EXTENDED TO NOVEMBER 15, 2017

Return of Organization Exempt From Income Tax

Department of the Treasury

Internal Revenue Service

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.lrs.gov/form990. 1612

2016
Open to Public Inspection

OMB No 1545-0047

A For the 2016 calendar year, or tax year beginning and ending C Name of organization D Employer identification number Check if applicable Address change READY COLORADO Name change 47-3043818 Doing business as Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ 1801 CALIFORNIA STREET, STE 2400 303-668-4654 termin-ated City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ 1,546,825. Amended DENVER , CO 80202 H(a) Is this a group return Applica-F Name and address of principal officer MARGO BRANSCOMB for subordinates? JYes LX No pending SAME AS C ABOVE H(b) Are all subordinates included? Yes No 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ► WWW.READYCOLO.ORG H(c) Group exemption number K Form of organization: X Corporation | Trust L Year of formation: 2015 M State of legal domicile: CO Part I Summary 1 Briefly describe the organization's mission or most significant activities. READY COLORADO IS AN ORGANIZATION OF CONSERVATIVES WORKING TOGETHER TO IMPROVE EDUCATION Check this box If the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 0 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 5 0 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column-(C), line 12... 0. 0. **Prior Year Current Year** 766,500 1,546,825. Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) 0. Investment income (Part VIII, column (A), lines 3, 4, and 7d). 0. 0. 10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0. 0. 766,500 Total revenue add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,546,825. 995,500. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 249,993 0. 0. Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 15 - Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 0. b Total fundraising expenses (Part IX, column (D), line 25) 448,842. 365,960. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) <u>1,361,460.</u> 698,835. 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 185,365. 67,665. Revenue less expenses Subtract line 18 from line 12 **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16) 67,665 253,030. 21 Total liabilities (Part X, line 26) 0 Net assets or fund balances Subtract line 21 from line 20 67 665. 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. Mua, Signature of officer Sign MARGO BRANSCOMB, BOARD CHAIR Here Type or print name and title PTIN Print/Type preparer's name Preparer's signature Paid SABRINA J. HOYT, CPA P00855363 ahuna self-employed Preparer Firm's name DALBY, WENDLAND & CO., 84-0795096 Firm's EIN Use Only Firm's address ▶ P O BOX 430 GRAND JUNCTION, CO 81502 Phone no. (970) 243-1921 X Yes May the IRS discuss this return with the preparer shown above? (see instructions) Form 990 (2016) LHA For Paperwork Reduction Act Notice, see the separate instructions.

Porm	t III Statement of Program Service Accomplishments	-
Fai		
	Check if Schedule O contains a response or note to any line in this Part III	-
1	Briefly describe the organization's mission. READY COLORADO IS AN ORGANIZATION OF CONSERVATIVES WORKING TOGETHER TO	
	IMPROVE EDUCATION IN COLORADO. THE TOUCHSTONE OF OUR EDUCATION SYSTEM	-
	SHOULD BE CHOICE; NO ONE SYSTEM OF SCHOOLING SHOULD HAVE A MONOPOLY	-
	OVER OPPORTUNITY. PARENTS SHOULD HAVE THE ABILITY TO SEND THEIR KIDS	-
2	Did the organization undertake any significant program services during the year which were not listed on the	•
~	prior Form 990 or 990-EZ?	
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	
Ŭ	If "Yes," describe these changes on Schedule O.	
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 \$ 695,511. including grants of \$ 587,500.) (Revenue \$)	-
	EDUCATION AND ADVOCACY IN COLORADO	
		-
		-
		-
		-
		-
		•
		•
		•
		•
		•
		•
4b	(Code) (Expenses \$ 465,816 · including grants of \$ 408,000 ·) (Revenue \$)	-
	SUPPORT FOR LIKE-MINDED ORGANIZATIONS	
		_
		_
		_
		_
		_
		_
		-
		-
		_
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)	ı
	ISSUE EDUCATION	_
		_
		_
		_
		_
		_
		_
		_
		_
		_
		_
		_
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	_
<u>4e</u>	Total program service expenses ▶ 1,161,327.	_
	Form 990 (2016)

