

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



Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

Information about Form 990 and its instructions is at www.IRS.gov/form990

OMB No 1545-0047

Open to Public Inspection

3 Ch	or the 2 eck if ap dress cha	THE COLORADO NONPROFIL DEVELOPMENT	-2013			ntification number
_	me chan	Doing Business As		84-14	19358	5
_	tıal returr					
_	rminated	789 SHERMAN ST	e	E Teleph	one num	nber
_	nended re	ROOM/SUITE 250		(720)	855-0	0501
_	plication	DENVER, CO 80203		G Gross i	eceints	\$ 15,206,212
		F Name and address of principal officer	H(a) I	s this a group		· · · · ·
		MELINDA HIGGS 789 SHERMAN ST 250		subordinates?		┌ Yes ┌ No
		DENVER, CO 80203	H(b) /	Are all subord	nates	┌ Yes ┌ No
			ı	ncluded?		
	ıx-exemp	,(-)(-) ,(-) ,(-)(-) ,(-)(-) ,(-)(-) ,(-)(-) ,(-)(-)(-)(-)(-)(-)(-)(-)(-)(-)(-)(-)(1	r "No," attacr	a list	(see instructions)
ı w	ebsite:	₩WW CNDC ORG	H(c)	Group exempt	ion nu	mber 🟲
		anization Corporation Trust Association Other F	L Year	of formation 19	98 M	State of legal domicile CO
Pa	rt I	Summary riefly describe the organization's mission or most significant activities				
Governance	C C A II S Y	EALTHY AND VIBRANT NONPROFIT SECTOR IN COLORADO BY ENHANCE OMMUNITY RESOURCES AND BY SUPPORTING THE DEVELOPMENT OF C NDC PROVIDES COMPREHENSIVE FISCAL SPONSORSHIP TO CHARITAB RE PART OF CNDC'S CORPORATE AND LEGAL STRUCTURE AND CNDC PR NCLUDING FINANCE, HR AND LIABILITY INSURANCE FOR PROJECTS PREEVICES TO COLORADO COMMUNITIES COMBINED CNDC'S PROJECTS EAR WITH SERVICES AS VARIED AS HEALTHCARE ADVOCACY AND REFORMULES, FAMILY SUPPORT AND ADVOCACY, AND A VARIETY OF OTHER	HARITA LE GRO ROVIDE O JECTS SERVE DRM, ED	ABLE PROJECUPS (CALLEDS ALL BACK-IN TURN PROUSANDS	TS AN) "PRO OFFIC OVIDE S OF C	D NONPROFITS JECTS") PROJECTS E FUNCTIONS, E A WIDE RANGE OF OLORADOANS A
<u>ē</u>	-					
ø						
ACTIVITIES	2 C	heck this box 🔭 if the organization discontinued its operations or disposed of	f more th	nan 25% of its	net as	ssets
.	3 N	umber of voting members of the governing body (Part VI, line 1a)			з	11
4		umber of independent voting members of the governing body (Part VI, line 1b)			4	11
	5 T	otal number of individuals employed in calendar year 2013 (Part V, line 2a) .			5	362
	6 T	otal number of volunteers (estimate if necessary)			6	2,000
		otal unrelated business revenue from Part VIII, column (C), line 12			7a	66,980
	b N	et unrelated business taxable income from Form 990-T, line 34	· ·		7b	
	8	Contributions and grants (Part VIII, line 1h)		Prior Year	211	13,113,821
≘	9	Program service revenue (Part VIII, line 2g)		1,570,		1,824,118
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)			545	11,249
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		160,		181,737
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		12,264,	202	15,130,925
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		12,204,	303	13,130,323
	14	Benefits paid to or for members (Part IX, column (A), line 4)				0
46	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines				
Expenses	16-	5-10)		4,947,	2/1	7,313,963
क ⊖	16a b	Professional fundraising fees (Part IX, column (A), line 11e)				0
Δ	17	Other expenses (Part IX, column (D), line 25) (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		5,412,	719	6,912,405
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		10,359,		14,226,368
	19	Revenue less expenses Subtract line 18 from line 12	. —	1,904,		904,557
			Begi	nning of Curre	nt	F
€8 80			Year			End of Year
seets or Jakances	20	Total assets (Part X, line 16)		Year 8,138,	642	
et Assets or nd Balances	20 21	Total assets (Part X, line 16)				9,144,524
	21 22	Total liabilities (Part X, line 26)		8,138,	235	9,144,524
Pa	21 22 rt III	Total liabilities (Part X, line 26)		8,138, 769, 7,369,	235	9,144,524 870,560 8,273,964
Jnde ny k	21 22 rt III er penal nowled	Total liabilities (Part X, line 26)	/ing sch	8,138, 769, 7,369, edules and sta	235 407 Itemen	9,144,524 870,560 8,273,964 Its, and to the best of
Pa Jnde	21 22 rt III er penal nowled	Total liabilities (Part X, line 26)	/ing sch	8,138, 769, 7,369, edules and sta r) is based on 2014-11-03	235 407 Itemen	9,144,524 870,560 8,273,964 Its, and to the best of
Pa Undeny k prepa	21 22 rt III er penal nowledgarer has	Total liabilities (Part X, line 26)	/ing sch	8,138, 769, 7,369, edules and sta r) is based on	235 407 Itemen	9,144,524 870,560 8,273,964 Its, and to the best of
Pa Jnde	21 22 rt III er penal nowledgarer has	Total liabilities (Part X, line 26)	/ing sch	8,138, 769, 7,369, edules and sta r) is based on 2014-11-03	235 407 Itemen	9,144,524 870,560 8,273,964 Its, and to the best of
Pa Undeny k prepa	21 22 rt III er penal nowledgarer has	Total liabilities (Part X, line 26)	/ing sch	8,138, 769, 7,369, edules and star) is based on 2014-11-03 Date	235 407 Itemen	9,144,524 870,560 8,273,964 ets, and to the best of primation of which

► JDS PROFESSIONAL GROUP

ENGLEWOOD, CO 80112 May the IRS discuss this return with the preparer shown above? (see instructions)

