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Department of the

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

2015 Open to Public

DLN: 93493307018166 OMB No 1545-0047

Intern		nue Servic	e	Tomi 990 and its instructions is at win	W 1753 901/10	,,,,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		Inspection			
A F	or the	2015 ca	endar year, or tax year beginnin	g 01-01-2015 , and ending 12-31-201	5						
B Ch	eck ıf a	pplicable	C Name of organization PIKES PEAK COMMUNITY FOUNDATION	ON		D Emplo	yer id	entification number			
·	ddress (-	% GARY BUTTERWORTH			84-1	3396	70			
	ame ch	-	Doing business as								
F	nitial ret inal	urn				F Teleph	one nu	mher			
return	/termın		Number and street (or P O box if m 730 N NEVADA AVENUE	ail is not delivered to street address) Room/sui	te	E Telephone number (719) 389-1251					
	nended			1770		(719) 389-	-1251			
Ap	plicatio	n pending	City or town, state or province, coun COLORADO SPRINGS, CO 80903	try, and ZIP or foreign postal code		G Gross	receint	s \$ 25,852,577			
			F Name and address of number	-1 - <i>ff</i> : :		!	-				
			F Name and address of princip GARY BUTTERWORTH	al officer	H(a) Is th						
			730 N NEVADA AVENUE	2002	subo No	rdinates?		☐ Yes 🗸			
	v-even	npt status	COLORADO SPRINGS, CO 80		н(ь) А ге		ınates	Yes No			
1 10	IX-EXEII	ipt status	√ 501(c)(3)	nsert no) 4947(a)(1) or 527		ded? o " attacl	n a list	t (see instructions)			
J W	ebsite	e:► www	v ppcf org			up exemp		•			
K For	m of or	ganization	✓ Corporation Trust Associa	tion Other ►	L Year of fo	-		M State of legal domicile Co			
101	111 01 01	gamzadon	₩ Corporation Hust Associa	don't other b				-			
Pa	rt I	Sum	mary		<u>'</u>						
		•	cribe the organization's mission	5							
a.	-	ommunit	y Trust to promote philanthrophy	In the Pikes Peak region							
2											
E	_										
o Ve	2 (Check th	is box ▶ ☐ if the organization di	scontinued its operations or disposed o	f more than	25% of it	s net	assets			
Ğ	۱ .	Jumbor	f voting members of the governu	ng body (Part VI. Jupo 1a)			3	15			
>5 √1			-	ng body (Part VI, line 1a) f the governing body (Part VI, line 1b)			4	15			
Activities & Governance			•	alendar year 2015 (Part V, line 2a)			5	46			
cţ.				ecessary)			6	285			
⋖			•	rt VIII, column (C), line 12			7a	4,498			
				m Form 990-T, line 34		• •	7b	-48,63			
				·	1	or Year		Current Year			
	8	Contri	butions and grants (Part VIII, lir	ne 1h)		10,003	433	5,578,632			
<u>S</u>	9		-	ne 2 g)		1,133		975,628			
Ravenue	10	_	· · · · · · · · · · · · · · · · · · ·	(A), lines 3, 4, and 7d)		1,617	,649	1,095,905			
æ	11	Other	revenue (Part VIII, column (A),	lines 5, 6d, 8c, 9c, 10c, and 11e)		283	,757	287,315			
	12	Totalı	evenue—add lines 8 through 11	(must equal Part VIII, column (A), line	!	13,038	380	7,937,480			
		12)									
	13		• • •	IX, column (A), lines 1-3)		3,683		4,429,983			
	14		•	X, column (A), line 4)			0	(
Æ	15	5-10)		e benefits (Part IX, column (A), lines		998	,899	1,057,910			
Expenses	16a	Profes	sional fundraising fees (Part IX,	column (A), line 11e)		25	,431	19,406			
άx	b	Total fu	ndraising expenses (Part IX, column (D)	, line 25) ▶333,790							
ш	17		= ' ' '	ines 11a-11d, 11f-24e)		1,586	,982	2,195,901			
	18	Total	expenses Add lines 13-17 (mus	st equal Part IX, column (A), line 25)		6,294	,601	7,703,200			
	19	Reven	ue less expenses Subtract line :	18 from line 12		6,743	,779	234,280			
9 S					Beginning	of Current	Year	End of Year			
Net Assets or Fund Balances		+ · ·			<u> </u>						
Ass I Ba	20		,			57,110	-	55,652,545			
<u>چ</u> چ	21			line 21 from line 20	•	2,312, 54,797,	_	2,067,055			
	22 rt III		ature Block	illie 21 IIoiii illie 20		34,/9/	,707	33,363,490			
				mined this return, including accompan	yıng schedul	es and st	ateme	nts, and to the best of			
				plete Declaration of preparer (other th	an officer) is	based on	all ın	formation of which			
prep	arer na	as any kr	lowleage								
		****	ri tc		2	016-09-15					
Sign	1	Signa	ture of officer		D	ate					
Her			BUTTERWORTH CEO								
		17	or print name and title				T ===				
			nnt/Type preparer's name OREEN B MERZ	Preparer's signature Dore Dore B MERZ		eck ıf	PTIN P008	41439			
Pai		- -	ırm's name ► STOCKMAN KAST RYAN			-employed n's EIN ▶					
Firm's address > 102 N CASCADE AVENUE SUITE 400					1186						
Use	On	ly 📋	COLORADO SPRINGS, C			(, 2	,				
M	tha TD	C diar:	·								
мay	rue IR	.5 aiscus	s this return with the preparer st	nown above? (see instructions)				✓ tes NO			

19

Part IV Checklist of Required Schedules

No

Yes

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 2	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (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	3		No
	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		No
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure $98-19$? If "Yes," complete Schedule C, Part III	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 I	6	Yes	
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		No
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	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? If "Yes," complete Schedule D, Pait V 🔰	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
a	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	11 d	Yes	
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	12 a		No
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	Yes	
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 No
	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	15		No

for any foreign organization? If "Yes," complete Schedule F, Parts II and IV

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H .

16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other

IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 🔧

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If

assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV \dots .

Νo

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20a

Yes

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

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instructions for applicable filing thresholds, conditions, and exceptions)

Page 4

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21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		
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		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24 c		

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

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

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?

26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current

28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . 🛂 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 💆 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Pait II, III, or IV,

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

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 🛸 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

24d

25a

25b

26

27

28a

28b

28c

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35a

35b

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37

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Yes

Yes

Yes

Yes

Yes

Yes

Form 990 (2015)

Form	990 (2015)			Page 5
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 101			
b	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	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			
b	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	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	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	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Yes	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		No
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	Yes	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
92	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter	<u> </u>		
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	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?	12 a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b			
c	Enter the amount of reserves on hand			ļ
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No

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

14b

year by the following

Section C. Disclosure

Par

990 (2015)	Page 6
VI	Governance, Management, and Disclosure	
	For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below	W,

describe the circumstances, processes, or changes in Schedule O. See instructions. Chack if Cabadula O contains a response or note to any line in this Dart VI No

	eneck in senedate of contains a response of note to any fine in this rate vi		 	 	•		 -	•
Se	ection A. Governing Body and Management							
							Yes	
1a	Enter the number of voting members of the governing body at the end of the tax year	1a			15	;		
	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

Did the organization delegate control over management duties customarily performed by or under the direct

supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was

Did the organization become aware during the year of a significant diversion of the organization's assets?

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or

Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders,

Did the organization contemporaneously document the meetings held or written actions undertaken during the

b If "Yes," did the organization have written policies and procedures governing the activities of such chapters,

12a Did the organization have a written conflict of interest policy? If "No," go to line 13

Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a

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 Upon request Other (explain in Schedule O)

State the name, address, and telephone number of the person who possesses the organization's books and records ▶GARY BUTTERWORTH 730 N NEVADA AVENUE COLORADO SPRINGS, CO 80903 (719) 389-1251

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of

b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing

b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give

c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe

Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Enter the number of voting members included in line 1a, above, who are ındependent

Did the organization have members or stockholders?

10a Did the organization have local chapters, branches, or affiliates?

b Describe in Schedule O the process, if any, used by the organization to review this Form 990

Did the organization have a written document retention and destruction policy?

a The organization's CEO, Executive Director, or top management official

b Other officers or key employees of the organization

List the States with which a copy of this Form 990 is required to be filed▶

If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)

interest policy, and financial statements available to the public during the tax year

1h Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any

2

3

4

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7a

10b

11a

12a

12h

12c

13

14

15a

15b

16a

16b

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Νo

Form 990 (2015)

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Νo Yes Νo Νo Νo Νo Yes Yes

Nο

Νo

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									e	
(A) Name and Title	(B) Average hours per week (list any hours for related organizations	more pers and	than on is la di	one bot	note bo: h ar or/tr	chec x, unle n offic rustee	ess er	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization	
	below dotted line)	Individual trustee or director	Institutional Trustee	<u> </u>	Key employee	Highest compensated employee	mëi			and related organizations
(1) Paula D Pollet	1 0	×		Х				0	0	0
Board Chair	0.0	_ ^								
(2) Deborah R Adams Secretary	1 0	×		x				0	0	0
(3) Larry R Gaddis vice-chair	1 0	×		х				0	0	0
(4) Gregory L Gandy	1 0			\ _\				0		0
Treasurer	0 0	X		Х				٥	0	U
(5) Suzanne Connaughton	1 0									
director	0 0	X						0	0	0
(6) Joan Gurvis	1 0	×						,	0	0
director	0 0							9	G	3
(7) Michael Berniger	1 0	х						0	0	0
director	0.0									
(8) Bonnie Martinez	1 0	l x						0	0	0
director	0.0									
(9) Alıcıa McConnell dırector	1 0	x						0	0	0
(10) Kae Raeder	1 0									
director	0 0	X						0	0	0
(11) Marı Sınton-Martinez	1 0							_		_
director	0 0	X						0	0	0
(12) Rob Wrubel	1 0	х		х				0	0	0
Vice - Chair	0.0			<u> </u>						
(13) WENDEL P TORRES Board Chair	1 0	×		x				0	0	0
(14) Susan Edmondson	1 0									
Director	0 0	Х						0	0	0
	<u>I</u>				_		_			Earm 000 (2015)

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

	(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	compensat from relati organizatio	Reportable Esticompensation from related organizations (W- 2/1099-		table Estima sation amount elated other ations compens 1099- from tl				portable E pensation a n related inizations cor 2/1099-	nated nt of ner nsation
		organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)		organizat and relat organizati	lated					
	Trudy Strewler Hodges	40 0			Х				116,047	,	0		13,32					
Chief	Executive Officer	0 0																
1b c d	Sub-Total	•		•	>			1	16,047	0			13,326					
2	Total number of individuals (including but in \$100,000 of reportable compensation from		se list	ed al		e) w	ho red		<u> </u>	<u> </u>								
												Yes	No					
3	Did the organization list any former officer, on line 1a? <i>If "Yes," complete Schedule J for</i>							ghe: •	st compensated	employee	3		No					
4	For any individual listed on line 1a, is the sorganization and related organizations great individual.									n the	_							

\$100,000 of compensation from the organization \blacktriangleright 0

(A)

Name and business address

Section B. Independent Contractors

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person .

