

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



DLN: 93493319064587 **Return of Organization Exempt From Income Tax** Form 990

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

2016

OMB No 1545-0047

Open to Public

Department of the Treasury

► Do not enter social security numbers on this form as it may be made public

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

| Interna | l Rev | enue Service | P Information as | out Form 550 and its matricellons is at y | <u> </u> | <u>111220</u> | | Inspection | |
|--|--------|-----------------|--|--|-----------------------|----------------------------|--------------------|----------------------|--|
| A F | or th | e 2016 c | alendar year, or tax year beg | inning 01-01-2016 , and ending 12 | 2-31-2016 | | | | |
| | | applicable | C Name of organization The Catholic Foundation No Colora | ado | | D Employ | er identi | fication number | |
| | | change nange | % THE ORGANIZATION | 84-148 | 1641 | | | | |
| | | - | Doing business as | | | - | | | |
| Fin | | minated | | | | E Talanha | na numba | <u> </u> | |
| ☐eturn/terminated☐ Amended return | | | Number and street (or P O box if 3801 EAST FLORIDA AVE Suite 90 | mail is not delivered to street address) Room | n/suite | | E Telephone number | | |
| □ Ар | plicat | ion pending | | (303) 4 | 168-9885 | <u> </u> | | | |
| | | | DENVER, CO 80210 | ountry, and ZIP or foreign postal code | | G Gross r | acounte ¢ 1 | .29,402,073 | |
| | | | F Name and address of princi | nal officer | H(a) Tath | is a group re | • | 25,402,075 | |
| | | | STEVEN STEMPER | • | | is a group re rdinates? | eturn for | □Yes ☑ No | |
| | | | 3801 EAST FLORIDA AVE STE DENVER, CO 80210 | 909 | H(b) Are a | all subordina | tes | Yes No | |
| I Ta: | x-exe | mpt status | ✓ 501(c)(3) | ◀ (Insert no) | inclu | | list (see | : instructions) | |
| 1 W | ehsi | te: > WW | /W THECATHOLICFOUNDATION | | | p exemptior | • | • | |
| | CD31 | | THE CATHOLIC CONDAINON | | | ' ' | | | |
| K Forr | n of c | organization | ☑ Corporation ☐ Trust ☐ As | ssociation Other ► | L Year of form | nation 1998 | M State | of legal domicile CO | |
| | | | | | | | | | |
| Pa | | | <u> </u> | as most significant activities | | | | | |
| | | | scribe the organization's mission OLIC FDN INSPIRES CHARITABL | FOR MOST SIGNIFICANT ACTIVITIES LE GIVING & PLANNING THAT SPREADS | THE GOSPEL, TE | ACHES OUR | CHILDR | EN, PREPARES OUR | |
| ce | | PRIESTS, | CARES FOR OUR POOR, & STRE | NGTHENS OUR PARISHES | | | | | |
| Tel. | | | | | | | | | |
| Ven | | | | | | | | | |
| Activities & Governance | 2 | Check thi | is box $\blacktriangleright \Box$ if the organization of | discontinued its operations or disposed of | of more than 25° | % of its net a | | 1 | |
| ≈ 5 | l | | | ning body (Part VI, line 1a) | | | 3 | 14 | |
| ties | 4 | | • | of the governing body (Part VI, line 1b) calendar year 2016 (Part V, line 2a) | | | 5 | 14 | |
| Ĭ. | l | | • • | recessary) | | | 6 | 25 | |
| Ac | l | | , | art VIII, column (C), line 12 | | • | 7a | | |
| | l | | | om Form 990-T, line 34 | | | 7b | <u>'</u> | |
| | - | THE UTILITY | acca pasificas taxasic intestite ii | 5.11.15.11.15.51.1.1.1.1.1.1.1.1.1.1.1. | | ior Year | 1.5 | Current Year | |
| | 8 | Contribut | ions and grants (Part VIII, line : | 1h) | | 7,789, | 286 | 6,986,076 | |
| Ravenue | l | | service revenue (Part VIII, line : | | 0 | | | | |
| ðΛċ | 10 | Investme | ent income (Part VIII, column (A | 989, | 919 | 3,878,435 | | | |
| <u> </u> | 11 | Other rev | enue (Part VIII, column (A), lin | | 0 | (| | | |
| | 12 | Total rev | enue—add lines 8 through 11 (n | 8,779, | 205 | 10,864,51 | | | |
| | 13 | Grants ar | nd sımılar amounts paıd (Part IX | 200 | 9,784,346 | | | | |
| | 14 | Benefits | paid to or for members (Part IX, | 0 | (| | | | |
| æ | 15 | Salaries, | other compensation, employee | benefits (Part IX, column (A), lines 5–10 | 0) | 825, | 307 | 671,891 | |
| Expenses | 16 | Professio | onal fundraising fees (Part IX, co | lumn (A), line 11e) | | | 0 | (| |
| â | l | | raising expenses (Part IX, column (D) | · · · | | | | | |
| ш | l | | penses (Part IX, column (A), line | , | | 891, | | 843,726 | |
| | l | • | · | qual Part IX, column (A), line 25) | | 11,385, | | 11,299,963 | |
| <u>, </u> | 19 | Revenue | less expenses Subtract line 18 | from line 12 | Posinnin | -2,606, | | -435,452 | |
| Net Assets or Fund Balances | | | | | peginning | g of Current \ | ear | End of Year | |
| sset Safa | 20 | Total ass | ets (Part X, line 16) | | | 121,887, | 882 | 125,666,803 | |
| A P | 21 | Total liab | ulities (Part X, line 26) | | | 24,459, | 802 | 28,810,823 | |
| ŽΞ | 22 | Net asset | s or fund balances Subtract line | e 21 from line 20 | | 97,428, | 080 | 96,855,980 | |
| Pai | | | ature Block | | | | | | |
| | | | | mined this return, including accompany tell Declaration of preparer (other than of | | | | | |
| any k | _ | | | 1 1 1 | | | | | |
| | | | * | | 20 | 17-11-15 | | | |
| Sign | | Signati | ure of officer | | Da | | | | |
| Here | | DEACO | ON STEVEN STEMPER PRESIDENT | | | | | | |
| | | | r print name and title | | | | | | |
| | | | rint/Type preparer's name | Preparer's signature | Date | | PTIN | | |
| Paid | k | | dam R Smith CPA | Adam R Smith CPA | se | f-employed | P0095896 | o | |
| Pre | par | C! ⊢ | irm's name BKD LLP | h- 900 | | m's EIN ► | 474 | | |
| Use | Or | าly ็ | irm's address ► 111 South Tejon Sui | | Ph | one no (719) | 471-4290 | | |
| | | | Colorado Springs, CC | 0 809039848 | | | | | |
| May t | he IF | RS discuss | this return with the preparer sh | own above? (see instructions) | | | . 🔽 · | Yes 🗌 No | |

| Form | 990 (2016) | | | | | Page 2 | | | | | |
|------|---|---|-------------------|---------------------------|---------------------------|-------------------|--|--|--|--|--|
| Par | t IIII Stateme | nt of Program Servic | e Accomplisi | hments | | | | | | | |
| | Check if Sc | chedule O contains a respo | nse or note to a | any line in this Part III | | 🗹 | | | | | |
| 1 | | e organization's mission | | · | | | | | | | |
| | | | | | JRCH IN NORTHERN COLORADO | | | | | | |
| | | IP, TO FAITHFULLY STEW CATHOLIC ORGANIZATION | | | ED TO THE FOUNDATION, AND | TO COOPERATE WITH | | | | | |
| FARI | SHES AND OTHER C | CATHOLIC ORGANIZATION | IS TO DEVELOP | ADDITIONAL RESOURCE | S AND SUFFORT | | | | | | |
| | | | | | | | | | | | |
| 2 | Did the organization | on undertake any significa | int program serv | /ices during the year wh | ıch were not listed on | | | | | | |
| | the prior Form 990 | 0 or 990-EZ? | | | | 🗌 Yes 🗹 No | | | | | |
| | If "Yes," describe | | | | | | | | | | |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program | | | | | | | | | | |
| | services? | ervices? | | | | | | | | | |
| | If "Yes," describe | these changes on Schedul | e O | | | | | | | | |
| 4 | Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses | | | | | | | | | | |
| | Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported | | | | | | | | | | |
| | expenses, and rev | cride, if arry, for each pro | grann service rep | 501164 | | | | | | | |
| 4a | (Code |) (Expenses \$ | 3,127,889 | including grants of \$ | 3,127,889) (Revenue \$ | 0) | | | | | |
| | See Addıtıonal Data | | | | | | | | | | |
| | | | | | | | | | | | |
| 4b | (Code |) (Expenses \$ | 2,029,481 | including grants of \$ | 2,006,474) (Revenue \$ | 0) | | | | | |
| | See Additional Data | | | | | | | | | | |
| | (2.1 | | | | | | | | | | |
| 4c | (Code See Additional Data |) (Expenses \$ | 1,922,238 | including grants of \$ | 1,774,107) (Revenue \$ | 0) | | | | | |
| | See Additional Data | | | | | | | | | | |
| | See Additional Da | ta Table | | | | | | | | | |
| 4d | Other program se | rvices (Describe in Schedi | ıle O) | | | _ | | | | | |
| | (Expenses \$ | 2,930,413 incl | uding grants of | \$ 2,875,87 | 76) (Revenue \$ | 0) | | | | | |
| 4e | Total program s | ervice expenses > | 10,010,0 | 21 | | | | | | | |

Yes

Yes

Yes

Yes

1 2

3

4

5

6

7

8

9

10

11a

11b

11c

11d

11e

11f

12a

12b

13

14a

14h

15

16

17

18

19

Yes

Yes

Page 3

No

No

No

No

Nο

Nο

No

Νo

Nο

Nο

Nο

No

No

Νo

No

Nο

Νo

Form **990** (2016)

| | Checklist | of Requ | ired | Sch | edule |
|-------|--------------|-----------|--------|------|-------|
| | | | | | |
| | organization | described | ın sec | tion | 501(c |
| Cahad | ula A 🗪 | | | | |

| Is the orga | | | | | | | |
|-------------|---|---|---|---|---|---|---|
| Schedule A | 2 | • | • | ٠ | ٠ | • | ٠ |

c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete

Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆 . . . Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates

If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🕏

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 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,"

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

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

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

Section 501(c)(3) organizations.

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

assessments, or similar amounts as defined in Revenue Procedure 98-19? Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts?

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

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

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, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🛸

or X as applicable

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? . . . **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

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

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

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

29

Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's Yes current and former officers, directors, trustees, key employees, and highest compensated employees, If "Yes," 23

Nο

Νo

Nο

Nο

Nο

No

Nο

Nο

Nο

No

Nο

No

Nο

Yes

Yes

Yes

Yes

Yes

Form 990 (2016)

35a

35h

36

37

28b

the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of 24a

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c **d** Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

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

24d

25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 25b 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? 26

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 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, 28a

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . . 🥞

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

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

29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. Part I . 31

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

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

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

33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and 34

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.

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 🛸

| orm | 990 (2016) | | | Page 5 |
|----------|--|-----|----------|---------------|
| Par | t V Statements Regarding Other IRS Filings and Tax Compliance | | | |
| | Check if Schedule O contains a response or note to any line in this Part V | | <u> </u> | |
| | | | Yes | No |
| | Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 4 | | | |
| | Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0 | | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1c | 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 | | | |
| L | this return | 2b | Yes | |
| U | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | | 103 | |
| 3a | Did the organization have unrelated business gross income of $$1,000$ or more during the year? | 3a | Yes | |
| b | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O | 3b | Yes | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | | No |
| b | If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) | | | |
| 52 | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | No |
| | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | | | No |
| | | 5b | | |
| С | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? | 5c | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? | 6a | | No |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | |
| 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 | | No |
| | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | |
| | 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 | | No |
| | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | | No |
| | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | No |
| 10 | Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 | | | |
| | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b | | | |
| | Section 501(c)(12) organizations. Enter | | | |
| | Gross income from members or shareholders | | | |
| | Gross income from other sources (Do not net amounts due or paid to other sources | | | |
| | against amounts due or received from them) | | | |
| | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | |
| 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 | | | |
| С | Enter the amount of reserves on hand | | | |
| | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | No |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O | 14b | | |
| | | | orm 00 | 0 (201 |

| Par | t VI | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions | ' 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 | - | | | | | | | | |
| 1.5 | Enter | the number of voting members of the governing body at the end of the tax year | | Yes | No | | | | | | |
| Ia | Lince | 14 | | | | | | | | | |
| | body, | ere are material differences in voting rights among members of the governing, or if the governing body delegated broad authority to an executive committee or ar committee, explain in Schedule O | | | | | | | | | |
| b | Enter | the number of voting members included in line 1a, above, who are independent 1b 14 | | | | | | | | | |
| 2 | | ny officer, director, trustee, or key employee have a family relationship or a business relationship with any other ir, director, trustee, or key employee? | 2 | | No | | | | | | |
| 3 | | ne organization delegate control over management duties customarily performed by or under the direct supervision icers, directors or trustees, or key employees to a management company or other person? | 3 | | No | | | | | | |
| 4 | Did th | he organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | No | | | | | | |
| 5 | Did th | he organization become aware during the year of a significant diversion of the organization's assets? | 5 | | No | | | | | | |
| 6 | | | | | | | | | | | |
| 7a | | | | | | | | | | | |
| | 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? | | | | | | | | | | |
| Ь | b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | | | | | | | | | | |
| 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following | | | | | | | | | | | |
| а | a The governing body? | | | | | | | | | | |
| b | | | | | | | | | | | |
| | orgar | ere any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the nization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i> | 9 | | No | | | | | | |
| Se | Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No | | | | | | | | | | |
| 10a | Did th | he organization have local chapters, branches, or affiliates? | 10a | res | No No | | | | | | |
| | If "Ye | es," did the organization have written policies and procedures governing the activities of such chapters, affiliates, oranches to ensure their operations are consistent with the organization's exempt purposes? | 10b | | -110 | | | | | | |
| 11a | | the organization provided a complete copy of this Form 990 to all members of its governing body before filing the | | | | | | | | | |
| h | | ribe in Schedule O the process, if any, used by the organization to review this Form 990 | 11a | Yes | | | | | | | |
| | | the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | Yes | | | | | | | |
| | | officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to | 120 | -103 | | | | | | | |
| | confli | cts? | 12b | Yes | | | | | | | |
| | Sched | dule O how this was done | 12c | Yes | | | | | | | |
| 13 | | he organization have a written whistleblower policy? | 13 | Yes | | | | | | | |
| 14 | | he organization have a written document retention and destruction policy? | 14 | Yes | | | | | | | |
| 15 | perso | the process for determining compensation of the following persons include a review and approval by independent ons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | | | | | | | |
| a | | organization's CEO, Executive Director, or top management official | 15a | Yes | | | | | | | |
| b | | r officers or key employees of the organization | 15b | | No | | | | | | |
| 160 | | es" to line 15a or 15b, describe the process in Schedule O (see instructions) he organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a | | | | | | | | | |
| | taxab | ole entity during the year? | 16a | | No | | | | | | |
| b | ın joli | es," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in the venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt is with respect to such arrangements? | 16b | | | | | | | | |
| | | C. Disclosure | | | | | | | | | |
| 17 | | he States with which a copy of this Form 990 is required to be filed | | | | | | | | | |
| 18 | availa | on 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) able for public inspection. Indicate how you made these available. Check all that apply | | | | | | | | | |
| 19 | | Dwn website LI Another's website LI Upon request LI Other (explain in Schedule O) ribe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest | | | | | | | | | |
| _, | | , and financial statements available to the public during the tax year | | | | | | | | | |
| 20 | | the name, address, and telephone number of the person who possesses the organization's books and records ORGANIZATION 3801 EAST FLORIDA AVENUE STE 909 DENVER, CO 80210 (303) 468-9885 | | | | | | | | | |

