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Form 990



Department of the Treasury  
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)  
▶ Do not enter social security numbers on this form as it may be made public  
▶ Information about Form 990 and its instructions is at [www.irs.gov/foi/m990](http://www.irs.gov/foi/m990)

OMB No 1545-0047

2015

Open to Public Inspection

**A For the 2015 calendar year, or tax year beginning 07-01-2015 , and ending 06-30-2016**

**B** Check if applicable  
☐ Address change  
☐ Name change  
☐ Initial return  
☐ Final return/terminated  
☐ Amended return  
☐ Application pending

**C** Name of organization  
Colorado 4-H Foundation Group  
  
Doing business as  
  
Number and street (or P O box if mail is not delivered to street address) Room/suite  
4040 Campus Delivery  
  
City or town, state or province, country, and ZIP or foreign postal code  
Fort Collins, CO 805234040  
  
**F** Name and address of principal officer  
GARY SMALL  
4040 Campus Delivery  
Fort Collins, CO 805234040

**D** Employer identification number  
  
46-4830470  
  
**E** Telephone number  
  
(970) 491-1537  
  
**G** Gross receipts \$ 2,844,648

**I** Tax-exempt status ☒ 501(c)(3) ☐ 501(c) ( ) ◀(insert no ) ☐ 4947(a)(1) or ☐ 527

**J Website:** ▶ HTTP //WWW.COLORADO4H.ORG

**K** Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

**H(a)** Is this a group return for subordinates? ☒ Yes ☐ No  
**H(b)** Are all subordinates included? ☒ Yes ☐ No  
If "No," attach a list (see instructions)  
**H(c)** Group exemption number ▶ 5947

**L** Year of formation **M** State of legal domicile

Part I Summary				
Activities & Governance	<b>1</b> Briefly describe the organization's mission or most significant activities FUNDS ARE PROVIDED TO OFFSET COSTS ASSOCIATED WITH LOCAL, STATE, REGIONAL, AND NATIONAL 4-H PROGRAMS AND CONFERENCES TO ALLOW MORE YOUTH TO PARTICIPATE			
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets			
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a) . . . . .	<b>3</b>	13	
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) . . . . .	<b>4</b>	13	
	<b>5</b> Total number of individuals employed in calendar year 2015 (Part V, line 2a) . . . . .	<b>5</b>	0	
	<b>6</b> Total number of volunteers (estimate if necessary) . . . . .	<b>6</b>	11,789	
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 . . . . .	<b>7a</b>	0	
Revenue	<b>b</b> Net unrelated business taxable income from Form 990-T, line 34 . . . . .	<b>7b</b>	0	
	<b>8</b> Contributions and grants (Part VIII, line 1h) . . . . . <b>9</b> Program service revenue (Part VIII, line 2g) . . . . . <b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d ) . . . . . <b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) <b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	Prior Year	Current Year	
		1,142,873	1,313,162	
		0	0	
		9,491	12,536	
		600,943	813,787	
Expenses		1,753,307	2,139,485	
<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) . . . . . <b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) . . . . . <b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) <b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) . . . . . <b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <sup>0</sup> <b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) . . . . . <b>18</b> Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) <b>19</b> Revenue less expenses Subtract line 18 from line 12 . . . . .	429,918	268,062		
	0	0		
	0	0		
	0	0		
	Net Assets or Fund Balances		1,078,943	1,752,285
			1,508,861	2,020,347
			244,446	119,138
			Beginning of Current Year	End of Year
	<b>20</b> Total assets (Part X, line 16) . . . . . <b>21</b> Total liabilities (Part X, line 26) . . . . . <b>22</b> Net assets or fund balances Subtract line 21 from line 20 . . . . .	428,952	548,090	
		0	0	
		428,952	548,090	

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

\*\*\*\*\*

Signature of officer

GARY SMALL EXECUTIVE DIRECTOR

Type or print name and title

2017-03-14

Date

Paid Preparer Use Only

Print/Type preparer's name  
Kimberly A Ryan

Firm's name ▶ RubinBrown LLP

Firm's address ▶ 1900 16th Street Suite 300  
Denver, CO 80202

Preparer's signature  
Kimberly A Ryan

Firm's EIN ▶ 43-0765316

Phone no (303) 698-1883

Date

Check ☐ if self-employed

PTIN  
P00829977

May the IRS discuss this return with the preparer shown above? (see instructions) . . . . . ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990(2015)

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission

FUNDS ARE PROVIDED TO OFFSET COSTS ASSOCIATED WITH LOCAL, STATE, REGIONAL, AND NATIONAL 4-H PROGRAMS AND CONFERENCES TO ALLOW MORE YOUTH TO PARTICIPATE

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes

No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes

No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code ) (Expenses \$ 2,020,347 including grants of \$ 268,063 ) (Revenue \$ )

FUNDS ARE PROVIDED TO OFFSET COSTS ASSOCIATED WITH LOCAL, STATE, REGIONAL, AND NATIONAL 4-H PROGRAMS AND CONFERENCES TO ALLOW MORE YOUTH TO PARTICIPATE IN THE PROGRAMS

4b (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )






4c (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services (Describe in Schedule O )

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses ▶ 2,020,347

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	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
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	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	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
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	No
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
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	No
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	No
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	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	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 	18 Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

**Part IV** Checklist of Required Schedules (continued)

<b>21</b>	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? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .	<b>21</b>		No
<b>22</b>	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? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .	<b>22</b>	Yes	
<b>23</b>	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> . . . . .	<b>23</b>		No
<b>24a</b>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> . . . . .	<b>24a</b>		No
<b>b</b>	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . .	<b>24b</b>		
<b>c</b>	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .	<b>24c</b>		
<b>d</b>	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . .	<b>24d</b>		
<b>25a</b>	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	<b>25a</b>		No
<b>b</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? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	<b>25b</b>		No
<b>26</b>	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i> . . . . .	<b>26</b>		No
<b>27</b>	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> . . . . .	<b>27</b>		No
<b>28</b>	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
<b>a</b>	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	<b>28a</b>		No
<b>b</b>	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	<b>28b</b>		No
<b>c</b>	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	<b>28c</b>		No
<b>29</b>	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . .	<b>29</b>		No
<b>30</b>	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .	<b>30</b>		No
<b>31</b>	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	<b>31</b>		No
<b>32</b>	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	<b>32</b>		No
<b>33</b>	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . .	<b>33</b>		No
<b>34</b>	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> . . . . .	<b>34</b>		No
<b>35a</b>	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	<b>35a</b>		No
<b>b</b>	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	<b>35b</b>		
<b>36</b>	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	<b>36</b>		No
<b>37</b>	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? <i>If "Yes," complete Schedule R, Part VI</i>	<b>37</b>		No
<b>38</b>	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	<b>38</b>	Yes	

Part 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
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a	0
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0
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.	2a	0
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	No
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	
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	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	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	No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
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	
9a	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		
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders.	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> 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.	13c	
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	

**Part 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, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI ☒

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year 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	13	
<b>1b</b>	Enter the number of voting members included in line 1a, above, who are independent	13	
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	<b>2</b>	No
<b>3</b>	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?	<b>3</b>	Yes
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	<b>4</b>	No
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?	<b>5</b>	No
<b>6</b>	Did the organization have members or stockholders?	<b>6</b>	No
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	<b>7a</b>	No
<b>7b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7b</b>	No
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
<b>a</b>	The governing body?	<b>8a</b>	Yes
<b>b</b>	Each committee with authority to act on behalf of the governing body?	<b>8b</b>	Yes
<b>9</b>	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	<b>9</b>	No

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

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?	<b>10a</b>	Yes
<b>b</b>	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	<b>10b</b>	Yes
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<b>11a</b>	Yes
<b>b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	<b>12a</b>	No
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<b>12b</b>	
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	<b>12c</b>	
<b>13</b>	Did the organization have a written whistleblower policy?	<b>13</b>	No
<b>14</b>	Did the organization have a written document retention and destruction policy?	<b>14</b>	No
<b>15</b>	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?		
<b>a</b>	The organization's CEO, Executive Director, or top management official	<b>15a</b>	No
<b>b</b>	Other officers or key employees of the organization	<b>15b</b>	No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	<b>16a</b>	No
<b>b</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?	<b>16b</b>	

**Section C. Disclosure**

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

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**18** 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)

**19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

**20** State the name, address, and telephone number of the person who possesses the organization's books and records  
 ► GARY SMALL 4040 CAMPUS DELIVERY FORT COLLINS, CO 80523 (970) 491-1537

Check if Schedule O contains a response or note to any line in this Part VII ☐

**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

[illegible]



<b>2</b>	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 0			
<b>3</b>	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	<b>3</b>	Yes	No
<b>4</b>	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	<b>4</b>		No
<b>5</b>	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> . . . . .	<b>5</b>		No

<b>1</b> 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.		
(A)	(B)	(C)
Name and business address	Description of services	Compensation
<b>2</b> Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 0		

Part VIII

Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . .	1a					
	b	Membership dues . . . . .	1b	722,510				
	c	Fundraising events . . . . .	1c					
	d	Related organizations . . . . .	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	590,652				
	g	Noncash contributions included in lines 1a-1f \$						
	h	Total. Add lines 1a-1f . . . . .			1,313,162			
Program Service Revenue			Business Code					
	2a							
	b							
	c							
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f . . . . .						
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . .		12,536			12,536	
	4	Income from investment of tax-exempt bond proceeds . . .						
	5	Royalties . . . . .						
	6a	(i) Real		(ii) Personal				
		Gross rents						
		b	Less rental expenses					
		c	Rental income or (loss)					
	d	Net rental income or (loss) . . . . .						
	7a	(i) Securities		(ii) Other				
		Gross amount from sales of assets other than inventory						
		b	Less cost or other basis and sales expenses					
		c	Gain or (loss)					
	d	Net gain or (loss) . . . . .						
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . .						
		a	1,502,092					
		b	Less direct expenses . . . . .	b	705,163			
		c	Net income or (loss) from fundraising events . . .		796,929			796,929
	9a	Gross income from gaming activities See Part IV, line 19 . . . . .						
		a						
		b	Less direct expenses . . . . .	b				
		c	Net income or (loss) from gaming activities . . . .					
	10a	Gross sales of inventory, less returns and allowances . .						
a								
b		Less cost of goods sold . . . . .	b					
c		Net income or (loss) from sales of inventory . . .						
Miscellaneous Revenue		Business Code						
11a	MISCELLANEOUS INCOME		900099	16,858	16,858			
b								
c								
d	All other revenue . . . . .							
e	Total. Add lines 11a-11d . . . . .			16,858				
12	Total revenue. See Instructions . . . . .			2,139,485	16,858	0	809,465	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