2 Total number of independent contractors (including but not limited to those listed above) who received more than

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of

compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

ı	
١.	

(B)

Description of services

_

(C)

Compensation

Form 990 (2015)

N
N

ı	
ı	

Form 99		<u> </u>						Page S
Part V	/##1	Statement o						_
		Check If Sched	ule O contains a respo	nse or note to any lir	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
- S	1a	Federated cam	paigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership du	es 1b					
	c	Fundraising eve	ents 1 c					
	d	Related organiz	zations 1d					
imil	e	Government grants	s (contributions) 1e					
tion er S	f	All other contribution	ons, gifts, grants, and 1f	5,578,632				
ibu Sthe	g	Noncash contribution	ons included in lines	917,650				
ontr nd (h	1a-1f \$ Total. Add lines	: 1a-1f		5,578,632			
		Total: Add lines		Business Code	2,212,222			
표	2a	PROGRAM SERVICI	E REVENUE	624200	975,628	975,628		
₹ ₹	b				,	,		
Ce F	c							
ž.	d							
E S	e							
Program Service Revenue	f	All other progra	am service revenue					
<u>~</u>	g	Total. Add lines	s 2a-2f		975,628			
	3		ome (including dividen ar amounts)	ds, interest,	793,084			793,084
	4	Income from inves	stment of tax-exempt bond	proceeds >	0			
	5	Royalties	() PI		0			
	6a	Gross rents	(i) Real 14,700	(II) Personal				
	ь	Less rental						
	֡֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֓֓֓֓֡֓֓֓֡֓֡	expenses Rental income	14,700	0				
	,	or (loss)			14,700			14,700
	d	Net Telltal IllCol	me or (loss) (i) Securities	(II) O ther	11,700			11,700
	7a	Gross amount from sales of assets other than inventory	18,206,559	7,700				
	ь	Less cost or other basis and	17,911,438					
	c	sales expenses Gain or (loss)	295,121	7,700				
	d	Net gain or (los			302,821			302,821
enne	8a	Gross income f events (not inc	ludıng 					
Other Revenue		See Part IV, lin	a	17,370				
ŏ	b c		penses b (loss) from fundraising	3,659 events >	13,711			13,71
			rom gaming activities	,				
	1		penses b (loss) from gamıng actı	vities	0			
	10a	Gross sales of returns and allo						
	ь	_	oods sold b					
	С	Net income or ((loss) from sales of inv	entory ▶ Business Code	0			
	11a	MANAGEMENT		561000	4,498		4,498	
	ь	INVESTMENT		533110	254,406			254,406
	С							
	d	All other reven						
	e	Total. Add lines		•	258,904			
	12	Total revenue.	See Instructions .	•	7,937,480	975,628	4,498	1,378,722

Form 990 (2015)

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must comp

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)								
	Check if Schedule O contains a response or note to any line in th	nıs Part IX		.				
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses			
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	4,359,007	4,359,007					
2	Grants and other assistance to domestic individuals See Part IV, line 22	70,976	70,976					
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	0	, 5,5, -					
4	Benefits paid to or for members	0						
5	Compensation of current officers, directors, trustees, and	129,373	65,980	43,987	19,406			
6	key employees	129,373	03,300	73,307	19,700			
7	Other salaries and wages	685,301	548,241	68,530	68,530			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	35,971	28,777	3,597	3,597			
9	Other employee benefits	151,490	121,192	15,149	15,149			
10	Payroll taxes	,	·	,	,			
		75,181	60,145	7,518	7,518			
11	Fees for services (non-employees)							
a L	Management	0	10.350	1 204	1 204			
b	Accounting	12,938	10,350	1,294	1,294			
c d	Accounting	21,430	17,144	2,143	2,143			
u e	Lobbying	0						
f	Investment management fees	189,422	151,538	18,942	18,942			
g g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	19,402	15,522	1,940	1,940			
12	Advertising and promotion	9,082	7,266	908	908			
13	Office expenses	59,012	47,210	5,901	5,901			
14	Information technology	61,377	49,101	6,138	6,138			
15	Royalties	0						
16	Occupancy	35,984	28,788	3,598	3,598			
17	Travel	8,388	6,710	839	839			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0						
19	Conferences, conventions, and meetings	12,403	9,923	1,240	1,240			
20	Interest	0						
21	Payments to affiliates	0						
22	Depreciation, depletion, and amortization	41,009	32,807	4,101	4,101			
23	Insurance	42,262	33,810	4,226	4,226			
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 EXPENSE	1,632,456	1,305,964	163,246	163,246			
ь	REPAIRS & MAINTENANCE	15,306	12,244	1,531	1,531			
с	MISCELLANEOUS	35,430	28,344	3,543	3,543			
d								
e	All other expenses							
25	Total functional expenses. Add lines 1 through 24e	7,703,200	7,011,039	358,371	333,790			
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)							

(B) End of year

> 4,387,462 42,842

> > 3,900

27,639

13,774,885

29,533,817

7,882,000

55,652,545

112,609

5,900

2,000

1,946,546

2,067,055

53,481,127

53,585,490

55,652,545 Form 990 (2015)

104,363

C

Form 9	990 (2015)		
Par	t X	Balance Sheet		
		Check if Schedule O contains a response or note to any line in this Part X		
			(A) Beginning of year	
	1	Cash-non-interest-bearing	4,431,611	1
	2	Savings and temporary cash investments	29,592	2
	3	Pledges and grants receivable, net	0	3
	4	Accounts receivable, net	10,786	4
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		
Assets	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	0	5
SS			0	6
¥	7	Notes and loans receivable, net	0	7
	8	Inventories for sale or use	0	8
	م ا	Proposed expenses and deferred charges	0	

14,296,289

521,404

13,812,133

30,944,526

7,882,000

57,110,648

86,733

2,224

0

0

0

0

2,096,781

2,312,941

54,689,898

54,797,707

57,110,648

107,809

127,203

10c

11 0

12

13

15

16

17

18

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31

32

33

0

0 14

10a **10**b

Land, buildings, and equipment cost or other basis

Investments—other securities See Part IV, line 11

Investments-program-related See Part IV, line 11

Total assets. Add lines 1 through 15 (must equal line 34)

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Organizations that follow SFAS 117 (ASC 958), check here ▶

Organizations that do not follow SFAS 117 (ASC 958), check here ▶

Paid-in or capital surplus, or land, building or equipment fund .

Retained earnings, endowment, accumulated income, or other funds

and other liabilities not included on lines 17-24)

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Total liabilities. Add lines 17 through 25

lines 27 through 29, and lines 33 and 34.

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

complete lines 30 through 34.

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Complete Part VI of Schedule D

Intangible assets . .

Grants payable

Deferred revenue .

Tax-exempt bond liabilities

Complete Part X of Schedule D

Unrestricted net assets

Less accumulated depreciation .

Other assets See Part IV, line 11

Accounts payable and accrued expenses

Investments—publicly traded securities .

10a

b

11

12

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Net Assets or Fund Balances

nse or note to any line in this Part XI

Total revenue (must equal Part VIII, column (A), line 12) . . . Total expenses (must equal Part IX, column (A), line 25) Page **12**

7,937,480

7,703,200

234,280

54,797,707

-1,443,054

-3,443

No

Νo

Νo

Form 990 (2015)

53,585,490

Yes

Yes

Yes

2a

2b

2c

3a

3b

1

2

3

4

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6

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8

9

10

Revenue less expenses Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . .

Net unrealized gains (losses) on investments .

Donated services and use of facilities . Investment expenses

Prior period adjustments .

Other changes in net assets or fund balances (explain in Schedule O) .

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))

Part XIII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII 1 Accounting method used to prepare the Form 990 ☐ Cash ☐ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O

2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on

a separate basis, consolidated basis, or both Separate basis Consolidated basis

basis, consolidated basis, or both

Single Audit Act and OMB Circular A-133?

Schedule O

Separate basis ✓ Consolidated basis

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate Both consolidated and separate basis

b Were the organization's financial statements audited by an independent accountant?

Both consolidated and separate basis

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If the organization changed either its oversight process or selection process during the tax year, explain in

efi	le GF	RAPHIC pr	int - DO I	NOT PROCES	S As Filed Da	ta -		DLN: 93	3493307018166
Department of the		>	Complete if the	Public Charity Status and Public Support lete 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. rmation about Schedule A (Form 990 or 990-EZ) and its instructions is at rs.gov/form990.				2015 Open to Public Inspection	
Treas Interr		enue Service							
		he organizat						Employer identific	ation number
PIKES	PEAK	COMMUNITY F	DUNDATION					84-1339670	
Pa	rt I	Reason	for Publi	c Charity S	tatus (All organiza	ations must c	omplete this	part.) See instruction	ons.
The	organı				use it is (For lines 1				
1	_	A church,	convention	of churches, o	r association of churc	hes described	in section 170(b)(1)(A)(i).	
2)(1)(A)(ii).(Attach S				
3	<u>'</u>				service organization				
4	<u>'</u>	A medical	research or	ganization ope	rated in conjunction	with a hospital	described in se	ection 170(b)(1)(A)(ii	i). Enter the
	'		name, city,						
5						niversity owned	l or operated by	a governmental unit	described in section
6	_			omplete Part I al government	ı) : or governmental unı	t described in s	section 170(b)(1)(A)(v).	
7	<u> </u>			-	-			ental unit or from the	general public
	ı				i). (Complete Part II				9 - · · - · · · · · · · · ·
8	~		•		ion 170(b)(1)(A)(vi)		•		
9 10 11 a b c d e f g	☐ ☐ ☐ ☐ Ente	receipts fi from gross organizati An organiz one or mor the box in Type I. A s supported organizatio Type III fi supported Type III fi supported Type III in not functio (see instru Check this integrated	om activities investment on after Jun ation organ ation organ e publicly solves in You mus supporting organization or You mus supporting nt of the sublete Part I unctionally incorpanization organization organizati	es related to it in tincome and it income and it income and it is 30,1975 Sized and operation op	s exempt functions— unrelated business ta eesection 509(a)(2). ted exclusively to tet ted exclusively for th nizations described in t describes the type erated, supervised, o to regularly appoint upervised or controlle ization vested in the und C. supporting organizatio uctions) You must co to to A supporting organ nization generally mu te Part IV, Sections A	subject to cert. xable income ((Complete Par st for public sale benefit of, to a section 509 (a f supporting our controlled by or elect a major benefit of the same persons on operated in complete Part IN station operate ist satisfy a distance of the same persons on operated in complete Part IN station operate ist satisfy a distance of the same persons on operated in complete Part IN station operate ist satisfy a distance of the same persons	ain exceptions, less section 5: t III) fety See section 5: t III) fety See section perform the fura)(1) or section rganization and its supported crity of the direction with its supported for the control or connection with /, Sections A, D d in connection stribution requirent V. the IRS that it	nctions of, or to carry of 509(a)(2) See section 509(a)(2) See section 509(a)(2) See section 509(a)(a) See section 509(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(331/3% of its supportes acquired by the purposes of on 509(a)(3). Check 11f, and 11g lly by giving the supporting by having control or diorganization(s) You grated with, its ganization(s) that is reness requirement
(i) Name of supported orga		ganızatıon	(ii)EIN	(iii) Type of organization (described on lines 1 - 9 above (see instructions))	, , , , ,		(v) A mount of monetary support (see instructions)	'''	
						Yes	No		
	_					1			
Tota	ıl					1		<u> </u>	1
For F	Paperv	work Reduct	on Act Noti	ice, see the In	structions for Form 9	90 or 990EZ.	Cat No 112		n 990 or 990-EZ) 2015