(10) REV RANDY DOLLINS DIRECTOR

THE BOARD THRU 9/2016

(12) SAM PERRY

(13) TONY CHURCH SECRETARY

(14) WILLIAM LEER

(15) RANDY HAMMOND

DIRECTOR THRU 1/2016

DIRECTOR THRU 1/2016

DIRECTOR THRU 1/2016

(17) SUZAN LAVELLE

(16) MARGUERITE HUNTER

DIRECTOR

DIRECTOR

(11) ROBERT ZARLENGO - CHAIRMAN OF

Part VII

✓

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

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

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

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

- year • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount
- of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid • List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

| or reportable compensation from the organization | Tana any relate | sa organ | IIZG CI | 0113 | | | | | | | |
|--|--|-----------------------------------|------------------------|----------------------|----------------------------------|------------------------------|---------|---|--|--|--|
| • List all of the organization's former director organization, more than \$10,000 of reportable co | | | | | | | | | | | |
| List persons in the following order individual trus compensated employees, and former such person | | rs, ınstı | tutioi | nal t | :rust | ees, o | office | ers, key employees | s, highest | | |
| Check this box if neither the organization no | r any related or | rganızat | ion c | omp | ens | ated a | any o | current officer, dire | ctor, or trustee | | |
| (A) Name and Title | (B) Average hours per week (list any hours for related | pers and | n on on is a dir | e bo both ecto | t che ox, u h an or/tri | inless office ustee) | er) | (D) Reportable compensation from the organization (W- 2/1099- | (E) Reportable compensation from related organizations (W- 2/1099- | (F) Estimated amount of other compensation from the organization and | |
| | organizations below dotted line) | Individual trustee or director | Institutional Trustee | Officer | key employee | Highest compensated employee | Former | MISC) | MISC) | related organizations | |
| (1) ARCHBISHOP SAMUEL J AQUILA | 1 0 | | | | | | | | | | |
| DIRECTOR | 0 0 | X | | | | | | U | 0 | 0 | |
| (2) BOB GROSS | 1 0 | | | | | | | | | | |
| VICE CHAIR | 0 0 | X | | | | | | U | 0 | 0 | |
| (3) DOMINIC PALAZZO | 1 0 | | | , | | | | | | | |
| TREASURER thru 9/2016 | 1 0 | × | | X | | | | U | 0 | 0 | |
| (4) FRAN COMBS | 1 0 | | | | | | | | | | |
| DIRECTOR thru 3/2016 | 0.0 | × | | | | | | 0 | 0 | 0 | |
| (5) JOE DESPLINTER DIRECTOR | 1 0 | х | | | | | | 0 | 0 | 0 | |
| | 00 | 1 | | - | - | | | | | | |
| (6) JOHN ZIMMERMAN | | x | | | | | | 0 | О | 0 | |
| DIRECTOR | 0.0 | | | <u> </u> | | | - | | | | |
| (7) MICHAEL JANSEN | 1 0 | × | | | | | | 0 | o | 0 | |
| DIRECTOR | 0 0 | | | | | | | - | - | - | |
| (8) NANCY BAUMAN | 1 0 | | | | | [| | | 0 | 0 | |
| DIRECTOR | 0 0 | × | | | | | | U | U | <u> </u> | |
| (9) NORMA FRANK | 1 0 | × | | | | | | | 0 | | |
| Chair | 1 0 | | | | | | | | 0 | 0 | |
| | | † | | - | - | - | _ | | | | |

1 0

> 10 1 0

0.0 1 0

0 0

Χ

Х

Х

Х

Х

Χ

Χ

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

Form 990 (2016)

Form 990 (2016) Page 8

| Form 990 (2016) | | | | | | | | | | | Page 8 | |
|--|---|-----------------------------------|---|---------|--|------------------------------|--|--------------------|----------------------|---|--------------------------------------|------------------------------------|
| Part VII Section A. Officers, Directors | s, Trustees, K | ey Em | ploy | ees | , an | nd Hig | he | st Compensated | Employees (con | tinued) | | |
| (A) Name and Title | week (list shoth an officer and a from the any hours director/trustee) organization (W- | | ition (do not check more none box, unless person both an officer and a director/trustee) Reportable compensation compensation from the organization (Woorganization) | | Position (do not check more than one box, unless person is both an officer and a director/trustee) Position (do not check more than one box, unless person from the organization (V | | not check more x, unless person officer and a or/trustee) | | | Reportable compensation from related organizations | Estim amount of compen from | ated of other isation the |
| | for related organizations below dotted line) | Individual trustee or director | Institutional Trustee | Officer | key employee | Highest compensated employee | Former | 2/1099-MISC) | (W- 2/1099- MISC) | organizat relat organiz | ted | |
| (18) DEACON MARK SALVATO DIRECTOR THRU 1/2016 | 10 | × | | | | | | 0 | C | | 0 | |
| (19) JIM BARON DIRECTOR | 10 | × | | | | | | 0 | C | ı | 0 | |
| (20) ALLEN ROSS | 1 0 | | | | | | | 0 | 0 | | | |
| DIRECTOR | 0.0 | ^ | | | | | | | | | U | |
| (21) BISHOP JORGE RODRIGUEZ | 1 0 | ., | | | | | | | | | | |
| DIRECTOR | 0.0 | | | | | | | 0 | <u> </u> | | | |
| (22) DAVID FANTZ | | | | x | | | | 89,698 | C | , | 13,290 | |
| ADMINISTRATIVE OFFICER (23) STEVEN STEMPER | 27 0 40 0 | | | | | | | | | | | |
| PRESIDENT AND CEO | | | | Х | | | | 193,967 | C | 1 | 33,532 | |
| (24) MICHELLE FEHN - DIRECTOR OF | 16 0 | | | | | × | | 135,793 | C | | 11,820 | |
| ACCOUNTING AND OPERATIONS | 24 0 | | | | | | | 155,795 | | | | |
| | | | | | | | | | | | | |
| 1b Sub-Total | VII, Section A | | | | 1 | - | • | | | | | |
| d Total (add lines 1b and 1c) | | | | | 1 | • | | 419,458 | 0 | | 58,642 | |
| 2 Total number of individuals (including bu of reportable compensation from the org | | those lis | sted : | abov | /e) v | vho re | ceıv | ed more than \$100 | ,000 | | | |
| | | | | | | | | | | Yes | No | |
| 3 Did the organization list any former office line 1a? <i>If "Yes," complete Schedule J for</i> | , | | key (| | loye • | e, or h | nighe | est compensated er | · ' | | N | |
| , , | | | | • | • | | • | | 3 | | No | |
| 4 For any individual listed on line 1a, is the organization and related organizations gr | | | | | | | | | ne | | | |

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

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

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

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

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

Name and business address

4

5

Description of services

INVESTMENT MGMT

Yes

Νo

115,752

(C)

Compensation

Form 990 (2016)

Section B. Independent Contractors

compensation from the organization ▶ 1

5

1

FIR TREE INC.

505 FIFTH AVENUE 23RD FLOOR NEW YORK, NY 10017

| Part | VIII Statement o | f Revenue | | | | | |
|--|--|-------------------------------|---------------------|---|--------------------------------|--------------------------------|--|
| | Check If Schedu | ile O contains a resp | onse or note to any | Ine in this Part VIII (A) Total revenue | (B) Related or exempt function | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections |
| ats nts | 1a Federated campaig b Membership dues | | | | revenue | revenue | 512-514 |
| ifts, Grar ar Amou | c Fundraising events d Related organization | 1c | | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | Government grants (c) f All other contributions and similar amounts r above | s, gifts, grants, | 6,986,076 | | | | |
| Contrib | g Noncash contributi in lines 1a-1f \$ h Total.Add lines 1a- | 2,4 | 34,76 <u>5</u> ▶ | 6,986,076 | | | |
| 3 | | | Business | Code | | | |
| Service Revenue | 2a | | | | | | |
| υ Q | b ———— | | | | | | |
| Ϋ́ | | | | | | | |
| % = | l a | | | | | | |
| Program | f All other program se | ervice revenue | | | | | |
| ě | gTotal. Add lines 2a-2 | 2f | > | 0 | | | |
| | 3 Investment income (| including dividends, | ınterest, and other | 1 | | T | |
| | similar amounts) | | • | 1,254,02 | 0 | 906,934 | 347,088 |
| | 4 Income from investment 5 Royalties | | | | 0 | | |
| | 3 Royaldes | (ı) Real | (II) Personal | | | | |
| | 6a Gross rents | ,, | . , | - | | | |
| | b Less rental expenses | | | | | | |
| | c Rental income or (loss) | (| 0 | | | | |
| | d Net rental income of | or (loss) | • • • | 1 | 0 | | |
| | 7a Gross amount from sales of assets other than inventory | (i) Securities 121,161,975 | (II) Other | | | | |
| | b Less cost or other basis and sales expenses | 118,537,562 | | | | | |
| | C Gain or (loss) | 2,624,413 | 3 | 2 624 44: | | | 2 624 442 |
| | d Net gain or (loss) 8a Gross income from t | | • | 2,624,413 | 3 | | 2,624,413 |
| Other Revenue | (not including \$ contributions report See Part IV, line 18 | of ed on line 1c) a | | | | | |
| ά | b Less direct expense c Net income or (loss) | | lonts |] | 0 | | |
| Othe | 9a Gross income from a See Part IV, line 19 | gaming activities | vents • | | | | |
| | b Less direct expense | a esb | 0 | | | | |
| | c Net income or (loss) | | ties | 1 | 0 | | |
| | 10aGross sales of inven returns and allowan | | 0 | | | | |
| | b Less cost of goods | sold Ł | 0 | | | | |
| | C Net income or (loss) | | | | 0 | | |
| | Miscellaneous 11a | s Revenue | Business Code | | | | |
| | b | | | | | | |
| | с | | | | | | |
| | | | | | | | |
| | d All other revenue . e Total. Add lines 11a | | • | | | | |
| | 12 Total revenue. See | | | | 0 | | |
| | | | • • • | 10,864,51 | 1 | 906,934 | 2,971,501 Form 990 (2016) |

| Forn | n 990 (2016) | | | | Page 10 |
|-----------|---|-----------------------|------------------------------|-------------------------------------|----------------------------|
| | rt IX Statement of Functional Expenses ion 501(c)(3) and 501(c)(4) organizations must complete all co | lumns All other orga | ınızatıons must comp | lete column (A) | |
| | Check if Schedule O contains a response or note to any | line in this Part IX | | | 🗆 |
| Do 7b, | not include amounts reported on lines 6b, 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 | 9,780,346 | 9,780,346 | | |
| 2 | Grants and other assistance to domestic individuals See Part IV, line 22 | 0 | | | |
| 3 | Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16 | 4,000 | 4,000 | | |
| 4 | Benefits paid to or for members | 0 | | | |
| 5 | Compensation of current officers, directors, trustees, and key employees | 81,851 | 0 | 81,851 | 0 |
| 6 | Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$ | 0 | | | |
| 7 | Other salaries and wages | 469,719 | | 336,036 | 133,683 |
| 8 | Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions) | 33,683 | | 29,483 | 4,200 |
| 9 | Other employee benefits | 24,172 | | 23,045 | 1,127 |
| 10 | Payroll taxes | 62,466 | | 57,440 | 5,026 |
| | Fees for services (non-employees) | | | | |
| | Management | 0 | | | |
| | Legal | 5,301 | | 5,301 | |
| | _ ⁻ _ | 61,232 | | 61,232 | |
| | ⁻ | 01,232 | | 01,232 | |
| | Lobbying | 0 | | | |
| | Professional fundraising services See Part IV, line 17 | - | | | |
| | Investment management fees | 41,819 | | 41,819 | |
| _ | Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) | 54,280 | | 4,111 | 50,169 |
| 12 | Advertising and promotion | 25,850 | 4,010 | 0 | 21,840 |
| 13 | Office expenses | 62,829 | 513 | 29,684 | 32,632 |
| 14 | Information technology | 47,800 | | 47,800 | |
| 15 | Royalties | 0 | | | |
| 16 | Occupancy | 136,215 | | 136,215 | |
| 17 | Travel | 33,537 | | | 33,537 |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials . | 0 | | | |
| 19 | Conferences, conventions, and meetings | 35,958 | | 31,458 | 4,500 |
| 20 | Interest | 172,637 | 171,138 | 1,499 | |
| 21 | Payments to affiliates | 0 | | | |
| 22 | Depreciation, depletion, and amortization | 45,090 | | 45,090 | |
| | Insurance | 44,564 | 33,333 | 11,231 | |
| | Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) | · | · | , | |
| | a DUES/LICENSES/FEES | 10,963 | | 10,963 | |
| | L. DEVELOPMENT MARKETING | 44.346 | | | 44.345 |
| | b DEVELOPMENT MARKETING | 44,246 | | | 44,246 |
| , | c ROSARIES & PRAYER BOOKS | 16,681 | 16,681 | | |
| | d OTHER | 4,724 | | 4,724 | |
| | e All other expenses | | | | |
| | Total functional expenses. Add lines 1 through 24e | 11,299,963 | 10,010,021 | 958,982 | 330,960 |
| | Joint costs. Complete this line only if the organization | - | | | |
| | reported in column (B) joint costs from a combined educational campaign and fundraising solicitation | | | | |

Form **990** (2016)

Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

Page **11**

33.760.265

72.148.331

1.087.683

389,291 318,726

46,487

0

0

0

O

3.466.669

24.589.650

28,810,823

47.236.175

48,585,992

1.033.813

96,855,980

125.666.803

Form **990** (2016)

125,666,803

0

0

47.904.419

50.047.201

574.863

390.818

118,972

49,730

0 20

0 21

0 22

3.466.669

20.433.613

24,459,802

48.956.346

47,437,921

1.033.813

97,428,080

121,887,882

121,887,882

11

12

13

15

16

17

18

19

23

24

25

26

27

28

29

30

31 32

33

34

0 14

Form 990 (2016)

11

12

13 14

15

16

17

18

19

20

21

23

24

25

26

27

28

29

31

32

33

34

Liabilities 22

Fund Balances

Assets or 30

Net

Investments—publicly traded securities .