Check if Schedule O contains a response or note to any line in this Part IX

☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21 . . . . .	25,905	25,905		
2	Grants and other assistance to domestic individuals See Part IV, line 22 . . . . .	242,157	242,157		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 . . . . .				
4	Benefits paid to or for members . . . . .				
5	Compensation of current officers, directors, trustees, and key employees . . . . .				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .				
7	Other salaries and wages . . . . .				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . . . .				
9	Other employee benefits . . . . .				
10	Payroll taxes . . . . .				
11	Fees for services (non-employees)				
a	Management . . . . .				
b	Legal . . . . .				
c	Accounting . . . . .				
d	Lobbying . . . . .				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees . . . . .				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) . . . . .				
12	Advertising and promotion . . . . .	2,842	2,842		
13	Office expenses . . . . .				
14	Information technology . . . . .				
15	Royalties . . . . .				
16	Occupancy . . . . .	13,848	13,848		
17	Travel . . . . .				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
19	Conferences, conventions, and meetings . . . . .				
20	Interest . . . . .				
21	Payments to affiliates . . . . .				
22	Depreciation, depletion, and amortization . . . . .				
23	Insurance . . . . .	3,251	3,251		
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 )				
a	ACTIVITIES	1,021,626	1,021,626		
b	TROPHIES/AWARDS	227,333	227,333		
c	SUPPLIES	220,621	220,621		
d	DUES	219,444	219,444		
e	All other expenses	43,320	43,320		
25	Total functional expenses. Add lines 1 through 24e	2,020,347	2,020,347	0	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X

Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest-bearing . . . . .	428,952	1	548,090
	2	Savings and temporary cash investments . . . . .		2	
	3	Pledges and grants receivable, net . . . . .		3	
	4	Accounts receivable, net . . . . .		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 . . . . .		5	
	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 . . . . .		6	
	7	Notes and loans receivable, net . . . . .		7	
	8	Inventories for sale or use . . . . .		8	
	9	Prepaid expenses and deferred charges . . . . .		9	
	10a	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D . . . . .	10a		
	b	Less: accumulated depreciation . . . . .	10b		10c
	11	Investments—publicly traded securities . . . . .		11	
	12	Investments—other securities. See Part IV, line 11 . . . . .		12	
	13	Investments—program-related. See Part IV, line 11 . . . . .		13	
	14	Intangible assets . . . . .		14	
	15	Other assets. See Part IV, line 11 . . . . .		15	
16	Total assets. Add lines 1 through 15 (must equal line 34) . . . . .	428,952	16	548,090	
Liabilities	17	Accounts payable and accrued expenses . . . . .		17	
	18	Grants payable . . . . .		18	
	19	Deferred revenue . . . . .		19	
	20	Tax-exempt bond liabilities . . . . .		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .		22	
	23	Secured mortgages and notes payable to unrelated third parties . . . . .		23	
	24	Unsecured notes and loans payable to unrelated third parties . . . . .		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D . . . . .		25	
	26	Total liabilities. Add lines 17 through 25 . . . . .	0	26	0
	Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
27		Unrestricted net assets . . . . .		27	
28		Temporarily restricted net assets . . . . .		28	
29		Permanently restricted net assets . . . . .		29	
Organizations that do not follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 30 through 34.					
30		Capital stock or trust principal, or current funds . . . . .	0	30	0
31		Paid-in or capital surplus, or land, building or equipment fund . . . . .	0	31	0
32		Retained earnings, endowment, accumulated income, or other funds . . . . .	428,952	32	548,090
33		Total net assets or fund balances . . . . .	428,952	33	548,090
34	Total liabilities and net assets/fund balances . . . . .	428,952	34	548,090	

Part XI

Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,139,485
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,020,347
3	Revenue less expenses Subtract line 2 from line 1	3	119,138
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	428,952
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	548,090

Part XII

Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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 <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
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		

Additional Data

Software ID:  
Software Version:  
EIN: 46-4830470  
Name: Colorado 4-H Foundation Group

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Mark Trostel ..... PRESIDENT (JULY-DEC )	20 00 .....			X				0	0	0
Barbara Walz ..... TRUSTEE/PRESIDENT (JAN -JUNE)	20 00 .....			X				0	0	0
Mary Gearhart ..... VICE PRESIDENT	15 00 .....			X				0	0	0
Jodie Martin-Witt ..... TREASURER	5 00 .....			X				0	0	0
Kent Singer ..... TRUSTEE	5 00 .....			X				0	0	0
Rachel Skanson ..... TRUSTEE	5 00 .....			X				0	0	0
Paula Waggoner ..... TRUSTEE	5 00 .....			X				0	0	0
Matthew Koly ..... TRUSTEE	5 00 .....			X				0	0	0
Michael A Thero ..... TRUSTEE	5 00 .....			X				0	0	0
Jim Van Someren ..... TRUSTEE	5 00 .....			X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Rob Ryan ..... TRUSTEE	5 00 .....			X				0	0	0
Andy Glover ..... TRUSTEE	5 00 .....			X				0	0	0
Gary Small ..... DIRECTOR	43 00 .....			X				0	0	0
Janice Schemp ..... PROGRAM ASSISTANT	40 00 .....			X				0	0	0
Aaron Andersen ..... CLUB LEADER	5 00 .....			X				0	0	0
Aaron Helus ..... CLUB LEADER	5 00 .....			X				0	0	0
Abby Power ..... CLUB LEADER	5 00 .....			X				0	0	0
Abby Reaksecker ..... CLUB LEADER	5 00 .....			X				0	0	0
ADAM JONES ..... CLUB LEADER	5 00 .....			X				0	0	0
Adrienne Roberts ..... CLUB LEADER	5 00 .....			X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Adrienne Weber ..... CLUB LEADER	5 00 .....			X				0	0	0
Aimee Wood ..... CLUB LEADER	5 00 .....			X				0	0	0
Alan Waldref ..... CLUB LEADER	5 00 .....			X				0	0	0
Aleta Lebaron ..... CLUB LEADER	5 00 .....			X				0	0	0
Alexis Gekeler ..... CLUB LEADER	5 00 .....			X				0	0	0
Alicia Chrstie ..... CLUB LEADER	5 00 .....			X				0	0	0
Alisha Shy ..... CLUB LEADER	5 00 .....			X				0	0	0
Alison Woodward ..... CLUB LEADER	5 00 .....			X				0	0	0
ALLEN HUTT ..... CLUB LEADER	5 00 .....			X				0	0	0
Amanda Higgins ..... CLUB LEADER	5 00 .....			X				0	0	0



Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Amanda Monk ..... CLUB LEADER	5 00 .....			X				0	0	0
Amanda Wahl ..... CLUB LEADER	5 00 .....			X				0	0	0
Amber Hersh ..... CLUB LEADER	5 00 .....			X				0	0	0
Amber Spence ..... CLUB LEADER	5 00 .....			X				0	0	0
Amberlyn Lake ..... CLUB LEADER	5 00 .....			X				0	0	0
Amy Cooksey ..... CLUB LEADER	5 00 .....			X				0	0	0
Amy Cope ..... CLUB LEADER	5 00 .....			X				0	0	0
Amy Decker ..... CLUB LEADER	5 00 .....			X				0	0	0
Amy Fnnk ..... CLUB LEADER	5 00 .....			X				0	0	0
Amy Mason ..... CLUB LEADER	5 00 .....			X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Amy Peebles ..... CLUB LEADER	5 00 .....			X				0	0	0
Amy Perkins ..... CLUB LEADER	5 00 .....			X				0	0	0
Angel DeCicco ..... CLUB LEADER	5 00 .....			X				0	0	0
Angela Fountain ..... CLUB LEADER	5 00 .....			X				0	0	0
Angela Sandy ..... CLUB LEADER	5 00 .....			X				0	0	0
ANGELA WYLIE ..... CLUB LEADER	5 00 .....			X				0	0	0
Angelina Salazar ..... CLUB LEADER	5 00 .....			X				0	0	0
Angie Harper ..... CLUB LEADER	5 00 .....			X				0	0	0
Angie LaDeau ..... CLUB LEADER	5 00 .....			X				0	0	0
Anita Hoxie ..... CLUB LEADER	5 00 .....			X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Anita Smith ..... CLUB LEADER	5 00 .....			X				0	0	0
Ann Franklin ..... CLUB LEADER	5 00 .....			X				0	0	0
Ann Hahn ..... CLUB LEADER	5 00 .....			X				0	0	0
Ann Hector ..... CLUB LEADER	5 00 .....			X				0	0	0
Ann Marie Doolittle ..... CLUB LEADER	5 00 .....			X				0	0	0
Anna Gerard-Ponce ..... CLUB LEADER	5 00 .....			X				0	0	0
Anne Hansen ..... CLUB LEADER	5 00 .....			X				0	0	0
Anne Knutson ..... CLUB LEADER	5 00 .....			X				0	0	0
Anne Marie Scrtchfield ..... CLUB LEADER	5 00 .....			X				0	0	0
Anne Une ..... CLUB LEADER	5 00 .....			X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Annette Lebsock ..... CLUB LEADER	5 00 .....			X				0	0	0
Annette Nusser ..... CLUB LEADER	5 00 .....			X				0	0	0
Annette Shipley ..... CLUB LEADER	5 00 .....			X				0	0	0
Annie Struble ..... CLUB LEADER	5 00 .....			X				0	0	0
April Potyondy ..... CLUB LEADER	5 00 .....			X				0	0	0
April Roof ..... CLUB LEADER	5 00 .....			X				0	0	0
Ashley Lynch ..... CLUB LEADER	5 00 .....			X				0	0	0
Audra Felt ..... CLUB LEADER	5 00 .....			X				0	0	0
Audra Schlosser ..... CLUB LEADER	5 00 .....			X				0	0	0
Barb Toomey-Moncrief ..... CLUB LEADER	5 00 .....			X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Barbara Jones ..... CLUB LEADER	5 00 .....			X				0	0	0
Barbara Zeutzius ..... CLUB LEADER	5 00 .....			X				0	0	0
Barbie Garnett ..... CLUB LEADER	5 00 .....			X				0	0	0
Bart Campbell ..... CLUB LEADER	5 00 .....			X				0	0	0
Becky Bowen ..... CLUB LEADER	5 00 .....			X				0	0	0
Becky Gemmer ..... CLUB LEADER	5 00 .....			X				0	0	0
Becky Heid ..... CLUB LEADER	5 00 .....			X				0	0	0
Becky Leach ..... CLUB LEADER	5 00 .....			X				0	0	0
Beki Schroder ..... CLUB LEADER	5 00 .....			X				0	0	0
Ben Duke ..... CLUB LEADER	5 00 .....			X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Bert Davis ..... CLUB LEADER	5 00 .....			X				0	0	0
BETH JOHNSON ..... CLUB LEADER	5 00 .....			X				0	0	0
Beth LaShell ..... CLUB LEADER	5 00 .....			X				0	0	0
BETTY HOOD ..... CLUB LEADER	5 00 .....			X				0	0	0
Betty Lou Moyer ..... CLUB LEADER	5 00 .....			X				0	0	0
Beverlee Kyffin ..... CLUB LEADER	5 00 .....			X				0	0	0
Biz Bopp ..... CLUB LEADER	5 00 .....			X				0	0	0
BOB HOMM ..... CLUB LEADER	5 00 .....			X				0	0	0
Bob Klenda ..... CLUB LEADER	5 00 .....			X				0	0	0
Bob Rush ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Bonnie Amen ..... CLUB LEADER	5 00 .....			X				0	0	0
Bonnie Coryell ..... CLUB LEADER	5 00 .....			X				0	0	0
Bonnie Smith ..... CLUB LEADER	5 00 .....			X				0	0	0
Brad Kavanagh ..... CLUB LEADER	5 00 .....			X				0	0	0
Brandon Creamer ..... CLUB LEADER	5 00 .....			X				0	0	0
Brechen Santeramo ..... CLUB LEADER	5 00 .....			X				0	0	0
Brenda Ballard ..... CLUB LEADER	5 00 .....			X				0	0	0
Brenda Chinn ..... CLUB LEADER	5 00 .....			X				0	0	0
BRENDA GARCIA ..... CLUB LEADER	5 00 .....			X				0	0	0
BRENDA GREGERSEN ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Brenda Hindmarsh ..... CLUB LEADER	5 00 .....			X				0	0	0
Brenda Johnston ..... CLUB LEADER	5 00 .....			X				0	0	0
Brenda Kwang ..... CLUB LEADER	5 00 .....			X				0	0	0
Brenda Lantz ..... CLUB LEADER	5 00 .....			X				0	0	0
Brenda Miltenberger ..... CLUB LEADER	5 00 .....			X				0	0	0
Brenda Mueller ..... CLUB LEADER	5 00 .....			X				0	0	0
Brenda Raley ..... CLUB LEADER	5 00 .....			X				0	0	0
Brett Redden ..... CLUB LEADER	5 00 .....			X				0	0	0
Bridget Gittere ..... CLUB LEADER	5 00 .....			X				0	0	0
Bridget Holcomb ..... CLUB LEADER	5 00 .....			X				0	0	0