Schedule A (Form 990 or 990-EZ) 2015 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

	(Complete only if you Part III. If the organiz						
S	ection A. Public Support	adon falls to qu	dilly dilder the	tests listed bei	ow, picase con	inplete Falt III.)	
	Calendar year	(a)2011	(b) 2012	(c) 2013	(d)2014	(e) 2015	(f) Total
(or 1	fiscal year beginning in) ► Gifts, grants, contributions, and membership fees received (Do	4,872,961	4,081,127	4,776,394	5,680,433		24,989,547
2	not include any unusual grants) Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
4	Total. Add lines 1 through 3	4,872,961	4,081,127	4,776,394	5,680,433	5,578,632	24,989,547
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5						225,654
_	from line 4 ection B. Total Support						
_	Calendar year	(a)2011	(b) 2012	(c)2013	(d) 2014	(e) 2015	(f) Total
7	A mounts from line 4	4,872,961	4,081,127	4,776,394	5,680,433	5,578,632	24,989,547
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	857,989	909,516	989,554	982,717	1,062,190	4,801,966
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part	42,968	41,836	44,575	36,045	17,370	182,794

	VI)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activi	ties, etc (see ins	tructions)				
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or						
	check this box and stop here						
S	Section C. Computation of Public Support Percentage						
14	Public support percentage for 201	L5 (line 6, column	(f) divided by line	e 11, column (f))			
15	Public support percentage for 201	L4 Schedule A , Pa	art II, line 14				

29,974,307 12 4,956,693 ind, third, fourth, or fifth tax year as a section 501(c)(3) organization,

organization

instructions

supported organization

and **stop here.** The organization qualifies as a publicly supported organization

box and stop here. The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test - 2015. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

b 10%-facts-and-circumstances test - 2014. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

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

b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

16a 33 1/3% support test-2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

14 15

Schedule A (Form 990 or 990-EZ) 2015

▶ 🗸

▶□

82 617 % 81 497 % 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.)

	II. If the organization	n fails to qualify	under the tes	ts listea below,	please comple	ete Part II.)	
Se	ction A. Public Support						
	Calendar year	(a)2011	(b) 2012	(c)2013	(d) 2014	(e)2015	(f) ⊤otal
(or t	iscal year beginning in) > Gifts, grants, contributions, and	. ,	. ,	. ,	. ,	. ,	
_	membership fees received (Do						
	not include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services performed, or facilities furnished						
	in any activity that is related to						
	the organization's tax-exempt						
	purpose						
3	Gross receipts from activities						
	that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the						
-	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
	and 3 received from disqualified						
_	persons						
b	Amounts included on lines 2 and 3 received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of						
	the amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6)						
Se	ction B. Total Support			l			
	Calendar year	4.32.44	412242	4.3004.0	4 D204 4	4 22045	(5) =
(or f	iscal year beginning in) ▶	(a)2011	(b) 2012	(c)2013	(d)2014	(e) 2015	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable						
	income (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
с 11	Net income from unrelated						
	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	business is regularly carried on Other income Do not include						
12	business is regularly carried on Other income Do not include gain or loss from the sale of						
12	business is regularly carried on Other income Do not include						
12	business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c,						
13	business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12)	For the organization	an's first second	third fourth or	ifth tay year ac	section 501/cV	R) organization
	business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is the same of the same o	or the organization	on's first, second	, third, fourth, or f	ifth tax year as a	section 501(c)(3	3) organization,
13 14	business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is the check this box and stop here			, third, fourth, or 1	ifth tax year as a	section 501(c)(3) organization, ▶
13 14	business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is to check this box and stop here Ction C. Computation of Pub	lic Support P	ercentage		ifth tax year as a		B) organization, ▶ □
13 14 Se 15	business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is facheck this box and stop here ction C. Computation of Pub Public support percentage for 2015	lic Support Position (line 8, column	ercentage (f) divided by line		ifth tax year as a	15	3) organization, ▶ □
13 14 Se 15 16	business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is the check this box and stop here ction C. Computation of Pub Public support percentage for 2015	lic Support Po (line 8, column of 14 Schedule A, P	ercentage (f) divided by line art III, line 15	13, column (f))	ifth tax year as a		3) organization, ▶ T
13 14 Se 15 16	business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is to check this box and stop here ction C. Computation of Pub Public support percentage from 2015 Ction D. Computation of Inv	lic Support Post (line 8, column of 14 Schedule A, Postment Inco	ercentage (f) divided by line art III, line 15 me Percenta	13, column (f))	· · · · · · · · · · · · · · · · · · ·	15	3) organization, ▶ □
13 14 Se 15 16	business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is to check this box and stop here Ction C. Computation of Pub Public support percentage for 2015 Public support percentage from 20; ction D. Computation of Inv Investment income percentage for	lic Support Position 8, column of 14 Schedule A, Postment Inco	ercentage (f) divided by line art III, line 15 me Percenta olumn (f) divided	13, column (f)) ge by line 13, colum	· · · · · · · · · · · · · · · · · · ·	15	3) organization, ▶ □
13 14 Se 15 16	business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is to check this box and stop here ction C. Computation of Pub Public support percentage from 2015 Ction D. Computation of Inv	lic Support Position 8, column of 14 Schedule A, Postment Inco	ercentage (f) divided by line art III, line 15 me Percenta olumn (f) divided	13, column (f)) ge by line 13, colum	· · · · · · · · · · · · · · · · · · ·	15 16	3) organization, ▶ □

more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2014. 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

Schedule A (Form 990 or 990-EZ) 2015

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V)

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section	2		
3а	509(a)(1) or (2) Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?	3 c		
4a	If "Yes," explain in Part VI what controls the organization put in place to ensure such use Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9с		
	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)	10b		
.1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	· ·			

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI

11c

Yes

2a

2b

Schedule A (Form 990 or 990-EZ) 2015

No

Page 5

No

Part IV Supporting Organizations (continued) Section B. Type I Supporting Organizations

•	bection by Type I Supporting Organizations		
			Yes
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	
2	2 Did the organization operate for the benefit of any supported organization other than the supported organization(s)		

that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization

Section C. Type II Supporting Organizations Yes No

Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in **Part VI** how contiol or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s) 1 Section D. All Type III Supporting Organizations Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior

tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in **Part VI** how the organization maintained a close and continuous working relationship with the 2 supported organization(s) 3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? 3

If "Yes," describe in **Part VI** the role the organization's supported organizations played in this regard Section E. Type III Functionally-Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions) The organization satisfied the Activities Test Complete line 2 below а

The organization is the parent of each of its supported organizations. Complete line 3 below b

c

The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instructions)

2 Activities Test_Answer (a) and (b) below.

a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the

supported organization(s) to which the organization was responsive?

If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the

organization determined that these activities constituted substantially all of its activities

b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of

the organization's supported organization(s) would have been engaged in? If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have

engaged in these activities but for the organization's involvement

3 Parent of Supported Organizations Answer (a) and (b) below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of

each of the supported organizations? Provide details in Part VI

b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

3a 3b

(B) Current Year (optional)

Page **6**

1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on	Nov 20,1970 See inst	ructions. All other
	Type III non-functionally integrated supporting organizations must complete Sections	s A through E	
	Section A - Adjusted Net Income	(A) Prior Year	(B) Current Ye

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	•		•	

6	gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	A ggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		(opnonia)
_	, , , ,	-		
а	Average monthly value of securities	1a		
b	A verage monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1 c		
d	Total (add lines 1a, 1b, and 1c)	1d		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1 a		
b	Average monthly cash balances	1 b		
c	Fair market value of other non-exempt-use assets	1 c		
d	Total (add lines 1a, 1b, and 1c)	1 d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
1				

d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
	Section C - Distributable Amount		Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	

-	racept, me s s, sss	_	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
	Section C - Distributable Amount		Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	

4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable A mount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrat	ed Type III supporting o	rganization (see

Section D - Distributions	Current Year		
A mounts paid to supported organizations to accom	plish exempt purposes		
2 Amounts paid to perform activity that directly furthe excess of income from activity	oorted organizations, in		
3 Administrative expenses paid to accomplish exemp	ot purposes of supported orga	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	uured)		
6 Other distributions (describe in Part VI) See instru	ictions		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is re	esponsive (provide	
9 Distributable amount for 2015 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
f 1 Distributable amount for 2015 from Section C, line $f 6$			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2015			
a			
b			
_ с			
d From 2013			
e From 2014			
f Total of lines 3a through e			
 g Applied to underdistributions of prior years h Applied to 2015 distributable amount 			
i Carryover from 2010 not applied (see			
instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7			
\$ <u></u>			
A pplied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 31 and 4c			
8 Breakdown of line 7			
a			
b			
c Excess from 2013			
d From 2014			
e From 2015			
		Schedule A	(Form 990 or 990-EZ) (2015

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Schedule A	(Form 990 or 990-EZ) 201	5	Page 8			
Part VI	Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).					
		Facts And Circumstances Test				
R	eturn Reference	Explanation				
		Schedule A (Form 990 or 990-i	Z) 2015			

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**SCHEDULE D**

(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

DLN: 93493307018166

	► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12	ZU1 5	
partment of the asury ernal Revenue Service	► Attach to Form 990. Information about Schedule D (Form 990) and its instructions is at www.irs.	Open to Publi Inspection	
lame of the organiz TKES PEAK COMMUNIT		Employer ident	ification number

