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Department of the Treasury

DLN: 93493226012927 OMB No 1545-0047

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 <u>www IRS gov/form990</u>

Open to Public

A F	or th	e 2016 c	alendar year, or tax year begin	ning 01-01-2016 , and endi	ing 12-31	1-2016				
		pplicable change	C Name of organization The Women's Foundation of Colorad	o Inc			D Employ	er identif	ication number	
□ Na		-					84-103	9305		
☐ Ini		turn	Doing business as							
Fir Detur		minated	Number and street (or D.O. boy if m	ail is not delivered to street address)	I Daam /suu	to	E Telephor	ne number		
_		d return	1901 East Asbury Avenue	all is not delivered to street address)	Room/sui	ite	(303) 2	(303) 285-2960		
□Ар	plicati	on pending	City or town, state or province, cour	(303) 2	(303) 203 2300					
			Denver, CO 80208	G Gross re	eceipts \$ 2,	.575,917				
			F Name and address of principa	l officer		H(a) Is	this a group re	turn for		
			Lauren Y Casteel 1901 East Asbury Avenue			sı	ubordinates?		□ _{Yes} ☑ _{No}	
			Denver, CO 80208				re all subordina cluded?	tes	☐ Yes ☐No	
I Ta	x-exei	mpt status	☑ 501(c)(3) □ 501(c)() ◄	(insert no)	J 527		"No," attach a	list (see	instructions)	
J W	ebsit	te:► ww	w wfco org			H(c) G	roup exemption	number	•	
K Forr	n of o	rganızatıon	☑ Corporation ☐ Trust ☐ Asso	ciation 🔲 Other 🟲		L Year of f	formation 1986	M State	of legal domicile CO	
Pa	at T	E	MA D. M.							
Ра		Sum Briefly des	mary scribe the organization's mission o	r most significant activities						
യ		See Part I		Thiose significant delivities						
Governance	-									
Ē	:									
0 Ve	2	Check thi	is box $\blacktriangleright \Box$ if the organization dis	continued its operations or disp	osed of m	ore than i	25% of its net a	ssets		
	3	Number o	of voting members of the governing	g body (Part VI, line 1a)			•	3	28	
20 ⊻	4	Number o	of independent voting members of	the governing body (Part VI, lir	ne 1b) .			4	28	
ЩE	l		mber of individuals employed in ca		•			5	19	
Activities &	l		nber of volunteers (estimate if ned		6	197				
4	l		elated business revenue from Part	, , , ,				7a	0	
	b	Net unrel	lated business taxable income fror	n Form 990-T, line 34				7b	0	
							Prior Year		Current Year	
<u>g</u>	l		tions and grants (Part VIII, line 1h	•	•		1,516,		1,759,459	
Rəvenue	l	-	service revenue (Part VIII, line 2g	•				0	0	
Ğ.	l		ent income (Part VIII, column (A),	, , , ,	•		264,	_	535,852	
	l		venue (Part VIII, column (A), lines		12)		1,781,	338	2,295,311	
	_		enue—add lines 8 through 11 (mu nd similar amounts paid (Part IX, o		ine 12)		1,230,		939,014	
	l		paid to or for members (Part IX, c		•		1,230,	0	939,014	
	l		other compensation, employee be	, ,, ,	• • 5–10)		960,		1,133,890	
Expenses	l		onal fundraising fees (Part IX, colu				,	0	1,133,030	
8			raising expenses (Part IX, column (D), I		•					
五	l		penses (Part IX, column (A), lines	·	_		729,	593	764,077	
	l		penses Add lines 13–17 (must equ	, ,	-		2,919,		2,836,981	
	l		less expenses Subtract line 18 fro				-1,138,		-541,670	
<u>~ ~</u>			·			Begini	ning of Current \		End of Year	
Net Assets or Fund Balances										
Bal	l		ets (Part X, line 16)		•		20,705,	410	20,234,184	
돌	l		ollities (Part X, line 26)				234,	_	171,535	
			ts or fund balances Subtract line ?	21 from line 20	•		20,471,	286	20,062,649	
Par			ature Block erjury, I declare that I have exam	uned this return, including accon	nnanwing	cchoduloc	and statement	s and to	the best of my	
			ef, it is true, correct, and complete							
any k	nowle	edge								
		*****	*				2017-08-14			
Sign		Signati	ure of officer				Date			
Here		John D	Oobey VP of Finance & Administration							
		Type o	or print name and title							
			Print/Type preparer's name Laurie Anderson	Preparer's signature Laurie Anderson		ate 017-08-07		PTIN P01416697	7	
Paid		<u> </u>				-1, 00 07	self-employed	. 51415097		
Pre	-	^{ਫ਼} । ├ _ट	Firm's name Kundinger Corder & Er				Firm's EIN ▶	F34 F3=*		
Use	On	ıly ⁵	Firm's address > 475 Lincoln Street Suit	c 200			Phone no (303)	534-5953		
			Denver, CO 80203							
			this return with the preparer show					✓ ٧	'es 🗆 No	
For P	aper	work Red	duction Act Notice, see the sep	arate instructions.		Cat N	lo 11282Y		Form 990 (2016)	

Form	990 (2016)					Page 2
Par	t IIII Statement	of Program Servic	e Accomplis	hments		
	Check If Sche	dule O contains a respo	nse or note to	any line in this Part III .		🗹
1	Briefly describe the o	rganization's mission				
Cata	lyzing community to ac	dvance and accelerate e	economic oppor	tunities for Colorado wom	nen and their families	
	Did the example tion	undertake any comples	nt program cor	vices during the year which	ch were not listed on	
_	-	r 990-EZ?		- ,	cit were not listed on	☐ Yes ☑ No
		se new services on Sch				Lifes Life
3				changes in how it conduct	ts any program	
,	services?			· · · · · ·		☐ Yes 🗹 No
	If "Yes," describe the	se changes on Schedul	e O			
4	Section 501(c)(3) an		ns are required	to report the amount of	rgest program services, as mea: grants and allocations to others,	
4a	(Code) (Expenses \$	1,009,590	ıncludıng grants of \$	720,422) (Revenue \$)
	See Additional Data					
4b	(Code See Additional Data) (Expenses \$	226,486	including grants of \$	148,517) (Revenue \$)
4c	(Code See Additional Data) (Expenses \$	385,180	including grants of \$	13,200) (Revenue \$)
	(Code) (Expenses \$	117,305	including grants of \$	56,875) (Revenue \$)
	succeed The Girls' Lead change, through leaders grants totaling \$10,000	ership Council (GLC), as pa hip and grantmaking GLC to nonprofit organizations leadership by receiving the	art of WFCO's culti Participants each supporting girls' hi Dottie Lamm Awa	vation of philanthropy, develo design a community leadershi igh school graduation and STE ard, an academic stipend esta	no share the belief that when women ops 20 young women from across Coli ip project and as a group, they are guent EM pipeline programming Three youn blished in 1987 to honor Dottie Lamm ,, and the Black Fox Scholars award for	orado as agents of community uided in making decisions on ig women participating in GLC n's commitment to women's
4d	and girls ^T issues through philanthropy leadership		ıle O)			
4d	and girls ^T issues through philanthropy leadership	potential ces (Describe in Schedu	ıle O) udıng grants of	\$ 56,87	5) (Revenue \$)

Section 501(c)(3) organizations.

or X as applicable

IV Checklist of Required Schedules		
		Γ
Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 🕏	1	

Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates

Did the organization receive or hold a conservation easement, including easements to preserve open space,

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

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 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional ঙ 뉰

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

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

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

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

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

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🛸 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX,

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 🛸 🔒 Did the organization maintain collections of works of art, historical treasures, or other similar assets?

to provide advice on the distribution or investment of amounts in such funds or accounts?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

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

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

b Was the organization included in consolidated, independent audited financial statements for the tax year?

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*

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

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

assessments, or similar amounts as defined in Revenue Procedure 98-19?

Yes

3

4

5

6

7

8

9

10

11f

12a

12b

13

14a

14h

15

16

17

18

19

Yes

Yes

No

No

Page 3

No

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

Yes Yes

Yes

Nο

N	
Ν	
Ν	
Ν	

Nο

No

No

Nο

No

Nο

No

Nο

No

No

Form **990** (2016)

а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🕏	11b		N
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		N
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	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🛸	116		_

29

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

instructions for applicable filing thresholds, conditions, and exceptions)

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

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

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 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

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,"

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

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

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

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

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

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

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

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

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

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

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?