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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Brooke Barbata ..... CLUB LEADER	5 00 .....			X				0	0	0
Bryanna Spafford ..... CLUB LEADER	5 00 .....			X				0	0	0
Cammie Janssen ..... CLUB LEADER	5 00 .....			X				0	0	0
Candice Bartholomew-Brown ..... CLUB LEADER	5 00 .....			X				0	0	0
Carla Elliott ..... CLUB LEADER	5 00 .....			X				0	0	0
Carla Giauque ..... CLUB LEADER	5 00 .....			X				0	0	0
Carleen Angela Knutsen ..... CLUB LEADER	5 00 .....			X				0	0	0
Carmen Porter ..... CLUB LEADER	5 00 .....			X				0	0	0
Carol von Michaelis ..... CLUB LEADER	5 00 .....			X				0	0	0
Carolyn Rudy ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Came Espinosa ..... CLUB LEADER	5 00 .....			X				0	0	0
Came Jacobucci ..... CLUB LEADER	5 00 .....			X				0	0	0
CASEY RUSSELL ..... CLUB LEADER	5 00 .....			X				0	0	0
Cassandra Shenk ..... CLUB LEADER	5 00 .....			X				0	0	0
Cate Ritchey ..... CLUB LEADER	5 00 .....			X				0	0	0
Cathy Solano ..... CLUB LEADER	5 00 .....			X				0	0	0
Charity Niccoli ..... CLUB LEADER	5 00 .....			X				0	0	0
Charlene Anselmo ..... CLUB LEADER	5 00 .....			X				0	0	0
Charlotte Poet ..... CLUB LEADER	5 00 .....			X				0	0	0
Chene Blomquist ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Cheryl Brown ..... CLUB LEADER	5 00 .....			X				0	0	0
Cheryl Clayton ..... CLUB LEADER	5 00 .....			X				0	0	0
Cheryl Thompson ..... CLUB LEADER	5 00 .....			X				0	0	0
Chrs Allen ..... CLUB LEADER	5 00 .....			X				0	0	0
Chrs Cude ..... CLUB LEADER	5 00 .....			X				0	0	0
Chrs Dekker ..... CLUB LEADER	5 00 .....			X				0	0	0
CHRIS HALL ..... CLUB LEADER	5 00 .....			X				0	0	0
Chrs Petersen ..... CLUB LEADER	5 00 .....			X				0	0	0
Chrs Reed ..... CLUB LEADER	5 00 .....			X				0	0	0
Chrs Rhyne ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Chrs Uhing ..... CLUB LEADER	5 00 .....			X				0	0	0
CHRIS YOUNG ..... CLUB LEADER	5 00 .....			X				0	0	0
CHRISTA MELGOZA ..... CLUB LEADER	5 00 .....			X				0	0	0
Christina Mayboca ..... CLUB LEADER	5 00 .....			X				0	0	0
Christina Ruffatti ..... CLUB LEADER	5 00 .....			X				0	0	0
Christina Van Bibber ..... CLUB LEADER	5 00 .....			X				0	0	0
Christine Fetzer ..... CLUB LEADER	5 00 .....			X				0	0	0
Christy Fitzpatrick ..... CLUB LEADER	5 00 .....			X				0	0	0
Christy Kimble ..... CLUB LEADER	5 00 .....			X				0	0	0
Cimmaron Alexander ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Cinda Gunn ..... CLUB LEADER	5 00 .....			X				0	0	0
Cindi Lee ..... CLUB LEADER	5 00 .....			X				0	0	0
Cindy Buckardt ..... CLUB LEADER	5 00 .....			X				0	0	0
Cindy Duckworth ..... CLUB LEADER	5 00 .....			X				0	0	0
Cindy Lowman ..... CLUB LEADER	5 00 .....			X				0	0	0
Cindy Medina ..... CLUB LEADER	5 00 .....			X				0	0	0
Cindy Still ..... CLUB LEADER	5 00 .....			X				0	0	0
Clare Shier ..... CLUB LEADER	5 00 .....			X				0	0	0
Clint Shults ..... CLUB LEADER	5 00 .....			X				0	0	0
CODY ANNEN ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Coleen Palmer ..... CLUB LEADER	5 00 .....			X				0	0	0
Colleen Freund ..... CLUB LEADER	5 00 .....			X				0	0	0
Colleen Russ ..... CLUB LEADER	5 00 .....			X				0	0	0
Colleen Vader ..... CLUB LEADER	5 00 .....			X				0	0	0
Connie Barber ..... CLUB LEADER	5 00 .....			X				0	0	0
CONNIE HAWN ..... CLUB LEADER	5 00 .....			X				0	0	0
Connie Mantelli ..... CLUB LEADER	5 00 .....			X				0	0	0
COREY TRAXLER ..... CLUB LEADER	5 00 .....			X				0	0	0
Cortney Aldridge ..... CLUB LEADER	5 00 .....			X				0	0	0
Courtney Jenkins ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Craig Horton ..... CLUB LEADER	5 00 .....			X				0	0	0
Crystal Foose ..... CLUB LEADER	5 00 .....			X				0	0	0
Crystal Morris ..... CLUB LEADER	5 00 .....			X				0	0	0
Curt Soehner ..... CLUB LEADER	5 00 .....			X				0	0	0
Cyndi Hofmeister ..... CLUB LEADER	5 00 .....			X				0	0	0
Dale Anderson ..... CLUB LEADER	5 00 .....			X				0	0	0
Dan Fiscuss ..... CLUB LEADER	5 00 .....			X				0	0	0
Dana Gettel ..... CLUB LEADER	5 00 .....			X				0	0	0
Dana Hanson ..... CLUB LEADER	5 00 .....			X				0	0	0
Dana McClure ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Danelle Ener ..... CLUB LEADER	5 00 .....			X				0	0	0
Danette Meyer ..... CLUB LEADER	5 00 .....			X				0	0	0
Daniel Lapp ..... CLUB LEADER	5 00 .....			X				0	0	0
Danielle Eggleston ..... CLUB LEADER	5 00 .....			X				0	0	0
Danielle Wollert ..... CLUB LEADER	5 00 .....			X				0	0	0
D'ANN HEBBERD ..... CLUB LEADER	5 00 .....			X				0	0	0
Dann Smith ..... CLUB LEADER	5 00 .....			X				0	0	0
Dave Holden ..... CLUB LEADER	5 00 .....			X				0	0	0
David Chrstensen ..... CLUB LEADER	5 00 .....			X				0	0	0
David Lind ..... CLUB LEADER	5 00 .....			X				0	0	0



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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Dawn Amt ..... CLUB LEADER	5 00 .....			X				0	0	0
Dawn Sammons ..... CLUB LEADER	5 00 .....			X				0	0	0
Dawn Wheeler ..... CLUB LEADER	5 00 .....			X				0	0	0
Dayna White ..... CLUB LEADER	5 00 .....			X				0	0	0
Deanie Samuel ..... CLUB LEADER	5 00 .....			X				0	0	0
Deanna Ames ..... CLUB LEADER	5 00 .....			X				0	0	0
DeAnna Cassidy ..... CLUB LEADER	5 00 .....			X				0	0	0
Deanna Higgins ..... CLUB LEADER	5 00 .....			X				0	0	0
Deb Bort ..... CLUB LEADER	5 00 .....			X				0	0	0
Deb Carbone ..... CLUB LEADER	5 00 .....			X				0	0	0