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.							Public tion
Na	me of the organi ES PEAK COMMUNIT				oyer identifi	cation numb	er
Pa			r Advised Funds or Other Similar F		339670 or Accoun	ts.	
	Comple	ete ii tile organization answer	ed "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds	(h)	Funds and ot	ther account	·s
1	Total numbe	r at end of year	148	(5)	r anas ana o	iner decount	316
2	Aggregate va	alue of contributions to (during					
_	year)		2,377,708			3	,180,757
3	33 0	alue of grants from (during year)	1,956,102				,473,881
4		alue at end of year	20,755,082			38	,275,193
5	•		advisors in writing that the assets held in do the organization's exclusive legal control?	nor advis	sed	√ Yes	∏ No
6	used only for ch		and donor advisors in writing that grant fund benefit of the donor or donor advisor, or for a		purpose	√ Yes	┌ N o
Pa	rt III Consei	rvation Easements. Compl	ete if the organization answered "Yes"	on Forn	າ 990, Part	IV, line 7.	
1		•	ne organization (check all that apply)				
	Preservation)	on of land for public use (e g , reci	reation or Preservation of a	an histor	ıcally ımport	ant land are	a
	Protection	of natural habitat	Preservation of a	a certifie	d historic sti	ructure	
	Preservati	on of open space					
2	•	2a through 2d if the organization ne last day of the tax year	held a qualified conservation contribution in	the form	of a conserv	/ation	
					Held at t	he End of th	e Year
а		f conservation easements		2a			
b	_	restricted by conservation easem		2b			
c			d historic structure included in (a)	2 c			
d		re listed in the National Register	c) acquired after 8/17/06, and not on a	2d			
3	Number of cons tax year ▶	servation easements modified, tra	nsferred, released, extinguished, or terminat	ed by the	e organizatio	n during the	
4	Number of state	es where property subject to cons	ervation easement is located >				
5	Does the organ		rding the periodic monitoring, inspection, har	ndling of	_	Yes □	Na.
6	,		inspecting, handling of violations, and enforc	ing cons	•	•	
	-						
7		enses incurred in monitoring, insp	ecting, handling of violations, and enforcing o	onserva	tion easeme	nts during th	ne year
8		servation easement reported on li on 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the requirements of se	ction 17		Yes [No.
9	In Part XIII, de balance sheet,	escribe how the organization repo	ts conservation easements in its revenue ar t of the footnote to the organization's financia	•	se statemen	t, and	••
Par	t IIII Örgani	izations Maintaining Collec	ctions of Art, Historical Treasures,	or Oth	er Simila	r Assets.	
1a		-	ed "Yes" on Form 990, Part IV, line 8. FAS 116 (ASC 958), not to report in its reve	nue stat	ement and b	alance shee	t
La	works of art, his	storical treasures, or other simila	r assets held for public exhibition, education note to its financial statements that describ	, or resea	arch in furthe		
b	works of art, his	· · · · · · · · · · · · · · · · · · ·	FAS 116 (ASC 958), to report in its revenue r assets held for public exhibition, education o these items				olic
((i) _{Revenue inclu}	ided on Form 990, Part VIII, line	1	> \$			
(i	ii) Assets include	ed in Form 990, Part X					
2			historical treasures, or other similar assets				

Assets included in Form 990, Part X For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Revenue included on Form 990, Part VIII, line 1

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

	edule D (Form 990) 2015										Page
Par	Organizations Maintaining	Collections of A	Art, His	torica	al Trea	sures,	or O	ther Sir	nilar A	sse	
3	Using the organization's acquisition, acc	ession, and other re	cords, ch	eck an	y of the f	ollowing t	hat a	re a sıgnı	ficant us	e of ı	ts
	collection items (check all that apply)			_							
а	Public exhibition		d		Loan or e	exchange	prog	rams			
b	Scholarly research		е		Other						
c	Preservation for future generations										
4	Provide a description of the organization Part XIII	's collections and ex	plain how	they f	urther th	e organız	ation	's exempt	purpose	: in	
5	During the year, did the organization soli assets to be sold to raise funds rather th								☐ Ye	s	☐ No
Par	rt IV Escrow and Custodial Arra Complete if the organization Part X, line 21.		n Form 9	90, P	art IV, l	line 9, oi	rep	orted an	amour	nt on	Form 990
1a	Is the organization an agent, trustee, cu included on Form 990, Part X?	stodian or other intei	rmediary	for cor	itribution	s or othe	rass	ets not	ΓYe	s	∏ No
b	If "Yes," explain the arrangement in P	art XIII and complet	te the foll	owina :	table				Am	ount	
c	Beginning balance						1c				
d	Additions during the year						1d				
e	Distributions during the year					Ē	1e				
f	Ending balance						1f				
2a	Did the organization include an amount of	on Form 990 Part X	line 21 f	nresci	row or cu	ם stodial ad	COUR	nt liability	? 🗆 🗸 -	_	
b Pa	If "Yes," explain the arrangement in Part Endowment Funds. Comple	ete if the organiza	tion ans	wered	"Yes" t	o Form 9	990,	Part IV,	line 10		
Pa	rt V Endowment Funds. Comple		tion ans		"Yes" t	o Form 9	990,		line 10		our years bac
		ete if the organiza	tion ans	wered	"Yes" t	o Form 9	990,	Part IV,	line 10		
Ра 1а	Beginning of year balance	ete if the organiza	tion ans	wered	"Yes" t	o Form 9	990,	Part IV,	line 10		
Ра 1а	Beginning of year balance	ete if the organiza	tion ans	wered	"Yes" t	o Form 9	990,	Part IV,	line 10		
Pa 1a b	Beginning of year balance	ete if the organiza	tion ans	wered	"Yes" t	o Form 9	990,	Part IV,	line 10		
Pa 1a b	Beginning of year balance	ete if the organiza	tion ans	wered	"Yes" t	o Form 9	990,	Part IV,	line 10		
Pa 1a b c	Beginning of year balance Contributions	ete if the organiza	tion ans	wered	"Yes" t	o Form 9	990,	Part IV,	line 10		
Pa 1a b c d e	Beginning of year balance Contributions	ete if the organiza	tion ans	wered	"Yes" t	o Form 9	990,	Part IV,	line 10		
Pa 1a b c	Beginning of year balance Contributions	ete if the organiza	tion ans	wered	"Yes" t	o Form 9	990,	Part IV,	line 10		
Pa 1a b c d e	Beginning of year balance Contributions	(a)Current year	(b)Pno	wered	"Yes" t	o Form 9	990, pack	Part IV,	line 10		
Pa 1a b c d e	Beginning of year balance	(a)Current year	(b)Pno	wered	"Yes" t	o Form 9	990, pack	Part IV,	line 10		
Pa 1a b c d e f g	Beginning of year balance	(a)Current year	(b)Pno	wered	"Yes" t	o Form 9	990, pack	Part IV,	line 10		
1a b c d e f g	Beginning of year balance	(a)Current year current year end bal	(b)Pro	wered	"Yes" t	o Form 9	990, pack	Part IV,	line 10		
1a b c d e f g 2 a b	Beginning of year balance	current year end bal should equal 100%	(b)Pro	wered or year	"Yes" t	o Form (9990, pack	Part IV, (d)Three ye	line 10	. (e)F	
Pa 1a b c d e f g a b c	Beginning of year balance	current year end bal should equal 100%	ance (line	wered or year	"Yes" t	o Form (9990, pack	Part IV, (d)Three ye	line 10	(e)F	our years bac
Pa 1a b c d e f g 2 a b c	Beginning of year balance	current year end bal should equal 100%	ance (line	e 1g, c	olumn (a	o Form 9 Two years b)) held as d adminis	9990, pack	Part IV, (d)Three ye	line 10 ears back	(e)F	our years bac
Pa 1a b c d e f g 2 a b c	Beginning of year balance	current year end bal should equal 100% essession of the orga	nization t	wered or year e 1g, c hat are chedul	olumn (a	o Form 9 Two years b)) held as d adminis	9990, pack	Part IV, (d)Three ye	line 10 ears back	(e)F	our years bac

	· - · - · · · · · · · · · · · · · ·								
b	3t	>							
4									
Pai	Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a.See Form 990, Part X, line 10.								
	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	Accumulated (c) depreciation	(d)Book value				
1 a	Land	4,323,000	8,082,000		12,405,000				
b	Buildings		1,632,370	306,193	1,326,176				
c	Leasehold improvements								
d	Equipment		210,907	167,198	43,709				

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

13,774,885

48,012

	Investments—Other Securities. See Form 990, Part X, line 12.	·		
	(a) Description of security or catege (including name of security)	ory	(b)Book value	(c)Method of valuation Cost or end-of-year market value
	al derivatives /-held equity interests			
(3) O ther	There equity interests			
	mn (b) must equal Form 990, Part X, col (B) line 12 Investments—Program Related			
ait VII.	Complete if the organization answe	red 'Yes' on Form		
	(a) Description of investment		(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total (Colu	mn (h) must equal Form 990 Part X col (B) line 13) >		
	·	ation answered 'Yes'	on Form 990, Part IV, lin	
Part IX	Other Assets. Complete if the organiz (a) De	,	on Form 990, Part IV, lin	(b) Book value
Part IX	Other Assets. Complete if the organiz (a) De	ation answered 'Yes'	on Form 990, Part IV, lin	(b) Book value
Part IX	Other Assets. Complete if the organiz (a) De	ation answered 'Yes'	on Form 990, Part IV , lin	(b) Book value
Part IX	Other Assets. Complete if the organiz (a) De	ation answered 'Yes'	on Form 990, Part IV , lin	(b) Book value
Part IX	Other Assets. Complete if the organiz (a) De	ation answered 'Yes'	on Form 990, Part IV , lin	(b) Book value
Part IX	Other Assets. Complete if the organiz (a) De	ation answered 'Yes'	on Form 990, Part IV , lin	(b) Book value
Part IX	Other Assets. Complete if the organiz (a) De	ation answered 'Yes'	on Form 990, Part IV , lin	(b) Book value
Part IX	Other Assets. Complete if the organiz (a) De	ation answered 'Yes'	on Form 990, Part IV , lin	(b) Book value
Part IX	Other Assets. Complete if the organiz (a) De	ation answered 'Yes'	on Form 990, Part IV , lin	(b) Book value
Part IX 1) WATER	Other Assets. Complete if the organiz (a) De	ration answered 'Yes'	on Form 990, Part IV , lin	(b) Book value 7,882,000
Part IX 1) WATER	Other Assets. Complete if the organiz (a) Department of the complete if the organize (a) Department of the complete if the other Liabilities. Complete if the other Liabilities.	ration answered 'Yes' escription		(b) Book value 7,882,000
Part IX 1) WATER Fotal. (Columnation)	Other Assets. Complete if the organiz (a) De R RIGHTS	ne 15) organization answered 'Yes'	red 'Yes' on Form 990	(b) Book value 7,882,000
Part IX 1) WATER Fotal. (Color Part X 1.	Other Assets. Complete if the organize (a) Description of liability Other Liabilities. Complete if the office of the complete in the office of the complete in the office of the complete in the office of the offi	ration answered 'Yes' escription	red 'Yes' on Form 990	(b) Book value 7,882,000
Part IX 1) WATER Fotal. (Color Part X 1.	Other Assets. Complete if the organize (a) Dec R RIGHTS www. (b) must equal Form 990, Part X, col (B) In Other Liabilities. Complete if the General See Form 990, Part X, line 25.	ne 15) organization answered 'Yes'	red 'Yes' on Form 990	(b) Book value 7,882,000
Part IX 1) WATER Fotal. (Color Part X 1.	Other Assets. Complete if the organize (a) Description of liability Other Liabilities. Complete if the office of the complete in the office of the complete in the office of the complete in the office of the offi	ne 15) organization answe	red 'Yes' on Form 990	(b) Book value 7,882,000
Total. (Color Part X	Other Assets. Complete if the organize (a) Description of liability come taxes	ration answered 'Yes' escription rine 15) organization answe (b) Book va	red 'Yes' on Form 990	(b) Book value 7,882,000
Total. (Color Part X	Other Assets. Complete if the organiz (a) Determine the Research of the Complete if the Compl	ration answered 'Yes' escription rine 15) organization answe (b) Book va		(b) Book value 7,882,000
Total. (Color Part X	Other Assets. Complete if the organiz (a) Determine the Research of the Complete if the Compl	ration answered 'Yes' escription rine 15) organization answe (b) Book va		(b) Book value 7,882,000
Total. (Color Part X	Other Assets. Complete if the organiz (a) Determine the Research of the Complete if the Compl	ration answered 'Yes' escription rine 15) organization answe (b) Book va		(b) Book value 7,882,000
Total. (Color Part X 1. CHARITA	Other Assets. Complete if the organiz (a) Determine the Research of the Complete if the Compl	ration answered 'Yes' escription rine 15) organization answe (b) Book va		(b) Book value 7,882,000
Total. (Color Part X 1. CHARITA	Other Assets. Complete if the organiz (a) Determine the Research of the Complete if the Compl	ration answered 'Yes' escription rine 15) organization answe (b) Book va		(b) Book value 7,882,000
Total. (Color Part X 1. CHARITA	Other Assets. Complete if the organiz (a) Determine the Research of the Complete if the Compl	ration answered 'Yes' escription rine 15) organization answe (b) Book va		(b) Book value 7,882,000
Total. (Color Part X 1. CHARITAI	Other Assets. Complete if the organiz (a) Determine the Research of the Complete if the Compl	ration answered 'Yes' escription rine 15) organization answe (b) Book va		(b) Book value 7,882,000
Total. (Color Part X 1. CHARITAI HELD FOR	Other Assets. Complete if the organiz (a) Determine the Research of the Complete if the Compl	ne 15) Organization answer (b) Book va		(b) Book value 7,882,000