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

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

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

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

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

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

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

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

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

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

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

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

20b 21

Yes

22

23

24a

24b

24c

24d

25a

25b

26

27

28a

28b

28c

29

30

31

32

33

34

35a

35h

36

37

Yes

Form 990 (2016)

Yes

No

Page 4

Yes

Nο Nο

Nο

Nο

No

Nο

No

Nο

No

Nο

No

Nο

Nο

Nο

Nο

Nο

Nο

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			Page 5
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 11			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
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			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
40	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
Ь	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)			
	See instructions for mining requirements for time EN Tornin 11 1, Report of Foreign Bunk and Financial Accounts (FB/III)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
Ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
	Organizations that may receive deductible contributions under section 170(c).	. .	V	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
Ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
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			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
Ь	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? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
Ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Par	t VI	Governance, Management, and Disclosure For each "Yes" response to lines 2 t 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Sched			" respo	nse to li	nes
		Check if Schedule O contains a response or note to any line in this Part VI					✓
Se	ction	A. Governing Body and Management					
						Yes	No
1a	Enter	the number of voting members of the governing body at the end of the tax year	1a	28			
	body,	re are material differences in voting rights among members of the governing or if the governing body delegated broad authority to an executive committee or ir committee, explain in Schedule O					
b	Enter	the number of voting members included in line 1a, above, who are independent	1b	28			
2		ny officer, director, trustee, or key employee have a family relationship or a busine r, director, trustee, or key employee?			2		No
3		ne organization delegate control over management duties customarily performed by icers, directors or trustees, or key employees to a management company or other i			3		No
4	Did th	ne organization make any significant changes to its governing documents since the	prior F	orm 990 was filed?	4		No
5	Did th	ne organization become aware during the year of a significant diversion of the organ	nizatio	n's assets?	5		No
6		ne organization have members or stockholders?			6		No
		ne organization have members, stockholders, or other persons who had the power	o elec	t or appoint one or more	H		
		pers of the governing body?			7a		No
b		ny governance decisions of the organization reserved to (or subject to approval by) ns other than the governing body?	mem	bers, stockholders, or	7b		No
8		ne organization contemporaneously document the meetings held or written actions ollowing	undert	aken during the year by			
а	The g	overning body?			8a	Yes	
Ь	Each	committee with authority to act on behalf of the governing body?			8 b	Yes	
9		ere any officer, director, trustee, or key employee listed in Part VII, Section A, who dization's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i> C		t be reached at the	9		No
Se	ction	B. Policies (This Section B requests information about policies not requ	ıred b	y the Internal Revenu	e Code	e.)	
						Yes	No
10a	Did th	ne organization have local chapters, branches, or affiliates?			10a		No
b		s," did the organization have written policies and procedures governing the activitie ranches to ensure their operations are consistent with the organization's exempt p			10b		
11a	Has t	he organization provided a complete copy of this Form 990 to all members of its go	vernin	g body before filing the	11a	Yes	
b	Descr	ibe in Schedule O the process, if any, used by the organization to review this Form	990				
12a	Did th	ne organization have a written conflict of interest policy? If "No," go to line 13 .			12a	Yes	
b	Were confli	officers, directors, or trustees, and key employees required to disclose annually int	erests	that could give rise to	12b	Yes	
С		ne organization regularly and consistently monitor and enforce compliance with the dule O how this was done	policy •	? If "Yes," describe in	12c	Yes	
13	Did th	ne organization have a written whistleblower policy?			13	Yes	
14	Did th	ne organization have a written document retention and destruction policy?			14	Yes	
15		ne process for determining compensation of the following persons include a review ins, comparability data, and contemporaneous substantiation of the deliberation and					
а	The o	rganization's CEO, Executive Director, or top management official			15a	Yes	
b	Other	officers or key employees of the organization			15b	Yes	
	If "Ye	s" to line 15a or 15b, describe the process in Schedule O (see instructions)					
16a		ne organization invest in, contribute assets to, or participate in a joint venture or si le entity during the year?			16a		No
Ь	ın joir	s," did the organization follow a written policy or procedure requiring the organizat nt venture arrangements under applicable federal tax law, and take steps to safegu s with respect to such arrangements?	ard the	evaluate its participation e organization's exempt	16b		
Se	ction	C. Disclosure					
17		ne States with which a copy of this Form 990 is required to be filed▶					
18	Section availa	on 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 99 ible for public inspection Indicate how you made these available Check all that ap	0, and ply	990-T (501(c)(3)s only)			
	☑ (Own website 🔲 Another's website 🗹 Upon request 🔲 Other (explain in Sc	hedul	e O)			
19		ibe in Schedule O whether (and if so, how) the organization made its governing do	cumen	ts, conflict of interest			
20	State	r, and financial statements available to the public during the tax year the name, address, and telephone number of the person who possesses the organ Dobey 1901 East Asbury Avenue Denver, CO 80208 (303) 285-2960	ızatıon	's books and records			

(A)

Name and Title

(F)

Estimated

Page 7

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

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

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

year • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

• List all of the organization's current key employees, if any See instructions for definition of "key employee"

(B)

Average

- 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 L Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(C)

Position (do not check more

(D)

Reportable

(E)

Reportable

hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from the from related compensation any hours director/trustee) organization (Worganizations from the for related 2/1099-MISC) (W-2/1099organization and Highest compensatemples ee Former Individual trustee or director Office organizations Ē MISC) related Institutional Trust⊷e below dotted organizations employee line) See Additional Data Table

Form 990 (2016)										Page 8
Part VII Section A. Officers, Direct	tors, Trustees	, Key l	Empl	loye	es,	and I	ligh	nest Compensate	d Employees (co	ntinued)
(A) Name and Title	(B) Average hours per week (list any hours		one bo oth a direct	ox, u n off	t che inles ficer	s pers	on	(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
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	10	Key employee	Highest compensated employee	Former			organization and related organizations
See Additional Data Table										

		"		P.9		
See Additional Data Table						

					<u> </u>
					
1b Sub-Total	 		▶		

1b Sub-Total											

1b Sub-Total				•			
c Total from continuation sheets to Pa	art VII, Sectio	nΑ.		▶□			
d Total (add lines 1b and 1s)				⊸i⊤	359 701	0	32 636

1b Sub-Total					▶		·	Τ	
c Total from continuation sheets to Pa	art VII, Sectio	nΑ.		•	▶□				
d Total (add lines 1b and 1c)					▶□	359,701		0	32,636

2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 2								
			Yes	No					
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on			1					

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? If "Yes," complete Schedule J for such

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for

services rendered to the organization? If "Yes," complete Schedule J for such person

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

line 1a? If "Yes," complete Schedule J for such individual

4

5

1

individual .

Section B. Independent Contractors

compensation from the organization ▶ 0

from the organization. Report compensation for the calendar year ending with or within the o	organization's tax year	
(A) Name and business address	(B) Description of services	(C) Compensation

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

Nο

Nο

3

4

5

Yes

Part	VIII Statement of Revenue						- age 3
	Check if Schedule O contains	a respo	nse or note to any	y line in this Part VII	ı		🗆
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
	1a Federated campaigns	1a			revenue		312 314
nts	b Membership dues	1b					
Gra not	c Fundraising events	1c	759,434				
S. 4	d Related organizations	1d	<u> </u>				
Giff Ilai	e Government grants (contributions)	1e					
S. is	f All other contributions, gifts, grants,						
tioi S IS	and similar amounts not included above	1f	1,000,025				
Contributions, Gifts, Grants and Other Similar Amounts	g Noncash contributions included						
n tr	ın lınes 1a-1f \$						
<u>ت</u> ك	h Total.Add lines 1a-1f		<u> </u>	1,759,459			
<u>+</u>			Busines	s Code			
Ve⊓	2a 	_					
Service Revenue	b —	_					
Š	с —						
3,	d ————————————————————————————————————						
ıran	f All other program service revenue						
Program	9Total. Add lines 2a-2f						
_	3 Investment income (including divide			. 1		1	<u> </u>
	sımılar amounts)		1	396,10	9		396,109
	4 Income from investment of tax-ex	-		<u> </u>			
	5 Royalties			<u>▶ </u>			
	6a Gross rents	31	(II) Personal	_			
	b Less rental expenses						
	c Rental income or						
	(loss)						
	d Net rental income or (loss) . (i) Securi	ıtıcs I	(II) Other				
	7a Gross amount	ities	(II) Other	_			
	assets other	139,743					
	than inventory						
	b Less cost or other basis and	0					
	sales expenses	139,743		_			
	C Gain or (loss) d Net gain or (loss)	·	•	<u> </u> 139,74	3		139,743
	8a Gross income from fundraising ev	_					
ne	(not including \$759,434 contributions reported on line 1c)						
₹	See Part IV, line 18		280,60	6			
Re	b Less direct expenses	ь[280,60	6			
Other Revenue	c Net income or (loss) from fundrai	-	ents 🕨		0		
Ö	9a Gross income from gaming activit See Part IV, line 19	ties					
		a					
	b Less direct expenses	b					
	c Net income or (loss) from gaming	g activiti r	es >				
	10a Gross sales of inventory, less returns and allowances						
		a					
	b Less cost of goods sold	b					
	c Net income or (loss) from sales o Miscellaneous Revenue	f invento					
	11a		Business Code				
	ь	-					
					+	+	
	d All other revenue				1	+	
	e Total. Add lines 11a-11d		•			1	
	12 Total revenue. See Instructions						
	<u> </u>			2,295,31	1	0	0 535,852 Form 990 (2016)

section 4958(c)(3)(B) . 7 Other salaries and wages

9 Other employee benefits .

11 Fees for services (non-employees) a Management

d Lobbying

f Investment management fees .