Intangible assets

Other assets See Part IV, line 11 .

Grants payable . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

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)

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

Total liabilities. Add lines 17 through 25 .

Investments—other securities See Part IV, line 11 .

Investments—program-related See Part IV, line 11

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

Escrow or custodial account liability Complete Part IV of Schedule D

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

| | beginning or year | | Life of year |
|--|-------------------|---|--------------|
| 1 Cash-non-interest-bearing | 243,423 | 1 | 387,363 |
| 2 Savings and temporary cash investments | 3,888,279 | 2 | 2,989,048 |
| 3 Pledges and grants receivable, net | 16,789,066 | 3 | 12,907,262 |
| 4 Accounts receivable, net | 6,400 | 4 | 7,000 |
| Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. | 0 | 5 | 0 |

| | | , , | | | | | |
|--------|-----|---|---|-----------|------------|---------|------------|
| | 3 | Pledges and grants receivable, net | | | 16,789,066 | 3 | 12,907,262 |
| | 4 | Accounts receivable, net | | | 6,400 | 4 | 7,000 |
| | 5 | Loans and other receivables from current and for trustees, key employees, and highest compensa II of Schedule L | 0 | 5 | 0 | | |
| | 6 | Loans and other receivables from other disquali section 4958(f)(1)), persons described in sectio contributing employers and sponsoring organiza- voluntary employees' beneficiary organizations Part II of Schedule L | s(c)(3)(B), and of section 501(c)(9) | 0 | 6 | 0 | |
| ets | 7 | Notes and loans receivable, net | | 124,775 | 7 | 118,501 | |
| Assets | 8 | Inventories for sale or use | | 0 | 8 | 0 | |
| Ø | 9 | Prepaid expenses and deferred charges | | | 80,820 | 9 | 99,567 |
| | 10a | Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D | 10a | 2,407,064 | | | |
| | b | Less accumulated depreciation | 10b | 245,281 | 2,228,636 | 10c | 2,161,783 |
| | | | | | | | |

Yes

Nο

Form 990 (2016)

2c

3a

3b

of the audit, review, or compilation of its financial statements and selection of an independent accountant?

Audit Act and OMB Circular A-133?

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

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

Additional Data

Software ID:

Software Version:

EIN: 84-1481641

Name: The Catholic Foundation No Colorado

Form 990 (2016)

Form 990, Part III, Line 4a: THROUGH THE FUNDING OF RELIGIOUS EDUCATION, CATECHIST TRAINING, AND CURRICULUM DEVELOPMENT, THE FOUNDATION HELPS SPREAD THE GOSPEL

Form 990, Part III, Line 4b: COMMITTED TO TEACHING OUR CHILDREN, THE CATHOLIC FOUNDATION AWARDS GRANTS TO CATHOLIC SCHOOLS ACROSS NORTHERN COLORADO TO BENEFIT SCHOLARSHIP PROGRAMS, PROVIDE TUITION ASSISTANCE, AND ENABLE THE SCHOOLS TO PROVIDE A JUST WAGE TO THEIR TEACHERS

Form 990, Part III, Line 4c: THE CATHOLIC FOUNDATION SUPPORTS THE PREPARATION OF PRIESTS THROUGH GRANTS, SUPPORTING THE OPERATIONS AND NEEDS OF ST. JOHN VIANNEY THEOLOGICAL SEMINARY AND REDEMPTORIS MATER MISSIONARY SEMINARIES

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

| SEE SCH O, PART II | II, LINE 4D NARRATIVE | | | |
|--------------------|-----------------------|----------------------------------|-------------------------|----|
| (Code |) (Expenses \$ | 2,930,413 including grants of \$ | 2,875,876) (Revenue \$ | 0) |

FOR DETAIL ON OTHER PROGRAMS

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

| efile | GR/ | APHIC prii | nt - DO NOT PROCE | SS | As Filed Data - | | | DLN: 9 | 3493319064587 |
|-------|-------------|---------------------------|---|--------------------|--|---|--------------------|---|---|
| SCI | IED | ULE A | Publi | ic C | harity Statu | s and Pub | olic Supp | ort | OMB No 1545-0047 |
| (For | m 990 | | | he org | anization is a sect | ion 501(c)(3) d | organization o | | 2016 |
| 990E | (Z) | | | | 947(a)(1) nonexe ► Attach to Form 9 | | | | 2010 |
| | | the Treasury | ► Information a | | Schedule A (Form | | | ıctions is at | Open to Public Inspection |
| Name | e of th | ue Service ne organiza | | | www.ns.ge | <u> </u> | | Employer identific | <u>`</u> |
| he Ca | tholic F | Foundation No | Colorado | | | | | 84-1481641 | |
| Pai | | | for Public Charity S | | | | | See instructions. | |
| | rganız | | a private foundation beca | | • | • | | (A)(') | |
| 1 | | • | onvention of churches, o | | | | | (A)(I). | |
| 2 | | | scribed in section 170(| | | · | | | |
| 3 | | • | or a cooperative hospital | | - | | | | |
| 4 | | name, city, | esearch organization ope and state | | | - | | | · |
| 5 | | | ation operated for the be (iv). (Complete Part II) | | of a college or univer | sity owned or op | perated by a gov | ernmental unit descri | bed in section 170 |
| 6 | | A federal, s | tate, or local governmer | nt or g | overnmental unit de | scribed in sectio | on 170(b)(1)(A | ۸)(v). | |
| 7 | ✓ | | ation that normally recei ^r ' 0(b)(1)(A)(vi). (Comp | | | s support from a | governmental (| unit or from the gener | al public described in |
| 8 | | A communi | ty trust described in sec | ction 1 | L70(b)(1)(A)(vi) | Complete Part I | I) | | |
| 9 | | | ural research organizatio rant college of agricultur | | | | | | ege or university or a |
| LO | | from activit | ation that normally receives related to its exempt income and unrelated because section 509(a)(2). | t funct ousines | nons—subject to cert ss taxable income (le | ain exceptions, a | and (2) no more | than 331/3% of its su | pport from gross |
| 1 | | • | ation organized and oper | • | • | public safety S | ee section 509 | (a)(4). | |
| 12 | | more public | ation organized and oper ly supported organization through 12d that descr | ons de | scribed in section 5 | 09(a)(1) or sec | tion 509(a)(2 |). See section 509(a | |
| а | | Type I. A so | supporting organization on the supporting organization on the supporting the supporting | operat arly app | ed, supervised, or co | ontrolled by its si | upported organı | zation(s), typically by | |
| b | | Type II. A manageme | supporting organization nt of the supporting organization plete Part IV, Sections | super anızatı | on vested in the san | | | | |
| С | | Type III f | unctionally integrated organization(s) (see insti | I. A su | pporting organization | | | | ited with, its |
| d | | Type III n | on-functionally integrated The organizes | rated. zation (| A supporting organi generally must satisf | zation operated i y a distribution i | in connection w | th its supported orgai | |
| e | | Check this | box if the organization re or Type III non-function | eceive | d a written determin | ation from the II | RS that it is a Ty | /pe I, Type II, Type II | I functionally |
| f | Enter | | of supported organization | | g. acca sapporting | o. gamzacion | | | |
| g | | | ing information about th | ne sup | ported organization(| s) | | | • |
| (i)Na | ame of | f supported (| organization (ii)EIN | | (iii) Type of organization (described on lines 1- 10 above (see instructions)) | (iv Is the organiz your governin | ation listed in | Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
| | | | | | | Yes | No | 1 | |
| | | | | + | | | | | |
| | | | | | | | | | |
| Total | | | tion Act Notice, see th | | _ | Cat No 11285 | | Schedule A (Form 9 | |

| Scł | nedule A (Form 990 or 990-EZ) 2016 | | | | | | Page 2 |
|-----|---|----------------------------|----------------------|---------------------|-----------------------------|--------------------|------------------|
| | Part II Support Schedule for | Organizations I | Described in Se | ctions 170(b) | (1)(A)(iv) and | 170(b)(1)(A) | (vi) |
| | (Complete only if you ch | ecked the box or | n line 5, 7, 8, or | 9 of Part I or if | the organization | failed to qualify | under Part |
| | III. If the organization fa | alls to qualify und | der the tests liste | ed below, please | e complete Part | III.) | |
| | Section A. Public Support | | | | | | |
| | Calendar year (or fiscal year beginning in) ▶ | (a)2012 | (b) 2013 | (c)2014 | (d) 2015 | (e) 2016 | (f)Total |
| 1 | Gifts, grants, contributions, and | | | | | | |
| | membership fees received (Do not | 32,692,933 | 6,120,642 | 8,938,493 | 7,789,286 | 6,986,076 | 62,527,430 |
| _ | include any "unusual grant ") | | | | | | |
| 2 | Tax revenues levied for the organization's benefit and either paid | | | | | | |
| | to or expended on its behalf | | | | | | 0 |
| | ' <u> </u> | | | | | | |
| 3 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to the organization without charge | | | | | | 0 |
| 4 | Total. Add lines 1 through 3 | 32,692,933 | 6,120,642 | 8,938,493 | 7,789,286 | 6,986,076 | 62,527,430 |
| 5 | The portion of total contributions by | | -,, | -,, | .,, | .,, | ,, |
| _ | each person (other than a | | | | | | |
| | governmental unit or publicly | | | | | | 4 000 446 |
| | supported organization) included on line 1 that exceeds 2% of the | | | | | | 4,929,446 |
| | amount shown on line 11, column (f) | | | | | | |
| | , , , , , | | | | | | |
| 6 | Public support. Subtract line 5 | | | | | | 57,597,984 |
| _ | from line 4 | | | | | | · · |
| | Section B. Total Support Calendar year | Т | | | | | |
| | (or fiscal year beginning in) ▶ | (a)2012 | (b) 2013 | (c)2014 | (d)2015 | (e)2016 | (f) Total |
| 7 | Amounts from line 4 | 32,692,933 | 6,120,642 | 8,938,493 | 7,789,286 | 6,986,076 | 62,527,430 |
| 8 | | | | | | | _ |
| | dividends, payments received on | 609,650 | 508,270 | 712,214 | 599,230 | 347,088 | 2,776,452 |
| | securities loans, rents, royalties and income from similar sources | | | | | | |
| 9 | | | | | | | |
| | activities, whether or not the | | | | | 500,083 | 500,083 |
| | business is regularly carried on | | | | | | |
| 10 | Other income Do not include gain or loss from the sale of capital | | | | | | 0 |
| | assets (Explain in Part VI) | | | | | | Ū |
| 11 | | | | | | | 65,803,965 |
| | 10 | | > | | | T T | · · · |
| | Gross receipts from related activities, | | | | | 12 | 7,652 |
| 13 | First five years. If the Form 990 is fo | - | | | • | • • • • • | nization, |
| | check this box and stop here | | | | | ▶⊔ | |
| _ : | Section C. Computation of Public | Support Perce | entage | | | | |
| 14 | Public support percentage for 2016 (lir | ne 6, column (f) div | rided by line 11, co | lumn (f)) | | 14 | 87 530 % |
| | Public support percentage for 2015 Sc | | | | | 15 | 89 049 % |
| 16 | a 33 1/3% support test—2016. If the | organization did n | ot check the box o | n line 13, and line | 14 is 33 1/3% or | more, check this b | ox |
| | and stop here. The organization quali | | | | | | ▶ ☑ |
| | 33 1/3% support test—2015. If th | e organization did i | not check a box on | line 13 or 16a, ar | nd line 15 is 33 1/3 | 3% or more, check | |
| | box and stop here. The organization | | | | | | ightharpoons |
| 17 | a 10%-facts-and-circumstances test | t —2016. If the org | anization did not cl | neck a box on line | 13, 16a, or 16b, | and line 14 | |
| | is 10% or more, and if the organizatio | n meets the "facts- | and-circumstances | test, check this | box and stop her | e. Explain | |

in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

b 10%-facts-and-circumstances test—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.