information

Schedule D Part X Line 2

Return Reference

Schedule D (Form 990) 2015

Page 4

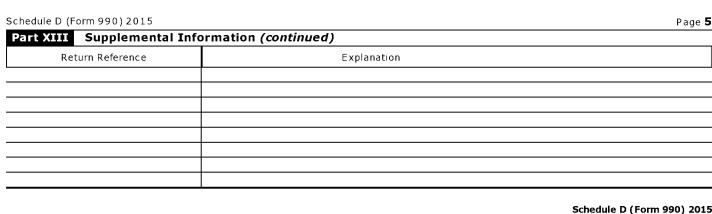
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments 2a		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
1	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)		
	Add lines 4a and 4b	4c	
C			
5	Total revenue Add lines 3 and 4c.(This must equal Form 990, Part I, line 12)	s per	Return.
art	Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	s per	Return.
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements		Return.
art	Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements	s per	Return.
art a	Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements	s per	Return.
Part a	Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements	s per	Return.
art a b	Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements	s per	Return.
art a b	Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements	s per	Return.
art a b c d	Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements	s per	Return.
art a b c d	Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements	s per	Return.
a b c d e	Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements	s per	Return.
Part a b c d e	Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements	s per	Return.
a b c d	Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements	s per	Return.
Part 2 a b c d e 3	Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements	s per	Return.

Explanation

current period

The Foundation is a nonprofit corporation which is exempt from income tax under Section 501(c)(3) of

the Internal Revenue Code In addition, the Foundation qualifies for the Charitable Contribution deduction The Foundation believes that it does not have any uncertain tax positions that are material to the financial statements Tax years that remain subject to examination include 2012 through the



PIKES PEAK COMMUNITY FOUNDATION

DLN: 93493307018166

OMB No 1545-0047

2015

SCHEDULE G (Form 990 or 990-EZ)

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

organization entered more than \$15,000 on Form 990-EZ, line 6a

Open to Public

Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990 or Form 990-EZ

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

84-1339670 Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Solicitation of non-government grants ☐ Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising Yes No services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of (ii) Activity (iii) Did (iv) Gross receipts (v) A mount paid to (vi) A mount paid to ındıvıdual fundraiser have from activity (or retained by) (or retained by) or entity (fundraiser) custody or fundraiser listed in organization control of col (i) contributions? No Yes Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Cat No 50083H

Schedule G (Form 990 or 990-EZ) 2015 Page 2 Fundraising Events. Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a)Event #1 (b)Event #2 (c)Other events (d) Total events Fall Festival **Farm Dinners** (add col (a) through (event type) (event type) (total number) col (c)) 5,300 4,800 7,280 17,380 **1** Gross receipts 10 2 Less Contributions. 3 Gross income (line 1 minus line 2) 5,290 7,280 4,800 17,370 4 Cash prizes Noncash prizes 6 Rent/facility costs Expenses 7 Food and beverages 8 Entertainment Teg Teg 9 Other direct expenses 3,074 585 3,659 10 Direct expense summary Add lines 4 through 9 in column (d) 3,659 11 Net income summary Subtract line 10 from line 3, column (d) 13,711 Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b)Pull tabs/Instant (d) Revenue (a)Bingo (c)Other gaming Total gaming (add col bingo/progressive bingo (a) through col (c)) 1 Gross revenue . Expenses 2 Cash prizes 3 Noncash prizes Direct 4 Rent/facility costs 5 Other direct expenses Yes_____% ☐ Yes_____% Yes______% No 6 Volunteer labor 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Subtract line 7 from line 1, column (d). Enter the state(s) in which the organization conducts gaming activities Yes No Is the organization licensed to conduct gaming activities in each of these states? If "No," explain

Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

If "Yes," explain _

Yes No

efile GRAPHIC print - DO N	OT PROCESS	As Filed Data -				DLN: 9	3493307018166
Schedule I (Form 990) Department of the Treasury Internal Revenue Service	Com	Grants and Oth Governments and Inplete if the organization	OMB No 1545-0047 2015 Open to Public Inspection				
Name of the organization PIKES PEAK COMMUNITY FOUN	DATION					Employer identificati	on number
Part I General Informa	tion on Grants	and Assistance				84-1339670	
 Does the organization maintainte the selection criteria used to Describe in Part IV the organ Part II Grants and Other Assi 	ain records to subs award the grants c nization's procedur stance to Domestic	tantiate the amount of th	of grant funds in the Urestic Governments. Com	nited States		,	✓ Yes No
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
See Additional Data Table							
2 Enter total number of section 3 Enter total number of other o	rganizations listed	in the line 1 table					159
For Paperwork Reduction Act Notice,	see the instructions	O TOT FORM 990.		Cat No 50055P		Schedu	le I (Form 990) 2015

Schedule I (Form 990) 2015

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) scholarships	34	70,976			
		1			
		1			
r					L
					<u> </u>
	1	1			I

All recommendations must be a 501(c)(3) charitable organization or qualifyed tax exempt organization. The 501(c)(3) tax status letter from the IRS must be on file All 501(c)(3) letters are connected to the organization in our database, Foundation Information Management Systems (FIMS) If it is a new organization to the Foundation, the non-profit is contacted and requested to fax, email or mail the 501(c)(3) to the Foundation office Requests cannot move through the process without the 501(c)(3) on file. If the request is for other than general operating support, if needed, a program officer will

discretionary grant awards are mailed with a grant agreement which includes a mandatory annual report on how the funds were used. All other grants are sent with a letter that reads by accepting this check, you certify that your organization is currently recognized by the IRS as a 501(c)(3) public charity or a qualified tax exempt organization such as a school or a church, and that the grant is fully tax deductible For grants over \$5,000, grant awards are

make contact with the non-profit organization to ensure the program is charitable and the grantee is able to perform the proposed activity. All

mailed with a grant agreement which includes a mandatory annual report on how the funds were used

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. Part IV

Return Reference

Schedule I Part I Line 2

Schedule I (Form 990) 2015

Explanation

Additional Data

Hope and Home

Rd

4945 N 30th St Third Floor Colorado Springs, CO 80919

6155 Fountain Valley School

Colorado Springs, CO 80911

Fountain Valley School

Software ID: Software Version:

EIN: 84-1339670

Name: PIKES PEAK COMMUNITY FOUNDATION

5,100

6,000

(h) Purpose of grant

orassistance

Youth Service

Youth Service

Youth Service

(a) Description of ıf applıcable (book, FMV, appraisal, non-cash assistance organization grant cash or government assistance other)

Colorado Springs School District 11 1115 N El Paso Street	84-6001179	Government	5,085		

Colorado Springs, CO 80903

501(c)(3)

501(c)(3)

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

84-1467476

84-0423922

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Safe Passage 84-1241767 501(c)(3) 6,000 Youth Service

423 South Cascade Avenue Colorado Springs, CO 80903					
Boys and Girls Club Pikes Peak Region	84-0416503	501(c)(3)	6,200		Youth Service
103 E Dikac Daak Aya E00					

9,000

Youth Service

102 E PIKES PEAK AVE 500 Colorado Springs, CO 80903

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

TWOCOR Projects

Colorado Springs, CO 80909

625 Arrawanna

72-1566504

(a) Name and address of **(b)** EIN (c) IRC section (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (d) A mount of cash organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance arant or government assistance other) Harrison School District 2 84-6001175 10.000 Vouth Service Government

Youth Service

1060 Harrison Road Colorado Springs, CO 80905	04 0001173	Government	10,000		Touth Service
Big Brothers Big Sisters	23-7161796	501(c)(3)	13,220		Youth Service

111 South Tejon Ste 302

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Parents Challenge

2 North Cascade Ave Colorado Springs, CO 80903 84-1591310

Colorado Springs, CO 80903 15,000

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Alpine Autism Center 84-0909184 501(c)(3) 15,418 Youth Service 2760 Fieldstone Boad

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Colorado Springs, CO 80919					
Mile High Youth Corps 1506 North Hancock Avenue Colorado Springs, CO 80903		501(c)(3)	17,500		Youth Service
University of Denver College	84-0404231	Government	19,000		Youth Service

University of Denver College of Law 2255 F Evans Ave STF 115

Denver, CO 80208

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) Colorado Springs Teen Court 501(c)(3) 19,661 Youth Service 84-1318849 c/o Municipal Court Building

Colorado Springs, CO 80901					
Court Care for the Pikes Peak Region PO Box 68	45-0488427	501(c)(3)	20,180		Youth Service
Colorado Springs, CO 80901					

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

200

Colorado Springs, CO 80909

21,246 Sprinkle Art 84-1526365 501(c)(3) Youth Service 1515 North Academy Suite

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Community Partnership for 501(c)(3) 21,329 Youth Service 84-1071825 Child Development 2220 Dobinson Ctroot

Colorado Springs, CO 80904					
Dale House Project 7 West Dale St Colorado Springs, CO 80903	84-1571115	501(c)(3)	22,369		Youth Service

Youth Service in the

Murphy

names of Kate and Rich

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Atlas Preparatory School

Colorado Springs, CO 80916

1602 S Murray Blvd

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Special Kids-Special Families 84-1476535 501(c)(3) 29,156 Youth Service