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Form 990 (2016) READY COLORADO
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		<u>X</u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		i	
_	during the tax year? If "Yes," complete Schedule C, Part II	4	<u></u>	
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		X
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		<u>X</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			v
9	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	8_		<u>X</u>
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
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	-10		
•	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	İ		
	Part VI	11a		X
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		<u>X</u>
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u>X</u>
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		<u>X</u>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	<u>11e</u>		<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	l	į	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u>X</u>
-12a-	-Did-the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		l	32
	Schedule D, Parts XI and XII	12a		<u>X</u>
ь	Was the organization included in consolidated, independent audited financial statements for the tax year?			v
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	., , , , ,	14a		
D	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	44h		X
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	14b		_41
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			: <u>-</u> _
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
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		X
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	لــــِــا	<u>X</u>
		_	$\Delta \Omega \Delta A$	

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
04-	Schedule J	23		<u>X</u>
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the		ļ	
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a	24a		х
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
Ī	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete		Ì	
	Schedule L, Part I	25b		X_
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or		ļ	
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		_X_
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			**
00	of any of these persons? If "Yes," complete Schedule L, Part III	27		<u>X</u> _
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV		ļ	
a	Instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		<u>X</u>
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Ì	\mathbf{x}_{-}
29 –	-Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		<u>X</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?		1	
	If "Yes," complete Schedule N, Part I	31		<u>X</u> _
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	Ì	}	
	Schedule N, Part II	32		<u>X</u> _
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	i		3,
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u> _
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		İ	v
054	Part V, line 1	34		X
35ạ	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a		
U	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330		
	If "Yes," complete Schedule R, Part V, line 2	36	Į	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			-
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	\	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
			agn a	OO4 ()

	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	11			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eporta	ble gaming			1
	(gambling) winnings to prize winners?			1c	Х	1
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			1
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retuin	rns?		2b		1
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	author	ity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a		X
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 A	ccoun	ts (FBAR)	ļ		(
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction?		5b_		X
С	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	ne orga	anization solicit	- 1	l	1
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions o	r gifts	1	l	l
	were not tax deductible?			<u>6</u> b		
7	Organizations that may receive deductible contributions under section 170(c).			ľ		l
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	rvices p	rovided to the payor?	7a		X
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?		,	<u>7</u> b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as req	uired	ĺ		
	to file Form 8282?			7 <u>c</u>		X
d	If "Yes," indicate the number of Forms 8262 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		t?	<u>7e</u>		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr			7f		X
9	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization are statistically and a second for the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, airplanes, or other vehicles, did the organization of cars, airplanes, airplan		ï	7 <u>h</u>		
8 	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by th				
9	sponsoring organization have excess business holdings at any time during the year?			_8_		
	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?			00		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		'	9a 9b		
10	Section 501(c)(7) organizations. Enter.			90		
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				l
11	Section 501(c)(12) organizations. Enter:					
a	Gross income from members or shareholders	11a			ļ	1
	Gross income from other sources (Do not net amounts due or paid to other sources against				i	1
	amounts due or received from them)	11b			l	1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		,	12a		
	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.					
а	Is the organization licensed to issue qualified health plans in more than one state?		l	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the				ľ	1
	organization is licensed to issue qualified health plans	13b				1
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		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e O		14b		Щ
					agn	(2016)