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

organization

instructions

supported organization

ightharpoons

▶□

Schedule A (Form 990 or 990-FZ) 2016

| ection A. Public Support | | | | | | | | | | |
|--|----|--|--|--|--|--|--|--|--|--|
| the organization fails to qualify under the tests listed below, please complete Part II.) | | | | | | | | | | |
| (Complete only if you checked the box on line 10 of Part 1 or if the organization failed to qualify under Part 11. I | ίT | | | | | | | | | |

| Se | ection A. Public Support | | | | | | |
|----------|--|--------------------|---------------------|----------------------|---------------------|--------------------|---------------------------|
| | Calendar year | (a)2012 | (b) 2013 | (c)2014 | (d)2015 | (e) 2016 | (f)Total |
| 1 | (or fiscal year beginning in) ► Gifts, grants, contributions, and | | | | | | |
| _ | membership fees received (Do not | I | | | | | |
| | ınclude any "unusual grants`") | <u> </u> | | | | | |
| 2 | Gross receipts from admissions, | I | | | | | |
| | merchandise sold or services performed, or facilities furnished in | I | | | | | |
| | any activity that is related to the | I | | | | | |
| | organization's tax-exempt purpose | I | | | | | |
| _ | Cross receipts from activities that are | | | | | | |
| 3 | Gross receipts from activities that are not an unrelated trade or business | I | | | | | |
| | under section 513 | I | | | | | |
| 4 | Tax revenues levied for the | | | | | | |
| | organization's benefit and either paid | I | | | | | |
| 5 | to or expended on its behalf The value of services or facilities | | | | | | |
| , | furnished by a governmental unit to | I | | | | | |
| | the organization without charge | ļ | | | | | |
| 6 | Total. Add lines 1 through 5 | <u></u> | | | | | |
| 7a | Amounts included on lines 1, 2, and 3 received from disqualified persons | I | | | | | |
| | 5 received from disqualified persons | <u> </u> | | | | | |
| b | Amounts included on lines 2 and 3 | | | | | | |
| | received from other than disqualified | I | | | | | |
| | persons that exceed the greater of \$5,000 or 1% of the amount on line | I | | | | | |
| | 13 for the year | I | | | | | |
| C | Add lines 7a and 7b | | | | | | |
| 8 | Public support. (Subtract line 7c | | | | | | |
| | from line 6) | | | | | | |
| 31 | ection B. Total Support | Г | 1 | T | Т | | |
| | Calendar year (or fiscal year beginning in) ▶ | (a)2012 | (b) 2013 | (c)2014 | (d) 2015 | (e) 2016 | (f)Total |
| 9 | Amounts from line 6 | | | | | | |
| .0a | Gross income from interest, | | | | | | |
| | dividends, payments received on | | | | | | |
| | securities loans, rents, royalties and | | | | | | |
| ь | income from similar sources Unrelated business taxable income | | | | | | |
| U | (less section 511 taxes) from | | | | | | |
| | businesses acquired after June 30, | | | | | | |
| | 1975 | | | | | | |
| | Add lines 10a and 10b Net income from unrelated business | | | | | | |
| 11 | activities not included in line 10b, | | | | | | |
| | whether or not the business is | | | | | | |
| | regularly carried on | | | | | | |
| 12 | Other income Do not include gain or loss from the sale of capital assets | | | | | | |
| | (Explain in Part VI) | | | | | | |
| 13 | Total support. (Add lines 9, 10c, | | | | | | |
| | 11, and 12) First five years. If the Form 990 is fo | r the organization | te first second the | hird fourth or fift | | ction 501/c)(2) a: | raanization |
| 14 | check this box and stop here | Tale organización | r a mac, second, ti | ma, iourtii, or iiit | ii tax yeai as a se | CCOT 301(C)(3) 01 | yanızatıon, ► □ |
| <u> </u> | ection C. Computation of Public | Support Perce | ntage | | | | |
| 15 | Public support percentage for 2016 (lin | | | column (f)) | | 15 | |
| 16 | Public support percentage from 2015 S | | · · | (.,, | | 16 | |
| | ection D. Computation of Invest | <u> </u> | | | | 10 | |
| 17 | Investment income percentage for 20: | | | line 13, column (f |)) | 17 | |
| 18 | Investment income percentage from 2 | | | ,(| •• | 18 | |
| | 331/3% support tests—2016. If the | | | on line 14, and lir | e 15 is more than | | e 17 is not |
| | more than 33 1/3%, check this box and | | | | | | ▶ □ |
| | 33 1/3% support tests—2015. If the | | | | | | . — |

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

ightharpoons

ightharpoons

Schedule A (Form 990 or 990-EZ) 2016

6

7

8

10a

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 Yes No

Page 4

5c

6

7

8

9a

9b

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2016

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

| эa | Did the organization have a supported organization described in section 301(c)(4), (5), or (6), it res, 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 | | | | | |
| С | Old 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 | | | | | |
| | | | | | | |

| | 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 in Part I, answer (b) and (c) below | 4a | |
| b | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported | | |
| | organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations | 4b | |
| | Supervised by or in connection with its supported organizations | | |

| | 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 | | | |
| 4a | Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you | | | |
| | checked 12a or 12b in Part I, answer (b) and (c) below | | | |
| 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 | 4b | | |
| С | upervised by or in connection with its supported organizations Oid the organization support any foreign supported organization that does not have an IRS determination under sections | | | |
| | 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support | | | |
| | to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes | | | |
| 5a | Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and | | | |

| 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 supervised by or in connection with its supported organizations | 4b | |
| С | Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support | | |
| | to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes | 4c | |
| 5a | Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the | | |
| | organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by | 5a | |

| U | bld the organization have ditinate control and discretion in deciding whether to make grants to the foreign supported | | | | |
|----|--|----|--|--|--|
| | organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations | 4b | | | |
| С | Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support | | | | |
| | to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes | | | | |
| 5a | Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the | | | | |
| | organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document) | 5a | | | |
| b | Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the | | | | |
| | organization's organizing document? | 5b | | | |

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

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,"

than (i) its supported organizations, (ii) 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 make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

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

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

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.

provide detail in Part VI.

answer line 10b below

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.

| 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 | | | | | |
| C- | ection B. Type I Supporting Organizations | | | | | | |
| se | ection B. Type I Supporting Organizations | | Yes | No | | | |
| 1 | Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint of | ır 🗆 | 1.03 | "" | | | |
| | elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Pa | | | | | | |
| | VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or | | | | | | |
| | trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such | | | | | | |
| | powers during the tax year | 1 | | | | | |
| 2 | 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 | | | | | | |
| | | | • | • | | | |
| Se | ection C. Type II Supporting Organizations | | Yes | N. | | | |
| 1 | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees | of [| res | No | | | |
| 1 | were a majority of the organization's directors of trustees during the tax year also a majority of the directors of trustees each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the | or | | | | | |
| | supporting organization was vested in the same persons that controlled or managed the supported organization(s) | | | | | | |
| | | | | | | | |
| | | 1 | | | | | |
| | | | | • | | | |
| Se | ection D. All Type III Supporting Organizations | | Τ., | | | | |
| | Did the appropriate any would be each of the grown which are not the best first first of the COL seconds of the | , | 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? | <u> </u> | - | <u> </u> | | | |
| 2 | Were any of the organization's officers directors or trustoes either (1) appointed or elected by the supported | n 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) | <u> </u> | | | | | |
| _ | Divinion of the valeting described in (2) did the surround of | 2 | | | | | |
| 3 | By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in torganization's investment policies and in directing the use of the organization's income or assets at all times during the t | | | | | | |
| | year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard | 3 | | | | | |
| | | | | | | | |
| | ection E. Type III Functionally-Integrated Supporting Organizations | | | | | | |
| 1 | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instr | actions) | | | | | |
| a | | | | | | | |
| b | | | | | | | |
| С | The organization supported a governmental entity Describe in Part VI how you supported a government entity (| see instru | ictions) |) | | | |
| | | | | | | | |
| 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 supporte organizations and explain how these activities directly furthered their exempt purposes, how the organization was | 3 | | | | | |
| | responsive to those supported organizations, and how the organization determined that these activities constituted | <u> </u> | | | | | |
| | substantially all of its activities | 2a | | | | | |
| b | Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the | | | | | | |
| | organization's position that its supported organization(s) would have engaged in these activities but for the organization | s | | | | | |
| _ | involvement | 2b | | | | | |
| 3 | Parent of Supported Organizations Answer (a) and (b) below. | _ | | | | | |
| а | Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each the supported organizations? Provide details in Part VI. | of 3a | | | | | |
| h | Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its | <u> </u> | 1 | | | | |
| , | supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard | 3b | | | | | |
| | | , | 1 | | | | |

| - | Add lifles 1 till odgif 5 | | | |
|---|--|------------|----------------|--------------------------------|
| 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) |
| 1 | Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year) | 1 | | |
| а | Average monthly value of securities | 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 | | |
| 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 | | |
| | | | | |

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

b Excess from 2013.

d Excess from 2015.

e Excess from 2016. . . .

c Excess from 2014.



SCHEDULE D (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.

► Attach to Form 990.

2016

DLN: 93493319064587 OMB No 1545-0047

Open to Public

Internal Revenue Service

Department of the Treasury

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

Inspection

| | ne of the organization Catholic Foundation No Colorado | | Employer identification number | | | | | |
|----------|---|---|--|--|--|--|--|--|
| me | Catholic Foundation No Colorado | | 84-1481641 | | | | | |
| Pa | rt I Organizations Maintaining Donor Complete if the organization answere | Advised Funds or Other Similar Fund | ls or Accounts. | | | | | |
| | Complete if the organization answere | (a) Donor advised funds | (b)Funds and other accounts | | | | | |
| _ | Total number at end of year | (a) Donor advised funds | 136 | | | | | |
| | · | | | | | | | |
| 2 | Aggregate value of contributions to (during year) | 5,033,089 | 1,952,987 | | | | | |
| 3 | Aggregate value of grants from (during year) | 6,389,752 | 4,385,403 | | | | | |
| ļ | Aggregate value at end of year | 31,428,997 | 65,426,983 | | | | | |
| • | 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 No | | | | | | | |
| j | 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? Yes No | | | | | | | |
| Pai | t III Conservation Easements. Complet | e if the organization answered "Yes" on F | Form 990, Part IV, line 7. | | | | | |
| | Purpose(s) of conservation easements held by the | organization (check all that apply) | | | | | | |
| | \square Preservation of land for public use (e g , reci | reation or education) | f an historically important land area | | | | | |
| | Protection of natural habitat | ☐ Preservation o | f a certified historic structure | | | | | |
| | Preservation of open space | | | | | | | |
| 2 | Complete lines 2a through 2d if the organization heasement on the last day of the tax year | eld a qualified conservation contribution in the | | | | | | |
| _ | Total number of conservation easements | | Held at the End of the Year | | | | | |
| a L | Total acreage restricted by conservation easement | - | | | | | | |
| b | Number of conservation easements on a certified it | | 2b | | | | | |
| c d | Number of conservation easements included in (c) | , , | 2c 2d | | | | | |
| : | structure listed in the National Register Number of conservation easements modified, tran | sferred, released, extinguished, or terminated | by the organization during the | | | | | |
| | tax year ► | | | | | | | |
| ŀ | Number of states where property subject to conse | rvation easement is located > | _ | | | | | |
| 5 | Does the organization have a written policy regard and enforcement of the conservation easements if | ding the periodic monitoring, inspection, handl : holds? | ing of violations, Yes No | | | | | |
| • | Staff and volunteer hours devoted to monitoring, • | inspecting, handling of violations, and enforcin | g conservation easements during the year | | | | | |
| , | Amount of expenses incurred in monitoring, inspe ▶ \$ | cting, handling of violations, and enforcing cor | nservation easements during the year | | | | | |
| 3 | Does each conservation easement reported on line | e 2(d) above satisfy the requirements of section | on 170(h)(4)(B)(ı) | | | | | |
| | and section 170(h)(4)(B)(II)? | | 🗌 Yes 🔲 No | | | | | |
|) | In Part XIII, describe how the organization reports balance sheet, and include, if applicable, the text the organization's accounting for conservation eas | of the footnote to the organization's financial s | | | | | | |
| ar | | ions of Art, Historical Treasures, or (| Other Similar Assets. | | | | | |
| .a | If the organization elected, as permitted under SF art, historical treasures, or other similar assets he provide, in Part XIII, the text of the footnote to its | ld for public exhibition, education, or research | in furtherance of public service, | | | | | |
| b | If the organization elected, as permitted under SF historical treasures, or other similar assets held for following amounts relating to these items | AS 116 (ASC 958), to report in its revenue sta | stement and balance sheet works of art, | | | | | |
| (| i) Revenue included on Form 990, Part VIII, line 1 | | ▶ \$ | | | | | |
| - | i)Assets included in Form 990, Part X | | <u> </u> | | | | | |
| 2 | If the organization received or held works of art, he following amounts required to be reported under states. | | financial gain, provide the | | | | | |
| а | Revenue included on Form 990, Part VIII, line 1 | | ▶ \$ | | | | | |
| b | Assets included in Form 990, Part X | | ▶ \$ | | | | | |
| | | | | | | | | |

d Equipment .

| Par | t IIII | Organizations M | aintaining Collections | of Art, Hi | istori | cal Tr | reası | ures, or | Other | Similar A | ssets (cont | tınued) |
|------------|-----------------|--|---|----------------|---------------|------------|---------|------------------|------------|-------------|--------------|-----------------|
| 3 | | Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply) | | | | | | | | | | |
| а | | Public exhibition | | | d | | Loan | or excha | nge prog | rams | | |
| b | | Scholarly research | | | е | | Othe | er | | | | |
| С | | Preservation for future | e generations | | | | | | | | | |
| 4 | Provi Part : | | organization's collections ai | nd explain h | ow the | y furth | ner the | e organiza | ation's ex | empt purp | ose in | |
| 5 | | | anızatıon solicit or receive o nds rather than to be maint | | | | | | | ılar | ☐ Yes | □ No |
| Pa | rt IV | | codial Arrangements. ganızatıon answered "Ye | es" on Forn | n 990, | , Part | IV, lı | ine 9, or | reporte | d an amo | ount on Form | n 990, Part |
| 1a | | e organization an agent ded on Form 990, Part | t, trustee, custodian or othe X? | er intermedia | ary for | contril | bution | ns or othe | r assets I | not | ☐ Yes | □ No |
| ь | If "Y€ | es," explain the arrange | ement in Part XIII and comp | plete the foll | owing | table | | | | | Amount | |
| c | | nning balance | | | | | | | 1c | | | |
| d | _ | tions during the year | | | | | | | 1d | | | |
| е | | ibutions during the yea | r | | | | | | 1e | | | |
| f | | ng balance | | | | | | - | 1f | | | |
| 2 a | | - | an amount on Form 990, P | art X, line 2 | 1, for e | escrow | or cu | L ustodial ad | count lia | bility? | ☐ Yes | |
| b | If "Y∈ | es," explain the arrange | ement in Part XIII Check he | ere if the exp | planatı | on has | been | provided | ın Part) | KIII | | |
| Pa | rt V | Endowment Fun | ds. Complete if the orga | anization ar | nswer | ed "Ye | es" o | | | | | |
| _ | _ | | | ent year | (b) Pr | or year | | (c)Two ye | | (d)Three ye | | Four years back |
| | - | ning of year balance . | | 40,768,206 | | 37,520 | | | 4,038,029 | 34 | 2,081,688 | 24,113,209 |
| | | butions | | 3,798,734 | | 5,917 | | • | 4,986,117 | | 556,161 | 6,733,720 |
| | | vestment earnings, gair | ns, and losses | 1,655,941 | | | ,638 | | 193,166 | | 2,930,901 | 2,386,034 |
| d | Grants | or scholarships | • | 1,908,397 | | 1,742 | 2,273 | | 1,696,397 | 1 | 1,530,721 | 1,151,275 |
| е | | expenditures for faciliti ograms | es | | | | | | | | | |
| f | Admın | istrative expenses . | | | | | | | | | | |
| g | End of | year balance | | 44,314,484 | | 40,768 | 3,206 | 3 | 7,520,915 | 34 | 1,038,029 | 32,081,688 |
| 2 | Provi | de the estimated perce | ntage of the current year e | nd balance (| line 1g | , colu | mn (a |)) held as | ; | | | |
| а | Board | d designated or quasi-e | endowment ► 8 500 % | | | | | | | | | |
| b | Perm | anent endowment 🟲 | 2 300 % | | | | | | | | | |
| С | Temp | porarily restricted endo | wment ▶ 89 200 % | | | | | | | | | |
| | The p | percentages on lines 2a | , 2b, and 2c should equal 1 | .00% | | | | | | | | |
| 3а | | here endowment funds nızatıon by | not in the possession of the | e organizatio | on that | are h | eld an | nd adminis | stered fo | r the | | Yes No |
| | (i) u | nrelated organizations | | | | | | | | | 3a(i) | No |
| b | | related organizations .es" on 3a(ii), are the re | | s required or | n Sche | dule R | · · | | | | 3a(ii) |) No |
| 4 | Desci | ribe in Part XIII the inte | ended uses of the organizat | ion's endow | ment f | unds | | | | | <u> </u> | <u> </u> |
| Pa | rt VI | Land, Buildings, | | | | | | | | | | |
| | | | ganization answered 'Ye | | | | | | | | | |
| | Descr | iption of property | (a) Cost or other basis (investment) | (b)Cost o | r other l | basis (d | other) | (c)Accu | mulated d | epreciation | (d)E | Book value |
| 1a | Land | | 1,612,00 | 10 | | | | | | | | 1,612,000 |
| b | Buildin | ngs | 110,00 | 10 | | | | | | | | 110,000 |
| c | Leaseh | nold improvements | | | | 6 | 59,773 | 1 | | 21,238 | | 48,535 |