424 W Pikes Peak Ave Colorado Springs, CO 80905					
Urban Peak 423 E Cucharras	84-1549702	501(c)(3)	30,926		Youth Service

Colorado Springs, CO 80904

423 E Cucharras Colorado Springs, CO 80903	84-1549/02	501(c)(3)	30,926		Youth Service
Kids on Bikes 600 South 21st Street Suite	20-2820211	501(c)(3)	36,155		Youth Service

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) Colorado Springs Youth 84-1109579 501(c)(3) 48.197 Youth Service

o o i o i a a o o o o i i o a c i i	0 . 11000,				
Symphony					
PO Box 7846					
Colorado Springs, CO 80933					
CASA of the Pikes Peak	84-1115548	501(c)(3)	51,302		Youth Service

Youth Service

Region Inc 701 S Cascade

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Inside Out Youth Services

Colorado Springs, CO 80903

412 S Tejon Street

84-1407299

Colorado Springs, CO 80903

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Peak Education 84-1467174 501(c)(3) 107,959 Youth Service

730 N Nevada Colorado Springs,CO 80903					
Montrose Rotary Club Youth Foundation Inc	84-1128761	501(c)(3)	520,688		Youth Service

1500 Illinois Street Golden, CO 80401

Montrose Rotary Club Youth	84-1128761	501(c)(3)	520,688		Youth Service
Foundation Inc					
PO Box 3020					
Montrose, CO 81402					

Montrose Rotary Club Youth	84-1128761	501(c)(3)	520,688		Youth Service
Foundation Inc					
PO Box 3020					
Montrose CO 81402					

PO Box 3020					
Montrose,CO 81402					
Colorado School of Mines	84-0397522	Government	5.100		Community Service

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other)

National Museum of World	01-0859843	501(c)(3)	5,100		Community Service
War II Aviation					
755 Aviation Way					
Colorado Springs, CO 80916					
Colorado Springs Fine Arts	84-0406947	501(c)(3)	5,200		Community Service

Community Service

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Center

30 West Dale Street

Rocky Mountain PBS

1089 Bannock St Denver, CO 80204

Colorado Springs, CO 80903

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) 501(c)(3) 5,500 Community Service Colorado College 84-0402510 DO D.

PO Box 1117					
Colorado Springs, CO 80901					
Rocky Mountain Women's Film Festival 421 S Tejon St Ste 333	84-1097818	501(c)(3)	5,850		Community Service
Colorado Springs CO 80903					

Cultural Office of the Pikes 20-5794244 501(c)(3) 6,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Colorado Springs, CO 80901

Community Service Peak Region PO Box 190

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) 84-0893509 501(c)(3) 6,000 Anchor Center for Blind Community Service Children

Government

Colorado State University at

1065 Campus Delivery Fort Collins, CO 80523

Fort Collins

84-6000545

2550 Roslyn St Denver, CO 80238						
Educating Children of Color PO Box 16074 colo spgs,CO 80935	46-3347809	501(c)(3)	6,000			Community Service
4					l .	

6,100

Community Service

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other)

Catholic Charities of Colorado	84-0586169	501(c)(3)	6,305		Community Service
Springs					
228 N Cascade Ave					
Colorado Springs, CO 80903					

6,955

Community Service

Community Service

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

501(c)(3)

Springs Ensemble Theatre

Colorado Springs, CO 80904

635 Manitou Blvd

Project Sanctuary

PO Box 1563 Granby, CO 80446 27-0180887

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) National Society of Colonial 84-6032793 501(c)(3) 7.000 Community Service

Dames of America in C 635 Paisley Dr Colorado Springs, CO 80906	0.0002733	331(3)(3)	, ,,,,,,,		
Peak Vista Community Health Centers Foundation	20-3640104	501(c)(3)	7,099		Community Service

Community Service

722 S Wahsatch Ave

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Care and Share

2605 Preamble Point Colorado Springs, CO 80915 84-0731930

months Colorado Springs, CO 80903

635 Paisley Dr Colorado Springs, CO 80906					
Peak Vista Community Health Centers Foundation	20-3640104	501(c)(3)	7,099		Community S instructors fo

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) E 0 4 (-) (2) 7 400 Community Service

525 North Academy Blvd Colorado Springs, CO 80910	45-5236651	501(c)(3)	7,400		Community
El Paso County Search and	84-0607739	501(c)(3)	7,456		Community :

Rescue 3950 Interpark Drive

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

6565 E Broadway Blvd Tucson, AZ 85710

v Service Colorado Springs, CO 80907 Christ Presbyterian Church 86-6052069 501(c)(3) 7,500 Community Service

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) See the Change USA 46-0893801 501(c)(3) 7,500 Community Service

Society PO Box 6802

Colorado Springs, CO 80934

Colorado Springs, CO 80920					
Friends of Cheyenne Canon PO Box 60275 Colorado Springs, CO 80906	84-1324887	501(c)(3)	8,250		Community Service
Pikes Peak Jazz and Swing	84-0978225	501(c)(3)	8,480		Community Service

(a) Name and address of **(b)** EIN (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (c) IRC section (d) A mount of cash organization ıf applicable cash (book, FMV, appraisal, non-cash assistance or assistance arant or government assistance other) Pikes Peak Justice and Peace 74-2423069 501(c)(3) 8,519 Community Service Commission

8.578

8,656

Community Service

Community Service

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

501(c)(3)

332 West Bijou St STE 102 Colorado Springs, CO 809051347 Bear Creek Garden

Colorado Springs, CO 80937

Colorado Springs, CO 80949

Cool Science Company
PO Box 50015

Association PO Box 38326 84-1025774

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) 20-2089736 501(c)(3) 9,000 Trampled Rose Inc Community Service PO Box 50403

Colorado Springs Public Market Project 315 E Costilla Colorado Springs, CO 80903 Community Service	Colorado Springs, CO 80949				
	Market Project 315 E Costilla	501(c)(3)	9,348		Community Service

City of Colorado Springs -84-6000573 Government 10,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Colorado Springs, CO 80911

Community Service Therapeutic Recreation 1315 E Pikes Peak Ave

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) Pikes Peak Range Riders 84-1497942 501(c)(3) 10,300 Community Service Foundation

Community Service

PO Box 758 Colorado Springs,CO 80901					
Salvation Army 910 Yuma Street Colorado Springs,CO 80932	94-1156347	501(c)(3)	10,450		Community Service

910 Yuma Street
Colorado Springs, CO 80932

Colorado Springs Dance
Theatre
PO Box 877

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Colorado Springs, CO 80901

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Ecumenical Social Ministries 84-0890978 501(c)(3) 10.500 Community Service 201 N Weber St

Colorado Springs, CO 80903					
Harley's Hope Foundation PO BOX 88146 Colorado Springs,CO 80908	27-3127204	501(c)(3)	10,677		Community Service
Teller County Regional	84-1584194	501(c)(3)	10,833		Community Service

Teller County Regional 84-1584194 Animal Shelter

PO Box 904 Divide, CO 80814

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Wickenburg Foundation for the 96-0973340 501/61/31 11 000 Community Service

Colorado Enringe Utilitios	20 0642062	E01/c)/3)	11.000		Community Corvi
Wickenburg, AZ 85390					
2001 West Wickenburg Way Suite 3					
Performing Arts					
wickenburg roundation for the	00-00/3249	301(c)(3)	11,000		Community Servi

Colorado Springs Utilities 20-8643063 501(c)(3) 11,989 Foundation

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Colorado Springs, CO 80918

PO Box 1103

Community Service

809470929 Chevenne Village	84-6051921	501(c)(3)	12.440		Community Serv
809470929					
Colorado Springs, CO	1				

rvice 6275 Lehman Dr Bldg C

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) 20-2793024 501(c)(3) 12.586 Ormao Dance Company Community Service

10 S Spruce St Colorado Springs, CO 80905		, ,, ,	·		·
Women's Resource Agency 750 Citadel Dr East Ste	84-0747154	501(c)(3)	12,609		Community Service

Community Service

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Church

Women's Resource Agency
750 Citadel Dr East Ste
3128
Colorado Springs, CO 80909

Chapel of our Saviour 84-0408181

Colorado Springs, CO 80906

Episcopal 8 Fourth Street

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) 23-7029329 501(c)(3) 13,000 Assistance League of Community Service

Colorado Springs 405 S Nevada Avenue Colorado Springs,CO 80903					
Women's Crisis and Family	74-2385006	501(c)(3)	13,500		Community Service

501(c)(3)

27-5071916

Blue Star Recyclers

Colorado Springs, CO 80962

PO Box 64435

Women's Crisis and Family	74-2385006	501(c)(3)	13,500		Community Se
Outreach Center					
PO Box 367					
Castle Rock, CO 80104					

Colorado Springs, CO 80903					
Women's Crisis and Family Outreach Center PO Box 367	74-2385006	501(c)(3)	13,500		Community Serv

13,962

Community Service

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Training Cround 20 0002114 E01/61/21 1 E 000 Cammunity Camua

PO Box 49595 Colorado Springs, CO 80904	20-8093114	501(c)(3)	15,000		Community Service
UCCS Gallery of Contemporary Art 1420 Austin Bluffs Pkwy	84-6000555	501(c)(3)	16,036		Community Service

Community Service

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Energy Resource Center

114 W Rio Grande St Colorado Springs, CO 80903 84-0809393

809337150

occs dancily of	04 0000333] 301(0)(3)[10,030	l		Commu
Contemporary Art						
1420 Austin Bluffs Pkwy						
Colorado Springs, CO						
000227150						

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) Episcopal Church of the 31-0559888 Church 16,500 Community Service Redeemer

2944 Erie Ave Cincinnati, OH 45208				
The ARC - Pikes Peak Region Inc 12 N Meade Ave Colorado Springs,CO 80909	501(c)(3)	16,524		Community Service

University of Colorado 84-6049811 501(c)(3) 17,000 Community Service Theatre Works 1420 Austin Bluffs Parkway

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Colorado Springs, CO 80918

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) Gazette Charitable Programs 84-1526179 501(c)(3) 17.500 Community Service

501(c)(3)

Divide, CO 80814

1805 North 30th St

Gods

Friends of the Garden of the

Colorado Springs, CO 80904

84-1167597

30 E Pikes Peak Avenue Suite 100 Colorado Springs, CO 80903		, , , ,	,		·
Community Partnership	84-1157057	501(c)(3)	17,745		Community Service
Family Resource Center PO Box 396					

17,760

Community Service

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Partners in Housing 84-1188208 501(c)(3) 18,143 Community Service

455 Gold Pass Heights Colorado Springs, CO 80906					
Pikes Peak United Way 518 N Nevada Colorado Springs,CO 80903	84-0511799	501(c)(3)	18,250		Community Service
Pikes Peak Children's	20-3451384	501(c)(3)	18,320		Community Service

Pikes Peak Children's 20-3451384 Museum

Colorado Springs, CO 80949

PO Box 50042

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Yobel International 27-1736236 501(c)(3) 18,560 Community Service 2528 B West Colorado Ave