Firm's address ► 10303 E DRY CREEK RD STE 400

Paid

Preparer

Use Only

Check 🗀 ıf self-employed

Firm's EIN 🕨 20-8019714

Phone no (303) 771-0123

▼Yes

No

art TV	Check	list of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	140
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? 😼	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I^{\bullet}	3		No
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	Yes	
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? <i>If "Yes," complete Schedule C, Part III</i>	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Νo
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
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		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
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	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Νo
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
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		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		1	1
		28a		No
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νo
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

GI I	Statements Regarding Other 1RS Fillings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	• •	Yes	. J No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 212		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	1c	Yes	
ı	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		N
	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Ζ
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		N
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		N
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		Ν
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Ζ
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	11	
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. See the instructions for additional information the organization must report on Schedule O	13a		L
)	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes" has it filed a Form 720 to report these payments? If "No" provide an explanation in Schedule O	14h		

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

	ection A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	11			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	11			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?		relationship with any	2		No
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management coi			3		No
4	Did the organization make any significant changes to its governing documents since filed?	the p	orior Form 990 was	4		No
5	Did the organization become aware during the year of a significant diversion of the or	rganız	ation's assets? .	5		No
6	Did the organization have members or stockholders?			6		Νo
7a	Did the organization have members, stockholders, or other persons who had the pow more members of the governing body?		elect or appoint one or	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?		members, stockholders,	7b		No
8	Did the organization contemporaneously document the meetings held or written action year by the following	ons u	ndertaken during the			
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i>			9		No
Se	ection B. Policies (This Section B requests information about policies not)	requ.	ired by the Internal R	Reveni	ie Cod	e.)
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		
	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization	tivitie	s of such chapters,	10a 10b		No
b	If "Yes," did the organization have written policies and procedures governing the act	tivitie on's e	s of such chapters, exempt purposes?	10b		No
b 11a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of its	tivitie on's e s gov	s of such chapters, exempt purposes? erning body before filing	10b	Yes	No
b 11a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?	tivitie on's e s gov • •	s of such chapters, exempt purposes? erning body before filing 	10b	Yes	No
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 to all members of its form?	tivitie on's e s gov • • Form 9	s of such chapters, exempt purposes? erning body before filing	10b	Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?	tivitie on's e s gov form s ly inte	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b	Yes Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?	tivitie on's e s gov form s ly inte	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b	Yes Yes Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?	tivitie on's e s gov Form S ly inte	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c	Yes Yes Yes Yes	No
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F 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 annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy?	tivitie on's e s gov form s ly inte the p	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?	tivitie on's e s gov form s ly inte the p	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?	tivitie on's e s gov form s ly inte the p	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?	tivitie on's e s gov form s ly inte the p	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?	tivitie on's e s gov form 9 ly inte the p lew ari e deli	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?	tivitie on's e s gov form 9 the p iew arise deli	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes	No No
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F 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 annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organic participation in joint venture arrangements under applicable federal tax law, and take	tivitie on's e s gov form 9 the p iew arise deli	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes	No No

- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website V Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►THE CO NONPROFIT DEVELOPMENT CTR 789 SHERMAN ST STE 250 DENVER, CO 80203 (720)855-0501

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or 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) A verage hours per week (list any hours	more pers	than on is	one bot	not box h an or/tr	offic ustee	ess er e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation	
	for related organizations below dotted line)	Individual trustée or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations	
(1) LAURIE ANDERSON	1 00	×		Х				0	0	0	
CHAIR											
(2) KELLY BERG DIRECTOR	1 00	x						0	0	0	
(3) ANNE GARCIA	1 00										
DIRECTOR	100	×						0	0	0	
(4) CAROL BUSH	1 00										
TREASURER		X		Х				0	0	0	
(5) MARK SULLIVAN	1 00	х						0	0	0	
DIRECTOR		^							U	·	
(6) ANDREW RITZ	1 00	х						0	0	0	
DIRECTOR (Z) KAREN TOMB											
(7) KAREN TOMB	1 00	×		х				О	0	0	
SECRETARY (8) ANN HOVLAND	1 00										
DIRECTOR		X						0	0	0	
(9) DAVE RYAN	1 00										
DIRECTOR		×						0	0	0	
(10) NIM PATEL	1 00							_	_	_	
DIRECTOR		×						0	0	0	
(11) MIKE NIYOMPONG	1 00							_	_	_	
DIRECTOR		X						0	0	0	
(12) MELINDA HIGGS	40 00			Х				126,666	0	11,927	
PRES CEO								120,000		11,927	
(13) ANGELA SCHREFFLER	40 00			х				67,926	0	9,950	
VICE PRESIDE								07,320	0	9,930	
(14) CHRISTINE CAMPBELL	40 00			x				65,373	0	5,993	
CF0				Ĺ				03,373			
(15) MAUREEN EWING	40 00			x				49,625	0	6,916	
VICE PRESIDE								.5,525			
(16) KEVIN VAN VLEET	40 00			x				17,296	0	916	
CF0								1.,230			
(17) BARBARA O'BRIEN	40 00				×			163,427	0	8,568	

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

(A) Name and Title	(B) A verage hours per	A verage Position (do not check Reportable Reportable compensation week (list person is both an officer from the Position from) ated of other
	week (list any hours for related	and		rect	or/tı	rustee	:)	organization	from related organizations	compen	the
	orrelated organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organiz and re organiz	lated
(18) DUDLEY VAN SCHOALES	40 00					x		116,327	0		11,305
PROGRAM DIRE (19) ELIZABETH GREEN	40.00										
	40 00					х		115,274	0		11,158
PROGRAM DIRE (20) AMY RUSHNECK	40 00										
PROGRAM DIRE	10 00					х		108,980	0		17,423
(21) ALAN GOTTLIEB	40 00										
PROGRAM DIRE						Х		108,478	0		4,913
				-	_						
4h Cub Tatal						<u> </u>			<u> </u>		
1b Sub-Total	art VII Section A		•	•		⊢ ⊢					
d Total (add lines 1b and 1c)	•					⊢ ⊢		939,372			89,069
2 Total number of individuals (includin		those	liste	ed al	bove	e) who	rec	eıved more than			
\$100,000 of reportable compensati	on from the organiz	zatıon	- 6								
										Yes	No
3 Did the organization list any former on line 1a? <i>If "Yes," complete Schedu</i>			e, key	y em	nplo [.]	yee, o	r hıg	ghest compensate	d employee		No
For any individual listed on line 1a, i organization and related organization individual									om the	Yes	
5 Did any person listed on line 1a rece	alve or accrue com	nancat	- -ion f	rom	anı	unrel	- ated	l organization or "	<u> </u>	res	
services rendered to the organization		•						=	5		No
Section B. Independent Contra	ctors										
1 Complete this table for your five high										. +52	
compensation from the organization	(A)	נוטוו וטו	ше	care	nua	ı year	end	ing with or within	(B)	cax year (C	