504,126

111,165

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

332,886

58,362

2,161,783

171,240

52,803

| | Investments—Other Securities. Complete if the org | ganization ans | wered 'Yes' on | Form 990, Par | t IV, line 11b. |
|---------------|---|--------------------------------|-----------------------------------|-------------------------------------|------------------|
| | See Form 990, Part X, line 12. (a) Description of security or category (including name of security) | (b)Book value | | (c)Method of va t or end-of-year | |
| | | : | | , | |
| (A) | | _ | | | |
| (B) | | | | | |
| (C) | | | | | |
| (D) | | | | | |
| (E) | | | | | |
| (F) | | | | | |
| (G) | | | | | |
| (H) | | | | | |
| Total. (Colum | n (b) must equal Form 990, Part X, col (B) line 12) Investments—Program Related. Complete if the or | ▶ 0 | | n Form 990 Pa | ert IV line 11c |
| rait viii | See Form 990, Part X, line 13. (a) Description of investment | (b) Book value | | (c) Method of va | |
| (4) | (a) Description of investment | (b) Book value | | t or end-of-year | |
| (1) (2) | | | | | |
| (3) | | | | | |
| (4) | | | | | |
| (5) | | | | | |
| (6) | | | | | |
| (7) | | | | | |
| (8) | | | | | |
| (9) | | | | | |
| | n (b) must equal Form 990, Part X, col (B) line 13) | | | | |
| Part IX | Other Assets. Complete if the organization answered 'Yes' (a) Description | on Form 990, P | art IV, line 11d | See Form 990, Pa | (b) Book value |
| (1) | | | | | |
| (2) | | | | | |
| (3) | | | | | |
| (4) | | | | | |
| (5) | | | | | |
| (6) (7) | | | | | |
| (8) | | | | | |
| (9) | | | | | |
| | mn (b) must equal Form 990, Part X, col (B) line 15) | | | • | |
| Part X | Other Liabilities. Complete if the organization answe See Form 990, Part X, line 25. | red 'Yes' on F | orm 990, Part I | IV, line 11e or | 11f. |
| 1. | (a) Description of liability | (b) E | Book value | | |
| (1) Federal ı | ncome taxes | | 0 | | |
| - | TS HELD IN TRUST | | 24,589,650 | | |
| (2) | | | | | |
| (3) | | | | | |
| (4) | | | | | |
| (5) | | | | | |
| (6) | | | | | |
| (7) | | | | | |
| (8) | | | | | |
| (9) | | | | | |
| | n (b) must equal Form 990, Part X, col (B) line 25) or uncertain tax positions In Part XIII, provide the text of the f | ▶ ootnote to the o | 24,589,650 organization's fina | ncial statements | that reports the |
| | 's liability for uncertain tax positions under FIN 48 (ASC 740) | | | | |

Part XI

2

е

3

4

b

c 5

1

2

а b

d

e 3

а

b

c

Part XIII

5

4

Part XII

Schedule D (Form 990) 2016

Page 4

661,819

41,819

798,467

41,819

11,299,963

Schedule D (Form 990) 2015

11.258.144

10,822,692

| _ | Bollatea Sel Vices and ase of facilities |
|---|--|
| c | Recoveries of prior year grants |
| d | Other (Describe in Part XIII) |

Donated services and use of facilities .

Prior year adjustments . . .

Other (Describe in Part XIII) .

Add lines 2a through 2d .

Add lines 4a and 4b .

Return Reference

See Additional Data Table

Subtract line 2e from line 1 .

Other losses .

Net unrealized gains (losses) on investments Donated services and use of facilities

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Total expenses and losses per audited financial statements .

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 .

2d

Add lines 2a through 2d .

Subtract line 2e from line 1 .

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. Other (Describe in Part XIII) Add lines 4a and 4b . . .

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)

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,

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 Revenue per Audited Financial Statements With Revenue per Return

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

2a

2b

2c 2d

4a 4b

Explanation

2a

2b 2c

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

41,819

798.467

41.819

661.819

4c

2e

3

4c

5

2e

3

10,864,511 12,056,611

| Page 5 | | Schedule D (Form 990) 2015 | | |
|---------------|------------------------------------|-----------------------------|--|--|
| | tal Information <i>(continued)</i> | Part XIII Supplemental Info | | |
| xplanation | | Return Reference | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Schedule D (Form 990) 2016

Additional Data

Software ID: Software Version:

EIN: 84-1481641

Name: The Catholic Foundation No Colorado

Supplemental Information

| Return Reference | Explanation |
|----------------------------|---|
| SCHEDULE D, PART V, LINE 4 | Describe the intended uses of the organization's endowment funds. Temporarily restricted n et assets are those whose use by the Foundation has been limited by donors to a specific t ime period or purpose. Permanently restricted net assets have been restricted by donors to be maintained by the Foundation in perpetuity. Endowments have been restricted for the us e of the following. Caring for our poor, teaching our children, spreading the Gospel, streightening our parishes, preparing our priests, and time restriction. |

| Supplemental Information | | | | | | | |
|--------------------------|---|--|--|--|--|--|--|
| Return Reference | Explanation | | | | | | |
| | UNCERTAIN TAX POSITIONS MANAGEMENT HAS EVALUATED ITS INCOME TAX POSITIONS UNDER THE GUIDA NCE INCLUDED IN ASC 740 BASED ON ITS REVIEW, MANAGEMENT HAS NOT IDENTIFIED ANY MATERIAL UNCERTAIN TAX POSITIONS TO BE RECORDED OR DISCLOSED IN THE FINANCIAL STATEMENTS | | | | | | |

| Supplemental Information | | | | | | |
|-------------------------------|--|--|--|--|--|--|
| Return Reference | Explanation | | | | | |
| SCHEDULE D, PART XII, LINE 2B | EXPENSE ON BOOKS, NOT ON RETURN RETURN OF GRANTS FUNDS TREATED AS A CHANGE IN NET ASSETS 798,467 | | | | | |

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493319064587 OMB No 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2016 ► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. Open to Public ► Attach to Form 990. ► See separate instructions. Department of the Treasury Inspection ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service **Employer identification number** Name of the organization The Catholic Foundation No Colorado 84-1481641 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and 1 other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed) 3 (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures offices in the employees, agents, region (by type) (e q, program service, describe for and investments region and independent fundraising, program specific type of in region contractors in services, investments, grants service(s) in region region to recipients located in the region) (1) See Add'l Data (2) (3) (4) (5) 24,510,094 3a Sub-total b Total from continuation sheets to Part I c Totals (add lines 3a and 3b) 24,510,094

(4)

Schedule F (Form 990) 2016

(4) (5) (6)

(7) (8) (9)

(10) (11) (12) (13) (14) (15) (16)

(17) (18) Page **3**

Schedule F (Form 990) 2016

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III Part III can be duplicated if additional space is needed. (c) Number of (d) Amount of (e) Manner of cash (f) Amount of (h) Method of (a) Type of grant or assistance (b) Region (a) Description

| (a) Type of grant of assistance | (D) Region | recipients | cash grant | disbursement | non-cash assistance | of non-cash assistance | valuation (book, FMV, appraisal, other) |
|---------------------------------|------------|------------|------------|--------------|------------------------|---------------------------|---|
| (1) | | | | | | | |
| (2) | • | | | | | | |

| | | | assistance | assistance | (book, FMV, appraisal, other) |
|------|--|--|------------|------------|----------------------------------|
| (1) | | | | | |
| (2) | | | | | |

| (1) | | | | |
|-----|--|--|--|--|
| (2) | | | | |
| (3) | | | | |

| Schedule F (Form 990) 2016 | | | | | | |
|----------------------------|--|---------------|-------------|--|--|--|
| Par | t IV Foreign Forms | | | | | |
| 1 | Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926) | ✓ Yes | □No | | | |
| 2 | Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A) | | | | | |
| | | \square Yes | ✓ No | | | |
| 3 | Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign | | | | | |
| | Corporations (see Instructions for Form 5471) | ✓ Yes | □No | | | |
| 4 | Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621) | ✓ Yes | □No | | | |
| 5 | Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865) | _ | _ | | | |
| | | ✓ Yes | ∐No | | | |
| 6 | Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form | | | | | |
| | 5713) | ☐ Yes | ✓ No | | | |

| Schedule F (Forr | n 990) 2016 Page 5 | | | | | | | | |
|--|---|--|--|--|--|--|--|--|--|
| Part V Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting me amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions). | | | | | | | | | |
| Return Reference | Explanation | | | | | | | | |
| SCHEDULE F, PART I, | Organization's procedures for monitoring the use of grant funds. From the foundation's policy statement regarding international grant making and the making of grants to certain other organizations, projects and initiatives project monitoring the proposed project must include meaningful processes by which the committee or individual designated may assess the project in terms of | | | | | | | | |

Organization's procedures for monitoring the use of grant funds. From the foundation's policy statement regarding international grant making and the making of grants to certain other organizations, projects and initiatives project monitoring the proposed project must include meaningful processes by which the committee or individual designated may assess the project in terms of meeting stated goals, including regular accounting for use of grant funds by the foreign organization recipient and possibly including field investigations after the grant is made. This corporation shall retain the right to withdraw approval of a grant and to receive a refund of any unexpended grant funds in the event that it is determined by said committee or individual that the project is not meeting its stated goals, or that any of the preconditions set forth in the grant are not being satisfied. Wherever feasible, grant funds will be released for specific projects on an as needed basis.

| Return Reference | Explanation |
|-----------------------------|---|
| HEDULE F, PART I, LINE 3(2) | DETAIL OF FOREIGN INVESTMENTS FAIR MARKET VALUE OF INVESTMENTS 24,166,475 |

sc⊦

| Return Reference | Explanation |
|-----------------------------|--|
| HEDULE F, PART I, LINE 3(3) | DETAIL OF FOREIGN INVESTMENTS INVESTMENT MANAGEMENT/INCENTIVE FEES 339,619 |

 \sim

Additional Data

Central America and the

Central America and the

Carıbbean

Carıbbean

Software ID: Software Version:

EIN: 84-1481641

Name: The Catholic Foundation No Colorado

24,166,475

339,619

Form 990 Schedule F Part I - Activities Outside The United States

| offices in the region | employees or agents in region | in region (by type) (i e , fundraising, program services, grants to recipients located in the region) | is a program service, describe specific type of service(s) in region | (f) Total expenditures for region |
|-----------------------|-------------------------------------|---|---|---|
| | | Grantmaking | | 4,000 |
| | offices in the | offices in the region agents in region | offices in the region employees or agents in region services, grants to recipients located in the | region agents in fundraising, program describe specific type of services, grants to recipients located in the region) |

Investments

Investments

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493319064587 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 Catholic Foundation No Colorado 84-1481641 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

Cat No 50055P

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

Schedule I (Form 990) 2016

| Schedule I (Form 990) 2016 | | | | | | Page 2 | | | | |
|---|---|---|--------------------------|-----------------------------------|---|--|--|--|--|--|
| Part III Grants and Other As Part III can be duplicated | | | | anization answered "Yes" | on Form 990, Part IV, line 22 | | | | | |
| (a) Type of grant or assist | cance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance | | | | |
| (1) | | | | | | <u> </u> | | | | |
| (2) | | | | | | | | | | |
| (3) | | | | | | | | | | |
| (4) | | | | | | | | | | |
| (5) | | | | | | | | | | |
| (6) | | | | | | | | | | |
| (7) | | | | | | | | | | |
| Part IV Supplemental | Information | on. Provide the in | nformation required in | Part I, line 2, Part III | , column (b), and any other a | additional information. | | | | |
| Return Reference | Explanation | Explanation | | | | | | | | |
| Schedule I, Part I, Question 2 | understandı agreement) reporting aft exempt stat | PROCEDURES FOR MONITORING USE OF GRANT FUNDS IN THE U.S. Following approval of a grant, a grant award letter and general grant terms, conditions, and understandings, together with the award check is sent to each recipient. The grant award letter and terms and conditions (which together constitute the grant agreement) outline the specific award stipulations including the purpose for which the funds are to be used, the length of the grant period, and required expenditure reporting after the close of the grant period, if any. Grantee deposit of the award check indicates acceptance of the grant's terms and conditions, and affirm their tax-exempt status. The terms and conditions of accepting foundation grant funds also require grant recipients to report any change to their tax exempt status during the grant term. Furthermore, recipients must submit written requests in advance to change the grant purpose or if the funds are unexpended within the grant period. | | | | | | | | |

Additional Data

Merrimack, NH 030549947 Arrupe Jesuit High School

4343 Utica Street Denver, CO 80212

Software ID: **Software Version:**

501(c)(3)

EIN: 84-1481641

Name: The Catholic Foundation No Colorado

| Form 990, Schedule I, Part | II, Grants and | Other Assistance to | Domestic Organiza | tions and Domest | ic Governments. | | |
|--|----------------|----------------------------------|-------------------------------------|--|---|--|---------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| Thomas More College of Liberal | 02-0344073 | 501(c)(3) | 100,000 | | | | Caring for Our |