Community Service

Colorado Springs, CO 80904					
Desert Caballeros Western	86-0204201	501(c)(3)	19,500		Community Service
Museum					
21 N Frontier St					
Wickenburg, AR 85390					

Town of Green Mountain Falls 84-1212905 Government 19,900 10605 Green Mountain Falls

Road

80819

Green Mountain Falls, CO

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other)

African Wildlife Foundation 1400 16th Street NW Suite 120 Washington, DC 20036	52-0781390	501(c)(3)	20,000		Community Service
Chevenne Mountain Civic	26-3105331	501(c)(3)	20,000		Community Service

Community Service

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Solutions

205 E Cheyenne Mtn Blvd Colorado Springs, CO 80906

Garden City, KS 67846

48-6009982

City of Garden City

PO Box 998

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (h) Purpose of grant (g) Description of organization ıf applicable cash (book, FMV, appraisal, non-cash assistance or assistance arant or government assistance other) First Drashytonian Church 04 0416330 20 000

219 E Bijou Colorado Springs, CO 80903	64-0416230	Charch	20,000		Community Service
HBA Cares 4585 Hilton Parkway Suite	20-8717585	501(c)(3)	20,000		Community Service

100

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

415 S Sahwatch

Colorado Springs, CO 80903

Colorado Springs, CO 80904

Colorado Springs 84-1502211 501(c)(3) 20,156 Community Service Conservatory

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other)

Opera Theatre of the Rockies PO Box 8110	84-1476734	501(c)(3)	20,500		Community Service
Colorado Springs, CO 80933					
SEEDS Cafe	36-4763809	501(c)(3)	20,786		Community Service

Community Service

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

109 E Pikes Peak Ave Colorado Springs, CO 80903

84-1199481

Project Angel Heart

4950 Washington St Denver, CO 80216

(a) Name and address of **(b)** EIN (d) A mount of cash (e) A mount of non- (f) Method of valuation (h) Purpose of grant (c) IRC section (g) Description of organization ıf applicable cash (book, FMV, appraisal, non-cash assistance or assistance arant or government assistance other) 501(c)(3) 21,663 Friends of Monument Valley 84-1589887 Community Service

Park PO Box 734 Colorado Springs,CO 80903					
Smokebrush Foundation 515 Manitou Ave Suite 220 Manitou Springs, CO 80829	84-1233281	501(c)(3)	22,903		Community Service

Community Service

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Friends of the New Horizons

5028 Iron Horse Trail Colorado Springs, CO 80917

Band

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Contar for Nonnrafit 20 2650477 E01/61/21 25 000 Community Convoc

Excellence 723 N Weber St Ste 200 Colorado Springs, CO 80903	20-2659477	501(c)(3)	25,000		Community Service
City of Woodland Park PO Box 9007	84-6002470	Government	25,000		Community Service

Community Service

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Government

Woodland Park, CO 808669007

5550 N Union Blvd

Pikes Peak Library District

Colorado Springs, CO 80918

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) 74-2232440 501(c)(3) 25,260 Pikes Peak Therapeutic Community Service Riding Center

13620 Halleluiah Trail Elbert, CO 80106					
Dream Centers of Colorado Springs	27-4876080	501(c)(3)	26,965		Community Service

Community Service

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Government

11025 Voyager Parkway Colorado Springs, CO 80921 University of Colorado at

Office of Sponsored Programs Colorado Springs, CO 809183733

Colorado Springs

(a) Name and address of **(b)** EIN (d) A mount of cash (e) A mount of non- (f) Method of valuation (h) Purpose of grant (c) IRC section (g) Description of organization ıf applicable cash (book, FMV, appraisal, non-cash assistance orassistance arant or government assistance other) 74-2354492 501(c)(3) 28,814 Westside Cares Community Service

2808 W Colorado Ave Colorado Springs, CO 809042444					
Manitou Art Center 513 Manitou Ave	74-2445135	501(c)(3)	29,014		Community Service

Community Service

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Church

Manitou Springs, CO 80829

Broadmoor Community

Colorado Springs, CO 80906

Church 315 Lake Ave

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) 501(c)(3) 30,000 Community Service Entrepreneur Nation 46-5395971

Colorado Springs, CO 80903					
Robert Scott Hall Field of Dreams 14825 Millhaven Pl	46-1306234	501(c)(3)	30,000		Community Service

Community Service

Colorado Springs, CO 80908

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Church

St Dominic Catholic Church

Colorado Springs, CO 80911

5354 S Hwy 85/87

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Pikes Peak Community 38-3721881 30,850 Community Service Government

College 5675 S A cademy Blvd A -216 Colorado Springs, CO 80906					
City of Colorado Springs	84-6000573	Government	32,288		Community Service

PO BOX 15/5 MC250

Colorado Springs, CO 80906

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

vice Colorado Springs, CO 80901 TESSA 84-0746803 501(c)(3) 32,421 Community Service 435 Gold Pass Heights

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other)

Safe Place for Pets PO Box 38202 Colorado Springs, CO 80937	84-1568356	501(c)(3)	32,854		Community Service
Greccio Housing Unlimited	84-1158819	501(c)(3)	32,977		Community Service

Community Service

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Inc

90-0752919

1808 W Colorado Ave Colorado Springs, CO 80904

1040 S 8th St Ste 101 Colorado Springs, CO 80905

Incline Friends

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance arant or government assistance other) Rocky Mountain Field 74-2225140 501(c)(3) 35,295 Community Service Inctitute

815 South 25th Street Suite 101 Colorado Springs, CO 80904					
Pikes Peak Real Estate	20-3455353	501(c)(3)	36,381		Community Serv

501(c)(3)

Colorado Springs, CO 80903 Happy Cats Haven Inc

Colorado Springs, CO 80904

1412 S 21st St

45-1633134

Colorado Springs, CO 80904					
Pikes Peak Real Estate Foundation 730 N Nevada Ave	20-3455353	501(c)(3)	36,381		Community Service

38,292

Community Service

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other)

Palmer Land Trust	84-0763346	501(c)(3)	38,756		Community Service
PO Box 1281					·
Colorado Springs, CO 80901					
UpaDowna	46-4226815	501(c)(3)	40,310		Community Service

Community Service

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

One Nation Walking Together

3150 N Nevada Avenue Colorado Springs, CO 80907

UpaDowna	46-4226815	501(c)(3)	40,310		Community Ser
120 Trout Ave					·
Colorado Springs, CO 80906					1

UpaDowna	46-4226815	501(c)(3)	40,310		Commun
120 Trout Ave					
Colorado Springs, CO 80906					

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance arant or government assistance other) Springs Rescue Mission 84-1340824 501(c)(3) 40,439 Community Service 5 W Las Vegas

Community Service

Colorado Springs, CO 80903					
Cheyenne Mountain Zoo 4250 Cheyenne Mountain Zoo Rd Colorado Springs,CO 80906	84-0407039	501(c)(3)	40,500		Community Service

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

42,750 Pikes Peak Community 74-2182257 501(c)(3) College Foundation 5675 S Academy Blvd Box C-

Colorado Springs, CO 80906

(a) Name and address of (b) EIN (c) IRC section (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (d) A mount of cash organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) 84-1325815 501(c)(3) 43,988 Community Service All Breed Rescue and Training 20 M+ V/1014 Lano

Colorado Springs, CO 80907					
Colorado Springs Food Rescue Inc	45-3006089	501(c)(3)	45,087		Community Service
927 N Weber					

Colorado Springs, CO 80903

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO Box 38516

Colorado Springs, CO 80937

Home Front Cares Inc. 20-0564493 501(c)(3)46,589 Community Service

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) Trails and Open Space 84-1156471 501(c)(3) 53.270 Community Service

i i i ana o pen opace	0 7 11307/1	301(0)(3)	33,210		Community Scrvi
Coalition					
1040 S 8th Street Ste 101					
Colorado Springs, CO 80905					
University of Colorado	84-6049811	501(c)(3)	54,800		Community Servi

501(c)(3)

Fostering Hope Foundation

3055 Sunnybrook Ln Colorado Springs, CO 80904 26-1991807

Colorado Springs, CO 80905					
University of Colorado	84-6049811	501(c)(3)	54,800		Community Service
Foundation					
1420 Austin Bluffs Parkway					1
Colorado Springs, CO 80918					1

56,076

Community Service

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other)

Mıllıbo Arts Theater 1626 S Tejon St Colorado Sprıngs,CO 80905	74-3261678	501(c)(3)	76,791		Community Service
Catamount Institute	86-1151502	501(c)(3)	77,117		Community Service

85,000

Community Service

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

740 West Caramillo St Colorado Springs, CO 80907

3168 County Road 28 Woodland Park, CO 80863 84-1438996

Catamount Center

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Humane Society of the Pikes 84-0410111 501(c)(3) 94,366 Community Service Deak Degion

610 Abbott Lane Colorado Springs, CO 80905					
Lead Foundation	47-3113297	501(c)(3)	161,319		Community Service

Colorado Springs, CO 80905					
Lead Foundation PO Box 38895	47-3113297	501(c)(3)	161,319		Community
Calarada Caringa CO 00037					

501(c)(3)

Colorado Center for the Blind

2233 West Shepperd Avenue Littleton, CO 80120

74-2465141

Lead Foundation	47-3113297	501(c)(3)	161,319		Community Ser
PO Box 38895					
Colorado Springs, CO 80937					

10,000

Health

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) 84-1093905 501(c)(3) 6,500 Health Newborn Hope DO Boy 3515

Colorado Springs, CO 80901					
Alzheimer's Association- Colorado Chapter 2315 Bott Ave	84-0908354	501(c)(3)	6,600		Health

Colorado Springs, CO 80960

2315 Bott Ave Colorado Springs, CO 80904					
Medicine Wheel Trail Advocates Inc PO Box 60280	20-5765291	501(c)(3)	8,020		Health

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Pikes Peak Hospice & 84-0816047 501(c)(3) 8,500 Health Palliative Care

2550 Tenderfoot Hill St Colorado Springs, CO 809063998					
Pikes Peak Hospice Foundation	84-1453050	501(c)(3)	8,500		Health

Foundation

332 W Bijou Suite 201 Colorado Springs, CO 80905

Pikes Peak Hospice	84-1453050	501(c)(3)	8,500		Health
Foundation					
2550 Tenderfoot HIII Street					
Colorado Springs, CO 80906					
Juvenile Diabetes Research	23-1907729	501(c)(3)	10,500		Health

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Southern Colorado AIDS 84-0961159 501(c)(3) 10,537 Health Project

1301 South Eighth Street Colorado Springs, CO 80906						
Pikes Peak Suicide Prevention 704 N Tejon St Colorado Springs, CO 80903	74-2763861	501(c)(3)	11,191			Health
		1		•	l .	