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

	to line da, db, or rob below, describe the direatilistances, processes, or changes in seriedule or see instructions							
500	Check if Schedule O contains a response or note to any line in this Part VI			X				
260	tion A. Governing Body and Management		V					
10	Enter the number of voting members of the governing body at the end of the tax year		Yes	No				
Ia	If there are material differences in voting rights among members of the governing body, or if the governing	†		Ï				
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	1	1	ļ				
h	Enter the number of voting members included in line 1a, above, who are independent 1b	ĺ						
2								
~	officer, director, trustee, or key employee?							
3								
Ū	of officers, directors, or trustees, or key employees to a management company or other person?	3		X				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X				
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X				
6	Did the organization have members or stockholders?	6	·	X				
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	T						
	more members of the governing body?	7a		Х				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or							
	persons other than the governing body?	7b		Х				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:							
а	The governing body?	8a	х					
b	Each committee with authority to act on behalf of the governing body?	8b		X				
9	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							
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)							
			Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	10a		_X_				
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	}						
	and branches to ensure their operations are consistent with the organization's exempt purposes?							
11a	1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?							
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		,					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	_X_					
þ	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		X				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	<u> </u>						
	-in-Schedule-O how this was done	12c	_X_					
13	Did the organization have a written whistleblower policy?	13		<u>X</u>				
14	Did the organization have a written document retention and destruction policy?	14		X				
15	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?			7.7				
	The organization's CEO, Executive Director, or top management official	15a		X				
b	Other officers or key employees of the organization	15b		<u> X</u>				
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			X				
	taxable entity during the year?	16a						
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	l						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	405						
Sec	exempt status with respect to such arrangements? tion C. Disclosure	16b						
	List the states with which a copy of this Form 990 is required to be filed NONE							
17 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availah						
,0	for public inspection. Indicate how you made these available. Check all that apply	avaiial	11C					
	Own website Another's website Work 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	d finan	cial					
	statements available to the public during the tax year.	ı iii idli l	o,ai					
20	State the name, address, and telephone number of the person who possesses the organization's books and records.							
	MARGO BRANSCOMB - 303-668-4654							
	1801 CALIFORNIA STREET, STE 2400, DENVER, CO 80202							

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compe	nsated	
Employees, and Independent Contractors		
Check if Schedule O contains a response or note to any line in this Part VII		
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or	r within the organization	n's tax yea
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardles 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 employees) 	•	

able compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

 List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average hours per week	box offi	box, unless person is bo officer and a director/tru		Position (do not check more than one box, unless person is both an officer and a director/trustee)			than sot	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations		
(1) MARGO BRANSCOMB	2.00											
BOARD CHAIR			<u> </u>	X		ļ		5,000.	0.	0		
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Part VII Section A. Officers, Directors, T	rustees, Key Em	ploy	ees	, an	d Hi	ghe	st C	Compensated Employe	es (continued)			
(A)	(B)	Į		Pos	C)			(D)	(E)	(F)	
Name and title	Average	_ (do not					nne.	Reportable	Reportable	Estim	ated	
	hours per	box	, unle	ss pe	rson	ıs bot	h an		compensation	amount of		
	week	⊢.	officer and a director/trustee)				(66)	-	from related	oth		
	(list any hours for	rect						the	organizations	comper		
	related	5	g		Ì	Sted	1	organization	(W-2/1099-MISC)	from		
	organizations	Ste	t trusi		8	ubeu		(W-2/1099-MISC)		organiz and re		
	below	daat	tolla	_	ş	ye co	<u> </u>			organiz		
	line)	Individual trustee or director	Institutional trustee	Officer	Кеу етрюуее	Highest compensated employee	Former			Organiz	ations	
			<u> </u>	<u> </u>	<u> </u>	<u> </u>	-	 		 		
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	<u>l</u>		L	<u> </u>		L	_	5 000				
1b Sub-total								5,000.	0.		0.	
c Total from continuation sheets to Par	t VII, Section A							0.	0.		0.	
d Total (add lines 1b and 1c)		_						5,000.	0.		0.	
2 Total number of individuals (including be	ut not limited to th	ose	liste	ed al	bove	e) wt	o r	eceived more than \$100	,000 of reportable		_	
compensation from the organization											0	
										Ye	s No	
3 Did the organization list any former office			e, ke	y er	nplo	yee,	or	highest compensated ei	mployee on	.	_	
Ine 1a? If "Yes," complete Schedule J'fe										3	X	
4 For any individual listed on line 1a, is the	e sum of reportable	le co	ompe	ensa	ation	and	iot	her compensation from	the organization		1	
and related organizations greater than \$										4	<u> </u>	
5 Did any person listed on line 1a receive	or accrue comper	nsat	ion f	rom	any	unr	elat	ted organization or indivi	dual for services			
rendered to the organization? If "Yes," or	complete Schedule	e <i>J f</i>	or st	ıch	pers	on			<u> </u>	5	X	
Section B. Independent Contractors												
 Complete this table for your five highest 										sation from	I	
the organization. Report compensation	for the calendar y	ear e	endı	ng v	vith	or w	ıthır	n the organization's tax	/ear			
(A)							ļ	(B)	Į.	(C)		
Name and busine	ess address							Description of s	ervices (Compensa	tion	
EIS SOLUTIONS												
1055 MAIN STREET, GRAND	JUNCTION	1,	<u>C(</u>	<u> </u>	315	<u> 501</u>	<u> </u>	CONSULTING		<u> 176,</u>	<u>496.</u>	
					_	_	Ĭ			-	-	
		_]					
		-		-								
]					
]	<u></u>				
2 Total number of independent contractor	rs (including but n	ot lii	mite	d to	tho	se lis	tec	d above) who received m	ore than			
\$100,000 of compensation from the org					:	1						
										- 000	1 (2016)	