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Deb Crossland ..... CLUB LEADER	5 00 .....			X				0	0	0
Deb Heeney ..... CLUB LEADER	5 00 .....			X				0	0	0
Deb Lester ..... CLUB LEADER	5 00 .....			X				0	0	0
Deb VonFeldt ..... CLUB LEADER	5 00 .....			X				0	0	0
Debbie Cornelius ..... CLUB LEADER	5 00 .....			X				0	0	0
DEBBIE HOMM ..... CLUB LEADER	5 00 .....			X				0	0	0
Debbie Lewis ..... CLUB LEADER	5 00 .....			X				0	0	0
Debbie Smith ..... CLUB LEADER	5 00 .....			X				0	0	0
Debbie Thalhammer ..... CLUB LEADER	5 00 .....			X				0	0	0
Debbie Wellman ..... CLUB LEADER	5 00 .....			X				0	0	0

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Dee Schoendaller ..... CLUB LEADER	5 00 .....			X				0	0	0
DeeDee Farago ..... CLUB LEADER	5 00 .....			X				0	0	0
Delores Comstock ..... CLUB LEADER	5 00 .....			X				0	0	0
Denise Jenkins ..... CLUB LEADER	5 00 .....			X				0	0	0
Denise Miller ..... CLUB LEADER	5 00 .....			X				0	0	0
Denise Revell ..... CLUB LEADER	5 00 .....			X				0	0	0
Denise Smith ..... CLUB LEADER	5 00 .....			X				0	0	0
Denise Tarbutton ..... CLUB LEADER	5 00 .....			X				0	0	0
Devin Engle ..... CLUB LEADER	5 00 .....			X				0	0	0
Diane Blocker ..... CLUB LEADER	5 00 .....			X				0	0	0

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Dixie Gibbens ..... CLUB LEADER	5 00 .....			X				0	0	0
DJ MOORES ..... CLUB LEADER	5 00 .....			X				0	0	0
Don Brehm ..... CLUB LEADER	5 00 .....			X				0	0	0
Donna Hood ..... CLUB LEADER	5 00 .....			X				0	0	0
Donna Huff ..... CLUB LEADER	5 00 .....			X				0	0	0
Donna Pattee ..... CLUB LEADER	5 00 .....			X				0	0	0
Doris Bair ..... CLUB LEADER	5 00 .....			X				0	0	0
Doug Davis ..... CLUB LEADER	5 00 .....			X				0	0	0
Doug Shirack ..... CLUB LEADER	5 00 .....			X				0	0	0
Elisha Morris ..... CLUB LEADER	5 00 .....			X				0	0	0

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Elizabeth A Woodward ..... CLUB LEADER	5 00 .....			X				0	0	0
Elizabeth Billups ..... CLUB LEADER	5 00 .....			X				0	0	0
Elizabeth Butler ..... CLUB LEADER	5 00 .....			X				0	0	0
Ellie Jones ..... CLUB LEADER	5 00 .....			X				0	0	0
Emily Brnkley ..... CLUB LEADER	5 00 .....			X				0	0	0
Emily Gifford ..... CLUB LEADER	5 00 .....			X				0	0	0
Emily Waldron ..... CLUB LEADER	5 00 .....			X				0	0	0
Eric Engle ..... CLUB LEADER	5 00 .....			X				0	0	0
Erica Schweitz ..... CLUB LEADER	5 00 .....			X				0	0	0
Ern Babcock ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Enn Barker ..... CLUB LEADER	5 00 .....			X				0	0	0
Enn Comden ..... CLUB LEADER	5 00 .....			X				0	0	0
ERIN HENSCHEL ..... CLUB LEADER	5 00 .....			X				0	0	0
ERIN KENDRICK ..... CLUB LEADER	5 00 .....			X				0	0	0
Erna Waterman ..... CLUB LEADER	5 00 .....			X				0	0	0
Esther Worker ..... CLUB LEADER	5 00 .....			X				0	0	0
Felicia Casto ..... CLUB LEADER	5 00 .....			X				0	0	0
Gail Muehlethaler ..... CLUB LEADER	5 00 .....			X				0	0	0
Gayle Ware ..... CLUB LEADER	5 00 .....			X				0	0	0
Geneva Stuke ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Gerald Lyne ..... CLUB LEADER	5 00 .....			X				0	0	0
Gina Grisenti ..... CLUB LEADER	5 00 .....			X				0	0	0
Glenn Sanger ..... CLUB LEADER	5 00 .....			X				0	0	0
Glonia Cundall ..... CLUB LEADER	5 00 .....			X				0	0	0
Glonia Rameriz ..... CLUB LEADER	5 00 .....			X				0	0	0
Glonia Trosper ..... CLUB LEADER	5 00 .....			X				0	0	0
GRANT ARY ..... CLUB LEADER	5 00 .....			X				0	0	0
Greg Felsen ..... CLUB LEADER	5 00 .....			X				0	0	0
Greg George ..... CLUB LEADER	5 00 .....			X				0	0	0
Greg Huffman ..... CLUB LEADER	5 00 .....			X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Gregg Hartman ..... CLUB LEADER	5 00 .....			X				0	0	0
Gus Westerman ..... CLUB LEADER	5 00 .....			X				0	0	0
Harold Blackham ..... CLUB LEADER	5 00 .....			X				0	0	0
Heather Braslin ..... CLUB LEADER	5 00 .....			X				0	0	0
HEATHER HALL ..... CLUB LEADER	5 00 .....			X				0	0	0
Heather Kalous ..... CLUB LEADER	5 00 .....			X				0	0	0
Heather Kem ..... CLUB LEADER	5 00 .....			X				0	0	0
Heather Sauls ..... CLUB LEADER	5 00 .....			X				0	0	0
Heather Tillman ..... CLUB LEADER	5 00 .....			X				0	0	0
Heather Worrell ..... CLUB LEADER	5 00 .....			X				0	0	0



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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Heidi Anderson ..... CLUB LEADER	5 00 .....			X				0	0	0
Heidi Gniffith ..... CLUB LEADER	5 00 .....			X				0	0	0
Heidi Matthews ..... CLUB LEADER	5 00 .....			X				0	0	0
Heidi Simpson ..... CLUB LEADER	5 00 .....			X				0	0	0
Heidi White ..... CLUB LEADER	5 00 .....			X				0	0	0
Hillary Merwin ..... CLUB LEADER	5 00 .....			X				0	0	0
Holly Scott ..... CLUB LEADER	5 00 .....			X				0	0	0
Ida Bertram ..... CLUB LEADER	5 00 .....			X				0	0	0
Ivy McNulty ..... CLUB LEADER	5 00 .....			X				0	0	0
Jackie Page ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Jackie Shea ..... CLUB LEADER	5 00 .....			X				0	0	0
Jacque Burns ..... CLUB LEADER	5 00 .....			X				0	0	0
Jamie Axtell ..... CLUB LEADER	5 00 .....			X				0	0	0
Jamie McDonald ..... CLUB LEADER	5 00 .....			X				0	0	0
Jamie Turner ..... CLUB LEADER	5 00 .....			X				0	0	0
Janae Maker ..... CLUB LEADER	5 00 .....			X				0	0	0
Jane Lentz ..... CLUB LEADER	5 00 .....			X				0	0	0
Janeen Canty ..... CLUB LEADER	5 00 .....			X				0	0	0
Janet Cook ..... CLUB LEADER	5 00 .....			X				0	0	0
Janet Freeburg ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Janet Shendan ..... CLUB LEADER	5 00 .....			X				0	0	0
Janice Prosser ..... CLUB LEADER	5 00 .....			X				0	0	0
Jason FOOSE ..... CLUB LEADER	5 00 .....			X				0	0	0
Jason Neil ..... CLUB LEADER	5 00 .....			X				0	0	0
Jay Hill ..... CLUB LEADER	5 00 .....			X				0	0	0
Jean Meinzer ..... CLUB LEADER	5 00 .....			X				0	0	0
Jean Seymour ..... CLUB LEADER	5 00 .....			X				0	0	0
Jeannette Leffler ..... CLUB LEADER	5 00 .....			X				0	0	0
Jeannie Jenkins ..... CLUB LEADER	5 00 .....			X				0	0	0
Jeannie Jo Logan ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Jeff Lambeth ..... CLUB LEADER	5 00 .....			X				0	0	0
Jeff Sterkel ..... CLUB LEADER	5 00 .....			X				0	0	0
Jennie McCasland ..... CLUB LEADER	5 00 .....			X				0	0	0
Jennie Phippen ..... CLUB LEADER	5 00 .....			X				0	0	0
Jennifer Adams ..... CLUB LEADER	5 00 .....			X				0	0	0
Jennifer Carlson ..... CLUB LEADER	5 00 .....			X				0	0	0
Jennifer Fetzer ..... CLUB LEADER	5 00 .....			X				0	0	0
Jennifer Hart ..... CLUB LEADER	5 00 .....			X				0	0	0
Jennifer Sager ..... CLUB LEADER	5 00 .....			X				0	0	0
Jennifer Wade ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Jennifer Wells ..... CLUB LEADER	5 00 .....			X				0	0	0
Jenny Leonetti ..... CLUB LEADER	5 00 .....			X				0	0	0
Jenny States ..... CLUB LEADER	5 00 .....			X				0	0	0
Jen Trujillo ..... CLUB LEADER	5 00 .....			X				0	0	0
Jerod Armstrong ..... CLUB LEADER	5 00 .....			X				0	0	0
Jesse Mease ..... CLUB LEADER	5 00 .....			X				0	0	0
Jessica Adams ..... CLUB LEADER	5 00 .....			X				0	0	0
Jessica Engetto ..... CLUB LEADER	5 00 .....			X				0	0	0
Jessica Harrington ..... CLUB LEADER	5 00 .....			X				0	0	0
Jill Norwood ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Jill Parker ..... CLUB LEADER	5 00 .....			X				0	0	0
Jill Young ..... CLUB LEADER	5 00 .....			X				0	0	0
Jimetta Brassington ..... CLUB LEADER	5 00 .....			X				0	0	0
Jo Ann McEndree ..... CLUB LEADER	5 00 .....			X				0	0	0
Jo Sickendick ..... CLUB LEADER	5 00 .....			X				0	0	0
Joan Jahelka ..... CLUB LEADER	5 00 .....			X				0	0	0
Joan Owens ..... CLUB LEADER	5 00 .....			X				0	0	0
JoAnne Ary ..... CLUB LEADER	5 00 .....			X				0	0	0
JoAnne Busing ..... CLUB LEADER	5 00 .....			X				0	0	0
Jodi Carlson ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Jodi Corliss ..... CLUB LEADER	5 00 .....			X				0	0	0
JODI HILFERTY ..... CLUB LEADER	5 00 .....			X				0	0	0
Jodi Klassen ..... CLUB LEADER	5 00 .....			X				0	0	0
Jodi Mahaffey ..... CLUB LEADER	5 00 .....			X				0	0	0
Jodi Pike ..... CLUB LEADER	5 00 .....			X				0	0	0
Jodi Reed ..... CLUB LEADER	5 00 .....			X				0	0	0
Jodie Douthit ..... CLUB LEADER	5 00 .....			X				0	0	0
Jodie Schoemaker ..... CLUB LEADER	5 00 .....			X				0	0	0
Jodie Tuxhorn ..... CLUB LEADER	5 00 .....			X				0	0	0
Jody LEE ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Johanna Ball ..... CLUB LEADER	5 00 .....			X				0	0	0
John Hinners ..... CLUB LEADER	5 00 .....			X				0	0	0
John Scott ..... CLUB LEADER	5 00 .....			X				0	0	0
Joie Kendrick ..... CLUB LEADER	5 00 .....			X				0	0	0
JoLynn Midcap ..... CLUB LEADER	5 00 .....			X				0	0	0
Jonathan Vrabec ..... CLUB LEADER	5 00 .....			X				0	0	0
Jonna Negus-Pemberton ..... CLUB LEADER	5 00 .....			X				0	0	0
Jordyn Neely ..... CLUB LEADER	5 00 .....			X				0	0	0
Judi Blum ..... CLUB LEADER	5 00 .....			X				0	0	0
Julee Meiners ..... CLUB LEADER	5 00 .....			X				0	0	0