(A)	(B)	(C)
Name and business address	Description of services	Compensation
DIGITAL DOVETAIL LLC, 8434 BRAUN LOOP ARVADA CO 80005	CONSULTING	599,961
UNIVERSITY PHYSICIANS INC, 13611 E COLFAX AVE AURORA CO 80045	SALARY REIMB	286,804
CHILDREN'S HOSPITAL, 13100 E COLFAX AVE B010 AURORA CO 80011	SALARY REIMB	281,701
MADE MOVEMENT LLC, 200 PEARL ST BOULDER CO 80302	VIDEO PROD	115,000
LINHART PR, 1514 CURTIS ST DENVER CO 80202	PUBLIC RELATION	107,003

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►7

Form 99								Page 9
Part V	/##		of Revenue ule O contains a respon	se or note to any lir	ne in this Part VIII			୮
		Check if Select	ure o contamb a respon	Se of flore to uny fi	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts	1a	Federated camp	paigns 1a	23,486				
ant	b	Membership du	es 1b					
الم أو	С	Fundraising eve	ents 1c	31,487				
iffs ar /	d	Related organiz	rations 1d					
s, G imil	e	Government grants	s (contributions) 1e	3,809,681				
Contributions, Giffs, Grants and Other Similar Amounts	f	All other contribution similar amounts no	ons, gifts, grants, and 1f ot included above	9,249,167				
ള등	g	Noncash contribution 1a-1f \$	ons included in lines	334,673				
Con	h	Total. Add lines	s 1a-1f	🔎	13,113,821			
				Business Code				
æm	2a	TUITION			640,925	640,925		
<u>.</u>	b	CONSULTING/OTHE			493,167	493,167		
MCA	C .	REGISTRATION FEE			480,472	480,472		
Š	d e	INSTRUCTION FEE			142,393	142,393		
ra E	f		am service revenue		67,161	67,161		
Program Service Revenue								
	g 3	Total. Add lines	ome (including dividence	► Is interest.	1,824,118			
		and other simila	aramounts)		11,249			11,249
	4		stment of tax-exempt bond p					
	5	Royalties	(ı) Real	(II) Personal				
	6a	Gross rents	3,808	(, 1 0.00				
	ь	Less rental expenses						
	С	Rental income or (loss)	3,808					
	d	' '	me or (loss)		3,808			3,808
	l _	Cross amount	(ı) Securities	(II) Other				
	7a b	Gross amount from sales of assets other than inventory Less cost or other basis and						
	_	sales expenses Gain or (loss)						
	c d	` '	[
	8a	Gross income fi	· .	· · · · · · · · · · · · · · · · · · ·				
Other Revenue		Ť	,487 s reported on line 1c) ne 18					
⊕ -		المحمد	a noncos	186,236				
Ě	b c		penses b [(loss) from fundraising e	75,287	110,949			110,949
•	9a		rom gaming activities	-				
	ь		penses b					
	10a	Net income or (Gross sales of returns and allo		vities				
	ь		a oods sold b					
	С		(loss) from sales of inve					
	11a	Miscellaneous ACCOUNTING		Business Code 541200	66,980		66,980	
	ь	FEES						
	С							
	d	All other revenu	L					
	e	Total. Add lines	s 11a-11d	🕨	66,980			
	12	Total revenue.	See Instructions	· · · •	15,130,925	1,824,118	66,980	126,006

	Statement of Functional Expenses	- LL L		lata a disease (A.)	
section	on 501(c)(3) and 501(c)(4) organizations must complete all columns. All				
	Check if Schedule O contains a response or note to any line in this		 (B)	(c)	. \/\tag{D}
Do no 7b, 8t	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	534,586	251,954	218,844	63,788
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	5,674,650	5,207,237	336,445	130,968
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	72,769	71,095	1,161	513
9	Other employee benefits	472,045	431,872	29,642	10,531
10	Payroll taxes	559,913	499,009	44,384	16,520
11	Fees for services (non-employees)				_
а	Management				
b	Legal				_
c	Accounting				
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	3,251,271	3,166,799	68,078	16,394
12	Advertising and promotion	301,696	298,031	3,456	209
13	Office expenses	445,873	376,071	66,459	3,343
13 14	Information technology	443,873	370,071	00,439	3,343
1 4 15					
	Royalties	472.250	206.067	70.060	
16 17	Occupancy	473,359	396,967	70,969	5,423
17 18	Payments of travel or entertainment expenses for any federal, state, or local public officials	288,607	276,105	11,297	1,205
19	Conferences, conventions, and meetings	61,644	56,779	4,396	469
20	Interest	52,511	25,	.,523	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	69,573		69,573	
23	Insurance	40,832	8,191	30,624	2,017
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)		-,	,	-,
а	PROGRAM SUPPLIES/COSTS	986,954	972,390	14,564	
b	DONATED CLOTHING & GOODS	334,673	331,334	3,339	
c	SPECIAL EVENTS	245,312	224,419		20,893
d	MISCELLANEOUS	142,463	103,810	38,581	72
е	All other expenses	270,148	217,205	24,689	28,254
25	Total functional expenses. Add lines 1 through 24e	14,226,368	12,889,268	1,036,501	300,599
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Par	't X	Balance Sheet Check if Schedule O contains a response or note to any line in th	ıs Part	x			
					(A)		(B)
	1				Beginning of year		End of year
	1	Cash-non-interest-bearing			995	1	1,065
	2	Savings and temporary cash investments		•	5,544,740		5,987,158
	3	Pledges and grants receivable, net			1,771,599		2,062,537
	4	Accounts receivable, net			515,268	4	796,623
	5	Loans and other receivables from current and former officers, diremployees, and highest compensated employees Complete Par Schedule L	t II of			5	
Assets	6	Loans and other receivables from other disqualified persons (as $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and coand sponsoring organizations of section $501(c)(9)$ voluntary emorganizations (see instructions) Complete Part II of Schedule L	ntribu [.]	tıng employers		6	
88	7	Notes and loans receivable, net				7	
4	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			32,279	9	42,766
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	399,763			
	Ь	Less accumulated depreciation	10b	180,510	229,365	10c	219,253
	11	Investments—publicly traded securities				11	
	12	Investments—other securities See Part IV, line 11				12	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			44,396	15	35,122
	16	Total assets. Add lines 1 through 15 (must equal line 34)			8,138,642	16	9,144,524
	17	Accounts payable and accrued expenses			661,443	17	791,475
	18	Grants payable				18	
	19	Deferred revenue			89,779	19	39,566
	20	Tax-exempt bond liabilities		•		20	
Ø	21	Escrow or custodial account liability Complete Part IV of Scheo	dule D			21	
Liabilitie	22	Loans and other payables to current and former officers, director key employees, highest compensated employees, and disqualifie		tees,			
<u> </u>		persons Complete Part II of Schedule L				22	
-	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Part D			18,013	25	39,519
	26	Total liabilities. Add lines 17 through 25			769,235	26	870,560
s e		Organizations that follow SFAS 117 (ASC 958), check here ▶ lines 27 through 29, and lines 33 and 34.					
ant	27	Unrestricted net assets		•	932,785	27	970,007
- B3	28	Temporarily restricted net assets			6,436,622	28	7,303,957
⊒	29	Permanently restricted net assets				29	
r Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check her complete lines 30 through 34.	re ► 「	and			
9	30	Capital stock or trust principal, or current funds				30	
Assets or	31	Paid-in or capital surplus, or land, building or equipment fund				31	
Ą	32	Retained earnings, endowment, accumulated income, or other fu	nds			32	
Net	33	Total net assets or fund balances			7,369,407	33	8,273,964
_	34	Total liabilities and net assets/fund balances	<u>.</u> .	•	8,138,642	34	9,144,524
						F	Form 990 (2013)