		Check if Schedule O conta	ains a response	or note to any lir	e in this Part VIII			. 🗀
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under Sections 512 - 514
nts	1 a	Federated campaigns	1a					
ir ar	b	Membership dues	1b					
s, C	c	: Fundraising events	10					į.
Sift ar	d	Related organizations	1d					(
s, (е	Government grants (contribution	ons) 1e					}
ion	f	All other contributions, gifts, grants	s, and		,	ŀ		}
the		similar amounts not included abov	re 11 1,	546,825.				Ì
50	g	Noncash contributions included in lines				1		Į
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a-1f			1,546,825.			
				Business Code				
e	2 a	·						
ه کّ	b							
S	С							
e A	d							
Program Service Revenue	е	·						Ţ
4	f	All other program service rever	านe					
	g	Total. Add lines 2a-2f						
j	3	Investment income (including of	dividends, intere	st, and				
		other similar amounts)		>				<u> </u>
į	4	Income from investment of tax	exempt bond p	roceeds 🕨				
	5	Royalties						
{		1	(i) Real	(II) Personal				
1	6 a	Gross rents				Í		
	b	Less. rental expenses	 		!	Í		
}	c	Rental income or (loss)				j		
1	d	Net rental income or (loss)		>				L
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
ł		assets other than inventory			. (•		
Ì	b	Less cost or other basis						
- 1		and sales expenses						
	— с	-Gain or-(loss)						
		Net gain or (loss)	,					<u> </u>
9	8 a	Gross income from fundraising				,		
Other Reven		including \$				•		
ě		contributions reported on line 1	1 <i>c</i>). See			Ì		
ē		Part IV, line 18	а					
₹		Less. direct expenses	b					
		Net income or (loss) from fundr	- 1					
1	9 a	Gross income from gaming act	ivities See		1			}
}		Part IV, line 19	а		'			}
}		Less direct expenses	p					}
l		Net income or (loss) from gamil					~	
	10 a	Gross sales of inventory, less re	eturns	į		ļ		
ł		and allowances	a		ļ	J		
ł		Less. cost of goods sold	b (}			
}	<u>_c</u>	Net income or (loss) from sales						
}		Miscellaneous Revenue		Business Code		}		
ļ								
{	b							
{	د د	All other revenue						
)	u	Total. Add lines 11a-11d	ı				 	
{	12	Total revenue. See instructions.			1,546,825.	0.	0.	0.
\rightarrow					<u>+,,+,,040,</u>			· · · · · ·