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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Julia Hennch ..... CLUB LEADER	5 00 .....			X				0	0	0
Julia Hurdelbrnk ..... CLUB LEADER	5 00 .....			X				0	0	0
Juliane Fritz ..... CLUB LEADER	5 00 .....			X				0	0	0
Julie Crain ..... CLUB LEADER	5 00 .....			X				0	0	0
Julie Hurst-Farnham ..... CLUB LEADER	5 00 .....			X				0	0	0
Julie Melbye ..... CLUB LEADER	5 00 .....			X				0	0	0
Julie Rubalcaba ..... CLUB LEADER	5 00 .....			X				0	0	0
JUSTIN WHITE ..... CLUB LEADER	5 00 .....			X				0	0	0
Justin Wylie ..... CLUB LEADER	5 00 .....			X				0	0	0
Kali Fassett ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Kara Butterworth ..... CLUB LEADER	5 00 .....			X				0	0	0
Kara Rudnick ..... CLUB LEADER	5 00 .....			X				0	0	0
Karen Hersh ..... CLUB LEADER	5 00 .....			X				0	0	0
Karen Hoffner ..... CLUB LEADER	5 00 .....			X				0	0	0
Karen Huber ..... CLUB LEADER	5 00 .....			X				0	0	0
Kari Jenkins ..... CLUB LEADER	5 00 .....			X				0	0	0
Karl Redd ..... CLUB LEADER	5 00 .....			X				0	0	0
Kathi Collins ..... CLUB LEADER	5 00 .....			X				0	0	0
Kathi Creamer ..... CLUB LEADER	5 00 .....			X				0	0	0
Kathie Kralik ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Kathleen Wood ..... CLUB LEADER	5 00 .....			X				0	0	0
Kathy Capps ..... CLUB LEADER	5 00 .....			X				0	0	0
Kathy Collins ..... CLUB LEADER	5 00 .....			X				0	0	0
Kathy Wolyn ..... CLUB LEADER	5 00 .....			X				0	0	0
Katie Day ..... CLUB LEADER	5 00 .....			X				0	0	0
Katie Nagel ..... CLUB LEADER	5 00 .....			X				0	0	0
Katrina Simmons ..... CLUB LEADER	5 00 .....			X				0	0	0
Katy Vincent ..... CLUB LEADER	5 00 .....			X				0	0	0
Kaycee Manuppella ..... CLUB LEADER	5 00 .....			X				0	0	0
Kaye Kasza ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Keith Maxey ..... CLUB LEADER	5 00 .....			X				0	0	0
Kelle Brown ..... CLUB LEADER	5 00 .....			X				0	0	0
Kellie Huppert ..... CLUB LEADER	5 00 .....			X				0	0	0
Kellie Stoll ..... CLUB LEADER	5 00 .....			X				0	0	0
Kellie Turner ..... CLUB LEADER	5 00 .....			X				0	0	0
Kelly Fischer ..... CLUB LEADER	5 00 .....			X				0	0	0
Kelly Kurz ..... CLUB LEADER	5 00 .....			X				0	0	0
Kelly Seelhoff ..... CLUB LEADER	5 00 .....			X				0	0	0
Ken Henson ..... CLUB LEADER	5 00 .....			X				0	0	0
Kendra McConnell ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Kendra Scott ..... CLUB LEADER	5 00 .....			X				0	0	0
Kendra Walter ..... CLUB LEADER	5 00 .....			X				0	0	0
Kent Davis ..... CLUB LEADER	5 00 .....			X				0	0	0
Kenzie Knnkee ..... CLUB LEADER	5 00 .....			X				0	0	0
Kevin Vendegna ..... CLUB LEADER	5 00 .....			X				0	0	0
Kim Bell ..... CLUB LEADER	5 00 .....			X				0	0	0
Kim Latoski ..... CLUB LEADER	5 00 .....			X				0	0	0
Kim LeTourneau ..... CLUB LEADER	5 00 .....			X				0	0	0
Kim Madsen ..... CLUB LEADER	5 00 .....			X				0	0	0
Kim Martin ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Kim Morrison ..... CLUB LEADER	5 00 .....			X				0	0	0
Kim Mortensen ..... CLUB LEADER	5 00 .....			X				0	0	0
Kim O'Neill ..... CLUB LEADER	5 00 .....			X				0	0	0
Kim Phillips ..... CLUB LEADER	5 00 .....			X				0	0	0
Kim Riddle ..... CLUB LEADER	5 00 .....			X				0	0	0
Kim Scott ..... CLUB LEADER	5 00 .....			X				0	0	0
Kim Sterkel ..... CLUB LEADER	5 00 .....			X				0	0	0
Kim Walker ..... CLUB LEADER	5 00 .....			X				0	0	0
Kimberly Dame ..... CLUB LEADER	5 00 .....			X				0	0	0
Kindra Plumb ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Kira Hershman ..... CLUB LEADER	5 00 .....			X				0	0	0
Kirk Peine ..... CLUB LEADER	5 00 .....			X				0	0	0
Kirsten Jensen ..... CLUB LEADER	5 00 .....			X				0	0	0
Kns Elliott ..... CLUB LEADER	5 00 .....			X				0	0	0
Kns Stevens ..... CLUB LEADER	5 00 .....			X				0	0	0
Krsta Monger ..... CLUB LEADER	5 00 .....			X				0	0	0
Krsta Rector ..... CLUB LEADER	5 00 .....			X				0	0	0
Krsten Cornveau ..... CLUB LEADER	5 00 .....			X				0	0	0
Krsten Schaffner ..... CLUB LEADER	5 00 .....			X				0	0	0
Krsten Smith ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Krsti Clark ..... CLUB LEADER	5 00 .....			X				0	0	0
Krsti Moyer ..... CLUB LEADER	5 00 .....			X				0	0	0
Krstianna Andersen ..... CLUB LEADER	5 00 .....			X				0	0	0
Krstin Enney ..... CLUB LEADER	5 00 .....			X				0	0	0
Krstin Stephens ..... CLUB LEADER	5 00 .....			X				0	0	0
Krstina Teal ..... CLUB LEADER	5 00 .....			X				0	0	0
Krsty Schneider ..... CLUB LEADER	5 00 .....			X				0	0	0
Kurt Brossman ..... CLUB LEADER	5 00 .....			X				0	0	0
Lacey Mann ..... CLUB LEADER	5 00 .....			X				0	0	0
LACI MEASE ..... CLUB LEADER	5 00 .....			X				0	0	0