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		15,1	130,925
2	Total expenses (must equal Part IX, column (A), line 25)	2		14,2	226,368
3	Revenue less expenses Subtract line 2 from line 1	3		g	04,557
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			 369,407
5	Net unrealized gains (losses) on investments	5			,,,,,,,,
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		8,2	273,964
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
ь	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	rate			
	▼ Separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	1			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	9	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b	Yes	

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493307017324

Employer identification number

SCHEDULE A Public C

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

check this box

h

following persons?

Public Charity Status and Public Support

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

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

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

ENTER		84-1493585
Par	tΙ	Reason for Public Charity Status (All organizations must complete this part.) See instructions.
he oi	rganı	zation is not a private foundation because it is (For lines 1 through 11, check only one box)
1	Γ	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2	Γ	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)
3	Γ	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4	Γ	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state
5	Γ	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)
6	Γ	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7		An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)
8	Г	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)
9	\sqcap	An organization that normally receives (1) more than 331/3% 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 331/3% 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)
L O	\sqcap	An organization organized and operated exclusively to test for public safety See section 509(a)(4).
11	Γ	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 Type I b Type II c Type III - Functionally integrated
e	Γ	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
f		If the organization received a written determination from the IRS that it is a Type I. Type II. or Type III supporting organization.

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is to organizate col (i) listo your gove docume	ion in ted in rning	(v) Did you the organi in col (i) o suppor	zation of your	(vi) Is to organization col (i) organization col (i) organization col (ii) organization col (iii) in the U	on in anized	(vii) A mount of monetary support
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

Since August 17, 2006, has the organization accepted any gift or contribution from any of the

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii)

and (III) below, the governing body of the supported organization?

(iii) A 35% controlled entity of a person described in (i) or (ii) above?

Provide the following information about the supported organization(s)

(ii) A family member of a person described in (i) above?

Yes

11g(i)

11g(ii)

11g(iii)

No

instructions

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.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 6,600,614 9,031,233 7,853,322 10,527,211 13,113,821 47,126,201 include any "unusual grants ") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 6,600,614 9.031.233 7,853,322 10,527,211 13,113,821 47,126,201 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 2,347,032 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 44,779,169 from line 4 Section B. Total Support Calendar year (or fiscal year **(b)** 2010 (c) 2011 (a) 2009 (d) 2012 (e) 2013 (f) Total beginning in) 🟲 9,031,233 7,853,322 10,527,211 Amounts from line 4 6,600,614 13,113,821 47,126,201 Gross income from interest, dividends, payments received on securities loans, rents, royalties 32,463 5,723 14,734 17,642 15,057 85,619 and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support (Add lines 7 47,211,820 through 10) 12 Gross receipts from related activities, etc (see instructions) 12 7,218,951 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 94 850 % Public support percentage for 2012 Schedule A, Part II, line 14 15 94 920 % 16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ┡┰ and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2013 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.) Section A. Public Support

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt						
	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						<u> </u>
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	A mounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6) ction B. Total Support						
	ndar year (or fiscal year beginning	() 2000	(1) 2010	() 2011	(1) 2012	() 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	(b) 2010	(6) 2011	(4) 2012	(5,232	
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization ic Support Performance (line 8, column (2 Schedule A, Paragraphic Performance) colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or 13, column (f)) ge by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the state of the sta	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or 13, column (f)) ge by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).							
	Facts And Circumstances Test							
Retu	ırn Reference	Explanation						
		Schodulo A / Form 0	000 er 000 E7) 201					

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493307017324

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

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

∳ ∜ f th	Section 501(c)(3) organizations the organization answered "Ye	hat have filed Form 5768 (election und hat have NOT filed Form 5768 (electio s'' to Form 990, Part IV, Line 5 (Pr	n under section 50) 01(h)) Complete Part II-B Do	not complete Part II-A
N a THE	Section 501(c)(4), (5), or (6) orgame of the organization ECOLORADO NONPROFIT DEVELOPMEN NTER				tification number
		ganization is exempt under	section 501(84-1493585 c) or is a section 527	organization
					organization.
1 2	Provide a description of the or Political expenditures	ganızatıon's dırect and ındırect politi	cai campaign act	ivities in Part IV	_
3	Volunteer hours			•	\$
	volunteer nours				
Par	t I-B Complete if the or	ganization is exempt under	section 501(c)(3).	
1	Enter the amount of any excise	e tax incurred by the organization un	der section 4955	▶	\$
2	Enter the amount of any excise	e tax incurred by organization manaç	gers under sectior	1 4955 ►	\$
3	If the organization incurred a s	section 4955 tax, did it file Form 47	20 for this year?		┌ Yes ┌ No
4a	Was a correction made?				┌ Yes ┌ No
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt under	section 501(c), except section 50	1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for se	ection 527 exemp	ot function activities 🕨	\$
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to o	ther organizations	for section 527	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 112	0-POL, line 17b	\$
4	Did the filing organization file I	Form 1120-POL for this year?			⊤ Yes
5	organization made payments l amount of political contribution	nd employer identification number (E For each organization listed, enter th ns received that were promptly and o political action committee (PAC) If	ne amount paid fro directly delivered	m the filing organization's f to a separate political orga	funds Also enter the nization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0-
			+	+	_

section 4911 tax for this year?