35,500

Teaching Our

| or government | | |
|---|------------|--|
| Thomas More College of Liberal Arts 6 Manchester St | 02-0344073 | |

(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 National Catholic Bioethics 04-2871526 501(c)(3) 75.000 Spreading the Good Center 6399 Drexel Road

Teaching Our

6.000

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

501(c)(3)

Philadelphia, PA 19151 Taft School

110 Woodbury Rd Watertown, CT 06795

(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 Lanteri Center for Ignatius 20-1891947 501(c)(3) 10,000 Teaching Our

| Augustine Institute | 20-2349108 | 501(c)(3) | 579,997 | | Spreading the Good |
|---|------------|-----------|---------|--|--------------------|
| Spirituality 416 22nd St Denver, CO 80205 | | | | | |

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

6160 South Syracuse Way Greenwood Village, CO 80111

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) 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) Missionaries of the Poor USA 20-4553442 501(c)(3) 10.000 Teaching Our Inc PO Box 29893 Atlanta, GA 30359 Colorado Family Action 20-5723514 501(c)(3) 16,000 Teaching Our Foundation

PO Box 558

Castle Rock, CO 80104

(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 22-2245377 501(c)(3) 15.000 Strengthening Our

Del asalle Hall 810 Newman Springs Rd

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

PO Box 5284

Manchester, NH 03108

Lincroft, NJ 07738 Sophia Institute for Teachers 22-2548708 501(c)(3) 114,000 Caring for Our

(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

| Camilla Hall Nursing Home 1145 King Road | 23-1576706 | 501(c)(3) | 16,000 | | Spreading the Good |
|---|------------|-----------|--------|--|--------------------|
| Immaculate, PA 193450100 | | | | | |

Papal Foundation 23-2511991 501(c)(3) 130,000 Spreading the Good 150 Monument Road

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

Bala Cynwd, PA 19004

(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 23-2661414 501(c)(3) 20.000 Catholic Leadership Institute Strengthening Our 440 E Swedesford Road St

3040 Wavne, PA 19087

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

Roswell, GA 30075

Catholics Come Home Inc. 26-1102557 501(c)(3) 10.000 Caring for Our 560 W Crossville Rd Ste 100

(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 Camp Wojtyla 26-4365733 501(c)(3) 10.000 Caring for Our

PO Box 528 Berthoud, CO 80513

JPII Outdoor Lab 26-4365733 501(c)(3) 30,000 Spreading the Good PO Box 528

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

Berthoud, CO 80513

(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 Families of Character 27-1083135 501(c)(3) 126.000 Teaching Our 6456 S Quebec Suite 750

Spreading the Good

10,000

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

501(c)(3)

Centennial, CO 80111

National Catholic Register

PO Box 100699 Irondale, AL 35210

(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 Christ In The City 27-4663181 501(c)(3) 64,250 Teaching Our

| 3401 Pecos St Denver, CO 80211 | | | | | |
|---|------------|-----------|--------|--|--------------|
| Association for the Promotion of the Apostolate | 27-4663351 | 501(c)(3) | 63,000 | | Teaching Our |

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

3290 W Milan Avenue Englewood, CO 80110

(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

| In Ipso 8818 W Glasgow Pl | 27-5196942 | 501(c)(3) | 9,000 | | Teaching Our |
|------------------------------|------------|-----------|-------|--|--------------|
| Littleton, CO 80128 | | | | | |

St Patrick Catholic Community 30-0514891 501(c)(3) 30,000 Spreading the Good

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

10815 N 84th St Scottsdale, AZ 85260

(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 Adams County Emergency 30-0754165 501(c)(3) 20 000 Teaching Our

Caring for Our

| Food Bank | | | | | |
|-------------------------|------------|-----------|--------|--|--------|
| 7111 E 56th Ave | | | | | |
| Commerce City, CO 80022 | | | | | |
| Catholic Radio Network | 32-0081587 | 501(c)(3) | 49,250 | | Caring |

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

201 N Industrial Park Road Excelsior Springs, MO 64024

(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 John Carroll University 34-0714681 501(c)(3) 10.000 Teaching Our

1 John Carroll Blvd Cleveland, OH 44118

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

Mentor, OH 44060

Lake Catholic High School 34-1054185 501(c)(3) 10,000 Caring for Our 6733 Revnolds Road

(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

| University of Notre Dame | 35-0868188 | 501(c)(3) | 10,000 | | Teaching Our |
|------------------------------|------------|-----------|--------|--|--------------|
| 1251 N Eddy Street Suite 300 | | | | | |
| South Bend, IN 466171403 | | | | | |
| | | | | | |

Mercy Home for Boys & Girls 36-2171726 501(c)(3) 15,000 Spreading the Good

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

1140 W Jackson Blvd Chicago, IL 60607

Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) 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 Dominican Sisters of Marv 38-3349686 501(c)(3) 7.500 Strenathenina Our Mother of the Eucharist 4597 Warren Rd Ann Arbor, MI 48105 Academy of Our Lady of 41-0695522 501(c)(3) 14.000 Teaching Our Lourdes Sisters

1001 14th St NW Rochester, MN 55901

(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 Metal of Honor Fund 42-1613033 501(c)(3) 40.000 Teaching Our

 Metal of Honor Fund
 42-1613033
 501(c)(3)
 40,000
 Teaching Our

 1310 W Evans Ave
 Denver, CO 80223
 28,000
 Teaching Our

 Lalmba
 43-6057388
 501(c)(3)
 28,000
 Teaching Our

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

1000 Corey St Longmont, CO 80501

(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 46-0532968 501(c)(3) 100.000 Teaching Our Divine Mercy Academy 501(c)(3) 52,500 Preparing Our

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

| PO Box 10658 |
|---------------------------------------|
| Bozeman, MT 59719 |
| Marian Community of Reconciliation |

1060 St Francis Way 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 (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance OnoBillionStorios 46-0022781 E01/c1/21 6 500 Tooching Our

| 4324 S Jason St | 40-0922781 | 301(0)(3) | 0,500 | | reacting out |
|-------------------------------------|------------|-----------|---------|--|--------------|
| Englewood, CO 80110 | | | | | |
| Divine Mercy Supportive Care Inc | 46-1777911 | 501(c)(3) | 182,000 | | Teaching Our |

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

303 South Broadway Suite 220

Denver, CO 80209

(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 46-2578248 501(c)(3) 94.750 Strengthening Our

Bella Natural Women's Care 180 E Hampden Ave Suite 100

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

PO Box 471058 Aurora, CO 80047

Englewood, CO 80113 Children of the Dust Charity 46-3008410 501(c)(3) 12,000 Teaching Our

(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 47-2607386 501(c)(3) 375.000 Teaching Our The Catholic Alliance 3801 E Florida Ave 909 Denver, CO 80210 Karıbu Sana Friends of 47-2645129 501(c)(3) 7,500 Teaching Our

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

Carmelite Missions 8200 S Quebec St

Centennial, CO 80112

(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 Diocese of Phoenix 53-0196617 501(c)(3) 5.000 Strengthening Our 400 E Monroe St

Teaching Our

10,000

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

501(c)(3)

Phoenix, AZ 85004
Creighton University

2500 California Plaza Omaha, NE 68178

(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 53-0196617 501(c)(3) 18.000 Spreading the Good Oblates of the Virgin Marv 2 Ipswich Street

Boston, MA 02215 Institute for Catholic Liberal 54-1607202 501(c)(3) 25,000 Education

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

Spreading the Good PO Box 4638 Ventura, CA 93007

(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 ing Our

Caring for Our

| Dominican Sisters St Cecilia | 62-0552181 | 501(c)(3) | 12,500 | | Teaching |
|------------------------------|------------|-----------|--------|--|----------|
| Congregation | | | | | |
| 801 Dominican Dr | | | | | |
| Nashville, TN 372281909 | | | | | |

10.000

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

501(c)(3)

Alternatives Pregnancy Center

1440 Blake St Suite 200 Denver, CO 802021475

(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 ng for Our

Spreading the Good

| Providence Network | 74-2505406 | 501(c)(3) | 7,500 | | Caring |
|--------------------|------------|-----------|-------|--|--------|
| 801 Logan St | | | | | |
| Denver, CO 80203 | | | | | |

58,000

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

501(c)(3)

All Souls Catholic Church 80-0010721

4950 S Logan St

Englewood, CO 801139847

(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 Zarlengo Foundation 80-0015548 501(c)(3) 10 000 Teaching Our

| 7100 W 44th Ave Wheatridge, CO 80033 | 00 00133 10 | 301(0)(3) | 10,000 | | reaching |
|---|-------------|-----------|--------|--|-----------|
| St Ignatius of Antioch Parish- | 80-0015811 | 501(c)(3) | 10,000 | | Spreading |

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

Rangely, CO 81648

ng the Good Rangely 109 S Ssanolind Ave

(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

Spreading the Good

| Holy Family Meeker Parish | 80-0015811 | 501(c)(3) | 15,000 | | Spreading the Good |
|---------------------------|------------|-----------|--------|--|--------------------|
| 889 Park Avenue | | | | | |
| Meeker, CO 81641 | | | | | |

18,307

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

501(c)(3)

St Michael Craig Parish

678 School St Craig, CO 81625

(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 ing the Good

Caring for Our

| Courage International Inc | 80-0615570 | 501(c)(3) | 50,000 | | Spreadin |
|---------------------------------------|------------|-----------|--------|--|----------|
| 8 Leonard Street Norwalk, CT 06850 | | | | | |
| | | | | | |

27,800

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

501(c)(3)

83-0362209

ENDOW

6160 Syracuse Way Suite B110 Greenwood Village, CO 80111

(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 83-0434307 501(c)(3) 155.000 Teaching Our Wyoming Catholic College PO Box 750

PO Box 750
Lander, WY 82520

Blessed Sacrament Catholic 84-0402673 501(c)(3) 40,000

Teaching Our

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

1973 Elm St Denver, CO 80220

(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 84-0402681 Spreading the Good

Holy Ghost Catholic Church 501(c)(3) 130.750 1900 California St Denver, CO 80202

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

3333 Regis Blvd B-16 Denver, CO 80221

Reals University 84-0402707 501(c)(3) 17,500 Caring for Our

(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 84-0402708 501(c)(3) 50.000 Teaching Our St James Catholic School 1414 Newport St Denver, CO 80220

50,000

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

501(c)(3)

St Francis de Sales Catholic

301 S Sherman St Denver, CO 80209

School

(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 for Our

| Sacred Heart of Jesus Catholic | 84-0404918 | 501(c)(3) | 10,000 | | Caring fo |
|--------------------------------|------------|-----------|--------|--|-----------|
| School | | | | | |
| 1318 Mapleton Avenue | | | | | |
| Boulder, CO 80304 | | | | | |
| | | | | | |

10.000

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

501(c)(3)

Good Shepherd Catholic School

620 Elizabeth Street Denver, CO 80206

(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 84-0405260 501(c)(3) 25,000 Spreading the Good

5,000

Mount Saint Vincent Home 4159 Lowell Blvd Denver, CO 80211

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

501(c)(3)

84-0406817

St Louis Parish

3310 S Sherman St Englewood, CO 80113

(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 reading the Good

Caring for Our

13,800

| St Louis Catholic Church 3310 South Sherman St Englewood, CO 80113 | 84-0406817 | 501(c)(3) | 19,135 | | Spre |
|--|------------|-----------|--------|--|------|
| Zingiowoda, do dolla | | | | | |

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

501(c)(3)

84-0413978

St Joseph Church

300 W Mountain Ave Ft Collins, CO 80521

(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 Cathedral Basilica of 84-0421938 501(c)(3) 61.000 Carıng for Our Immaculate Conception 1535 Logan St Denver, CO 80203

75,000

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

501(c)(3)

1535 Logan St Denver, CO 80203 Our Lady of Lourdes Catholic School

2256 SO Logan St Denver, CO 80210

(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 84-0422002 501(c)(3) 100.000 Spreading the Good Holy Name Parish

Spreading the Good Spreading the

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

904 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 organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance ne Good

Caring for Our

| St Bernadette Catholic School | 84-0431890 | 501(c)(3) | 50,000 | | Spreading the |
|-------------------------------|------------|-----------|--------|--|---------------|
| 7240 W 12th Ave | | | | | |
| Denver, CO 80215 | | | | | |
| | | | | | |

31,000

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

501(c)(3)

St Catherine of Siena School

4200 Federal Blvd Denver, CO 80211

(f) Method of valuation (a) Name and address of **(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 government other) assistance Most Precious Blood Catholic 84-0439518 501(c)(3) 43.000 Carıng for Our School 2250 S Harrison Denver, CO 80210

Strenathenina Our

25.000

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

501(c)(3)

Sts Peter and Paul Catholic

School 3900 Pierce St WheatRidge, CO 80033

(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 Our Lady of Assumption 84-0449275 501(c)(3) 35.000 Caring for Our

10.000

| Catholic School 2361 E 78th Av Denver, CO 80229 | | | |
|---|------------|-----------|--|
| St Pius X Grade School | 84-0457083 | 501(c)(3) | |

13680 E 14th Place Denver, CO 80011

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

501(c)(3)

(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 St Rose of Lima Catholic 84-0465591 501(c)(3) 135.000 Caring for Our School 1345 W Dakota Ave

30,000

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

501(c)(3)

School 1345 W Dakota Ave Denver, CO 80223 St Therese Catholic School

1200 Kenton St 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 (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Holy Trinity Catholic School 84-0469648 501(c)(3) 50.000 Spreading the Good

Holy Trinity Catholic School 84-0469648 501(c)(3) 50,000 Spreading the Good 7595 Federal Blvd Westminster, CO 80030 Spreading the Good Religious Sisters of Mercy 84-0499858 501(c)(3) 7,500 Spreading the Good

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

1300 S Steele St Denver, CO 80210

(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 84-0499858 501(c)(3) 8.500 Teaching Our AOD - Catholic Biblical School 1300 S Steele St Denver, CO 80210

Charity/Aid

25,000

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

501(c)(3)

AOD - Office of Hispanic Ministries

1300 S Steele Street Denver, CO 80210

(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 AOD - Office of the Archbishop 84-0499858 501(c)(3) 50.000 Charity/Aid 1300 S Steele Street Denver, CO 80210

AOD - Office of Envangelization 84-0499858 501(c)(3) 57,560 & Family

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

Charity/Aid 1300 S Steele Street Denver, CO 80210

(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 AOD - Retired Priests 84-0499858 501(c)(3) 75,000 Charity/Aid 1300 S Steele St