Prevention
704 N Tejon St
Colorado Springs, CO 80903

Disabilities Services Inc AMBLICAB
Attn Gail Nehls
Colorado Springs, CO

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

809183659

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) 27-3546373 501(c)(3) 17,000 Health Mt Carmel Health Wellness and Community Center

Health

911 Robinson Ave Trinidad, CO 81082					
Mission Medical Clinic 2125 E La Salle Colorado Springs, CO 80909	68-0506812	501(c)(3)	27,483		Health

NAMI - National Alliance on 74-2338585 501(c)(3) 49,037 Mental Illness

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

510 E Willamette A

Colorado Springs, CO 80903

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other)

Penrose-St Francis	84-0902211	501(c)(3)	68,000		Health
Foundation					
2222 N Nevada					
Colorado Springs, CO 80907					
United States Association of	31-0977121	501(c)(3)	6,000		Health

Blind Athletes
1 Olympic Plaza

Colorado Springs, CO 80909

SCHEDULE M (Form 990)

Noncash Contributions

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

► Attach to Form 990.

2015

OMB No 1545-0047

DLN: 93493307018166

Treas	rtment of the sury nal Revenue Service	Pin officion at	Jour Jeneur	are in (1 orini 990) and its ins	eruccions is at <u>www.rrs.go</u>	<u> </u>	_	Inspe		
	ne of the organiza					Employer	identifica	tion nu	mber	
PIKE:	S PEAK COMMUNITY	FOUNDATION				84-1339	670			
Pā	rt I Types	of Property								
			(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	nonc	(c Method of d ash contrib	letermı	_	ts
1	Art—Works of a	t								
	Art—Historical 1									
3	Art—Fractional									
4	Books and publi									
5	Clothing and ho goods									
6	Cars and other	vehicles								
	Boats and plane									
	Intellectual proj									
	Securities—Pub	•	X	13	860,993	BFMV				
	Securities—Clos	′								
11	Securities—Part or trust interest									
	Securities—Mis									
13	Qualified conse contribution—H structures .	istoric								
14	Qualified conse contribution—O									
15	Real estate—Re	sidential .								
16	Real estate—Co	mmercial								
17	Real estate—Ot	her								
18	Collectibles .									
	Food inventory									
20	Drugs and medi	cal supplies .								
	Taxidermy .									
	Historical artifa									
	Scientific specii									
	Archeological a	rtifacts								
	Other►(gain sale of water	. 1	X	1	56,657	/ FMV				
	Other ► (
	Other ► (
	Other ► (
	`		by the orga	nnization during the tax yea	r for contributions					
				283, Part IV, Donee Acknowledge		29			V	N.
30a	During the vea	, did the organiza	ation receiv	e by contribution any prope	rty reported in Part I. lines	s 1 throun	h 28, that		Yes	No
				e date of the initial contribu	, ,	-	•			ĺ
		,			,	neu to be	useu			1
				period?				30a		No
ь	If "Yes," descr	ibe the arrangem	ent in Part :	II						(
31	Does the organ	ization have a gif	ft acceptan	ce policy that requires the r	review of any non-standard	contribut	ions?	31	Yes	1

contributions?

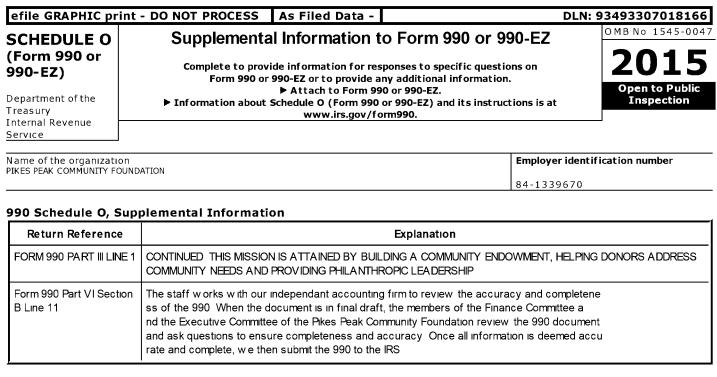
b If "Yes," describe in Part II

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

32a

Νo



Return Reference	Explanation
Form 990 Part VI Section A Line 4	The bylaw's were changed in October 2015 to accomodate up to 21 board members. Form 990 Part VI Section B Line 12c The Foundation is committed to integrity and fairness in the conduct of all its activities. Inevitably, the interests of directors and employees will involve them in organizations, causes, and other endeavors that intersect with the affairs of the Foundation. It would disadvantage the Foundation to deprive it of the involvement of interested colleagues, but their participation in Foundation decision-making cannot impair the fairness and integrity of Foundation processes. Directors and employees of the Foundation are committed to communicating fully with the Foundation regarding any relationship or commitment that could affect the impartial fulfillment of their role in the affairs of the Foundation. Disclosures ordinarily should be made to the CEO or President by members of the staff and to the Chair of the Board by other members of the Board of Directors. Formal notation of disclosures should be a part of the process.
Form 990 Part VI Section B Line 15	The performance evaluation of the Executive Director is a two-part process- A formative as sessment that occurs all year, and a summative assessment that occurs on or close to the d ate of employment of the Executive Director. The formative assessment occurs as weekly mee tings between the Executive Director and the Board Chair. These meetings are a chance to t alk over current projects, recent achievements, and upcoming events. During the meetings, the Board Chair takes notes for his files on the progress of the Executive Director tow and meeting the goals as stated in the strategic plan for for PPCF. The summative assessment begins approximately two months before the anniversary date of employment of the Executive Director. The Board Chair asks the Executive Director to write a self-evaluation that des cribes progress during the preceding year as related to the goals and objectives of the st rategic plan. At the same time, the Board Chair solicits feedback and input from all Board members, and also requests information from staff and key volunteers as appropriate. The Executive Director then meets one-on-one with the Board Chair to discuss both the self-evaluation and the Board feedback. After this session, the board chair convenes the Executive Committee of the Board for a formal performance review. Part of this session is ""Executive Session" during which the Executive Director is asked to leave the room so that the committee then prepares a recommendation for either retention or termination of the Executive Committee then prepares a recommendation for either retention or termination of the Executive Director and presents it to the full Board. The Executive Director then meets with the full Board to discuss performance, followed by an ""Executive Director then meets with the full Board to discuss performance, followed by an "Executive Director then meets with the Executive Director, and writes a formal performance review letter to the Executive Director, and writes a formal performance review letter to the

990 Schedule O, Supplemental Information

Return Reference Explanation

Change in value of split interest agreement -3,446 Rounding 3 ----- -3,443

Term 000 Pert VI Section Clare 10

Form 990 Part VI Section C Line 19 All documents available at the Organization's office

Form 990 Part XI line 9

Name, address, and EIN (if applicable) of disregarded entity

DLN: 93493307018166

Related Organizations and Unrelated Partnerships

Identification of Disregarded Entities Complete of the organization answered "Yes" on Form 990, Part IV, line 33.

Primary activity

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

2015

Open to Public Inspection

Direct controlling

entity

Employer identification number

84-1339670

End-of-year assets

Department of the Treasury
Internal Revenue Service
Name of the organization

PIKES PEAK COMMUNITY FOUNDATION

SCHEDULE R

(Form 990)

Part I

20-3455353

▶ Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at <u>www.irs.gov/form990</u>.

Total income

Legal domicile (state

or foreign country)

(1) HUNT OR GATHER LLC EDUCATION AND CO 95,366 10,014 PPCF 730 N NEVADA AVE COLORADO SPRINGS, CO 80903 (2) VENETUCCI RANCH LLC EDUCATION AND CO 441,010 9,809,615 PPCF 730 N NEVADA AVE COLORADO SPRINGS, CO 80903 (3) VENETUCCI VILLAGE LLC REAL ESTATE CO 6,440,733 PPCF 730 N NEVADA AVE COLORADO SPRINGS, CO 80903 (4) Pikes Peak Urban Gardens LLC CO 31,219 435 PPCF Edu/Gardening 730 N NEVADA AVE Colorado Springs, CO 80903 (5) 730 N Nevada LLC RE Holding 688,125 PPCF CO 730 N Nevada Ave Colorado springs, CO 80903 Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (d) (c) (e) (g) Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling Section 512(b) or foreign country) (if section 501(c)(3)) (13) controlled entity entity? Yes (1)PIKES PEAK REAL ESTATE FOUNDATION CO 501(c)(3) See Part VII See Pt VII See Part VII Yes 730 N NEVADA AVE COLORADO SPRINGS, CO 80903

Part III	Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part	: IV, line 34
	because it had one or more related organizations treated as a partnership during the tax year.	

(a) Name, address, and EIN of related organization	(c) Legal domicile (state or foreign country)	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets		rtionate tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana parti	ral or aging ner?	(k) Percentage ownership
					Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete of the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

_	_				01E
8) ed ?	No				- 000\ 7
(i) Section 512 (b)(13) controlled entity?	Yes				- D / F C
(h) Percentage ownership					Calcadula
(g) Share of end- of-year assets					
(f) Share of total Income					
(e) Type of entity (C corp, S corp, or trust)					
(d) Direct controlling entity					
(c) Legal domicile (state or foreign country)					
(b) Primary activity					
(a) Name, address, and EIN of related organization					1

Schedule R (Form 990) 2015					Pag	ge 3
Part V Transactions With Related Organizations Complete if the organization	n answered "Yes" on Form	990, Part IV, line	e 34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one of	r more related organizations li	sted in Parts II-IV	?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1 a		No
f b Gıft, grant, or capital contribution to related organization(s)				1b	Yes	
${f c}$ Gıft, grant, or capital contribution from related organization(s)				1 c		No
f d Loans or loan guarantees to or for related organization(s)				1 d		No
e Loans or loan guarantees by related organization(s)				1e		No
f Dividends from related organization(s)				1f		
g Sale of assets to related organization(s)				1 g		No
h Purchase of assets from related organization(s)				1h		No
i Exchange of assets with related organization(s)				1 i		No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)				1j		No
${f k}$ Lease of facilities, equipment, or other assets from related organization(s)				1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)			11		No
m Performance of services or membership or fundraising solicitations by related organization(s)			1m		No
$m{n}$ Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .				1n		No
o Sharing of paid employees with related organization(s)				10		No
p Reimbursement paid to related organization(s) for expenses				1 p		No
q Reimbursement paid by related organization(s) for expenses				1q		No
${f r}$ Other transfer of cash or property to related organization(s)				1r		No
$oldsymbol{s}$ Other transfer of cash or property from related organization(s)				1 s		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must c	complete this line, including co	overed relationships	and transaction threshold	s		
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining a	amount in	nvolved	
(1)Pikes Peak Real Estate Foundation	В	36,380	Cash transfer			

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

revenue) that was not a related organization. See instructions r							(c)	/h)		(1)	(1)		(k)
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	org	(e) all partners section 601(c)(3) anizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations ⁷		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)			(k) Percentage ownership
			317)	Yes	No			Yes	No		Yes	No	
												7	

Schedule R (Form 990) 2015 Page 5 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Return Reference Explanation Schedule R Part II Column F Pikes Peak Real Estate Foundation Direct Controlling entity Pikes Peak Community Foundation

Schedule R (Form 990) 2015