┌ Yes ┌ No

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A Check ► If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B Check ► If the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)	8,333	
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)		
C	Total lobbying expenditures (add lines 1a and 1b	p)	8,333	
d	Other exempt purpose expenditures		14,218,035	
е	Total exempt purpose expenditures (add lines 1	c and 1d)	14,226,368	
f	Lobbying nontaxable amount Enter the amount f	rom the following table in both	861,318	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
				1
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)	215,330	
h	Subtract line 1g from line 1a If zero or less, ent	er-0-		
i	Subtract line 1f from line 1c If zero or less, ente	r-0-		
j	If there is an amount other than zero on either lin	ne 1h or line 1i, did the organization file Form 47	20 reporting	□ Ves □ No

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expendi	tures During 4	1-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount	511,224	700,514	668,000	861,318	2,741,056
b	Lobbying ceiling amount (150% of line 2a, column(e))					4,111,584
c	Total lobbying expenditures	22,892	10,163	18,333	8,333	59,721
d	Grassroots nontaxable amount	127,806	175,129	167,000	215,330	685,265
e	Grassroots ceiling amount (150% of line 2d, column (e))					1,027,898
f	Grassroots lobbying expenditures	22,892	10,163		8,333	59,721

	Part II-B Complete if the organization is exempt under section filed Form 5768 (election under section 501(h)).					
For e	r each "Yes" response to lines 1a through 1ı below, provide in Part IV a detailed descri	ption of the lobbying	(8	a)	(1	b)
	tivity.		Yes	No	Amo	ount
1 a	legislation, including any attempt to influence public opinion on a legislative r through the use of					
b c	b Paid staff or management (include compensation in expenses reported on line	es 1c through 1ı)?				
d	d Mailings to members, legislators, or the public?					
e	e Publications, or published or broadcast statements?					
f	f Grants to other organizations for lobbying purposes?					
g	g Direct contact with legislators, their staffs, government officials, or a legislati	ive body?				
h i		ımılar means?				
j	•			1		
2a	.	on 501(c)(3)?				
b						
C	, , , , , , , , , , , , , , , , , , , ,			İ		
	d If the filing organization incurred a section 4912 tax, did it file Form 4720 for	-				
Par	art III-A Complete if the organization is exempt under section 501(c)(6).	on 501(c)(4), section 5	01(c)(5), c	or sect	ion
	301(0)(0).				Ye	s No
1	Were substantially all (90% or more) dues received nondeductible by membe	rs?		Г	1	111
2					2	
3					3	
Pai	art III-B Complete if the organization is exempt under section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 a line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not inclease for which the section 527(f) tax was paid).	lude amounts of political	20			
a	•		2a			
b			2b 2c			
с 3		a saction 163(a) duas	3			
4						
•	does the organization agree to carryover to the reasonable estimate of nonde political expenditure next year?	•	4			
5	, , , , , , , , , , , , , , , , , , , ,		5			
P	Part IV Supplemental Information					
	Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line Part II-B, line 1 Also, complete this part for any additional information	e 5, Part II-A (affiliated grou	p lıst),	Part II	-A , line	2, and
	Return Reference Explanation					

201104410 0 (101111 330 01 330 12) 2013	Return Reference Explanation Supplemental Information (continued)	i age -i
Part IV Supplemental Information	on <i>(continued)</i>	
Return Reference	Explanation	
l		

Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493307017324

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

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

Open to Public

nal Revenue Service	tructions is at www.irs.gov/10/111990.		Inspection
ame of the organization ENTER OF THE COLORADO NONPROFIT DEVELOPMENT		Employ	er identification number
ENTER	Addade de ou et u -	84-14	
art I Organizations Maintaining Donor organization answered "Yes" to Form	Advised Funds or Other Similar F 990. Part IV. line 6.	unds or	Accounts. Complete if the
organization answered Tes to Form	(a) Donor advised funds	(b)) Funds and other accounts
Total number at end of year			
Aggregate contributions to (during year)			
Aggregate grants from (during year)			
Aggregate value at end of year			
Did the organization inform all donors and donor a funds are the organization's property, subject to t	<u> </u>	nor advise	d Yes No
Did the organization inform all grantees, donors, a used only for charitable purposes and not for the beautiful appropriate the professional procession.			ourpose Yes N o
conferring impermissible private benefit? Int II Conservation Easements. Comple	te if the organization answered "Yes" t	to Form 9	,
Purpose(s) of conservation easements held by the		10 1 01111 3	790, Fait IV, lille 7.
Preservation of land for public use (e.g., recrea		n historica	lly important land area
Protection of natural habitat	Preservation of a		
Preservation of open space			
Complete lines 2a through 2d if the organization h	neld a qualified conservation contribution in	the form o	f a conservation
easement on the last day of the tax year	,		
			Held at the End of the Year
Total number of conservation easements		2a	
Total acreage restricted by conservation easeme		2b	
Number of conservation easements on a certified	, ,	2c	
Number of conservation easements included in (c historic structure listed in the National Register		2d	
Number of conservation easements modified, tran	sferred, released, extinguished, or terminate	ed by the o	organization during
the tax year ▶			
Number of states where property subject to conse	ervation easement is located 🛌		
Does the organization have a written policy regard enforcement of the conservation easements it hol	- · · · · · · · · · · · · · · · · · · ·	dling of vi	olations, and Yes No
Staff and volunteer hours devoted to monitoring, in	nspecting, and enforcing conservation ease	ments dur	ing the year
Amount of expenses incurred in monitoring, inspe	cting, and enforcing conservation easement	s during th	ne year
Does each conservation easement reported on lin and section 170(h)(4)(B)(ii)?	e 2(d) above satisfy the requirements of sec	ction 170((h)(4)(B)(ı)
In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation eas	of the footnote to the organization's financia		
	tions of Art, Historical Treasures,	or Othe	r Similar Assets.
If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the footn	assets held for public exhibition, education,	or researc	ch in furtherance of public
If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide the following amounts relating to	AS 116 (ASC 958), to report in its revenue assets held for public exhibition, education,	statemen	t and balance sheet
(i) Revenues included in Form 990, Part VIII, line	e 1		- \$
(ii) Assets included in Form 990, Part X			 \$
If the organization received or held works of art, h following amounts required to be reported under S			
Revenues included in Form 990, Part VIII, line 1	-		▶ \$
			· +
Assets included in Form 990, Part X			► \$