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

501(c)(3)

Denver, CO 80210

1300 S Steele Street Denver, CO 80210

AOD - JPII Center Assistance

Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) 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) AOD - Archbishop Catholic 84-0499858 501(c)(3) 176,500 Appeal PO Box 100316 Denver, CO 80250 AOD - Office of Catholic 84-0499858 501(c)(3) 192.365 Schools

1300 S Steele St Denver, CO 80210

(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 84-0499858 501(c)(3) 273.743 AOD - Emergency Grants to Parishes 1300 S Steele St Denver, CO 80210

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

501(c)(3)

Archdiocese of Denver

1300 South Steele Street Denver, CO 80210

(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 Shrine of St Anne 84-0508778 501(c)(3) 20.000 7555 Grant Pl Arvada, CO 80002

Nativity of Our Lord Catholic 84-0514655 501(c)(3) 11.683 School

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

900 W Midway Blvd Broomfield, CO 80020

(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 84-0518957 501(c)(3) 51.000 Guardian Angels Catholic School

1843 W 52nd Ave
Denver, CO 80221

Annunciation Catholic Church 84-0522064 501(c)(3) 5,000

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

1408 E 36th Avenue 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 (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Annunciation Catholic School 84-0522064 501(c)(3) 67.000 3536 Lafayette St Denver, CO 80205 Little Sisters of the Poor Mullen 84-0528531 501(c)(3) 35,500

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

Home for the Age 3629 W 29th Avenue Denver, CO 802113601

(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 St Stephen Catholic School 84-0539250 501(c)(3) 35.000 414 S Hyland Park Dr

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

501(c)(3)

Glenwood Springs, CO 81601 St Cajetan Catholic Parish

299 S Stuart St Denver, CO 80219

(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 Our Lady of Fatima Parish 84-0569526 501(c)(3) 17.000 1985 Miller St Lakewood, CO 80215

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

501(c)(3)

St Thomas More Parish

8035 South Quebec St Centennial, CO 80112

(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 84-0659341 501(c)(3) 10.250 Abbev of St Walburga 1029 Benedictine Way Virginia Dale, CO 80536

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

501(c)(3)

Virginia Dale, CO 80536

Catholic Charities - Regina
Caeli

6240 Smith Road Denver, CO 80216

(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) Catholic Charities - Beacon of 84-0686679 501(c)(3) 14.500 Hope PO Box 100728 Denver, CO 802500728

67.917

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

501(c)(3)

Catholic Charities - Fr Ed Judy

House PO Box 100728 Denver, CO 802500728

(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 84-0686679 501(c)(3) 77.500 Catholic Charities - Lighthouse PO Box 100728

Denver, CO 802500728 Catholic Charities - Marisol 84-0686679 501(c)(3) 156,000 Home

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

PO Box 100728 Denver, CO 802500728

Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) 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) Catholic Charities - Samaritan 84-0686679 501(c)(3) 189.167 House PO Box 100728 Denver, CO 802500728 Catholic Charities & 84-0686679 501(c)(3) 281.382

Community Services 4045 Pecos St Denver, CO 80210

Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments. (e) Amount of non-(f) Method of valuation (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government assistance other) Reals Jesuit High School - Boys 84-0791593 501(c)(3) 12.500 Division 6300 S Lewiston Way Aurora, CO 80016 Regis Jesuit High School - Girls 84-0791593 501(c)(3) 12.500 Division 6300 S Lewiston Way

Aurora, CO 80016

(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) St Clare of Assisi Catholic 84-1237387 501(c)(3) 10.000 School 31622 US Highway 6 Edwards, CO 81632

Boys Hope Girls Hope 84-1239769 501(c)(3) 12.500 7060 E Hampden Ave Suite

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

203

Denver, CO 80224

(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 Seeds of Hope 84-1437053 501(c)(3) 140.250 3801 E Florida Ave

Denver, CO 80210 AOD - St John viannev 84-1437053 501(c)(3) 266,133

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

Denver, CO 80210

Seminary 1300 S Steele St

(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 Father Woody's Haven of Hope 84-1479555 501(c)(3) 6.000 1101 W 7th Ave

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

501(c)(3)

Denver, CO 80204

PO Box 100676 Denver, CO 802500676

Bishop Machebeuf High School

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) 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 84-1490222 501(c)(3) 28.250 Holy Family High School PO Box 100337 Denver, CO 802500337 St John ViannevRedemptors 84-1495066 501(c)(3) 5,000

Mater Annual Sem Appea 3801 E Florida Ave Denver, CO 80210

(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 AOD - Office of Vocations 84-1495066 501(c)(3) 5.208 1300 S Steele St

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

501(c)(3)

AOD - TV Mass

1300 S Steele St Denver, CO 80210

Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) 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) St John Vianney Theological 84-1495066 501(c)(3) 1.420.113 Seminary 1300 S Steele St Denver, CO 80210 Fellowship of Catholic 84-1522811 501(c)(3) 775.010

University Students

Genesee, CO 80401

603 Park Point Drive Suite 200

(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

| 1 | | | | | |
|---|------------|--------------|--------|-------|--|
| ACE Scholarships 1201 E Colfax Ave Suite 302 Denver, CO 80218 | 84-1531066 | 501(c)(3) | 16,000 | | |
| 4 | | | | + | |

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

501(c)(3)

JK Mullen HIah School

3601 S Lowell Blvd Denver, CO 80236

(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

| St Louis Catholic School - | 84-6012535 | 501(c)(3) | 30,000 | | |
|----------------------------|------------|-----------|--------|--|--|
| Louisville | | | | | |
| 902 Grant Ave | | | | | |
| Louisville, CO 80027 | | | | | |
| | | | | | |

10.000

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

501(c)(3)

Rachel's Vineyard of Colorado 4147 Centennial Dr

Broomfield, CO 80023

(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

10.000

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

501(c)(3)

95-2544535

University of San Diego

5998 Alcala park San Diego, CA 92110 efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493319064587

Employer identification number

Schedule J (Form 990)

Compensation Information

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

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ► Attach to Form 990.

2015

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

The Catholic Foundation No Colorado 84-1481641 **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 Discretionary spending account Personal services (e.g., maid, chauffeur, chef) 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 1b 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 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 a Receive a severance payment or change-of-control payment? 4a Νo 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo Participate in, or receive payment from, an equity-based compensation arrangement? 4c Νo 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 compensation contingent on the revenues of The organization? **5**a Νo 5b Any related organization? Νo 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 compensation contingent on the net earnings of The organization? 6a Νo 6b Any related organization? Νo If "Yes," on line 6a or 6b, describe in Part III 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 67 If "Yes," describe in Part III 7 Νo 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 Yes If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)? Yes

Page 2

Schedule J (Form 990) 2015

| |) for each nated marvid | dar mast equal the tota | ramount of Form 550, | r are vii, occuon m, m | e 147 applicable colai | mi (B) and (E) amount | 5 TOT CHAC MATTICAL |
|--------------------|--------------------------|---|---|--------------------------------|------------------------|-----------------------|--|
| (A) Name and Title | (B) Breakdown of | f W-2 and/or 1099-MIS | SC compensation | (C) Retirement and | (D) Nontaxable | (E) Total of columns | (F) Compensation in |
| | Base (ı) compensation | (ii) Bonus & incentive compensation | (III) Other reportable compensation | other deferred compensation | benefits | (B)(ı)-(D) | column(B) reported as deferred on prior Form 990 |

11.638

21.894

227.499

193.967

1 STEVEN STEMPER

PRESIDENT AND CEO

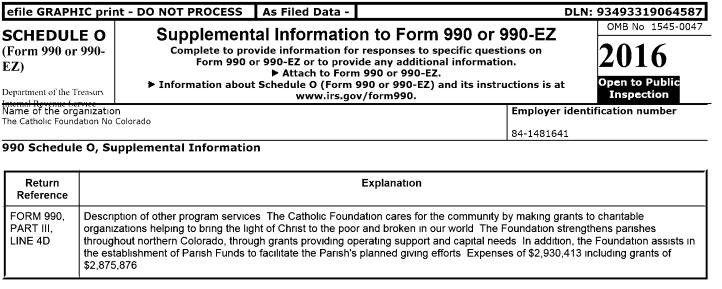
Schedule J (Form 990) 2015

| Schedule J (Form 990) 2015 | Page 3 |
|---|---|
| Part IIII Supplemental Infor | mation |
| Provide the information, explanation, c | r descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information |
| | |
| Return Reference | Explanation |

Schedule J (Form 990) 2015

| efil | e GRAPHIC pr | int - DO NOT PR | OCESS | As Filed Data - | | DLN: | 9349331 | 9064 | 587 |
|----------|---|--|-------------------------------|---|---|--|---------------------------------------|--------|-------|
| | IEDULE M | | N | Ioncash 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 | | | | | | | |
| • | tment of the Treasury | ▶Information abo | out Schedu | le M (Form 990) and its i | nstructions is at <u>www.irs</u> | s.gov/form990 | Open to | | |
| | e of the organizat | | | | | Employer ident | tification n | umbei | |
| rne c | atholic Foundation N | io Colorado | | | | 84-1481641 | | | |
| Pa | rt I Types | of Property | | | <u>'</u> | | | | |
| | | | (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 art | t | | | | | | | |
| 2 | Art—Historical tre | | | | | | | | |
| 3 | Art—Fractional in | | | | | | | | |
| 4 | Books and public Clothing and hou | | | | | | | | |
| 5 | | | | | | | | | |
| 6 | Cars and other v | ehicles | | | | | | | |
| 7 | Boats and planes | S | | | | | | | |
| 8 | Intellectual prope | • | | | | | | | |
| 9 | Securities—Public | | X | 62 | 2,424,327 | SALES PRICE | | | |
| | Securities—Close Securities—Partr or trust interest | nership, LLC, | | | | | | | |
| 12 | Securities—Misce | | | | | | | | |
| 13 | | vation istoric | | | | | | | |
| 14 | Qualified conserv | | | | | | | | |
| | contribution—Of | | | | | | | | |
| | Real estate—Res | | | | | | | | |
| 16 17 | Real estate—Cor Real estate—Oth | | | | | | | | |
| 18 | Collectibles . | | X | 5 | 8 656 | MARKET VALUE | | | |
| 19 | Food inventory | | | 3 | 0,030 | MARKET VALUE | | | |
| 20 | Drugs and medic | | | | | | | | |
| 21 | Taxidermy | | | | | | | | |
| | Historical artifact | | | | | | | | |
| | Scientific specim | | | | | | | | |
| | Archeological art | ifacts | | 2 | 1.70 | MARKETMALLIE | | | |
| | Other►(ARIES) | | X | 3 | 1,/82 | MARKET VALUE | | | |
| | Other • (|) | | | | | | | |
| 27 | Other ▶ (| | | | | | | | |
| | Other ► (| | | | | | | | |
| 29 | Number of Forms for which the org | s 8283 received by t ganization completed | he organiza I Form 8283 | tion during the tax year for 3, Part IV, Donee Acknowled | contributions gement | 29 | | | |
| 20- | During the | did the engages | n rocente les | contribution any property r | concepted in Daul T. Lines 4. 41- | rough 20 that | | Yes | No |
| 30a | | - | | | • | - ' | | | |
| | | | | ate of the initial contribution | · | to be used | | | |
| | | | | od? | | | 30a | - | No |
| b | If "Yes," describ | e the arrangement i | n Part II | | | | | | |
| 31 | Does the organi | zation have a gift ac | ceptance po | olicy that requires the reviev | of any non-standard contr | ibutions? | 31 | Yes | |
| 32a | Does the organi contributions? | | | or related organizations to so | olicit, process, or sell nonca | sh | 32a | Yes | |
| b | If "Yes," describ | e in Part II | | | | | | | |
| 33 | If the organizati | on did not report an | amount in | column (c) for a type of pro | perty for which column (a) | ıs checked, | | | |
| | describe in Part | II | | | | | | | |
| For D | anarwark Badustie | on Act Notice, see the | Instruction | s for Form 000 | Cat No. 512271 | Schoo | lule M (Form | 000) | 2016) |

| Schedule M (Form 990) (2016) | Page 2 |
|------------------------------|--|
| | ion required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part imber of contributions, the number of items received, or a combination of both. Also complete |
| Return Reference | Explanation |
| , , | USE OF THIRD PARTIES TO SOLICIT, PROCESS, OR SELL NONCASH CONTRIBUTIONS THE CATHOLIC FOUNDATION ENGAGES REAL ESTATE PROFESSIONALS WHO EITHER VOLUNTEER THEIR SERVICES OR ENTER A CONTRACTUAL RELATIONSHIP WITH THE FOUNDATION IN ORDER TO SELL REAL ESTATE THAT IS DONATED TO THE FOUNDATION |
| SCHEDULE M, PART I, COLUMN B | THE NUMBER INDICATED IN COLUMN B REPRESENTS THE TOTAL NUMBER OF CONTRIBUTIONS |
| | Schedule M (Form 990) (2016) |