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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
LaRay Gates ..... CLUB LEADER	5 00 .....			X				0	0	0
Larry Gilliland ..... CLUB LEADER	5 00 .....			X				0	0	0
Larry Hooker ..... CLUB LEADER	5 00 .....			X				0	0	0
Larry Rodenburg ..... CLUB LEADER	5 00 .....			X				0	0	0
Laura Brashear ..... CLUB LEADER	5 00 .....			X				0	0	0
Laura Bufmack ..... CLUB LEADER	5 00 .....			X				0	0	0
Lauren Beversluis ..... CLUB LEADER	5 00 .....			X				0	0	0
Laune Cook ..... CLUB LEADER	5 00 .....			X				0	0	0
Laune Stutz ..... CLUB LEADER	5 00 .....			X				0	0	0
Leah Clark ..... CLUB LEADER	5 00 .....			X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
LeAnn Duncan ..... CLUB LEADER	5 00 .....			X				0	0	0
Leisa Carson ..... CLUB LEADER	5 00 .....			X				0	0	0
Les Fraley ..... CLUB LEADER	5 00 .....			X				0	0	0
Lesley Linton ..... CLUB LEADER	5 00 .....			X				0	0	0
Libby Meyring ..... CLUB LEADER	5 00 .....			X				0	0	0
Linda Grater ..... CLUB LEADER	5 00 .....			X				0	0	0
Linda Moores ..... CLUB LEADER	5 00 .....			X				0	0	0
Linda Smith ..... CLUB LEADER	5 00 .....			X				0	0	0
Linda Squibb ..... CLUB LEADER	5 00 .....			X				0	0	0
Lisa Belmonte ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Lisa Boland ..... CLUB LEADER	5 00 .....			X				0	0	0
Lisa Byrne ..... CLUB LEADER	5 00 .....			X				0	0	0
Lisa Cooper ..... CLUB LEADER	5 00 .....			X				0	0	0
Lisa Franks ..... CLUB LEADER	5 00 .....			X				0	0	0
Lisa Mane Jacobs ..... CLUB LEADER	5 00 .....			X				0	0	0
Lisa Megel ..... CLUB LEADER	5 00 .....			X				0	0	0
Lisa Mirabito ..... CLUB LEADER	5 00 .....			X				0	0	0
LISA Nieslanik ..... CLUB LEADER	5 00 .....			X				0	0	0
Lisa Scott ..... CLUB LEADER	5 00 .....			X				0	0	0
Lisa Sholten ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Lisa Stavig ..... CLUB LEADER	5 00 .....			X				0	0	0
Lolita Shaffer ..... CLUB LEADER	5 00 .....			X				0	0	0
Loren French ..... CLUB LEADER	5 00 .....			X				0	0	0
Loretta Young ..... CLUB LEADER	5 00 .....			X				0	0	0
Lon Chase ..... CLUB LEADER	5 00 .....			X				0	0	0
Lon Delehoy ..... CLUB LEADER	5 00 .....			X				0	0	0
Lorn Arnhold ..... CLUB LEADER	5 00 .....			X				0	0	0
Lynette Clock ..... CLUB LEADER	5 00 .....			X				0	0	0
Lynette Johnson ..... CLUB LEADER	5 00 .....			X				0	0	0
Lynn Johnson ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Lynn Schwartz ..... CLUB LEADER	5 00 .....			X				0	0	0
Magdaline Montano ..... CLUB LEADER	5 00 .....			X				0	0	0
Maggie Repp ..... CLUB LEADER	5 00 .....			X				0	0	0
Mandie Hill ..... CLUB LEADER	5 00 .....			X				0	0	0
Margaret Marr ..... CLUB LEADER	5 00 .....			X				0	0	0
Margery Richter ..... CLUB LEADER	5 00 .....			X				0	0	0
Margie Corpron ..... CLUB LEADER	5 00 .....			X				0	0	0
Mana Kattnig ..... CLUB LEADER	5 00 .....			X				0	0	0
Mana Treto ..... CLUB LEADER	5 00 .....			X				0	0	0
Mane Adams ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Manlyn Wentz ..... CLUB LEADER	5 00 .....			X				0	0	0
Mark Nieslanik ..... CLUB LEADER	5 00 .....			X				0	0	0
Mark Volt ..... CLUB LEADER	5 00 .....			X				0	0	0
Marlo Valdez ..... CLUB LEADER	5 00 .....			X				0	0	0
Martha Stender ..... CLUB LEADER	5 00 .....			X				0	0	0
Martin Telck ..... CLUB LEADER	5 00 .....			X				0	0	0
Mary Alton ..... CLUB LEADER	5 00 .....			X				0	0	0
Mary Brewer ..... CLUB LEADER	5 00 .....			X				0	0	0
Mary Ellen LeBlanc ..... CLUB LEADER	5 00 .....			X				0	0	0
Mary Endsley ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Mary Gore ..... CLUB LEADER	5 00 .....			X				0	0	0
Mary Loving ..... CLUB LEADER	5 00 .....			X				0	0	0
Mary Olguin ..... CLUB LEADER	5 00 .....			X				0	0	0
Mary O'Malley ..... CLUB LEADER	5 00 .....			X				0	0	0
Mary Parenti ..... CLUB LEADER	5 00 .....			X				0	0	0
Mary Sharp ..... CLUB LEADER	5 00 .....			X				0	0	0
Mary Stephens ..... CLUB LEADER	5 00 .....			X				0	0	0
Matt Katzenberger ..... CLUB LEADER	5 00 .....			X				0	0	0
Matt Lemon ..... CLUB LEADER	5 00 .....			X				0	0	0
Maureen Bergenfeld ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Megan Blaser ..... CLUB LEADER	5 00 .....			X				0	0	0
Melani Hensley ..... CLUB LEADER	5 00 .....			X				0	0	0
Melanie Bohren ..... CLUB LEADER	5 00 .....			X				0	0	0
Melanie Enckson ..... CLUB LEADER	5 00 .....			X				0	0	0
Melanie Northup ..... CLUB LEADER	5 00 .....			X				0	0	0
MELINDA HUTT ..... CLUB LEADER	5 00 .....			X				0	0	0
Melinda Shade ..... CLUB LEADER	5 00 .....			X				0	0	0
Melissa Hackett ..... CLUB LEADER	5 00 .....			X				0	0	0
Mendi Lutze ..... CLUB LEADER	5 00 .....			X				0	0	0
Mendy Grisenti ..... CLUB LEADER	5 00 .....			X				0	0	0



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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Men Moller ..... CLUB LEADER	5 00 .....			X				0	0	0
Michael Morford ..... CLUB LEADER	5 00 .....			X				0	0	0
Michael Peterson ..... CLUB LEADER	5 00 .....			X				0	0	0
Michelle Shelby Dutton ..... CLUB LEADER	5 00 .....			X				0	0	0
Michelle Lehmann ..... CLUB LEADER	5 00 .....			X				0	0	0
Michelle Maloney ..... CLUB LEADER	5 00 .....			X				0	0	0
Mike Litzenberger ..... CLUB LEADER	5 00 .....			X				0	0	0
Mike Ritschard ..... CLUB LEADER	5 00 .....			X				0	0	0
Mike Strouse ..... CLUB LEADER	5 00 .....			X				0	0	0
MIKE THYNE ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Mildred Smelker ..... CLUB LEADER	5 00 .....			X				0	0	0
Missy Chavez ..... CLUB LEADER	5 00 .....			X				0	0	0
MISSY JONES ..... CLUB LEADER	5 00 .....			X				0	0	0
Misty Davis ..... CLUB LEADER	5 00 .....			X				0	0	0
Misty Taylor ..... CLUB LEADER	5 00 .....			X				0	0	0
Mitch Kendnck ..... CLUB LEADER	5 00 .....			X				0	0	0
Molly Mendoza ..... CLUB LEADER	5 00 .....			X				0	0	0
Nadine Henry ..... CLUB LEADER	5 00 .....			X				0	0	0
Nancy Day ..... CLUB LEADER	5 00 .....			X				0	0	0
Nancy Keller ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Nancy Weber ..... CLUB LEADER	5 00 .....			X				0	0	0
Nannette Hibbert ..... CLUB LEADER	5 00 .....			X				0	0	0
Nichol Bray ..... CLUB LEADER	5 00 .....			X				0	0	0
NICKI BEYALE ..... CLUB LEADER	5 00 .....			X				0	0	0
Nicole Carlson ..... CLUB LEADER	5 00 .....			X				0	0	0
Nicole Frank ..... CLUB LEADER	5 00 .....			X				0	0	0
Nicole King ..... CLUB LEADER	5 00 .....			X				0	0	0
Nicole McChesney ..... CLUB LEADER	5 00 .....			X				0	0	0
Nicolette Allen ..... CLUB LEADER	5 00 .....			X				0	0	0
Niki Smith ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Nikki Hobby ..... CLUB LEADER	5 00 .....			X				0	0	0
Nikki Lafferty ..... CLUB LEADER	5 00 .....			X				0	0	0
Nikki Reid ..... CLUB LEADER	5 00 .....			X				0	0	0
Nikki Shannon ..... CLUB LEADER	5 00 .....			X				0	0	0
Pam Haynes ..... CLUB LEADER	5 00 .....			X				0	0	0
Pam Long ..... CLUB LEADER	5 00 .....			X				0	0	0
Pam Struckmeyer ..... CLUB LEADER	5 00 .....			X				0	0	0
Pat Alger ..... CLUB LEADER	5 00 .....			X				0	0	0
Patricia Kuhlmann ..... CLUB LEADER	5 00 .....			X				0	0	0
Patti Churchwell ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Patty Coombs ..... CLUB LEADER	5 00 .....			X				0	0	0
Paul Chatham ..... CLUB LEADER	5 00 .....			X				0	0	0
Paul Clayton ..... CLUB LEADER	5 00 .....			X				0	0	0
Peggy Edson ..... CLUB LEADER	5 00 .....			X				0	0	0
Peggy Rushton ..... CLUB LEADER	5 00 .....			X				0	0	0
Peggy Thate ..... CLUB LEADER	5 00 .....			X				0	0	0
Penny Crawford ..... CLUB LEADER	5 00 .....			X				0	0	0
Priscilla Shannahan ..... CLUB LEADER	5 00 .....			X				0	0	0
Rachel Nichols ..... CLUB LEADER	5 00 .....			X				0	0	0
Rachel Walke ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Raejean Riegel ..... CLUB LEADER	5 00 .....			X				0	0	0
Raeme Padgett ..... CLUB LEADER	5 00 .....			X				0	0	0
Randy Schoenecker ..... CLUB LEADER	5 00 .....			X				0	0	0
Raymond Carlock ..... CLUB LEADER	5 00 .....			X				0	0	0
Reba Sonnier-Fertitta ..... CLUB LEADER	5 00 .....			X				0	0	0
Rebecca Fntz ..... CLUB LEADER	5 00 .....			X				0	0	0
Rebecca Gnffin ..... CLUB LEADER	5 00 .....			X				0	0	0
Rebecca Mills-Honstein ..... CLUB LEADER	5 00 .....			X				0	0	0
Rebecca Mitchell ..... CLUB LEADER	5 00 .....			X				0	0	0
Red Lee ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Renae Neilson ..... CLUB LEADER	5 00 .....			X				0	0	0
Renee Watters ..... CLUB LEADER	5 00 .....			X				0	0	0
rhina sotelo ..... CLUB LEADER	5 00 .....			X				0	0	0
Rhonda Graham ..... CLUB LEADER	5 00 .....			X				0	0	0
Rhonda Ledford ..... CLUB LEADER	5 00 .....			X				0	0	0
RINDI YOUNG ..... CLUB LEADER	5 00 .....			X				0	0	0
Rita Johnston ..... CLUB LEADER	5 00 .....			X				0	0	0
Robert Franklin ..... CLUB LEADER	5 00 .....			X				0	0	0
Robin Shearer ..... CLUB LEADER	5 00 .....			X				0	0	0
Robin Williams ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Rod Johnson ..... CLUB LEADER	5 00 .....			X				0	0	0
Rod Wille ..... CLUB LEADER	5 00 .....			X				0	0	0
Rozilynn Witherell ..... CLUB LEADER	5 00 .....			X				0	0	0
Russell Morns ..... CLUB LEADER	5 00 .....			X				0	0	0
Rusty Greer ..... CLUB LEADER	5 00 .....			X				0	0	0
Ruth Shepardson ..... CLUB LEADER	5 00 .....			X				0	0	0
Sabrina Elliott ..... CLUB LEADER	5 00 .....			X				0	0	0
Sally Kaufman ..... CLUB LEADER	5 00 .....			X				0	0	0
SAM MARTIN ..... CLUB LEADER	5 00 .....			X				0	0	0
Sami Lechman ..... CLUB LEADER	5 00 .....			X				0	0	0