Par	TITLE Organizations Maintaining Co	<u>llections of Art,</u>	, Histo	ric	<u>al Tre</u>	<u>asui</u>	res, or O	the	<u>r Similar As</u>	sets (<u>continued)</u>
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ds, che	cka	ny of the	e follo	owing that a	are a	significant use	of its	
а	Public exhibition		d		Loan or	exch	ange progr	ams			
b	Scholarly research		e l		Other						
С	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	ollections and explai	ın how t	:hey	further	the o	rganızatıon	's ex	empt purpose	ın	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t									┌ Yes	□ No
Par	t IV Escrow and Custodial Arrang	ements. Comple	te if th	ne o	rganıza	ation					,
	Part IV, line 9, or reported an an Is the organization an agent, trustee, custod						r other ass	ets r	not		
	included on Form 990, Part X?									│ Yes	☐ No
Ь	If "Yes," explain the arrangement in Part XII	.I and complete the	followir	ıg ta	ble		г				
	Danis and halance							1.	АГ	nount	
c d	Beginning balance Additions during the year						F	1c 1d			
e								1e			
f	Distributions during the year Ending balance						 	1f			
' 2a	Did the organization include an amount on Fo	orm 990 Bart V I	212				L			┌ Yes	
_											·
b	If "Yes," explain the arrangement in Part XII rt V Endowment Funds. Complete i										'
Pa	Endowment Funds. Complete	(a)Current year	<u>(b)</u> Pr						Three years back	(e)Four	years back
1a	Beginning of year balance						•		·		•
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
e	Other expenditures for facilities										
	and programs							_			
f	Administrative expenses							_			
g	End of year balance										
2	Provide the estimated percentage of the curi	rent year end balanc	e (line	1g,	column	(a)) h	ield as				
а	Board designated or quasi-endowment ►										
b	Permanent endowment ►										
C	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c show	uld equal 100%									
3a	Are there endowment funds not in the posses organization by	-	ition th	at aı	e held a	and ad	dmınıstere	d for		Ye	s No
	(i) unrelated organizations			•		• •		•	3a	``	
ь	(ii) related organizations							• •	<u> 3a(</u> 3		<u></u> _
4	Describe in Part XIII the intended uses of the					-	- •	-			
Par	t VI Land, Buildings, and Equipme	ent. Complete if t				answ	ered 'Yes	' to	Form 990, Pa	art IV,	line
	11a. See Form 990, Part X, line : Description of property	10.			Cost or o		(b)Cost or o		(c) Accumulate	d (d)	Book value
	land				(, 224)			•,		-	
	Land		-							-	
	Buildings Leasehold improvements		.				174	.,569	22.6	57	147.013
	Equipment		·					,569	23,6 156,8		147,912 71,341
4			· L				1 220	,, +, -, -	130,0	-55	, 1,571
е	Other		. [

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of va	Nuntun
(including name of security)	(b)Book value	Cost or end-of-year	
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	F		
Part VIII Investments—Program Related. C	omplete if the organization	on answered 'Yes' to Fo	orm 990, Part IV, line 11c.
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of va	aluation
(a) Description of investment	(b) Book value	Cost or end-of-year	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	<u>*</u>		
Part IX Other Assets. Complete if the organization (a) Desc		0, Part IV, line 11d See	(b) Book value
(4) 5 656			(b) Book Value
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15.)		
Part X Other Liabilities. Complete if the org	anızatıon answered 'Yes'		ine 11e or 11f. See
Form 990, Part X, line 25. (a) Description of liability	(b) Book value	T	
	(b) book value	4	
Federal income taxes	20011	-	
DEPOSITS PAYABLE LEASE PAYABLE	26,044	-	
LEASE PATABLE	13,475	-	
		1	
]	
	+	1	
	İ	İ	
		7	
]	