Seci	Charlet Cabadula Capataina a rappag			impiete column (A).	
	Check if Schedule O contains a respon	(A)		(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		expenses	general expenses	experises
•	and domestic governments. See Part IV, line 21	995,500.	995,500.		
2	Grants and other assistance to domestic				
2	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
3	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,				
6	trustees, and key employees Compensation not included above, to disqualified	·- ·- ·- ·-			
O	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				
8	·	i			
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits Payroll taxes			 	
10	· ·				
11	Fees for services (non-employees)	176,496.		176,496.	
a	Management	22,773.		22,773.	
b	Legal	44,113.		24,113.	
C	Accounting				
a	Lobbying Professional fundamental partitions See Part IV line 17				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,	118,281.	118,281.		
40	column (A) amount, list line 11g expenses on Sch O.)	110,201.	110,201.		
12	Advertising and promotion				
13 14	Office expenses Information technology				
	-Royalties				
_	Occupancy				
16 17	Travel				
	` 	- 			 _
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	-			
19 20	Conferences, conventions, and meetings Interest			 	
20 21	Payments to affiliates				
21 22	Depreciation, depletion, and amortization				
23	Insurance		 		
24	Other expenses. Itemize expenses not covered				
24	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 0.)				
а	DIRECT LOBBYING	48,000.	48,000.		
b	COMMUNICATIONS	6,666.	6,666.		
C	WEB SERVICES	5,500.	5,500.		
d	DESIGN	2,600.	2,600.		
	All other expenses	<14,356.		> 864.	
25	Total functional expenses. Add lines 1 through 24e	1,361,460.	$\frac{213,220.}{1,161,327.}$	200,133.	0.
<u>25</u> 26	Joint costs. Complete this line only if the organization	<u> </u>	±,±0±,3610	200,133.	<u> </u>
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.	ļ	ļ		
	Check here if following SOP 98-2 (ASC 958-720)				

253,030. Form **990** (2016)

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and complete lines 30 through 34.

Total net assets or fund balances

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

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

Retained earnings, endowment, accumulated income, or other funds

Form	990 (2016) READY COLORADO	<u>47-</u>	<u>-30438</u>	<u> 18</u>	Pag	_{le} 12
Pa	t 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	1,	54	6,8	25.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,	36	1,4	60.
3	Revenue less expenses. Subtract line 2 from line 1	3_		18	5,3	65.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		6	7,6	65.
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		<u> 25:</u>	3,0	<u>30.</u>
Pa	t 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. X Cash Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			ļ	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		<u> </u>	2a		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a		}		
	separate basis, consolidated basis, or both.		1		ļ	
	Separate basis Consolidated basis Both consolidated and separate basis					_
b	Were the organization's financial statements audited by an independent accountant?		<u> </u> -	2b		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis	,	- 1	ļ	
	consolidated basis, or both.				ĺ	
	Separate basis Consolidated basis Both consolidated and separate basis		İ	ĺ		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit	,	- }	l	
	review, or compilation of its financial statements and selection of an independent accountant?		F	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch		1			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dit			
	Act and OMB Circular A-133?		<u> </u>	3a		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired au	dit	.		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		
			F	orm 9	9 90 (2016)

SCHEDULEI (Form 990) Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

▶ Attach to Form 990.

2016 Open to Public OMB No 1545-0047 Inspection

► Information about Schedule I (Form 990) and its instructions is at www.lrs.gov/form990.

% |X 10. Employer identification number 0 47-3043818 IDUCATION ON EDUCATION EDUCATION ON EDUCATION SDUCATION ON EDUCATION EDUCATION ON EDUCATION EDUCATION ON EDUCATION EDUCATION ON EDUCATION (h) Purpose of grant or assistance TO SUPPORT PUBLIC TO SUPPORT PUBLIC TO SUPPORT PUBLIC TO SUPPORT PUBLIC TO SUPPORT PUBLIC TO SUPPORT PUBLIC Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any REFORM REFORM REFORM REFORM REFORM REFORM Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) o. ં o. (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ecipient that received more than \$5,000 Part II can be duplicated if additional space is needed (d) Amount of cash grant 250,000 150,000, 350 000 30,000 12,500 75 000 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section (if applicable) 501 (C)(4) 501 (C)(4) 501 (C)(6) 501 (C)(4) 501 (C)(4) Enter total number of other organizations listed in the line 1 table 45-0924894 80-0437208 46-2026976 46-5601272 General Information on Grants and Assistance 81-2821841 (p) EIN READY COLORADO criteria used to award the grants or assistance? 1 (a) Name and address of organization C18 #254 - GREENWOOD VILLAGE, CO COLORADO CITIZENS PROTECTING OUR EXPENDITURE COMMITTEE - 191 UNIV CONSTITUTION - 5910 S UNIV BLVD CITIZENS FOR A SOUND GOVERNMENT CONCERNED CITIZENS FOR COLORADO COLORADO RIGHT NOW INDEPENDENT BLVD #263 - DENVER, CO 80206 COLORADO SPRINGS, CO 80903 COLORADO SPRINGS FORWARD or government 111 S TEJON ST, STE 307 COMMON SENSE COLORADO Name of the organization LAKEWOOD, CO 80226 403 S REED COURT DENVER, CO 80218 DENVER, CO 80205 2318 CURTIS ST PO BOX 181734 Part Part II 80121