12 Advertising and promotion .

13 Office expenses .

20 Interest . . .

23 Insurance .

a Bad Debt

c In-kind Supplies

d Bank/interest charges

e All other expenses

b Other

15 Royalties .

16 Occupancy .

17 Travel .

14 Information technology

e Professional fundraising services See Part IV, line 17

18 Payments of travel or entertainment expenses for any federal, state, or local public officials .

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

25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ✓ If following SOP 98-2 (ASC 958-720)

19 Conferences, conventions, and meetings

22 Depreciation, depletion, and amortization

21 Payments to affiliates . . .

expenses on Schedule O)

g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)

10 Payroll taxes

b Legal . . c Accounting . 189,375

24,452

18,709

107,125

69,766

15,492

20,156

5.013

2,421

10,458

21,930

6,722

24,400

1,334

4,255

581,929

Form 990 (2016)

54

ParialX Statement of Functional Expenses

Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all c	olumns All other org	anizations must com	plete 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) Fundraisingexpenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	934,514	934,514		
2 Grants and other assistance to domestic individuals See Part IV, line 22	4,500	4,500		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and	282,607	118,660	103,680	60,267

696,232

82,294

72,757

25,000

303,988

114,452

26,449

53,496

12.036

7,880

40.502

41,190

59.992

30.104

24,400

14,604

9,930

2,836,981

54

369,451

37,917

36,265

122,165

29,542

9,669

23,198

6.705

3,519

20,087

12,919

4,605

4,845

1,738,561

137,406

19,925

17,783

25,000

74,698

15,144

1,288

10,142

318

1,940

9,957

6,341

59.992

18,777

13,270

516,491

830

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

8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions) . . .

2

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4 5

Assets

11

12

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14

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17

18

19

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21

22

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34

Fund Balances

Assets or 30

Net

Cash-non-interest-bearing .

10a Land, buildings, and equipment cost or other

Investments—publicly traded securities .

Investments—other securities See Part IV, line 11 .

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

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

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

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

Investments-program-related See Part IV, line 11

basis Complete Part VI of Schedule D

Intangible assets

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Tax-exempt bond liabilities

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

Total liabilities. Add lines 17 through 25 . .

Total liabilities and net assets/fund balances .

complete lines 27 through 29, and lines 33 and 34.

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

and complete lines 30 through 34.

Capital stock or trust principal, or current funds

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

Retained earnings, endowment, accumulated income, or other funds

b Less accumulated depreciation

Grants payable . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Unrestricted net assets

Savings and temporary cash investments	
Pledges and grants receivable, net	
Accounts receivable, net	
Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	
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	
Notes and loans receivable, net	
Inventories for sale or use	
Prepaid expenses and deferred charges	

10a

10b

Page **11**

5

315,002

777,713

37,982

26,463

17.577.019

1.500,000

20.234,184

161.535

10,000

171,535

6.330.504

3,366,502

10.365.643

20,062,649

20.234.184

Form **990** (2016)

(B)

End of year

(A)

Beginning of year

195 1

2

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4

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9

10c

11 12

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14

15

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22 23

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31

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33

34

689.889

984,411

32,361

56,113

17,442,441

1,500,000

20,705,410

182,624

51,500

234,124

6.172.273

3.933.370

10.365.643

20,471,286

20.705.410

59,171

32,708

Liabilities

Form	990 (2016)				Page 12
Par	t XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
	Tabal variance (minch annual Doub VIII) and varian (A), line 12)	1		7	205 211
1	Total revenue (must equal Part VIII, column (A), line 12)				295,311
2	Total expenses (must equal Part IX, column (A), line 25)	2			836,981
3	Revenue less expenses Subtract line 2 from line 1	3			541,670
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			471,286
5	Net unrealized gains (losses) on investments	5			133,033
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
	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		20,	.062,649
Par	TXII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u> </u>
				Yes	No
1	Accounting method used to prepare the Form 990				
	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?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both	on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
Ь	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both	basıs,			_
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	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?		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O			

За

3b

No

Form **990** (2016)

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

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

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

Software Version:

EIN: 84-1039305

Name: The Women's Foundation of Colorado Inc.

Form 990 (2016)

Form 990, Part III, Line 4a:

See Schedule OCommunity Investments and Grants - The Women's Foundation of Colorado (WFCO) improves economic outcomes for women, their families, and girls throughout Colorado by investing in organizations that provide a range of educational and job training opportunities. With grants made through the WFCO endowment and several donor-advised funds, WFCO invested in direct-services to help -Girls stay on track for graduation, college, and career success throughout middle school and high school, with a combination of school- and family-engagement services and academic interventions (Girls Graduate),-Single mothers achieve economic security, through holistic programs that set moms up for success as they pursue education and job training to advance their earning potential (Single Moms Succeed), and -Girls and young women build their interests, skills, and confidence in Science, Technology, Engineering, and Math (STEM) fields, which offer high earning potential, by offering opportunities to explore STEM careers, connect with diverse female role models, and learn through hands-on experiences

Form 990, Part III, Line 4b: See Schedule OPublic Policy Support - WFCO advocates for public policies that improve opportunities for Colorado women and families to achieve economic security by addressing root causes of poverty and advancing education and job training, access to work supports, such as child care, and pay equity In pursuit of these public policy

addressing root causes of poverty and advancing education and job training, access to work supports, such as child care, and pay equity. In pursuit of these public policy priorities, WFCO awards grants to public policy organizations with aligned goals of supporting progress for women and girls on the path to and beyond economic self-sufficiency.

See Schedule OCommunity Engagement - To inspire and motivate individuals to join the movement to strengthen the community by improving economic opportunities and outcomes for Colorado women and girls, WFCO gathers and shares information in several ways. WFCO invests in research to inform our programmatic and policy work. Issues, opportunities, and potential solutions identified through research are shared with partners, policy makers, and community members through direct outreach, various

Form 990, Part III, Line 4c:

findings on impacts of a minimum wage increase for women and families in Colorado

media, and educational events across the state. In 2016, research topics included advancing gender equity in STEM industries, the impacts of increasing the minimum wage, and strengthening leaders in Colorado's early education and child care sector. WFCO's work was highlighted in 26 news articles statewide and we connected with thousands of community members in events such as Annual Luncheons in Denver, Colorado Springs, and Vail, the Pueblo Soiree, STEM Coalition meetings, and webinars to share key.

Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W- 2/1099organization and Highest col Individual to or director Officer Former Institution MISC) related organizations MISC) below dotted emplo organizations line)

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

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Board Chair		^							
Patty Powell	1 00	x		x			0	0	
Secretary		^		\ \ \					

Pattı Klınge	1 00	Х	
Board Chair		<	
Patty Powell	1 00	v	
Secretary		Х	
Stephanie Bruno	1 00		Γ
		V	

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Vice Chair/Treasurer

Dolores Atencio

Board Member

Board Member

Susan Campbell

Board Member

Board Member

Board Member

Kım Desmond

Board Member

Board Member

Colleen Dougherty

Susie Davis

Jennifer Colosimo

Brooke Bell

Compensated Employees, and Independent, Contractors (D) (E) Name and Title Average Position (do not check more Reportable Reportable hours per than one box, unless compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations for related (W-2/1099-(W-2/1099organization and Officer Highest compensat Former MISC) organizations MISC) organizations

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

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	line)	adual trustee irector	titutional Trustee
Kelley Duke	1 00		
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Board Member			
Kamı Guildner	1 00		
		Х	
Board Member			

Nancy Hartley

Board Member

Board Member

Board Member

Anahita Kemp

Board Member

Brook Kramer

Board Member

Board Member

Patricia Orman

Board Member

Laurie Oswald

Board Member

Adrienne Mansanares

Katie Kellen

......