SCHEDULE D, PAGE 4, PART XII,

LINE 2D

Par		evenue per Audited Financial Statements With Revenue wered 'Yes' to Form 990, Part IV, line 12a.	per F	leturn Complete If
1		er support per audited financial statements	1	15,544,651
2		ut not on Form 990, Part VIII, line 12		
– a		tments		
b	-	acilities	,	
c		s	7	
d		75,28	,	
e	Add lines 2a through 2d			413,726
3	5		3	15,130,925
4		0, Part VIII, line 12, but not on line 1		' ' '
а		luded on Form 990, Part VIII, line 7b . 4a		
b	·	4b	1	
c	·		4c	
5		d 4c. (This must equal Form 990, Part I, line 12)	5	15,130,925
Part		xpenses per Audited Financial Statements With Expense	s per	
		swered 'Yes' to Form 990, Part IV, line 12a.		·
1	Total expenses and losses pe	r audited financial statements	1	14,640,094
2	Amounts included on line 1 bu	it not on Form 990, Part IX, line 25		
а	Donated services and use of f	acılıtıes	2	
b	Prior year adjustments	2b		
C	Otherlosses	<u>2</u> c		
d	Other (Describe in Part XIII)		<u>기</u>	
e	Add lines 2a through 2d		2e	413,726
3	Subtract line ${f 2e}$ from line ${f 1}$.		3	14,226,368
4	Amounts included on Form 99	0, Part IX, line 25, but not on line 1:		
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)			
C	Add lines 4a and 4b		4c	
5		nd 4c. (This must equal Form 990, Part I, line 18)	5	14,226,368
Part	Supplemental Int	formation		
Part		Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part t		de any additional
	Return Reference	Explanation		
	DULE D, PAGE 3, PART X DULE D, PAGE 4, PART XI,	CNDC FOLLOWS ACCOUNTING FOR UNCERTAINTY IN INCOME TA THE ACCOUNTING AND REPORTING FOR UNCERTAINTIES IN INCOME TA STANDARD PRESCRIBES A RECOGNITION THRESHOLD AND MEAST THE FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OR EXPECTED TO BE TAKEN AND THE IMPACT OF THE TAX POSIT WILL MORE LIKELY THAN NOT BE SUSTAINED ON AUDIT, BASED OF THE POSITION THE STANDARD ALSO PROVIDES GUIDANCE RECOGNITION, CLASSIFICATION, AND INTEREST AND PENALTIE ENDED DECEMBER 31, 2013, CNDC PERFORMED AN EVALUATION POSITIONS AND DID NOT NOTE ANY MATTERS THAT WOULD REQUESTED WHICH MAY HAVE AN AFFECT ON ITS TAX-EXEMPT STATUS	OME T SUREM OF A T ION III ON THI ELATE S DUF OF UN	TAX LAW THE ENT ATTRIBUTE FOR FAX POSITION TAKEN F THAT POSITION E TECHNICAL MERITS ED TO DE- RING THE YEAR ICERTAIN TAX
LINE		SPECIAL EVENT EXPENSES /3,28/		

SPECIAL EVENT EXPENSES 75,287

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493307017324

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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

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

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

	of the organization OLORADO NONPROFIT	DEVELORMENT					Employer ider	ntification number
CENT		DEVELOPMENT					84-1493585	
Pari	Fundraising Act Form 990-EZ filers				on answered "Yes" on part.	to Form	990, Part IV	, line 17.
1]	ndicate whether the organ	ızatıon raısed funds	through a	ny of the f	ollowing activities Che	eck all th	nat apply	
a	— Mail solicitations			e	Solicitation of nor	n-govern	ment grants	
Ь	Internet and email soli	citations		f	☐ Solicitation of gov	ernment/	t grants	
c	Phone solicitations			g	Special fundraisin	g events	5	
d	In-person solicitations							
	Old the organization have a or key employees listed in							Г Yes Г No
	f "Yes," list the ten highes to be compensated at least			fundraisei	rs) pursuant to agreem	ents und	ler which the fu	ndraiser is
	Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai cust cont contrib	Did ser have ody or trol of outions?	(iv) Gross receipts from activity	(or r	mount paid to retained by) aiser listed in col (i)	(vi) A mount paid to (or retained by) organization
1			Yes	No				
2								
4								
			+					
6								
7			+					-
·								
8								
9								
10								
Total				٠				
	ist all states in which the egistration or licensing	organization is regis	tered or lı	censed to	solicit contributions o	r has be	en notified it is	exempt from
СО								

Sche	dule	G (Form 990 or 990-EZ) 2013				Page 2
Pai	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts g	aising event contributi			
			(a) Event #1 BEYOND THE SUIT (event type)	(b) Event #2 POWER WALK (event type)	(c) O ther events 100 (total number)	(d) Total events (add col (a) through col (c))
₽	1	Gross receipts	22,760	11,215	183,748	217,723
Revenue	2	Less Contributions	1,100			
ž	3	Gross income (line 1	1,100	3,100	20,507	31,107
		minus line 2)	21,660	7,815	156,761	186,236
	4	Cash prizes				
မှာ	5	Noncash prizes				
Expenses	6	Rent/facility costs				
ă ă	7	Food and beverages .				
	8	Entertainment				
Direct	9	Other direct expenses .	3,886	2,153	69,248	75,287
	10	Direct expense summary Add lir	nes 4 through 9 in column	(d)		(75,287)
	11	Net income summary Subtract li				
Par		·	•		rt IV, line 19, or repo	110,949 rted more than
		\$15,000 on Form 990-EZ, li	ne 6a.			T
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>~</u>	1	Gross revenue				
ses	2	Cash prizes				
Expenses	3	Non-cash prizes				
Dreat	4	Rent/facility costs				
ă	5	Other direct expenses				
	6	Volunteer labor	│ Yes% │ No	┌ Yes	│ Yes %	
	7	Direct expense summary Add line	s 2 through 5 ın column (d)		
	8	Net gaming income summary Subt	tract line 7 from line 1, co	lumn (d)		
9	Ent	ter the state(s) in which the organiza	ation operates gaming act	tivities		
а		the organization licensed to operate		•		. 「Yes 「No
b	If"	No," explain				
10a b		re any of the organization's gaming 'Yes," explain				· · 「Yes 「No
-		, <u></u>				

						11
Does	s the organization operate gaming activi	ties with nonmembers	s?	Г	Yes Γ_{No}	
12	Is the organization a grantor, beneficia					
	formed to administer charitable gamin	g [,]			┌ Yes ┌	No
13	Indicate the percentage of gaming act	ıvıty operated ın				
а	The organization's facility					%
b	An outside facility			13b		%
14	Enter the name and address of the per	son who prepares the	e organization's gaming/special eve	nts books and record	ls	
	Name 🟲					
	Address 🟲					
15a b	Does the organization have a contract revenue?	evenue received by the	he organization 🟲 \$		· 「Yes 「	No
	amount of gaming revenue retained by	the third party 🟲 🕏 _				
C	If "Yes," enter name and address of th	e third party				
	Name 🕨					
	Address ►					
16	Gaming manager information					
	Name ▶					
	Gaming manager compensation ► \$					
	Description of services provided					
	Director/officer	Employee	☐ Independent contr	actor		
17	Mandatory distributions					
а	Is the organization required under stat	:e law to make charita	able distributions from the gaming p	proceeds to		
	retain the state gaming license?				$\Gamma_{ m Yes}$ Γ	No
b	Enter the amount of distributions requ	red under state law d	distributed to other exempt organiza	ations or spent		
	ın the organızatıon's own exempt actıv	ities during the tax y	ear 🟲 💲			
Pai		5b, 15c, 16, and 17	planations required by Part I, 7b, as applicable. Also complet			nd
	Return Reference		Explanation	n		
		<u> </u>	·	Schodulo G /Forn	- 000 000 F7\	2012