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2016)

47-3043818 Page 1		
Schedule I (Form 990) READY COLORADO	Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	Assistance to Go	vernments and Organ	nizations in the Ur	nited States (Scho	edule I (Form 990), Par	tII)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DOUGLAS COUNTY EDUCATION ALLIANCE PO BOX 3172 PARKER, CO 80134	45-4695612	501 (C)(4)	33,000,	0			TO SUPPORT PUBLIC EDUCATION ON EDUCATION REFORM
RURAL VOICES FOR EDUCATION INDEPENDENT EXPENDITURE COMMITTEE - 2318 CURTIS ST - DENVER, CO 80205	81_2613483		10,000.	0.			TO SUPPORT PUBLIC EDUCATION ON EDUCATION REFORM
SENATE MAJORITY FUND 2318 CURTIS ST DENVER, CO 80205	45-1353357	527	.000,03	0			TO SUPPORT PUBLIC EDUCATION ON EDUCATION REFORM
STAND FOR CHILDREN 1120 LINCOLN ST STE 904 DENVER, CO 80203	52-2146673	501 (C)(4)	35,000.	0			TO SUPPORT PUBLIC EDUCATION ON EDUCATION REFORM
							Schedule I (Form 990)

SCHEDULĖ 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.lrs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

READY COLORADO

Employer identification number 47-3043818

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
IN COLORADO. THE TOUCHSTONE OF OUR EDUCATION SYSTEM SHOULD BE CHOICE;
NO ONE SYSTEM OF SCHOOLING SHOULD HAVE A MONOPOLY OVER OPPORTUNITY.
PARENTS SHOULD HAVE THE ABILITY TO SEND THEIR KIDS TO THE SCHOOL THAT
WILL HELP THEIR CHILDREN THRIVE, REGARDLESS OF TYPE-PUBLIC, PRIVATE,
CHARTER, TRADITIONAL, MAGNET, VIRTUAL, OR HOME SCHOOL. READY COLORADO
BELIEVES THAT THE EDUCATION SYSTEM NEEDS TO FOCUS MORE ATTENTION ON THE
NEEDS OF STUDENTS AND FAMILIES; AND LESS ON THE NEEDS OF THE SYSTEM
ITSELF. SCHOOLS, DISTRICTS, AND THE STATE SHOULD BE MORE ACCOUNTABLE TO
PARENTS AND TAXPAYERS.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
TO THE SCHOOL THAT WILL HELP THEIR CHILDREN THRIVE, REGARDLESS OF
TYPE-PUBLIC, PRIVATE, CHARTER, TRADITIONAL, MAGNET, VIRTUAL, OR HOME
SCHOOL. READY COLORADO BELIEVES THAT THE EDUCATION SYSTEM NEEDS TO
FOCUS MORE ATTENTION ON THE NEEDS OF STUDENTS AND FAMILIES; AND LESS ON
THE NEEDS OF THE SYSTEM ITSELF. SCHOOLS, DISTRICTS, AND THE STATE
SHOULD BE MORE ACCOUNTABLE TO PARENTS AND TAXPAYERS.
FORM 990, PART VI, SECTION A, LINE 8B:
THE ORGANIZATION DID NOT HAVE ANY COMMITTEES WITH AUTHORITY TO ACT ON
BEHALF OF THE GOVERNING BODY.
FORM 990, PART VI, SECTION B, LINE 11B:
FORM 990 IS REVIEWED BY MUE BOARD CHAIR DRIOR MO ELLING

Name of the organization READY COLORADO	Employer identification number 47 – 3043818
FORM 990, PART VI, SECTION B, LINE 12C:	
COUNSEL REVIEWS ALL CONTRACTS AND DISBURSEMENTS.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANC	CIAL STATEMENTS
AVAILABLE TO THE PUBLIC UPON REQUEST.	