John Ikard

Compensated Employees, and Independent Contractors (C) (D) (E) Name and Title Average Position (do not check more Reportable Reportable hours per than one box, unless compensation compensation amount of other person is both an officer week (list from the from related any hours and a director/trustee) organization organizations for related (W-2/1099-(W-2/1099organization and Highest compensat Former MISC) MISC)

(F)

Estimated

compensation

from the

related organizations

16,925

6,760

0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

	organizations below dotted line)	ndividual trustee ir director	Institutional Trustee
Kım Patmore	1 00		
		X	
Board Member			

Natalie Lynn Rekstad

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Board Member

Board Member

Elaine Torres

Board Member

Board Member

Board Member

Board Member

Gaye Woods

Board Member

Lauren Casteel

John Dobey

President & CEO

VP of Finance and Administration

Joyce Vigil

Carol Wolf

Meredith Vaughan

Kathy Tobey

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183,962

74,959

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors(C) (E) (F) (D) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation week (list person is both an officer from the from related compensation

	any hours	and	a dır	ecto	r/tr	ustee)	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Louise Myrland	40 00					x		100,780	0	8,951
VP of Community Initiatives						^		100,700	Ŭ	0,551

efile	<u>GRA</u>	APHIC prin	nt - DO NOT	PROCESS	As Filed Data -			DLN: 9	3493226012927
SCH	ED	ULE A		Public C	harity Statu	s and Put	olic Supp	ort	OMB No 1545-0047
(Form	1990		Comp	lete if the org	janization is a secti	ion 501(c)(3) d	organization o		2016
990EZ	Z)			•	4947(a)(1) nonexe ▶ Attach to Form 9				2010
		the Treasury	▶ Infor	mation about	Schedule A (Form	990 or 990-EZ		ıctions is at	Open to Public Inspection
Name (of th	e organiza	tion		<u>www.irs.go</u>	ov/form990.		Employer identific	<u></u>
he Won	nen's	Foundation of	Colorado Inc					84-1039305	
Part					s (All organization:				
	janiza —		•		t is (For lines 1 thro	•	,		
1	Ш			•	ociation of churches o			(A)(i).	
2)(A)(ii). (Attach Sch	,	• • •		
3		·		•	ce organization descr				
4		name, city,	and state					170(b)(1)(A)(iii). E	·
5			ation operated i (iv). (Complete		of a college or univer	sity owned or op	perated by a gov	ernmental unit descri	bed in section 170
6		A federal, s	state, or local g	overnment or o	governmental unit de	scribed in sectio	on 170(b)(1)(<i>A</i>	۱)(v).	
7	✓		ation that norm '0(b)(1)(A)(v			s support from a	governmental ι	ınıt or from the gener	al public described in
8		A communi	ty trust describ	ed in section	170(b)(1)(A)(vi)	(Complete Part I	Ι)		
9					cribed in 170(b)(1) e instructions Enter f			with a land-grant coll college or university	ege or university or a
ιο		from activit	ties related to it income and ur	ts exempt func related busine	tions—subject to cert	ain exceptions, a	and (2) no more	s, membership fees, a than 331/3% of its su sses acquired by the c	pport from gross
l 1	П				exclusively to test for	r public safety S	ee section 509	(a)(4).	
L 2		more public	cly supported o	rganızatıons de		09(a)(1) or sec	ction 509(a)(2	s of, or to carry out th). See section 509(a	
a		Type I. A so	supporting orga	inization opera to regularly ap	ted, supervised, or co	ontrolled by its si	upported organi	zation(s), typically by of the supporting orga	
b		Type II. A manageme	supporting org	anızatıon supe erting organizat	ion vested in the san			organization(s), by ha ge the supported orga	
c		Type III fo	unctionally in	tegrated. A su				nd functionally integra	ted with, its
d		Type III n functionally	on-functional	ly integrated e organization	A supporting organi	zation operated fy a distribution	ın connection wi	th its supported orgar I an attentiveness req	
e		Check this	box if the orgai	nization receive	•	ation from the II	RS that it is a Ty	pe I, Type II, Type II	I functionally
f E	nter		of supported o	•	negracea supporting	or garnzacion			
g p	rovic	de the follow	ing information	about the sup	ported organization(s)			
(i)Nan	ne of	supported o	organization	(ii)EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv Is the organiz your governin	ation listed in	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
Γotal					structions for	Cat No 11285	-	 Schedule A (Form 9	

Schedule A (Form 990 or 990-EZ) 2016 Page 2 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, 8, or 9 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 (a)2012 (b)2013 (c)2014 (d)2015 (e)2016 (f)Total (or fiscal year beginning in) ▶ 1 Gifts, grants, contributions, and 2,005,792 2,049,980 1,759,459 membership fees received (Do not 1,680,047 1,516,947 9,012,225 include any "unusual grant") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge

4	Total. Add lines 1 through 3	2,049,980	1,680,047	2,005,792	1,516,947	1,759,459	9,012,225
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)						244,509
6	Public support. Subtract line 5 from line 4						8,767,716
- 5	Section B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a)2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f)Total
7	Amounts from line 4	2,049,980	1,680,047	2,005,792	1,516,947	1,759,459	9,012,225
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and	461,047	529,532	653,344	472,301	396,109	2,512,333

	Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f)Total
7	Amounts from line 4	2,049,980	1,680,047	2,005,792	1,516,947	1,759,459	9,012,225
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	461,047	529,532	653,344	472,301	396,109	2,512,333
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						11,524,558

12 1,716,444

14 76 080 %

12 Gross receipts from related activities, etc (see instructions) 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, Section C. Computation of Public Support Percentage 14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage for 2015 Schedule A, Part II, line 14 15

▶ ☑ and stop here. The organization qualifies as a publicly supported organization

72 850 % 16a 33 1/3% support test-2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box h 33 1/3% support test-2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test-2016. 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 h 10%-facts-and-circumstances test—2015. 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 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 Schedule A (Form 990 or 990-EZ) 2016

P	art III	Support Schedule for						
		(Complete only if you c						er Part II. If
	ation A	the organization fails to	qualify under t	ne tests listed	below, please co	mpiete Part II.)	
56		Public Support alendar year			T			
		year beginning in)	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f) Total
1	Gıfts, grar	its, contributions, and						
		rip fees received (Do not y "unusual grants")						
2		eipts from admissions,						
_		se sold or services						
		, or facilities furnished in						
		y that is related to the on's tax-exempt purpose						
	or garnzaci	on a tax exempt purpose						
3		eipts from activities that are						
	not an uni under sect	related trade or business						
4		ues levied for the						
•		on's benefit and either paid						
		nded on its behalf						
5		of services or facilities by a governmental unit to						
		zation without charge						
6	_	l lines 1 through 5						
7a		ncluded on lines 1, 2, and						
	3 received	from disqualified persons						
Ь	Amounts i	ncluded on lines 2 and 3						
		rom other than disqualified						
		at exceed the greater of						
	\$5,000 or 13 for the	1% of the amount on line						
С	Add lines	*						
8	Public su	pport. (Subtract line 7c						
_	from line (
Se		Total Support		Γ	_	-	1	
		alendar year year beginning in) ▶	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f)Total
9	•	from line 6						
L0a		ome from interest,						
		, payments received on						
		loans, rents, royalties and						
b		om similar sources I business taxable income						
		ion 511 taxes) from						
		es acquired after June 30,						
	1975	10 110						
C		10a and 10b ne from unrelated business						
11		not included in line 10b,						
		or not the business is						
		carried on						
12		ome Do not include gain or the sale of capital assets						
		n Part VI)						
13		pport. (Add lines 9, 10c,						
	11, and 1	vears. If the Form 990 is fo	r the organization	's first second t	hird fourth or fift	h tay year as a se	ction 501(c)(3) or	ganization
14		•	tile organization	s mst, second, t	illia, iourai, or illi	ii tax year as a se	201011 201(0)(3) 01	yamzation, ▶ □
Se		box and stop here Computation of Public S	Sunnort Perce	ntage				
<u> </u>		port percentage for 2016 (lin			column (f))		15	
16	-	port percentage from 2015 S		•			16	
		Computation of Investi					10	
<u> </u>		nt income percentage for 201			line 13. column (f))	17	
		nt income percentage from 20		. ,	13, column (1	"		
18 10-		upport tests—2016. If the			on line 14 and lin	ie 15 is more than	18 33 1/3% and line	a 17 is not
								▶ □
		33 1/3%, check this box and s support tests—2015. If the						
D			_					
20		than 33 1/3%, check this box		-	•			· — <u> </u>
20	Private f	oundation. If the organization	on did not check a	i box on line 14, :	19a, or 19b, check	this box and see	instructions	▶□

Schedule A (Form 990 or 990-EZ) 2016

5a

6

7

8

10a

supervised by or in connection with its supported organizations

organization's supported organizations? If "Yes," provide detail in Part VI.