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493307017324

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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

Compensation Information

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

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization THE COLORADO NONPROFIT DEVELOPMENT CENTER

Employer identification number

84-1493585

Pa	Questions Regarding Compensation					
					Yes	No
1a	Check the appropriate box(es) if the organization prov 990, Part VII, Section A, line 1a Complete Part III t					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the org					
	reimbursement or provision of all of the expenses des			1b		
2	Did the organization require substantiation prior to re directors, trustees, officers, including the CEO/Execu			2		
3	Indicate which, if any, of the following the filing organi organization's CEO/Executive Director Check all tha used by a related organization to establish compensa	t appl	y Do not check any boxes for methods			
	▼ Compensation committee	Γ	Written employment contract			
	Independent compensation consultant	굣	Compensation survey or study			
	Form 990 of other organizations		Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Pa or a related organization	art VII	, Section A , line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control p	aymen	t?	4a		Νo
b	Participate in, or receive payment from, a supplement	al non	qualified retirement plan?	4b		Νo
C	Participate in, or receive payment from, an equity-bas	sed co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and prov	vide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mus	t comp	olete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, I compensation contingent on the revenues of	ıne 1a	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A, I compensation contingent on the net earnings of	ıne 1a	, did the organization pay or accrue any			
a	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, I payments not described in lines 5 and 6? If "Yes," de			7		Νo
8	Were any amounts reported in Form 990, Part VII, pa	ıd or a	ccured pursuant to a contract that was			
	subject to the initial contract exception described in I	Regula	tions section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow the section 53 $4958-6(c)$?	rebutt	able presumption procedure described in Regulations	9		

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)BARBARA O'BRIEN PROGRAM DIRECTOR	(i) (ii)	163,427			1,743	6,825	171,995	

Schedule J (Form 990) 2013

Part III Supplemental Information

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

Return Reference Explanation

Schedule J (Form 990) 2013

DLN: 93493307017324

OMB No 1545-0047

SCHEDULE M (Form 990)

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

Noncash Contributions

Department of the Treasury Internal Revenue Service

Name of the organization

▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection **Employer identification number**

	COLORADO NONPROFIT DEVELOPMENT				04 1402505		be.	
	rt I Types of Property				84-1493585			
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d Method of d noncash contrib	etermı		ts
	Art—Works of art							
	Art—Historical treasures .							
3	Art—Fractional Interests							
4	Books and publications							
5	Clothing and household	X		334,673	FMV			
6	goods							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .							
10	Securities—Closely held stock .							
	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
	Qualified conservation							
	contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—O ther							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxıdermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	O ther ▶ ()							
	O ther ▶()							
27	O ther ▶()							
28	O ther ► ()				<u> </u>			
29	Number of Forms 8283 received				20			
	for which the organization comple	eted Form 8	283, Part IV, Donee Ackn	owledgement	29			
	5				4 .1	_	Yes	No
30a	During the year, did the organiza							
	it must hold for at least three ye				ired to be used			
	for exempt purposes for the enti					30a		No
Ь	If "Yes," describe the arrangem	ent in Part 1	II					
31	Does the organization have a gift					31	Yes	<u> </u>
32a	Does the organization hire or us contributions?	•	ies or related organizations	to solicit, process, or sell	noncash • • •	32a		No
ь	If "Yes," describe in Part II							
	If the organization did not report	t an amount	in column (c) for a type of	property for which column	(a) is checked,			

Part II

Supplemental Information. Provide the information required by Part I, lines 30b,

32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference Explanation

Schedule M (Form 990) (2013)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493307017324

OMB No 1545-0047

2013

Open to Public Inspection

Supplemental Information to Form 990 or 990-EZ

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

• Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization THE COLORADO NONPROFIT DEVELOPMENT CENTER

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Employer identification number

84-1493585

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 - ORGANIZATION'S MISSION	
FORM 990, PAGE 2, PART III, LINE 4D	THE ORGANIZATION HAS NEARLY 100 OTHER PROGRAMS AND SERVICES
FORM 990, PAGE 6, PART VI, LINE 11B	THE FORM 990 IS FIRST REVIEWED BY THE ORGANIZATION'S CHIEF FINANCIAL OFFICER, PRESIDENT, B OARD CHAIR, AND TREASURER IT IS THEN MADE AVAILABLE TO THE BOARD ELECTRONICALLY
FORM 990, PAGE 6, PART VI, LINE 12C	THE BOARD OF DIRECTORS MEETS 4-5 TIMES PER YEAR, AT WHICH TIME OFFICERS AND DIRECTORS DISC LOSE CONFLICT OF INTEREST TRANSACTIONS, IF ANY, AND REMOVE THEMSELVES FROM VOTING THERE W ERE NO CONFLICTS DURING 2013
FORM 990, PAGE 6, PART VI, LINE 15A	SELECTED BOARD MEMBERS REVIEWED LOCAL COMPENSATION SURVEYS PERFORMED BY 3RD PARTY ORGANIZA TIONS THEY DETERMINED A SYSTEM OF WHAT SHOULD BE INCLUDED FOR CONSIDERATION AND THEN DETE RMINED A RANGE BASED ON THE POSITION THAT THE COMPENSATION COULD BE ABOVE OR BELOW AND AVE RAGE THIS METHOD WAS THEN APPLIED TO OTHER POSITIONS OF THE ORGANIZATION
FORM 990, PAGE 6, PART VI, LINE 15B	SEE THE PROCESS PERFORMED FOR TOP MANAGEMENT OFFICIALS, THE SAME PROCESS IS USED FOR OTHER KEY EMPLOYEES
FORM 990, PAGE 6, PART VI, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC VIA THE ORGANIZATION'S WEBSITE
FORM 990, PART IX, LINE 11G	PROFESSIONAL FEES 693,257 38,352 3,724 CONTRACT LABOR 1,856,416 28,719 0 CONSULTING & TRAI NING 350,309 94 10,844 EVALUATION 86,958 0 0 INTERNSHIPS & AMERICCORP 179,859 913 1,826
FORM 990, PART XI, LINE 9	SPECIAL EVENT EXPENSES 75,287 SPECIAL EVENT EXPENSES -75,287