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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Sandra Hoihjelle ..... CLUB LEADER	5 00 .....			X				0	0	0
Sangeetha Chandrashekar ..... CLUB LEADER	5 00 .....			X				0	0	0
Sara McCourt ..... CLUB LEADER	5 00 .....			X				0	0	0
Sara Shields ..... CLUB LEADER	5 00 .....			X				0	0	0
Sarah Bacon ..... CLUB LEADER	5 00 .....			X				0	0	0
SARAH DEVOSS ..... CLUB LEADER	5 00 .....			X				0	0	0
Sarah Kindvall ..... CLUB LEADER	5 00 .....			X				0	0	0
Sarah Klassen ..... CLUB LEADER	5 00 .....			X				0	0	0
SARAH POLLY ..... CLUB LEADER	5 00 .....			X				0	0	0
SCOTT GARCIA ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Scott Stnnett ..... CLUB LEADER	5 00 .....			X				0	0	0
Serens Stieg ..... CLUB LEADER	5 00 .....			X				0	0	0
Shane Rider ..... CLUB LEADER	5 00 .....			X				0	0	0
Shani McBnde ..... CLUB LEADER	5 00 .....			X				0	0	0
Shantel Sator ..... CLUB LEADER	5 00 .....			X				0	0	0
Shan Yeager ..... CLUB LEADER	5 00 .....			X				0	0	0
SHARON BLACKHAM ..... CLUB LEADER	5 00 .....			X				0	0	0
Sharon O'Patik ..... CLUB LEADER	5 00 .....			X				0	0	0
SHARON PEINE ..... CLUB LEADER	5 00 .....			X				0	0	0
SHARON SHIRACK ..... CLUB LEADER	5 00 .....			X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Shawn McKinley ..... CLUB LEADER	5 00 .....			X				0	0	0
Shawn Meyers ..... CLUB LEADER	5 00 .....			X				0	0	0
Shawn Polly ..... CLUB LEADER	5 00 .....			X				0	0	0
Sheila Canaday ..... CLUB LEADER	5 00 .....			X				0	0	0
Shelagh Switzer ..... CLUB LEADER	5 00 .....			X				0	0	0
Shelly Mathis ..... CLUB LEADER	5 00 .....			X				0	0	0
Shelly McCoy ..... CLUB LEADER	5 00 .....			X				0	0	0
Shelly McIntire ..... CLUB LEADER	5 00 .....			X				0	0	0
Shelly Riester ..... CLUB LEADER	5 00 .....			X				0	0	0
Shelly Sabrowski ..... CLUB LEADER	5 00 .....			X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Shelly Smith ..... CLUB LEADER	5 00 .....			X				0	0	0
Shera Kiess ..... CLUB LEADER	5 00 .....			X				0	0	0
Sheri Brandt ..... CLUB LEADER	5 00 .....			X				0	0	0
Sheri Jemigan ..... CLUB LEADER	5 00 .....			X				0	0	0
Sherry Freese ..... CLUB LEADER	5 00 .....			X				0	0	0
Shiloh Whaley ..... CLUB LEADER	5 00 .....			X				0	0	0
Shirley Thyne ..... CLUB LEADER	5 00 .....			X				0	0	0
Shonda King ..... CLUB LEADER	5 00 .....			X				0	0	0
Silvia Otabachian-Smith ..... CLUB LEADER	5 00 .....			X				0	0	0
Sonia Eyre ..... CLUB LEADER	5 00 .....			X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Spencer Adleman ..... CLUB LEADER	5 00 .....			X				0	0	0
Stacey Neal ..... CLUB LEADER	5 00 .....			X				0	0	0
Stacie Strgnitz ..... CLUB LEADER	5 00 .....			X				0	0	0
Stacy Cantu ..... CLUB LEADER	5 00 .....			X				0	0	0
Stacy Farmer ..... CLUB LEADER	5 00 .....			X				0	0	0
Stephanie David ..... CLUB LEADER	5 00 .....			X				0	0	0
Steve Konieczka ..... CLUB LEADER	5 00 .....			X				0	0	0
Steven Villyard ..... CLUB LEADER	5 00 .....			X				0	0	0
Stuart Gebauer ..... CLUB LEADER	5 00 .....			X				0	0	0
Sue Mundell ..... CLUB LEADER	5 00 .....			X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Susan Benson ..... CLUB LEADER	5 00 .....			X				0	0	0
Susan Colfer ..... CLUB LEADER	5 00 .....			X				0	0	0
Susan Dieterly ..... CLUB LEADER	5 00 .....			X				0	0	0
Susan Hutchens ..... CLUB LEADER	5 00 .....			X				0	0	0
Susan Kendrick ..... CLUB LEADER	5 00 .....			X				0	0	0
Suzan Pelloni ..... CLUB LEADER	5 00 .....			X				0	0	0
Suzannae Sarasin ..... CLUB LEADER	5 00 .....			X				0	0	0
Suzanne Cavey ..... CLUB LEADER	5 00 .....			X				0	0	0
Suzanne Mitchell ..... CLUB LEADER	5 00 .....			X				0	0	0
Suzanne Sarasin ..... CLUB LEADER	5 00 .....			X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Talynn Allen ..... CLUB LEADER	5 00 .....			X				0	0	0
Tamara Dorns ..... CLUB LEADER	5 00 .....			X				0	0	0
Tamera Taylor ..... CLUB LEADER	5 00 .....			X				0	0	0
Tami Ratkovich ..... CLUB LEADER	5 00 .....			X				0	0	0
Tami Thurston ..... CLUB LEADER	5 00 .....			X				0	0	0
Tammy Hetnck ..... CLUB LEADER	5 00 .....			X				0	0	0
Tana Strasia ..... CLUB LEADER	5 00 .....			X				0	0	0
Tara Dreiling ..... CLUB LEADER	5 00 .....			X				0	0	0
Tara Garton ..... CLUB LEADER	5 00 .....			X				0	0	0
Tara Rumsey ..... CLUB LEADER	5 00 .....			X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Tawnya Springer ..... CLUB LEADER	5 00 .....			X				0	0	0
Taylor Oliver ..... CLUB LEADER	5 00 .....			X				0	0	0
Teddi Baird-Tharp ..... CLUB LEADER	5 00 .....			X				0	0	0
Teresa Garcia ..... CLUB LEADER	5 00 .....			X				0	0	0
TERESA TRAXLER ..... CLUB LEADER	5 00 .....			X				0	0	0
Teresa Wilcox ..... CLUB LEADER	5 00 .....			X				0	0	0
Tern Kelling ..... CLUB LEADER	5 00 .....			X				0	0	0
Tern Parks ..... CLUB LEADER	5 00 .....			X				0	0	0
Terry McCorkindale ..... CLUB LEADER	5 00 .....			X				0	0	0
Terry Wygant ..... CLUB LEADER	5 00 .....			X				0	0	0



Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Thea Wagler ..... CLUB LEADER	5 00 .....			X				0	0	0
Theresa Ommen ..... CLUB LEADER	5 00 .....			X				0	0	0
Thomas Torres ..... CLUB LEADER	5 00 .....			X				0	0	0
Thomas Wendland ..... CLUB LEADER	5 00 .....			X				0	0	0
Tiffany Bracco ..... CLUB LEADER	5 00 .....			X				0	0	0
Tim Hilferty ..... CLUB LEADER	5 00 .....			X				0	0	0
Tim Karp ..... CLUB LEADER	5 00 .....			X				0	0	0
Tim O'Grady ..... CLUB LEADER	5 00 .....			X				0	0	0
Tim Trosper ..... CLUB LEADER	5 00 .....			X				0	0	0
Tina Boutwell ..... CLUB LEADER	5 00 .....			X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Tina Dill ..... CLUB LEADER	5 00 .....			X				0	0	0
Tina McCray ..... CLUB LEADER	5 00 .....			X				0	0	0
Tina Pohlmann ..... CLUB LEADER	5 00 .....			X				0	0	0
Tom Hooten ..... CLUB LEADER	5 00 .....			X				0	0	0
Tom Knowles ..... CLUB LEADER	5 00 .....			X				0	0	0
Tom Mekelburg ..... CLUB LEADER	5 00 .....			X				0	0	0
Tom Sharpe ..... CLUB LEADER	5 00 .....			X				0	0	0
Tom Wendland ..... CLUB LEADER	5 00 .....			X				0	0	0
Tomalee Young ..... CLUB LEADER	5 00 .....			X				0	0	0
Toni Lambeth ..... CLUB LEADER	5 00 .....			X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Toni States ..... CLUB LEADER	5 00 .....			X				0	0	0
Tonia O'Donnell ..... CLUB LEADER	5 00 .....			X				0	0	0
Tonya Thieman ..... CLUB LEADER	5 00 .....			X				0	0	0
Tonya Yates ..... CLUB LEADER	5 00 .....			X				0	0	0
Tracey Bernett ..... CLUB LEADER	5 00 .....			X				0	0	0
Tracy Baldwin ..... CLUB LEADER	5 00 .....			X				0	0	0
Tracy Donaghy ..... CLUB LEADER	5 00 .....			X				0	0	0
Travis Chamblin ..... CLUB LEADER	5 00 .....			X				0	0	0
Travis Hoesli ..... CLUB LEADER	5 00 .....			X				0	0	0
Trent Hollister ..... CLUB LEADER	5 00 .....			X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Trevor Henschel ..... CLUB LEADER	5 00 .....			X				0	0	0
Tricia Leone ..... CLUB LEADER	5 00 .....			X				0	0	0
Troy Patton ..... CLUB LEADER	5 00 .....			X				0	0	0
TY KENDRICK ..... CLUB LEADER	5 00 .....			X				0	0	0
TYANNE ENGLE ..... CLUB LEADER	5 00 .....			X				0	0	0
Val Loose ..... CLUB LEADER	5 00 .....			X				0	0	0
Valerie McEntee ..... CLUB LEADER	5 00 .....			X				0	0	0
Vera Bott ..... CLUB LEADER	5 00 .....			X				0	0	0
Verla Noakes ..... CLUB LEADER	5 00 .....			X				0	0	0
Veronica M Capraro ..... CLUB LEADER	5 00 .....			X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Veronica Wilkins ..... CLUB LEADER	5 00 .....			X				0	0	0
Vicki Harns ..... CLUB LEADER	5 00 .....			X				0	0	0
VICKI HUTSON ..... CLUB LEADER	5 00 .....			X				0	0	0
Vickie Olson ..... CLUB LEADER	5 00 .....			X				0	0	0
Vicky Moreno ..... CLUB LEADER	5 00 .....			X				0	0	0
Vinchenza Kinza Burney ..... CLUB LEADER	5 00 .....			X				0	0	0
Virginia Christensen ..... CLUB LEADER	5 00 .....			X				0	0	0
Wade Gerber ..... CLUB LEADER	5 00 .....			X				0	0	0
Wendy Anemaet ..... CLUB LEADER	5 00 .....			X				0	0	0
Wendy Fischer ..... CLUB LEADER	5 00 .....			X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)							(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former				
Wendy Heywood ..... CLUB LEADER	5 00 .....			X				0	0	0	
Wendy Palyo ..... CLUB LEADER	5 00 .....			X				0	0	0	
Wendy Simmons ..... CLUB LEADER	5 00 .....			X				0	0	0	
Willian Aaroe ..... CLUB LEADER	5 00 .....			X				0	0	0	
Xela Ianier ..... CLUB LEADER	5 00 .....			X				0	0	0	
Yvonne Buoy ..... CLUB LEADER	5 00 .....			X				0	0	0	
Yvonne Morfitt ..... CLUB LEADER	5 00 .....			X				0	0	0	
Zach Coryell ..... CLUB LEADER	5 00 .....			X				0	0	0	
ZUELLA ANNEN ..... CLUB LEADER	5 00 .....			X				0	0	0	