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

amendment to the organizing document)

complete Part I of Schedule L (Form 990 or 990-EZ)

the organization had excess business holdings)

organization had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

provide detail in Part VI.

answer line 10b below

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V) Section A. All Supporting Organizations

Page 4

4b

4c

5a

5b

5c

6

7

8

9a

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2016

			res	NO
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1		

If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,	1	
describe the designation If historic and continuing relationship, explain	1	
Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described		
in section $509(a)(1)$ or (2)	2	

	The describe in that the supported organizations are designated in designated by class or purpose,		i .
	describe the designation If historic and continuing relationship, explain	1	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described		
	ın 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	

3а	Did the organization have a supported organization described in section $501(c)(4)$, (5) , or (6) ? If "Yes," answer (b) and (c)		
	below	3a	
b	Did the organization confirm that each supported organization qualified under section $501(c)(4)$, (5) , or (6) and satisfied the public support tests under section $509(a)(2)$? If "Yes," describe in Part VI when and how the organization made the		
	determination	3b	
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?		
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c	
_	the state of the s		

b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the		
	determination	3b	
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?		
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a	
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported		
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or	4h	

Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support

Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

than (1) its supported organizations. (11) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

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,"

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes

Substitutions only. Was the substitution the result of an event beyond the organization's control?

Par	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
Se	ction B. Type I Supporting Organizations			
	ction by Type a 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? If "No," describe in Par VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the	t		
	organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting			
	organization	2		
Se	ction C. Type II Supporting Organizations			
	ction c. Type 11 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)? 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)	f		
		1		
Se	ction D. All Type III Supporting Organizations			
	// 11 2 2		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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	e		
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)			
_		2		
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? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard			
<u>Se</u> 1	ction E. Type III Functionally-Integrated Supporting Organizations	<u></u>		
т а	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction and the organization satisfied the Activities Test Complete line 2 below	tions)		
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity (se	e ınstru	ctions))
2	Activities Test Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of the activities.	22		
h	substantially all of its activities Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the	2a		
U	organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
	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> .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its			
	supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3b		

4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
	Section B - Minimum Asset Amount		(A) Prior Year	` '
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		
_	Average monthly value of securities	1a		
d	Average monthly value of securities	14		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors			

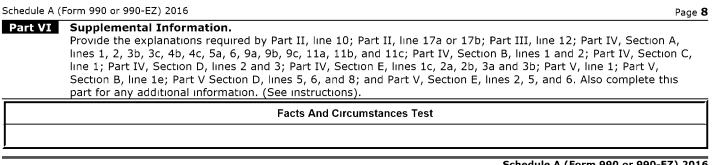
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
a Average monthly value of securities	1a		
b Average monthly cash balances	1 b		
c Fair market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

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

Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to emergency 6 temporary reduction (see instructions)

zero, see instructions) Excess distributions carryover to 2017. Add lines 31 and 4c Breakdown of line 7 **b** Excess from 2013.

c Excess from 2014. Excess from 2015. e Excess from 2016. . . . Schedule A (Form 990 or 990-EZ) (2016)



efile GRAPHIC print - DO NOT PROCESS As Filed Data -

SCHEDULE C (Form 990 or 990-

Department of the Treasury

EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

DLN: 93493226012927

Open to Public Inspection

Internal Revenue Service If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C • Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B Section 527 organizations Complete Part I-A only If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B • Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** The Women's Foundation of Colorado Inc 84-1039305 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV Political expenditures Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes Was a correction made? ☐ Yes □ No h If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 4 Did the filing organization fileForm 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds If none, enter and promptly and -0directly delivered to a separate political organization If none, enter -0-3 5

114,815

62,968

49.815

43,981

66,156

33,689

49,560

73,999

202

90,109

72,650

7,644

Schedule C (Form 990 or 990-EZ) 2016

298,465

275,773

413.660

91,350

Total lobbying expenditures

Grassroots ceiling amount

Grassroots nontaxable amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

Return Reference

activity

Volunteers?

1

(b)

Amount

(a)

Yes

No

Schedule C (Form 990 or 990EZ) 2016

Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) Part III-A (6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members 1 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year 2b Carryover from last year C Total 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Explanation

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

During the year, did the filing organization attempt to influence foreign, national, state or local legislation,

including any attempt to influence public opinion on a legislative matter or referendum, through the use of

SCHEDULE D

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

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

DLN: 93493226012927 OMB No 1545-0047

(Form 990)

1

5

► Attach to Form 990. Open to Public Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Inspection Internal Revenue Service Name of the organization **Employer identification number** The Women's Foundation of Colorado Inc 84-1039305 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts Total number at end of year 8 2 Aggregate value of contributions to (during 94,244 3 Aggregate value of grants from (during year) 199,500 Aggregate value at end of year 2,491,315 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ✓ Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ No Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 20 C Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? ☐ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Cat No 52283D

Schedule D (Form 990) 2016

Page 2

Par	t III	Organizations Ma	aintaining Col	lections of A	rt, Histori	ical Tr	eası	ires, or Oth	er Similar <i>A</i>	Assets (con	tınued)
3	_	the organization's acqu (check all that apply)	uisition, accession	n, and other rec	ords, check	any of	the fo	ollowing that ar	e a significant	use of its co	llection
a		Public exhibition			d		Loan	or exchange p	orograms		
b		Scholarly research			e		Othe	r			
С		Preservation for future	generations								
4	Provid Part X	de a description of the o	organization's col	lections and exp	olain how the	ey furth	er the	e organization'	s exempt purp	ose in	
5		g the year, did the orga s to be sold to raise fun								☐ Yes	□ No
Pa	rt IV	Escrow and Custo Complete if the org X, line 21.			n Form 990), Part	IV, lı	ine 9, or repo	orted an amo	ount on For	m 990, Part
1a		organization an agent, led on Form 990, Part >		an or other inte	rmediary for	contril	oution	s or other asse	ets not	Yes	□ No
Ь	If "Ye	s," explain the arrange	ment ın Part XIII	and complete t	he following	table				Amount	
С		ning balance			_			1c			
d	_	ons during the year						1d			
е		butions during the year						1e			
f		g balance						1f			
2 a		e organization include	an amount on Fo	rm 990. Part X.	line 21, for	escrow	or cu	ustodial accoun	t liability?	п.,	
		•			·					∐ Yes	∐ No □
<u>ь</u>		s," explain the arrange						•			
Pa	rt V	Endowment Fund	is. Complete if								<u> </u>
4	D = =:==	6 halanaa		(a)Current ye 14,899		16,109		(c)Two years ba 16,593,		ears back (e 5,755,129)Four years back 14,797,382
	-	ing of year balance .			,526		,409	968,		939,791	
		utions			,544		,409	526,		1,356,019	1,215,642
		estment earnings, gain	s, and losses		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,000	320,	-	1,550,015	1,713,302
		or scholarships	•								
е		expenditures for facilitie ograms	es	639	,380	1,896	,895	1,979,	830	1,457,347	1,973,397
f		strative expenses .									
		year balance		14,899	615	14,899	925	16,109,	070 10	6,593,592	15,755,129
_		•						· · ·	0,0	0,000,002	15,755,125
2		le the estimated percer designated or guasi-er	-	•	lance (line 1	g, colui	mn (a)) held as			
а				15 620 %							
b		anent endowment 🟲	69 570 %								
С		orarily restricted endov		310 %							
_		ercentages on lines 2a,	•	•							
3a		nere endowment funds Ization by	not in the posses	sion of the orga	inization tha	t are no	eid an	id administered	i for the		Yes No
	_	related organizations								3a(i	
	(ii) re	elated organizations .								3a(ii) No
b	If "Ye	s" on 3a(11), are the rel	ated organization	ns listed as requ	ired on Sche	edule R	٠.			. 3b	
4	Descr	ibe in Part XIII the inte	nded uses of the	organization's	endowment	funds					_
Pa	rt VI	Land, Buildings,									
	D	Complete if the org								 	
	Descri	ption of property	(a) Cost or oth (investme)Cost or other	Dasis (C	uner)	(e)Accumulati	ed depreciation	(4)	Book value
1a	Land										
b	Building	gs									
С	Leaseh	old improvements									
		nent				5	9,171		32,708		26,463
		lines 1a through 1e <i>(Co</i>	lumn (d) must e	qual Form 990,	Part X, colu	mn (B),	line .	10(c))	>		26,463
		- ,		·	•	. ,,			Sc	hodulo D (F	orm 990) 2016

Part VII Investments—Other Securities. Complete if the organization	zation answe	red 'Yes' on Form 9	990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category (including name of security)	(b) Book value		hod of valuation -of-year market value
(1)Financial derivatives	value	Cost of end	-or-year market value
(2)Closely-held equity interests (3)Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related. Complete if the organ	•	ared Weel on Form	OOO Port IV line 11c
See Form 990, Part X, line 13.			
(a) Description of investment (b)	Book value		thod of valuation -of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization answered 'Yes' on F	Form 990, Part	IV. line 11d See Forr	m 990, Part X, line 15
(a) Description (1) Investment in building	,	•	(b) Book value 1,500,000
(1)			2,000,000
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization answered	'Yes' on Form	n 990. Part IV. line	1,500,000 11e or 11f.
See Form 990, Part X, line 25. 1. (a) Description of liability	(b) Boo		
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<u> </u> 		
2. Liability for uncertain tax positions In Part XIII, provide the text of the footn			
organization's liability for uncertain tax positions under FIN 48 (ASC 740) Chec	k here if the te	ext of the footnote has	Schedule D (Form 990) 2016

Schedule D (Form 990) 2016

Part XI

а

b

5

1

2

а b

d

е 3

а

b

c

Part XIII

5

4

Part XII

Net unrealized gains (losses) on investments . . . 2a 133.033 Donated services and use of facilities . 2b 54,256 2c

c Recoveries of prior year grants . . . Other (Describe in Part XIII) . . 2d d е Add lines 2a through 2d 2e 3

3 Subtract line 2e from line 1 . 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b .

b

Total expenses and losses per audited financial statements .

Donated services and use of facilities .

Prior year adjustments . .

Other (Describe in Part XIII) . Add lines 2a through 2d .

Subtract line 2e from line 1 .

Add lines 4a and 4b .

Return Reference

See Additional Data Table

Other losses .

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1:

Other (Describe in Part XIII)

Supplemental Information

Investment expenses not included on Form 990, Part VIII, line 7b .

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Other (Describe in Part XIII) Add lines 4a and 4b . . . c Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)

Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

4a 4b

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

2a

2b 2c

2d

4a 4b

Explanation

25,000

54,256

25,000

4c

2e

3

4c

5

Page 4

2,457,600

187,289

25,000

2,295,311

2,866,237

54,256

25,000

2,836,981

Schedule D (Form 990) 2015

2.811.981

2,270,311

Page 5		chedule D (Form 990) 2015
	ormation (continued)	Part XIII Supplemental Info
	Explanation	Return Reference

Schedule D (Form 990) 2016

Additional Data

Software ID: Software Version:

EIN: 84-1039305

Name: The Women's Foundation of Colorado Inc.

To support delivery of our programs and strategies to help Colorado's women and girls achieve economic self-

Supplemental Information			

sufficiency

Return Reference

Part V, Line 4

Explanation

The Women's Foundation of Colorado Inc. 84-1039305 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. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e Solicitation of non-government grants Solicitation of government grants Internet and email solicitations Phone solicitations Special fundraising events ☐ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to individual fundraiser have from activity (or retained by) (or retained by) custody or or entity (fundraiser) fundraiser listed in organization control of col (i) contributions? No Yes 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 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat No 50083H Schedule G (Form 990 or 990-EZ) 2016

As Filed Data -

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

DLN: 93493226012927

OMB No 1545-0047

Open to Public

Inspection

Employer identification number

efile GRAPHIC print - DO NOT PROCESS

SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

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. (a)Event #1 (b) Event #2 (c)Other events (d) Total events Annual Luncheon **Regional Events** (add col (a) through (event type) (total number) col (c)) (event type) Revenue 1 Gross receipts. 857,814 182,226 1,040,040 627,443 131,991 759,434 2 Less Contributions. Gross income (line 1 minus 230,371 50,235 280,606 line 2) 4 Cash prizes Noncash prizes Expenses Rent/facility costs 19,015 8,394 27,409 7 Food and beverages 93,087 31,936 125,023 8 Entertainment 75,356 75,356 9 Other direct expenses 42.913 9,905 52,818 **10** Direct expense summary Add lines 4 through 9 in column (d) 280,606 11 Net income summary Subtract line 10 from line 3, column (d) 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 (b) Pull tabs/Instant (d) Total gaming (add (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) 1 Gross revenue Expenses 2 Cash prizes Noncash prizes Direct 4 Rent/facility costs 5 Other direct expenses Yes % Yes % Yes % 6 Volunteer labor No Direct expense summary Add lines 2 through 5 in column (d) Net gaming income summary Subtract line 7 from line 1, column (d). Enter the state(s) in which the organization conducts gaming activities _ ☐ Yes ☐ No Is the organization licensed to conduct gaming activities in each of these states? If "No," explain . Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10a ☐ Yes ☐ No If "Yes," explain _

sche	dule G (Form 990 or 990-EZ) 2016					F	Page
L1	Does the organization conduct gaming	activities with nonmember	s?		☐ Yes	□No	
L 2	Is the organization a grantor, beneficial formed to administer charitable gamin		member of a partnership or other entity		□Yes	□No	
L3	Indicate the percentage of gaming act	ivity conducted in					
а	The organization's facility			13a			
b	An outside facility			13b			
.4	Enter the name and address of the pe	rson who prepares the orga	nization's gaming/special events books and re	cords			
	Name						
	Address •	·····					
.5a	Does the organization have a contract revenue?	with a third party from who	om the organization receives gaming		□Yes	□No	
b			anization 🕨 \$ and th	ne			
	amount of gaming revenue retained by	y the third party $ hildsymbol{\blacktriangleright}$ \$					
С	If "Yes," enter name and address of the	ie third party					
	Name ►						
	Address ▶						
6	Gaming manager information						
	Name ►						
	Gaming manager compensation $ hilde{ ho}$ \$		·				
	Description of services provided ▶						
	☐ Director/officer	☐ Employee	☐ Independent contractor				
7	Mandatory distributions						
а	Is the organization required under star retain the state gaming license?	te law to make charitable di	stributions from the gaming proceeds to		П.,	П.,	
b		ured under state law distribi	uted to other exempt organizations or spent		☐ Yes	∐ No	
	in the organization's own exempt activ						
Par	t IV Supplemental Information	on. Provide the explanat .5c, 16, and 17b, as app	cions required by Part I, line 2b, column licable. Also complete this part to provid				_
	Return Reference		Explanation				
			<u>'</u>	ule G (F	orm 990 or	990-F7)	20

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493226012927 OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations,** (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ► Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization Employer identification number The Women's Foundation of Colorado Inc 84-1039305 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ✓ Yes □ No Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II 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 recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable (book, FMV, appraisal, non-cash assistance or assistance grant cash other) or government assistance See Additional Data Table (1)(2)(3)(4)(6)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 69 Schedule I (Form 990) 2016 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P

Committee

three highest ranking applicants receiving the award. The selection is approved by a representative of Blackfox Philanthropy and the Girls' Leadership Council

Schedule I (Form 990) 2016

Additional Data

Girls Inc of Metro Denver

1499 Julian Street Denver, CO 80204 Project Self-Sufficiency of

Loveland-Fort Collins 375 W 37th Street Ste 150 Fort Collins, CO 81401

Software ID: **Software Version:**

74-2277668

84-1206341

EIN: 84-1039305

Name: The Women's Foundation of Colorado Inc

63,875

30,000

For overnments.

501 (c) 3

501 (c) 3

orm 990,Schedule I, Part	II, Grants and	Other Assistance to	o Domestic Organiza	tions and Domesti	ic Gov
(a) Name and address of organization	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash	(f) M (boo
or government				assistance	

(h) Purpose of grant

or assistance

Direct Service

Direct Service

Method of valuation (q) Description of ook, FMV, appraisal, non-cash assistance other)

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance other) or government assistance 84-0459889 501 (c) 3 29.625 Direct Service St Marv's Academy 4545 S University Boulevard

Englewood, CO 80113 Colorado Women's 74-2202303 501 (c) 3 25,000 Employment and Education Inc

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

Direct Service 1175 Osage Street Ste 300 Denver, CO 80204

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

Sundance Institute 87-0361394 501 (c) 3 25,000 Direct PO Box 68442 Park City, UT 84068

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

Denver, CO 80218

Park City, UT 84068

Warren Village 84-0644270 501 (c) 3 25,000

Direct Service

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

Community College of Denver	45-3784543	501 (c) 3	22,500		Direct Service
PO Box 173363					
Denver, CO 80217					l

Walking Mountains 84-1436731 501 (c) 3 22,500 Direct Service

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

PO Box 9469 Avon, CO 81620

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance other) or government assistance 74-2393418 501 (c) 3 21.213 Colorado Mountain College Direct Service Foundation

802 Grand Ave Glenwood Springs, CO 81601 84-1188208 501 (c) 3 17.000 Direct Service

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

Partners in Housing 455 Gold Pass Hts

Colorado Springs, CO 80906

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

VORP of Denver 403 W 9th Ave Denver, CO 80204	84-1313876	501 (c) 3	16,000		Direct Service
Durango Adult Education Center	84-1118878	501 (c) 3	15,000		Direct Service

701 Camino Del Rio Ste 301 Durango, CO 81301

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government assistance other) The Colorado Education 26-1597530 501 (c) 3 12.500 Direct Service Initiative 1660 Lincoln Street Ste 2000

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

635 W Corona Avenue Pueblo, CO 81004

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance other) or government assistance Florence Crittenton Services 84-0429686 501 (c) 3 12.000 Direct Service

96 S Zunı Street Denver, CO 80223 I Have a Dream Foundation of 84-1150542 501 (c) 3 11.000

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

Direct Service Boulder County 390 Manhattan Circle 200 Boulder, CO 80303

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance 84-1538872 501 (c) 3 11.000 Open World Learning Direct Service 2543 California Street

Direct Service

10.700

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

501 (c) 3

Denver, CO 80205

Community Partnership for Child Development

2330 Robinson Street
Colorado Springs, CO 80904

84-1071825

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance Emorgoney Family Accietance 94-0454115 501 / c) 3 10 700 Direct Service

Association 1575 Yarmouth Ave	04-0454115	301 (c) 3	10,700		Direct Service
Boulder, CO 80304					
New Legacy Charter School	46-3841363	501 (c) 3	10,000		Direct Service

2091 N Dayton Street Aurora, CO 80010

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance Passage Charter School 84-1449330 501 (c) 3 10 0001 Direct Service

703 S 9th Street Montrose, CO 81401	0 1 2 1 13 3 3 5	331 (6, 3	10,000		211 000 001 1100
Young Womens Christian Association of Boulder County	84-0500276	501 (c) 3	10,000		Direct Service

2222 14th Street Boulder, CO 80302

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

Denver Kıds Inc	84-1244211	501 (c) 3	8,000		Direct
1860 Lincoln Street 9th Floor Denver, CO 80203					
				†	$\overline{}$

Full Circle of Lake County 84-1386727 501 (c) 3 7.000 Direct Service PO Box 622

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

Leadville, CO 80461

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance Soccer Without Borders 20-3786129 501 (c) 3 7.000 Direct Service 1100 8th Ave

1100 8th Ave
Greeley, CO 80631

Womens Resource Agency 750 Citadel Drive East Ste 3128

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

Colorado Springs, CO 80909

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance Bright Future Foundation for 84-0938374 501 (c) 3 5,000 Direct Service

Colorado Youth for a Change	20-2501002	501 (c) 3	5.000		Direct Service
Eagle County PO Box 2558 Avon, CO 81620					

2490 W 26th Ave Ste 110-A Denver, CO 80211

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

Direct Service

Futuro Media Group	27-2077349	501 (c) 3	5,000		Direct Service
361 West 125th Street 6th					
Floor					
New York, NY 10027					
New 101K, N1 10027					

5.000

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

501 (c) 3

84-0404231

UNIVERSITY OF DENVER

1901 E Asbury Dr Denver, CO 80208

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance other) or government assistance YouthPower365 84-1442909 501 (c) 3 5.000 Direct Service

PO Box 6550
Avon, CO 81620

WASHINGTON AREA WOMENS 52-2028612 501 (c) 3 5,000

FOUNDATION INC

Direct Service

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

1331 H Street NW Ste 1000 Washington, DC 20005

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government assistance other) The Red Ribbon Project of 84-1343263 501 (c) 3 4.000 Direct Service

PO Box 6058 Avon, CO 81620					
Colorado Association of	71-0947313	501 (c) 3	1,500		Direct

600 S Cherry Street Ste 1200

Denver, CO 80246

ect Service Funders

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance Society of Women Engineers -84-1127067 501 (c) 3 1.000 Direct Service Rocky Mountain Section

PO Box 260692 Lakewood, CO 80226

VOTERUNLEAD 46-4285577 501 (c) 3 1,000 Direct Service
1103 Missouri Ave
Duluth, MN 55811

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance other) or government assistance Emily Griffith Foundation Inc 84-1169001 501 (c) 3 500 Direct Service 1860 Lincoln Street Denver, CO 80203

Direct Service

1860 Lincoln Street
Denver, CO 80203

Pikes Peak Area Zonta 26-1382809 501 (c) 3

Foundation
PO Box 7924

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

Colorado Springs, CO 80933

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

from a Donor Advised

Fund

Chicken & Egg Pictures 45 Main Street Ste 506 Brooklyn, NY 11201	47-4712007	501 (c) 3	25,000		I .	Direct Service grant from a Donor Advised Fund
The Representation Project	45-1611066	501 (c) 3	25,000			Direct Service grant

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

PO Box 1750 Ross, CA 94957

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Rose Community Foundation 84-0920862 501 (c) 3 20.874 Direct Service grant from a Donor Advised

600 S Cherry Street Ste 1200 Denver, CO 80246 Fund Colorado Nonprofit 84-1493585 501 (c) 3 20,000

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

Denver, CO 80203

Direct Service grant Development Center from a Donor Advised 789 Sherman Street Ste 250 Fund

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government assistance other) Denver Art Museum 84-6038240 501 (c) 3 20.000 Direct Service grant from a Donor Advised 100 West 14th Avenue Fund

Fund

Parkway
Denver, CO 80204

Planned Parenthood of the R4-0404253 Sol (c) 3 Sol

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

7155 E 38th Ave

Denver, CO 80207

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

Fund

Sacred Heart House of Denver 84-0889359 501 (c) 3 15.000 Direct Service grant 2844 Lawrence Street Denver, CO 80205 Fund

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

Denver, CO 80228

from a Donor Advised Friendship Bridge 84-1141078 501 (c) 3 10,000 Direct Service grant 405 Urban Street Ste 140 from a Donor Advised

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

1905 Sherman Street Ste 800

Denver, CO 80203

MADRE 121 West 27th Street Ste 301 New York, NY 10001	13-3280194	501 (c) 3	10,000			Direct Service grant from a Donor Advised Fund
NARAL Pro-Choice Colorado Foundation	84-6050191	501 (c) 3	10,000		I .	Direct Service grant from a Donor Advised

Fund

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

1601 Connecticut Avenue NW Washington, DC 20009

Peace Development Fund	04-2738794	501 (c) 3	10,000		I .	Direct Service grant
PO Box 40250						from a Donor Advised
San Francisco, CA 94140						Fund
Search for Common Ground	52-1257425	501 (c) 3	10,000			Direct Service grant

from a Donor Advised

Fund

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government other) assistance USC Annenberg School for 77-6216147 501 (c) 3 10.000 Direct Service grant Communication and Journalism from a Donor Advised Fund

Fund

1500 Market Street Ste 3500E Philadelphia, PA 19102 GAY & LESBIAN ALLIANCE 13-3384027 501 (c) 3 5.310 Direct Service grant AGAINST DEFAMATION INC from a Donor Advised

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

30 Winter Street Ste 800

Boston, MA 02108

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

from a Donor Advised

Fund

Collective Heritage Institute
1607 Paseo de Peralta Ste 3
Santa Fe, NM 87501

Global Fund for Women

77-0155782

501 (c) 3
5,000

Direct Service grant from a Donor Advised Fund

Direct Service grant from a Donor Advised Fund

Direct Service grant

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

800 Market Street 7th Floor

San Francisco, CA 94102

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

Direct Service grant

Fund

from a Donor Advised

Just Vision	20-4898729	501 (c) 3	5,000		Direct Service grant
1616 P St NW Ste 340					from a Donor Advised
Washington, DC 20036					Fund

4,500

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

501 (c) 3

Denver Film Society

Denver, CO 80206

1510 York Street

84-0771070

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Lambi Fund of Haiti 52-1843357 501 (c) 3 12 000 Direct Service grant

PO Box 15298

Washington, DC 20003

1050 Connecticut Ave Washington, DC 20036	32-10-3337	301 (c) 3	12,000	from Beyond Our Borders Special Interest Fund
Advancing Girls' Education in Africa	27-0143166	501 (c) 3	10,000	Direct Service grant from Beyond Our

Borders Special Interest

Fund

(a) Name and address of (f) Method of valuation (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or aovernment assistance other) Friendship Bridge 84-1141078 501 (c) 3 10.000 Direct Service grant 405 Urban Street Ste 140 from Beyond Our Denver, CO 80228 Borders Special Interest Fund

Borders Special Interest

Fund

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

San Francisco, CA 94102

Global Fund for Women 77-0155782 501 (c) 3 10.000 Direct Service grant 800 Market Street 7th Floor from Beyond Our

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

from Beyond Our

Fund

Borders Special Interest

AfricAid 1031 33rd Street Ste 174 Denver, CO 80205	84-1549841	501 (c) 3	7,500		from Beyond Our Borders Special Interest Fund
Posner Center for International	46-4406422	501 (c) 3	7,500		Direct Service grant

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

Development

1031 33rd Street

Denver, CO 80205

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

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

501 (c) 3

Syria Relief and Development	45-3737015	501 (c) 3	7,500		Direct Service grant
PO Box 25446					from Beyond Our
Overland, KS 66225					Borders Special Interest
· ·					Fund

Public Policy

32.500

Bell Policy Center

Denver, CO 80203

1905 Sherman Street Ste 900

84-1550841

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 9to5 National Association of 34-1246311 501 (c) 3 31 000 Public Policy

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

Policy

789 Sherman Street Ste 300 Denver, CO 80203

Working Women- Colorado Chapter 1634 Downing Street Unit A	34 1240311	301 (6) 3	31,000		Table Folley
Denver, CO 80218					
Colorado Center on Law &	84-1264154	501 (c) 3	30,517		Public Policy

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Colorado Children's Campaign 74-2374672 501 (c) 3 23.500 Public Policy 1580 Lincoln Street Ste 420

1580 Lincoln Street Ste 420 Denver, CO 80203 Colorado Fiscal Institute 46-1281109 501 (c) 3 22,000 Public Policy 1905 N Sherman Street Ste

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

225

Denver, CO 80203

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

Colorado Succeeds 75-3221270 501 (c) 3 15,000 Public Policy 1390 Lawrence Street Ste 200

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

Denver, CO 80204

DLN: 93493226012927 **Compensation Information** OMB No 1545-0047 Schedule J (Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest 2016 Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990. ▶ Information about Schedule J (Form 990) and its instructions is at Open to Public Department of the Treasury www.irs.gov/form990. Inspection Internal Revenue Service **Employer identification number** Name of the organization The Women's Foundation of Colorado Inc 84-1039305 Questions Regarding Compensation Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Personal services (e g, maid, chauffeur, chef) Discretionary spending account If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain **1**b 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 4a No 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? No 4c Participate in, or receive payment from, an equity-based compensation arrangement? No If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any 5 compensation contingent on the revenues of No The organization? 5a 5b No Any related organization? If "Yes," on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any 6 compensation contingent on the net earnings of 6a The organization? No Any related organization? 6b No If "Yes," on line 6a or 6b, describe in Part III 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Νo 8 Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 No If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule J (Form 990) 2016 Cat No 50053T

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual (A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable (E) Total of columns (F) Compensation in column(B) reported as other deferred benefits (B)(1)-(D)(ii) (iii) (i) compensation deferred on prior Form Bonus & incentive Other reportable Base compensation 990 compensation compensation 183,962 1 Lauren Casteel (i) 0 0 7,358 9,567 200,887 0 President & CEO 0 0 0 0 0 0 (ii) 0 See Additional Data Table

							_
Schedule J (Form 990) 2016							

Schedule J (Form 990) 2016 Page 3 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information Return Reference Explanation

Schedule 1 (Form 990) 2016

efil	e GRAPHIC pr	int - DO NOT PR	OCESS	As Filed Data -		DLN	9349322	6012	927
	IEDULE M			loncash Contri	hutions		OMB No 1	.545-0	047
(For	m 990)	▶Complete if the		ons answered "Yes" on Fo		9 or 30.	20	16	-
		▶ Attach to Form 990.							
Denar	tment of the Treasury	l		le M (Form 990) and its i	nstructions is at <u>www.ir</u> :	s.gov/form990	Open to) Pub	lic
Intern	al Revenue Service						Inspe		_
	e of the organızat /omen's Foundation					Employer iden	tification n	umber	•
						84-1039305			
Pa	rt I Types	of Property				_			
			(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g		(d) d of determin ontribution a		s
1	Art—Works of ar	t			•				
2	Art—Historical tr								
3	Art—Fractional in								
4	Books and public Clothing and hou								
,									
6	Cars and other v	ehicles							
7	Boats and planes								
8	Intellectual prope	•		10	72.04	C			
9 10	Securities—Public Securities—Close		X	12	/2,810	6 Fair Market Val	ue		
	Securities—Partr or trust interest	nership, LLC,							
12	Securities—Misce								
13	Qualified conserve contribution—Histructures	istoric							
14	Qualified conserv	vation							
	contribution—Of								
15 16	Real estate—Res								
17	Real estate—Oth								
18	Collectibles .								
19	Food inventory								
20	Drugs and medic	al supplies .							
21	Taxidermy .								
	Historical artifact								
	Scientific specim								
	Archeological art Other ► (iracts	X	100	24 40	0 Fair Market Val	116		
	olies)			100	24,40	of all Market var	uc .		
26	Other ▶ (,							
27	Other ▶ (
	Other ► (
29				ition during the tax year for B, Part IV, Donee Acknowled		29		V	
30=	During the year	did the organization	n receive hi	contribution any property r	enorted in Part I lines 1 th	rough 28 that		Yes	No
504		·			·	-			
		·		ate of the initial contribution	·	to he asea			l
				od?			· 30a		No
b		e the arrangement i							
31	Does the organi	zation have a gift ac	ceptance po	olicy that requires the reviev	of any non-standard cont	rıbutıons?	31	Yes	<u></u>
32a	Does the organi contributions?			or related organizations to so	olicit, process, or sell nonce	ash · · · ·	32a		No
	If "Yes," describ								
33	_	•	amount in	column (c) for a type of pro	perty for which column (a)	ıs checked,			
	describe in Part								
For D	anorwork Roductio	on Act Notice, see the	Instruction	s for Form 990	Cat No. 512271	Sche	dule M (Form	0001	2016)

schedule M (Form 990)	(2016)	Page 2				
Part III Suppl	lemental Info	rmation.				
Provide	Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part					
I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete						
this pa	art for any add	itional information.				
Return Refer	rence	Explanation				
		Schedule M (Form 990) (2016)				

efile GRAPH	IC print - DO NOT PROCESS		DLN	: 93493226012927	
SCHEDULE O (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. Department of the Treasury Department of the Treasury					2016 Open to Public Inspection
	anization dation of Colorado Inc e O, Supplemental Informatio	n		Employer iden 84-1039305	tification number
Return Reference			Explanation		
Form 990, Part VI, Section B, line 11b	the Women's Foundation of Colorado places initial responsibility for review of the Form 99 with the Audit and Finance Committee as designated in the Audit and Finance Committee Choter The Form 990 is then distributed to the full Board for review in advance of its regularly scheduled Board meeting. Prior to, and at the Board meeting, the Trustees are proviced an opportunity to ask any questions regarding the Form 990 and the financial statement prior to approval by the Board.				

Return Reference	Explanation
Form 990, Part VI, Section B, line 12c	The Women's Foundation of Colorado distributes its Conflict of Interest Policy to all employees and Board members. Each Board member and employee is also provided a Conflict of Interest Statement, which affords the individual an opportunity to disclose any relationships, positions or circumstances which could potentially constitute a conflict of interest as defined in the Foundation's Conflict of Interest Policy. For each employee a signed form is sobtained, and retained in the employee's personnel file. For each Board member a signed form is retained in a file located at The Women's Foundation of Colorado office along with other Board of Trustee information. It is the responsibility of the Vice President of Fin ance and Administration to verify that all employees and Board members have a signed Conflict of Interest Statement on file. Whenever a potential conflict exists, the Board of Trus tees determines the appropriate response.

Return Explanation
Reference

Form 990,
Part VI,
Section B,
line 15

The Executive Committee of the Board of Trustees is responsible for determining the compensation of the President & CEO and the President & CEO is responsible for determining the base compensation of key employees Base Compensation. The determination of base salary of the President & CEO and key employees takes into account market rates as determined by the Colorado Association of Nonprofits Annual Salary Survey, other recognized published salar vidata or blend as deemed appropriate

990 Schedule O, Supplemental Information

Return Explanation
Reference

Form 990,
Part VI,
Section C,
line 19

The Women's Foundation of Colorado makes its governing documents, Conflict of Interest Policy, and financial statements available to the public as follows -Posting the information on its web-site at www wfco org -Providing copies upon written request

Return Explanation
Reference

Form 990, Other contract services Program service expenses 122,165 Management and general expenses 74,698 Fundraising expenses 107,125 Total expenses 303,988

Return Explanation

Form 990, Part XII, Line