990 Schedule O, Supplemental Information

Return Explanation

Pafaranca

line 11b

| Reference | |
|------------|--|
| Form 990, | Process to Review the Form 990 The 990 is completed by the Foundation's tax firm, BKD, in cooperation with the Foundation's |
| Part VI, | staff The return is reviewed by management and then by the Board's audit committee The 990 is then provided to the full board of |
| Section B, | the organization prior to being filed with the IRS |

| D . t | F. w. Lander |
|---------------------|--|
| Return Reference | Explanation |
| Reference | |
| Form 990, | PROCESS FOR MONITORING COMPLIANCE WITH CONFLICT OF INTEREST POLICY THE BOARD OF TRUSTEES OF THE |
| Part VI, | CATHOLIC FOUNDATION ADOPTED A WRITTEN CONFLICT OF INTEREST POLICY ON MARCH 7, 2005 IN ADDITION TO |
| Section B, | TRUSTEES AND OFFICERS, THE POLICY APPLIES TO ALL EMPLOYEES, COMMITTEE MEMB ERS, AND VOLUNTEERS |
| line 12c | WHO MAY BE IN A POSITION TO EXERCISE SUBSTANTIAL INFLUENCE OVER THE AF FAIRS OF THE FOUNDATION THE |
| | POLICY IDENTIFIES AND DEFINES INTERESTED PARTIES, THE NATURE OF POTENTIAL CONFLICTS, INCLUDING USE |
| | OF CONFIDENTIAL INFORMATION FOR PERSONAL GAIN AND A PROHIBITION AGAINST LOANS BY/TO THE |
| | FOUNDATION TO ANY TRUSTEE OR OFFICER AS WELL AS PROCED URES FOR DISCLOSURE, REVIEW, AND ACTION |
| | ON CONFLICTS OF INTEREST AS THEY ARISE ADDITIONAL LY, THE POLICY REQUIRES ANNUAL COMPLETION OF A CONFLICT OF INTEREST DISCLOSURE STATEMENT B Y THOSE IN A POSITION TO EXERCISE SUBSTANTIAL |
| | INFLUENCE OVER THE AFFAIRS OF THE FOUNDATION THE CONFLICT OF INTEREST POLICY TOGETHER WITH THE |
| | CONFLICT OF INTEREST DISCLOSURE STATEM ENT AND GIFT POLICY AND DISCLOSURE FORM ARE DISTRIBUTED |
| | ANNUALLY TO OFFICERS, TRUSTEES, AN D KEY EMPLOYEES THESE INDIVIDUALS ARE ASKED TO REVIEW THE |
| | POLICY AND COMPLETE AND RETURN BOTH THE CONFLICT OF INTEREST DISCLOSURE STATEMENT AND THE GIFT |
| | POLICY AND DISCLOSURE FORM THE ADMINISTRATIVE OFFICER TRACKS RESPONSES AND REVIEWS THE |
| | DISCLOSURES IN CONNECTION WITH, AND PRIOR TO THE FOUNDATIONS ENTERING INTO, ANY TRANSACTION OR |
| | ARRANGEMENT THAT MIGHT PRESENT AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, THE RESPONSIBLE |
| | PERSON INVOLVED SHALL DISCLOSE THE EXISTENCE AND NATURE OF HIS OR HER INTEREST IN THE TRANSACTION, \parallel |
| | AS WELL AS A LL MATERIAL FACTS RELATING TO THE TRANSACTION IN THE CASE OF FOUNDATION STAFF, THIS |
| | DISCL OSURE SHOULD BE MADE TO THE PRESIDENT (OR IF THE PRESIDENT IS THE ONE WITH THE CONFLICT, T HEN |
| | TO THE BOARD CHAIR), WHO SHALL BRING THE MATTER TO THE ATTENTION OF THE BOARD IN THE CASE OF |
| | TRUSTEES, THIS DISCLOSURE SHOULD BE MADE TO THE BOARD CHAIR, (OR IF THE BOARD CHAIR IS THE ONE WITH |
| | THE CONFLICT, THEN TO THE BOARD VICE-CHAIR), WHO SHALL BRING THE MATTER TO THE ATTENTION OF THE |
| | BOARD AS A WHOLE IF THE BOARD OR ANY COMMITTEE OF THE BOARD PROPERLY DELEGATED SUCH POWER |
| | DETERMINES THAT A CONFLICT OF INTEREST EXISTS AND CANNOT BE ELIMI NATED OR AVOIDED AND, IF APPROPRIATE, THAT A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY ATTAINABLE |
| | UNDER CIRCUMSTANCES THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST, THE BOARD OR COMMITTEE |
| | SHALL DETERMINE BY A MAJORITY VOTE OF DISINTERESTED TRUS TEES WHETHER THE TRANSACTION OR |
| | ARRANGEMENT IS IN THE FOUNDATIONS BEST INTEREST AND WHETHER THE TRANSACTION OR ARRANGEMENT IS |
| | FAIR AND REASONABLE TO THE FOUNDATION DESPITE THE EXIS TENCE OF THE CONFLICT, BASED ON WHETHER |
| | THE PROPOSED TRANSACTION OR ARRANGEMENT IS AT LEAS T AS FAVORABLE TO THE FOUNDATION AS AN ARMS- |
| | LENGTH TRANSACTION WITH DISINTERESTED INDIVIDU ALS OR ORGANIZATIONS THE DECISION OF THE BOARD OR |
| | COMMITTEE SHALL REST IN ITS SOLE DISCRE TION, BUT SHALL BE MADE IN GOO |
| <u> </u> | · · · · · · · · · · · · · · · · · · · |

Return Explanation
Reference

line 12c

Form 990, Part VI, Section B,

D FAITH AND IN MANNER SUCH BOARD OR COMMITTEE REASONABLY BELIEVES TO BE IN THE FOUNDATIONS BEST

Return

| Reference | |
|---|--|
| Form 990, Part VI, Section B, line 15a | REVIEW OF CEO OR TOP MGMT OFFICIAL COMPENSATION PURSUANT TO I R C 5498, COMPENSATION IS INDEPENDENTLY DETERMINED BY DISINTERESTED BOARD MEMBERS (I E THE CHAIRMAN OF THE BOARD OF TRUSTEES IN CONSULTATION WITH OTHER TRUSTEES) ON A YEARLY BASIS IN MAKING THIS DETERMINATION, THE CHAIRMAN RELIES ON APPROPRIATE COMPARABILITY DATA AND THEN DOCUMENTS THE DECISION IN THE BOARD OF TRUSTEE MEETING MINUTES EACH YEAR IN NOVEMBER 2012, THE BOARD HIRED DEACON STEVEN STEMPER AS PRESIDENT AND CEO OF THE FOUNDATION TOM HEULE, THEN CHAIRMAN OF THE BOARD OF TRUSTEES, WAS RESPONSIBLE FOR THE DRAFTING AND REVIEW OF THE CEO EMPLOYMENT AGREEMENT MR HEULE UTILIZED THE BRYAN CAVE LAW FIRM TO ASSIST IN THE PROCESS MR STEMPER'S CONTRACT WAS NEGOTIATED AND AGREED |
| | TO BY THE EXECUTIVE COMMITTEE |

Explanation

Return Explanation
Reference

Form 990,
Part VI,
Section B,
Inne 15b

REVIEW OF OTHER OFFICER OR KEY EMPLOYEES COMPENSATION THE PRESIDENT RECOMMENDS THE
COMPENSATION OF OTHER OFFICERS AND KEY EMPLOYEES AND THE BOARD OF TRUSTEES APPROVE THE
COMPENSATION

990 Schedule O, Supplemental Information

Return

| Reference | · |
|------------|---|
| Form 990, | GOVERNING DOCUMENTS AVAILABLE TO THE PUBLIC THE FOUNDATION'S GOVERNING DOCUMENTS, CONFLICT OF |
| Part VI, | INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST ADDITIONALLY, THE |
| Section C, | FOUNDATION'S ARTICLES OF INCORPORATION ARE AVAILABLE ON THE WEBSITE OF THE COLORADO SECRETARY |
| line 19 | OF STATE |

Explanation

Return Explanation

| FORM 990, | COMPENSATION OF CURRENT OFFICERS CERTAIN EMPLOYEES OF THE FOUNDATION ALSO PERFORM WORK FOR |
|-----------|---|
| PART IX, | THE CATHOLIC FOUNDATION ALLIANCE (ALLIANCE), A RELATED ENTITY THE ALLIANCE REIMBURSES THE |
| LINE 5 | FOUNDATION FOR A PORTION OF THEIR SALARIES THE AMOUNT ON LINE 5 OF PART IX REPRESENTS THE PORTION |
| | OF OFFICER COMPENSATION THAT IS NOT REIMBURSED BY THE ALLIANCE |

Return Explanation

| Reference | |
|-----------|---|
| PART XI, | OTHER CHANGES IN NET ASSETS RETURN OF GRANTS FUNDS TREATED AS A CHANGE IN NET ASSETS -798,467 |
| LINE 9 | |

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493319064587 OMB No 1545-0047 **SCHEDULE R Related Organizations and Unrelated Partnerships** 2016 (Form 990) ► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Open to Public ► Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Department of the Treasury Inspection Internal Revenue Service **Employer identification number** Name of the organization The Catholic Foundation No Colorado 84-1481641 Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (e) (f) Name, address, and EIN (if applicable) of disregarded entity Legal domicile (state End-of-year assets Primary activity Total income or foreign country) entity

Direct controlling (1) THE CATHOLIC FDN REAL PROPERTY HOLDINGS CO RE Holdings 260,000 catholic fdn 3801 E FLORIDA AVE 909 Denver, CO 80210 46-4051529 Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (b) (c) (d) (e) (f) (g) Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling Section 512(b) or foreign country) (if section 501(c)(3)) entity (13) controlled entity? Yes No (1)THE CATHOLIC ALLIANCE fundraising CO 501(C)(3) line 9 CATHOLIC FDN Yes 3801 E FLORIDA AVE 909 DENVER, CO 80210 47-2607386 Schedule R (Form 990) 2016 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50135Y

| (a) Name, address, and EIN of related organization | | | activity domicile controlling income(rela unrelated or foreign country) sections 5: | | (e) Predominant Income(related, unrelated, excluded from tax under sections 512- 514) | | (g) Share of e end-of-year assets | (h) Disproprtionate r allocations? | | (I) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) | (j Gene mana parti | ral or aging | (k) Percenta ownersh |
|---|----------------------------|-----------------|---|-------------|---|-------------------------------------|--|--|---------------------------|---|------------------------------------|-----------------|---|
| | | | | | , | | | Yes | No | | Yes | No | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | + | | | | | 1 | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| Identification of Related Orga because it had one or more relate | | | | | | zation ansv | wered "Yes | " on F | orm 9! | 90, Part IV, | line | 34 | |
| Identification of Related Orga because it had one or more relate (a) Name, address, and EIN of related organization | | s a corporation | | t during th | (d) controlling Typentity (C of | (e) | wered "Yes (f) Share of total income | Share | (g) e of end- year assets | (h |) ntage | Se (1 | L3) cont entity |
| because it had one or more relate (a) Name, address, and EIN of | ed organizations treated a | s a corporation | on or trus (c) egal micile or foreign | t during th | (d) controlling Typentity (C of | (e) pe of entity orp, S corp, | (f) Share of total | Share | (g) e of end- year | -of- Percer |) ntage | Se (1 | (i) ection 5 13) contr entity Yes |
| because it had one or more relate (a) Name, address, and EIN of | ed organizations treated a | s a corporation | on or trus (c) egal micile or foreign | t during th | (d) controlling Typentity (C of | (e) pe of entity orp, S corp, | (f) Share of total | Share | (g) e of end- year | -of- Percer |) ntage | Se (1 | ection 5: 13) conti entity |
| because it had one or more relate (a) Name, address, and EIN of | ed organizations treated a | s a corporation | on or trus (c) egal micile or foreign | t during th | (d) controlling Typentity (C of | (e) pe of entity orp, S corp, | (f) Share of total | Share | (g) e of end- year | -of- Percer |) ntage | Se (1 | ection 5 13) cont entity |
| because it had one or more relate (a) Name, address, and EIN of | ed organizations treated a | s a corporation | on or trus (c) egal micile or foreign | t during th | (d) controlling Typentity (C of | (e) pe of entity orp, S corp, | (f) Share of total | Share | (g) e of end- year | -of- Percer |) ntage | Se (1 | ection 5 13) cont entity |
| because it had one or more relate (a) Name, address, and EIN of | ed organizations treated a | s a corporation | on or trus (c) egal micile or foreign | t during th | (d) controlling Typentity (C of | (e) pe of entity orp, S corp, | (f) Share of total | Share | (g) e of end- year | -of- Percer |) ntage | Se (1 | ection 5 13) cont entity |
| because it had one or more relate (a) Name, address, and EIN of | ed organizations treated a | s a corporation | on or trus (c) egal micile or foreign | t during th | (d) controlling Typentity (C of | (e) pe of entity orp, S corp, | (f) Share of total | Share | (g) e of end- year | -of- Percer |) ntage | Se (1 | ection 5 13) con entit |

(1)the catholic alliance

(2)the catholic alliance

(3)the catholic alliance

(4)the catholic alliance

| Schedule K (Lottin 990) 2010 | | | Po | age 3 |
|---|--------|------------|-----|-------|
| Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or | or 36. | | | |
| Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule | | | Yes | No |
| 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? | | | | |
| a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity | | 1a | | No |
| b Gift, grant, or capital contribution to related organization(s) | | 1b | Yes | |
| c Gift, grant, or capital contribution from related organization(s) | | 1c | | No |
| d Loans or loan guarantees to or for related organization(s) | | 1d | Yes | |
| e Loans or loan guarantees by related organization(s) | | 1e | | No |
| f Dividends from related organization(s) | | 1f | | No |
| g Sale of assets to related organization(s) | | 1 g | | No |
| h Purchase of assets from related organization(s) | | 1h | | No |
| i Exchange of assets with related organization(s) | | 1 i | | No |
| j Lease of facilities, equipment, or other assets to related organization(s) | | 1j | | No |
| k Lease of facilities, equipment, or other assets from related organization(s) | | 1k | | No |
| | | I | +,, | |

| e | Loans or loan guarantees by related organization(s) | 1e | | No |
|---|--|------------|-----|----|
| | Dividends from related organization(s) | 1f | | No |
| | | 1 | | |
| g | Sale of assets to related organization(s) | 1g | | No |
| h | Purchase of assets from related organization(s) | 1h | | No |
| i | Exchange of assets with related organization(s) | 1 i | | No |
| j | Lease of facilities, equipment, or other assets to related organization(s) | 1j | | No |
| | | | | |
| k | Lease of facilities, equipment, or other assets from related organization(s) | 1k | | No |
| ı | Performance of services or membership or fundraising solicitations for related organization(s) | 11 | Yes | |

(b)

Transaction

type (a-s)

ь

d

n

(c)

Amount involved

375,000

1,087,683

321,582

570.562

financials

financials

prorata expense

prorata salary

1m Yes

Yes 1n 1o | Yes

Yes |1p | **1**q Yes

No

No

1r

1s

Schedule R (Form 990) 2016

(d)

Method of determining amount involved

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . .

Name of related organization

Reimbursement paid to related organization(s) for expenses . . .

Reimbursement paid by related organization(s) for expenses . . .

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

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

| - | | | | | | | | | | | | | | | | | |
|--|--------------------------------|--|--|-----|----|--|--|-----|----|--|-----|----------------------------------|--|---|---|--|--------------------------------|
| (a) Name, address, and EIN of entity | (b) Primary activity | | (d) Predominant income (related, unrelated, excluded from tax under sections 512- 514) | | | | | | | (e) Are all partners section 501(c)(3) organizations? (f) Share of total income ass | | (h) Disproprtionate allocations? | | (1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) | (j) General or managing partner? | | (k) Percentage ownership |
| | | | 514) | Yes | No | | | Yes | No | | Yes | No | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| Schedule R (Form 990) 2016 | | | | | | | | | | | | 0) 2016 | | | | | |