SCHEDULE A  
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2015

Open to Public Inspection

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
▶ Attach to Form 990 or Form 990-EZ.  
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

Employer identification number

Colorado 4-H Foundation Group

46-4830470

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

- The organization is not a private foundation because it is (For lines 1 through 11, check only one box )
- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).**(Attach Schedule E (Form 990 or 990-EZ))
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state \_\_\_\_\_
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II )
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II )
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 9

☒

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See**section 509(a)(2).** (Complete Part III )
- 10

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g
- a

☐

**Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
- b

☐

**Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
- c

☐

**Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
- d

☐

**Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
- e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
- f

Enter the number of supported organizations . . . . .
- g

Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii)EIN	(iii) Type of organization (described on lines 1- 9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)  
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants )						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI )						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc (see instructions)					12	
13 First five years.If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here . . . . . ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage						
14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))		14				
15 Public support percentage for 2014 Schedule A, Part II, line 14		15				
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 and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>						
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 box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>						
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 organization ► <input type="checkbox"/>						
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 supported organization ► <input type="checkbox"/>						
18 Private foundation.If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>						



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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")		366,549	606,799	1,142,873	1,313,162	3,429,383
<b>2</b> 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						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5		366,549	606,799	1,142,873	1,313,162	3,429,383
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						0
<b>b</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						0
<b>c</b> Add lines 7a and 7b						0
<b>8 Public support.</b> (Subtract line 7c from line 6.)						3,429,383

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
<b>9</b> Amounts from line 6		366,549	606,799	1,142,873	1,313,162	3,429,383
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		8,815	14,945	9,491	12,536	45,787
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b		8,815	14,945	9,491	12,536	45,787
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		923,239	1,034,582	600,943	813,787	3,372,551
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)		1,298,603	1,656,326	1,753,307	2,139,485	6,847,721
<b>14 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> <span style="float: right;">► <input checked="" type="checkbox"/></span>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	
<b>16</b> Public support percentage from 2014 Schedule A, Part III, line 15	<b>16</b>	

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2015</b> (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	
<b>18</b> Investment income percentage from <b>2014</b> Schedule A, Part III, line 17	<b>18</b>	

- 19a 33 1/3% support tests—2015.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not 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 ► ☐
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

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.)

Section 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 <b>Part VI</b> 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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2	
3a 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 <b>Part VI</b> 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? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c	
4a 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 <b>Part VI</b> 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 <b>Part VI</b> 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 <b>Part VI</b> , 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 <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	
c <b>Substitutions only.</b> 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 <b>Part VI</b> .	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 <b>Part I</b> 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 <b>Part II</b> 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 <b>Part VI</b> .	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 <b>Part VI</b> .	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 <b>Part VI</b> .	9c	
10a 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	
11 Has the organization accepted a gift or contribution from any of the following persons?		
a 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 <b>Part VI</b> .	11c	

Part IV

Supporting Organizations (continued)

Section B. Type I Supporting Organizations

	Yes	No
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? <i>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.</i>		
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? <i>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.</i>		

Section C. Type II Supporting Organizations

	Yes	No
1 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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

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?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> 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? <i>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.</i>		
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? <i>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.</i>		
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? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V

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

1

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

☐

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
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	<b>Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	8	

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	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> 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	<b>Minimum Asset Amount</b> (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	
6	<b>Distributable Amount.</b> 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-integrated Type III supporting organization (see instructions) <input type="checkbox"/>		

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

<b>Section D - Distributions</b>	<b>Current Year</b>
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	
<b>4</b> Amounts paid to acquire exempt-use assets	
<b>5</b> Qualified set-aside amounts (prior IRS approval required)	
<b>6</b> Other distributions (describe in Part VI) See instructions	
<b>7 Total annual distributions.</b> Add lines 1 through 6	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
<b>9</b> Distributable amount for 2015 from Section C, line 6	
<b>10</b> Line 8 amount divided by Line 9 amount	

<b>Section E - Distribution Allocations (see instructions)</b>	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2015</b>	<b>(iii) Distributable Amount for 2015</b>
<b>1</b> Distributable amount for 2015 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2015 (reasonable cause required--see instructions)			
<b>3</b> Excess distributions carryover, if any, to 2015			
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b> From 2013. . . . .			
<b>e</b> From 2014. . . . .			
<b>f Total</b> of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2015 distributable amount			
<b>i</b> Carryover from 2010 not applied (see instructions)			
<b>j</b> Remainder Subtract lines 3g, 3h, and 3i from 3f			
<b>4</b> Distributions for 2015 from Section D, line 7 \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2015 distributable amount			
<b>c</b> Remainder Subtract lines 4a and 4b from 4			
<b>5</b> Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
<b>6</b> Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
<b>7 Excess distributions carryover to 2016.</b> Add lines 3j and 4c			
<b>8</b> Breakdown of line 7			
<b>a</b>			
<b>b</b>			
<b>c</b> Excess from 2013. . . . .			
<b>d</b> From 2014. . . . .			
<b>e</b> From 2015. . . . .			

**Part VI Supplemental Information.**

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).

<b>Facts And Circumstances Test</b>

Return Reference	Explanation
Schedule A, Part III, Line 12, Explanation of Other Income	Supply and Miscellaneous Income - 2012 Amount \$ 190,318 2013 Amount \$ 198,088 2014 Amount \$ 103,220 2015 Amount \$ 16,858 SPECIAL EVENT INCOME - 2012 Amount \$ 732,921 2013 Amount \$ 836,494 2014 Amount \$ 497,723 2015 Amount \$ 796,929

SCHEDULE G  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Supplemental Information Regarding  
Fundraising or Gaming Activities

Complete if the organization answered "Yes" 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

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](http://www.irs.gov/form990)

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization  
Colorado 4-H Foundation Group

Employer identification number  
46-4830470

Part I 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.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a ☐ Mail solicitations

e ☐ Solicitation of non-government grants

b ☐ Internet and email solicitations

f ☐ Solicitation of government grants

c ☐ Phone solicitations

g ☐ Special fundraising events

d ☐ In-person solicitations
- 2a 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 services? ☐ Yes ☐ No
- b 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 individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
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.

Part II Fundraising Events.

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.

Revenue		(a)Event #1 All Chapter Events (event type)	(b)Event #2 (event type)	(c)Other events (total number)	(d) Total events (add col (a) through col (c))
Direct Expenses	1 Gross receipts . . . . .	1,502,092			1,502,092
	2 Less Contributions . . . . .				
	3 Gross income (line 1 minus line 2) . . . . .	1,502,092			1,502,092
	4 Cash prizes . . . . .				
	5 Noncash prizes . . . . .				
	6 Rent/facility costs . . . . .				
	7 Food and beverages . . . . .				
	8 Entertainment . . . . .				
	9 Other direct expenses . . . . .	705,163			705,163
	10 Direct expense summary Add lines 4 through 9 in column (d) . . . . . ▶				705,163
	11 Net income summary Subtract line 10 from line 3, column (d) . . . . . ▶				796,929

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.

Revenue		(a)Bingo	(b)Pull tabs/Instant bingo/progressive bingo	(c)Other gaming	(d) Total gaming (add col (a) through col (c))
Direct Expenses	1 Gross revenue . . . . .				
	2 Cash prizes . . . . .				
	3 Noncash prizes . . . . .				
	4 Rent/facility costs . . . . .				
	5 Other direct expenses . . . . .				
	6 Volunteer labor . . . . .	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	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) . . . . . ▶				

9 Enter the state(s) in which the organization conducts gaming activities \_\_\_\_\_

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**11**

Does the organization conduct gaming activities with nonmembers?

☐ **Yes** ☐ **No**

**12**

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

☐ **Yes** ☐ **No**

**13**

Indicate the percentage of gaming activity conducted in

<b>a</b>	The organization's facility	<b>13a</b>	%
<b>b</b>	An outside facility	<b>13b</b>	%

**14**

Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

**15a**

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

☐ **Yes** ☐ **No**

**b**

If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_

**c**

If "Yes," enter name and address of the third party

Name ▶

Address ▶

**16**

Gaming manager information

Name ▶

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

**17**

Mandatory distributions

**a**

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

☐ **Yes** ☐ **No**

**b**

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

**Part IV**

**Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Explanation
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# 2015

46-4830470

**(h) Purpose of grant or assistance**

[illegible]

Schedule I (Form 990) 2015

**Part III** **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22  
Part III can be duplicated if additional space is needed

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) Scholarships and awards	700	242,157		FMV	

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

Return Reference	Explanation
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**SCHEDULE O**  
**(Form 990 or**  
**990-EZ)**Department of the  
Treasury  
Internal Revenue  
Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at  
[www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

**2015****Open to Public  
Inspection**Name of the organization  
Colorado 4-H Foundation Group**Employer identification number**

46-4830470

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Form 990, Part VI, Section A, line 3	TULA CORPORATION HAS MANAGEMENT RESPONSIBILITIES AS IT RELATES TO ACTIVITIES OF CERTAIN 4-H FOUNDATION PROGRAMS AND FUNDRAISING ACTIVITIES, INCLUDING CHECK REQUEST AUTHORIZATIONS
Form 990, Part VI, Section B, line 11	990 REVIEWED AND APPROVED BY BOARD PRIOR TO FILING

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Form 990, Part VI, Section C, line 19	GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST