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Form **990-PF** 

Department of the Treasur Internal Revenue Service

# Extended to January 16, 2018 Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www irs gov/form990pf

| For               | caler  | idar year 2016 or tax year beginning MAR  | 1, 2016                               | , and ending                          | 3        | FEB 28, 2017  | ·  |
|-------------------|--------|---|---------------------------------------|---------------------------------------|----------|---|--|
| Na                | me o   | foundation  |                                       |                                       |          | A Employer identification   | n number   |
|                   |        |   |                                       |                                       |          |   |  |
| Т                 | he     | Norwood Foundation  |                                       |                                       |          | 01-0705471  |  |
| Nur               | nber a | ind street (or P.O. box number if mail is not delivered to street   | address)                              | Roor                                  | m/suite  | B Telephone number  |  |
| P                 | 0      | Box 792   |                                       |                                       |          | 719-593-26  | 500  |
| Cit               | v or t | own, state or province, country, and ZIP or foreign p   | ostal code                            |                                       |          | C if exemption application is   | pending, check here                              |
|                   |        | itou Springs, CO 80829  |                                       |                                       |          | ,   |  |
| _                 |        | all that apply: Initial return  | Initial return of a fo                | ormer public charit                   | v        | D 1. Foreign organization   | s, check here                                    |
| _                 |        | Final return  | Amended return                        | , , , , , , , , , , , , , , , , , , , | ,        |   | .,   |
|                   |        | Address change  | Name change                           |                                       |          | <ol><li>Foreign organizations m<br/>check here and attach c</li></ol> | eeting the 85% test,                             |
| н (               | Check  | type of organization; X Section 501(c)(3) ex  |                                       |                                       |          | 1   |  |
| Ţ,                | _      |   | Other taxable private founda          | ition                                 |          | E If private foundation st<br>under section 507(b)(1                  |  |
| L Fa              |        | arket value of all assets at end of year J Account  |                                       | X Accrual                             |          | ` ``  |  |
|                   |        | ·   —   | ther (specify)                        | [ <u></u> ] /(00/00/                  |          | F If the foundation is in a<br>under section 507(b)(1                 |  |
|                   | \$     | 2.533. (Part I. colu  | ımn (d) must be on cash b             | asis )                                |          | 011001 30011011 307 (B)( 1  | )(D), Glidak Hara                                |
|                   | irt I  | Analysis of Revenue and Expenses  | (a) Revenue and                       | (b) Net investr                       | ment     | (c) Adjusted net  | (d) Disbursements                                |
| تنا               |        | (The total of amounts in columns (b), (c), and (d) may not<br>necessarily equal the amounts in column (a) ) | expenses per books                    | income                                | HEHL     | income  | for charitable purposes<br>(cash basis only)     |
|                   | 1      | Contributions, gifts, grants, etc., received  | 930,650.                              |                                       |          |   | ,  |
|                   | 2      | Check If the foundation is not required to attach Sch B   |                                       |                                       | -        |   |  |
|                   | 3      | Interest on savings and temporary cash investments  |                                       |                                       |          |   |  |
|                   | 4      | Dividends and interest from securities  | -                                     |                                       |          |   |  |
|                   | 59     | Gross rents   | -                                     |                                       |          |   |  |
|                   | ı      | Net rental income or (loss)   |                                       | -                                     | -        |   |  |
|                   | آ ا    | Net gain or (loss) from sale of assets not on line 10   |                                       |                                       |          | <del></del>   |  |
| 9                 | , I    | Gross sales price for all   |                                       |                                       |          |   |  |
| Revenue           | 7      | assets on line 6a Capital gain net income (from Part IV, line 2)  |                                       |                                       | 0.       |   |  |
| e<br>e            | 8      | Net short-term capital gain   |                                       |                                       |          |   |  |
|                   | ء ا    | Income modifications  |                                       |                                       | -        |   |  |
|                   | 109    | Gross sales less returns and allowances   |                                       |                                       |          |   |  |
|                   | Ι.     | Less Cost of goods sold   |                                       |                                       |          |   |  |
|                   | ı      | Gross profit or (loss)  |                                       |                                       |          |   |  |
|                   | 111    | Other income  |                                       |                                       |          |   |  |
|                   | 12     | Total. Add lines 1 through 11   | 930,650.                              |                                       | 0.       | 0.  |  |
| _                 | 13     | Compensation of officers, directors, trustees, etc  | 0.                                    |                                       | 0.       | 0.  |  |
|                   | 14     | Other employee salaries and wages   | <del></del>                           | -                                     |          |   |  |
|                   | 15     | Pension plans, employee benefits  | -                                     |                                       |          |   |  |
| g                 | 46-    | Legal fees  | <del></del>                           |                                       |          | · · · · · · · · · · · · · · · · · · ·                                 | <del></del>                                      |
| ense              |        | Accounting fees   |                                       |                                       |          |   | <del>-</del>                                     |
|                   |        | Other professional fees   |                                       | R                                     | ECF      | IVED  |  |
| ÚÌ<br>O           | 17     | Interest  |                                       |                                       |          | 10  | <del></del>                                      |
| \$                | 18     | Taxes   |                                       | SF                                    | FP 0     |   |  |
| stra              | 19     | Depreciation and depletion  |                                       | [6]                                   |          | <del>  2017                                      </del>               | <del> </del>                                     |
| <u> </u>          | 20     | Occupancy   |                                       |                                       |          |   |  |
| Administrative Ex | 21     | Travel, conferences, and meetings   |                                       |                                       | BDE      | V. UT   | <del></del>                                      |
| and /             | 22     | Printing and publications   |                                       |                                       |          |   |  |
|                   | ۱      | Other expenses  |                                       |                                       |          |   | <del>                                     </del> |
| Ę                 | 24     | Total operating and administrative  |                                       |                                       |          |   |  |
| Operating         |        | expenses. Add lines 13 through 23   | l o.                                  |                                       | 0.       | 0.  | 0.   |
| ô                 | 25     | Contributions, gifts, grants paid   | 929,770.                              |                                       |          |   | 929,770.   |
|                   |        | Total expenses and disbursements.   |                                       |                                       |          |   | 1  |
|                   | ~      | Add lines 24 and 25   | 929,770.                              |                                       | 0.       | 0.  | 929,770.   |
| _                 | 27     | Subtract line 26 from line 12;  |                                       | <u> </u>                              |          |   | 1  |
|                   |        | Excess of revenue over expenses and disbursements   | 880.                                  |                                       |          |   | 1  |
|                   |        | Net investment income (if negative, enter -0-)  |                                       |                                       | 0.       |   | 1  |
|                   | 1      | Adjusted net income (if negative, enter -0-)  | · · · · · · · · · · · · · · · · · · · |                                       | <u> </u> | 0.  | 1  |
| 6235              |        | -23-16 LHA For Paperwork Reduction Act Notic  | e see instructions                    |                                       |          |   | Form <b>990-PF</b> (2016)                        |
| 0200              |        |   | -,                                    |                                       |          |   | (-5.0)   |



2,533. Form **990-PF** (2016)

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

|   |   | 0/0,/00•[                         | 3,341.                   |   | ZUZ.344140   |
|---|---|-----------------------------------|--------------------------|---|--------------|
| _ | 2013  | 1,192,174.                        | 3,465.                   |   | 344.061760   |
| _ | 2012  | 1,412,221.                        | 17,876.                  |   | 79.000951    |
|   | 2011  | 971,080.                          | 4,831.                   |   | 201.010143   |
| 2 | Total of line 1, column (d)   |                                   |                          | 2 | 1,093.755316 |
| 3 | Average distribution ratio for the 5-year bath the foundation has been in existence if less | • •                               | r by the number of years | 3 | 218.751063   |
| 4 | Enter the net value of noncharitable-use as   | sets for 2016 from Part X, line 5 |                          | 4 | 22,700.      |
| 5 | Multiply line 4 by line 3   |                                   |                          | 5 | 4,965,649.   |
| 6 | Enter 1% of net investment income (1% of  | Part i, line 27b)                 |                          | 6 | 0.           |
| 7 | Add lines 5 and 6   |                                   |                          | 7 | 4,965,649.   |
| 8 | Enter qualifying distributions from Part XII,   | line 4                            |                          | 8 | 929,770.     |

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

See the Part VI instructions.

|    | 1990-PF (2016) The Norwood Foundation 01-07 Part VI   Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se                        | 705471<br>e instruc | tion | Page <b>4</b><br><b>s)</b>                       |
|----|---|---------------------|------|--|
| 1a | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.   |                     |      |  |
|    | Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)   |                     |      | 1  |
| b  | Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%  |                     |      | 0.   |
|    | of Part I, line 27b   |                     |      | 1  |
| ¢  | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).  |                     |      | ا ا  |
| 2  | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)   |                     |      | <u>0.</u>  |
| 3  | Add lines 1 and 2   |                     |      | 0.   |
| 4  | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)   |                     |      | 0.   |
| 5  | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-   |                     |      |  |
| Ь  | Credits/Payments:   |                     |      |  |
|    | 2016 estimated tax payments and 2015 overpayment credited to 2016  Everpay foreign expansions - tax withhold at course.   |                     |      | į  |
|    | Exempt foreign organizations - tax withheld at source  Tax paid with application for extension of time to file (Form 8868)  6c                                      |                     |      | 1  |
|    | Backup withholding erroneously withheld  6d   |                     |      | t  |
| 7  | Total credits and payments, Add lines 6a through 6d   |                     |      | 0.   |
| 8  | Enter any penalty for underpayment of estimated tax. Check here   |                     |      |  |
| 9  | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed   |                     |      | 0.   |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid   |                     |      |  |
|    | Enter the amount of line 10 to be; Credited to 2017 estimated tax   |                     |      |  |
|    | irt VII-A   Statements Regarding Activities   |                     | _    |  |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in                        |                     | Yes  | No   |
|    | any political campaign?   | 1a                  |      | X  |
| b  | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?                          | 1b                  |      | X  |
|    | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or  |                     |      |  |
|    | distributed by the foundation in connection with the activities   |                     |      | L  |
| c  | Did the foundation file Form 1120-POL for this year?  | 10                  |      | X  |
| d  | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  | l l                 |      |  |
|    | (1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0 .  |                     |      |  |
| е  | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation   |                     |      | 1  |
|    | managers. ► \$ 0 .  |                     |      | ļ <u></u> '                                      |
| 2  | Has the foundation engaged in any activities that have not previously been reported to the IRS?   | 2                   |      | X  |
| _  | If "Yes," attach a detailed description of the activities   |                     |      |  |
| 3  | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or                                 |                     |      |  |
| 4- | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes  | 3                   |      | X  |
|    | Did the foundation have unrelated business gross income of \$1,000 or more during the year?  If "Yes," has it filed a tax return on Form 990-T for this year?  N/A  | 48                  |      | <u> </u>   |
|    | Was there a liquidation, termination, dissolution, or substantial contraction during the year?  | 4b 5                |      | x  |
| 9  | · · · · · · · · · · · · · · · · · · ·   | -                   |      | <del>                                     </del> |
| 6  | If "Yes," attach the statement required by General Instruction T  Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: |                     |      |  |
| Ū  | By language in the governing instrument, or   | }                   |      |  |
|    | By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law                              |                     |      |  |
|    | remain in the governing instrument?   | 6                   | X    |  |
| 7  | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV                                    | 7                   |      | X  |
|    |   |                     |      |  |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions)  | -                   |      |  |
| b  | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)   | _                   |      |  |
|    | of each state as required by General Instruction Go If "No," attach explanation   | A 8b                |      |  |
| 9  | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar                             |                     |      |  |
|    | year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV  | 9                   |      | X  |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses                                  | 10                  |      | X  |
|    |   | Form <b>990</b>     | )-PF | (2016)   |

during the year?

If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016)

N/A

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?

Form **990-PF** (2016)

X

3b

4a

| Part VII-B   Statements Regarding Activities for Which F                                     | orm 4720 May Be De                      |  | 01-07054   | <u>/</u>   | P                          | age 6         |
|--|---|--|--|--|----------------------------|---------------|
|  | Offil 4720 Way be no                    | equired (continu   | ued)   | <del></del>                                      |                            |               |
| 5a During the year did the foundation pay or incur any amount to:                            |   | <b>—</b>   | [32]   | 1  |                            |               |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section              | · ''                                    |  | es X No  |  | - 1                        |               |
| (2) Influence the outcome of any specific public election (see section 4955); o              | r to carry on, directly or indire       | • •  |  | j  | - 1                        |               |
| any voter registration drive?  |   |  | s X No   |  |                            | )             |
| (3) Provide a grant to an individual for travel, study, or other similar purposes            | 7                                       | Ye   | s X No   | ļ  | - [                        |               |
| (4) Provide a grant to an organization other than a charitable, etc., organization           | n described in section                  |  |  | ŀ  | ı                          | 1             |
| 4945(d)(4)(A)? (see instructions)  |   | Ye   | s X No   | 1  |                            |               |
| (5) Provide for any purpose other than religious, charitable, scientific, literary,          | or educational purposes, or fo          | or   | 1  | Į.   | - 1                        |               |
| the prevention of cruelty to children or animals?  |   | Ye   | s X No   | ľ  | - 1                        | 4             |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und       | der the exceptions described in         | n Regulations  | ]  | ı  | _                          |               |
| section 53.4945 or in a current notice regarding disaster assistance (see instru             | ctions)?                                |  | N/A  | 5b   |                            |               |
| Organizations relying on a current notice regarding disaster assistance check hi             | ere                                     |  |  |  |                            |               |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr           | om the tax because it maintair          | ned  |  | ı  |                            | i             |
| expenditure responsibility for the grant?  | N                                       | /A   Ye  | s No   | ]  | 1                          | 1             |
| If "Yes," attach the statement required by Regulations section 53 4945                       | -5(d)                                   |  |  | l  | 1                          |               |
| <b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to | * *                                     |  | ļ  | ļ  | - [                        | i i           |
| a personal benefit contract?   | ,-, p                                   | □ v  | s X No   |  |                            |               |
| <b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p   | ersonal benefit contract?               |  |  | 6b   | ľ                          | X             |
| If "Yes" to 6b. file Form 8870   |   |  | <u></u>  |  | $\neg \neg$                | -             |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s         | helter transaction?                     | □ v  | s X No   |  |                            | - 1           |
| <b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attribu    |   | L ' ' '  |  | 7b   |                            |               |
| Part VIII Information About Officers, Directors, Truste                                      |   | agers. Highly  | -17  | <u> 1</u>  |                            |               |
| Paid Employees, and Contractors  | , |  |  |  |                            |               |
| 1 List all officers, directors, trustees, foundation managers and their of                   | ompensation.                            | _  |  |  |                            |               |
|  | (b) Title, and average                  | (c) Compensation   | (d) Contributions to<br>employee benefit plans<br>and deferred | (e   | Expe                       | nșe           |
| (a) Name and address   | hòurs per week devoted<br>to position   | (If not paid,<br>enter -0-)  | and deferred<br>compensation                                   | acc  | ount, d<br>Iowan           | other<br>ces  |
| David D. Jenkins   | President                               | 5.1.5. 57  | oo in portacion  | T -  |                            |               |
| PO Box 792   | 1                                       |  |  |  |                            |               |
| Manitou Springs, CO 80829  | 1.00                                    | 0.   | 0.   | 1  |                            | 0.            |
| Carolyn S. Jenkins   | Vice Presiden                           |  |  | 1  |                            |               |
| PO Box 792   |   | Γ  |  |  |                            |               |
| Manitou Springs, CO 80829  | 1.00                                    | 0.   | 0.   | 1  |                            | 0.            |
|  | Sec/Treas                               |  |  |  |                            |               |
| PO Box 792   | DCC/ 11CGD                              |  |  |  |                            |               |
| Manitou Springs, CO 80829  | 1.00                                    | 0.   | 0.   |  |                            | 0.            |
| delicor portugo, co ovoro  |   |  |  |  |                            | <del>••</del> |
| <del></del>  |   |  |  |  |                            |               |
|  |   |  |  | 1  |                            |               |
| 2 Compensation of five highest-paid employees (other than those incl                         | uded on line 1). If none, e             | enter "NONE."  |  | Ļ  |                            |               |
|  | (b) Title, and average                  | THE THE PARTY OF T | (d) Contributions to   | (e   | ) Expe                     | nse           |
| (a) Name and address of each employee paid more than \$50,000                                | hours per week<br>devoted to position   | (c) Compensation   | (d) Contributions to<br>employee benefit plans<br>and deferred | acc  | ) Expe<br>ount, o<br>lowan | other         |
| NONE   | devoted to position                     |  | compensation   | aı   | IUWAII                     | <del></del>   |
| NONE   |   |  |  | l  |                            |               |
|  |   |  | <del></del> ·  | -  |                            |               |
|  |   |  |  |  |                            |               |
|  |   |  |  | $\vdash$   |                            |               |
|  |   |  |  |  |                            |               |
|  | <del> </del>                            |  |  | <del>                                     </del> |                            |               |
|  |   |  |  | 1  |                            |               |
|  |   | <del></del>  |  | <del> </del>                                     |                            |               |
|  |   |  |  | i  |                            |               |
| Total author of other analysis and average 000   | L                                       | L  |  | L  |                            | 0             |
| Total number of other employees paid over \$50,000   |   |  | <u>_</u>   | 990-   | DE «                       | <u> </u>      |
|  |   |  | ⊦orm   | 220-   | FF (Z                      | ZU 16)        |

| Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)   | -0/054/1 Page 7                                  |
|--|--|
| 3 Five highest-paid independent contractors for professional services. If none, enter "NONE."  |  |
| (a) Name and address of each person paid more than \$50,000 (b) Type of service  | (c) Compensation                                 |
| NONE   |  |
|  |  |
|  |  |
|  |  |
|  |  |
| Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities  | ▶ 0  |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | Expenses   |
| 1 N/A  | <del>                                     </del> |
|  |  |
| 2  | 1  |
| 3  | _  |
|  |  |
| ·  | 1  |
| Part IX-B   Summary of Program-Related Investments   |  |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  N/A   | Amount   |
|  | -  |
|  |  |
| All other program-related investments. See instructions.   | <del> </del>                                     |
| 3  |  |
|  | -  |
|  | 7  |
| Total. Add lines 1 through 3   | 0.   |

The Norwood Foundation 01-0705471 Form 990-PF (2016) Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 0. a Average monthly fair market value of securities Average of monthly cash balances 23,046. 1b c Fair market value of all other assets 1c 23,046. d Total (add lines 1a, b, and c) 1d Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 23,046. Subtract line 2 from line 1d 3 346. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 22,700. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 Minimum investment return. Enter 5% of line 5 135. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here 
and do not complete this part.) 1,135. Minimum investment return from Part X, line 6 2a Tax on investment income for 2016 from Part VI, line 5 Income tax for 2016. (This does not include the tax from Part VI.) Add lines 2a and 2b 2c Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 1,135. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 929,770. Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3а Cash distribution test (attach the required schedule) 3b  $\overline{9}2\overline{9},770$ Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions. Subtract line 5 from line 4

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Part XIII Undistributed Income (see instructions)

|  | (a)<br>Corpus | (b)<br>Years prior to 2015              | (c)<br>2015 | ( <b>d)</b><br>2016       |
|--|---------------|---|-------------|---------------------------|
| 1 Distributable amount for 2016 from Part XI,  |               |   |             | 1,135.                    |
| line 7  Undistributed income, if any, as of the end of 2016                                    |               | <del></del>                             |             | 1,133.                    |
| a Enter amount for 2015 only   |               |   | 0.          |                           |
| b Total for prior years:   |               |   |             |                           |
| ,  |               | 0.                                      |             |                           |
| 3 Excess distributions carryover, if any, to 2016:   |               |   |             |                           |
| a From 2011 970,838.   |               |   |             |                           |
| b From 2012 1,411,327.   |               |   |             |                           |
| c From 2013 1,192,001.   |               |   |             |                           |
| d From 2014 676,700.   |               |   |             |                           |
| e From 2015 1,201,096.   | _ ":_::       |   |             |                           |
| f Total of lines 3a through e  | 5,451,962.    | <del></del>                             |             |                           |
| 4 Qualifying distributions for 2016 from   |               |   |             |                           |
| Part XII, line 4: ►\$ 929,770.   |               |   |             |                           |
| a Applied to 2015, but not more than line 2a   |               | <del> </del>                            | 0.          |                           |
| b Applied to undistributed income of prior   |               | •                                       |             |                           |
| years (Election required - see instructions)   |               | 0.                                      |             |                           |
| c Treated as distributions out of corpus   | 0.            |   |             |                           |
| (Election required - see instructions)   | <del></del>   |   |             | 1,135.                    |
| d Applied to 2016 distributable amount   | 928,635.      |   |             | 1,133.                    |
| e Remaining amount distributed out of corpus  5 Excess distributions carryover applied to 2016 | 0.            | - · · · · · · · · · · · · · · · · · · · |             | 0.                        |
| (If an amount appears in column (d), the same amount must be shown in column (a))              | <u> </u>      | ······································  |             |                           |
| 6 Enter the net total of each column as indicated below:                                       |               |   |             |                           |
| 2 Corpus Add lines 3f, 4c, and 4e Subtract line 5  | 6,380,597.    |   |             |                           |
| b Prior years' undistributed income. Subtract  |               |   |             |                           |
| line 4b from line 2b   |               | 0.                                      |             |                           |
| c Enter the amount of prior years'   |               |   |             |                           |
| undistributed income for which a notice of deficiency has been issued, or on which             |               |   |             |                           |
| the section 4942(a) tax has been previously  |               |   |             |                           |
| assessed   |               | 0.                                      |             |                           |
| d Subtract line 6c from line 6b. Taxable   |               |   | ĺ           |                           |
| amount - see instructions  |               | 0.                                      |             |                           |
| e Undistributed income for 2015. Subtract line   |               |   |             |                           |
| 4a from line 2a. Taxable amount - see instr.   | <del></del>   |   | 0.          |                           |
| f Undistributed income for 2016. Subtract  |               |   |             |                           |
| lines 4d and 5 from line 1. This amount must   |               |   | ļ           | 0.                        |
| be distributed in 2017   |               |   |             | <u>U.</u>                 |
| 7 Amounts treated as distributions out of  |               |   |             | 1                         |
| corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election         |               |   |             | i                         |
| may be required - see instructions)  | 0.            |   |             |                           |
| 8 Excess distributions carryover from 2011   |               |   |             |                           |
| not applied on line 5 or line 7  | 970,838.      |   |             |                           |
| 9 Excess distributions carryover to 2017.  |               |   |             |                           |
| Subtract lines 7 and 8 from line 6a  | 5,409,759.    |   |             |                           |
| 0 Analysis of line 9:  |               |   |             |                           |
| a Excess from 2012 1,411,327.  |               | į                                       |             |                           |
| <b>b</b> Excess from 2013 1,192,001.   | J             |   |             |                           |
| c Excess from 2014 676,700.  |               |   |             |                           |
| d Excess from 2015 1,201,096.  |               |   |             |                           |
| e Excess from 2016 928,635.  |               |   |             | <del></del>               |
| 523581 11-23-16  |               |   |             | Form <b>990-PF</b> (2016) |

| art XIV   Private Operating For   |                       | nat it is a private operation |                            | N/A  |  |
|---|-----------------------|-------------------------------|----------------------------|--|--|
| foundation, and the ruling is effective for 2                                     |                       |                               |                            |  |  |
| Check box to indicate whether the foundate  | •                     | •                             | in section                 | 4942(j)(3) or 4                                  | 942(1)(5)  |
| Enter the lesser of the adjusted net  | Tax year              | ting roundation described     | Prior 3 years              | <del>1</del>                                     | T  |
| income from Part I or the minimum   | (a) 2016              | <b>(b)</b> 2015               | (c) 2014                   | (d) 2013   | (e) Total  |
| ·   |                       | (0) = 0.0                     | (6) 2011                   | +  | 1 (0,100)  |
| investment return from Part X for   |                       |                               |                            |  | 1  |
| each year listed  |                       | <del></del>                   | <del></del>                | <del> </del>                                     | <del> </del>                                     |
| 85% of line 2a  |                       | <del> </del>                  | <del></del>                | <del></del>                                      | <del></del>                                      |
| Qualifying distributions from Part XII,   |                       |                               | ì                          |  | 1  |
| line 4 for each year listed   |                       | <del></del>                   | <del>+</del>               | <del></del>                                      | <del> </del>                                     |
| Amounts included in line 2c not   |                       | 1                             | }                          |  | 1  |
| used directly for active conduct of   |                       | 1                             | ļ                          |  |  |
| exempt activities   |                       | <del></del>                   | <del></del>                |  | <del></del>                                      |
| Qualifying distributions made directly  |                       |                               |                            |  |  |
| for active conduct of exempt activities.  |                       | }                             |                            |  | 1  |
| Subtract line 2d from line 2c   |                       |                               | <u> </u>                   |  |  |
| Complete 3a, b, or c for the  |                       | <b>\</b>                      |                            |  | }  |
| alternative test relied upon: "Assets" alternative test - enter:                  |                       |                               | 1                          | İ  | <b>,</b>   |
| (1) Value of all assets   |                       |                               |                            |  | l  |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i)                     | <del></del>           |                               |                            |  |  |
| "Endowment" alternative test - enter  |                       | 1                             | <del> </del>               | <del> </del>                                     | <del>                                     </del> |
| 2/3 of minimum investment return  |                       | {                             | 1                          | 1  | }  |
| shown in Part X, line 6 for each year listed                                      |                       | <b>\</b>                      |                            |  | 1  |
| "Support" alternative test - enter:   |                       |                               | <del> </del>               | <del></del>                                      | <del></del>                                      |
| (1) Total support other than gross  |                       |                               |                            |  | 1  |
| investment income (interest,  |                       |                               |                            |  | ł  |
| dividends, rents, payments on   |                       |                               |                            |  | 1  |
| securities loans (section   |                       |                               |                            |  | 1  |
| 512(a)(5)), or royalties)   |                       |                               |                            |  | <del> </del>                                     |
| (2) Support from general public and 5 or more exempt                              |                       |                               | -                          | · ·  | į  |
| organizations as provided in  |                       |                               |                            |  |  |
| section 4942(j)(3)(B)(iii)  |                       | <del> </del>                  | <del></del>                | <del>                                     </del> | <b></b>  |
| (3) Largest amount of support from  |                       |                               |                            | ]  |  |
| an exempt organization  |                       | <u> </u>                      |                            |  |  |
| (4) Gross investment income   |                       | <u> </u>                      | <u> </u>                   | <u> </u>   | <u></u>  |
| rt XV Supplementary Inform  |                       |                               | if the foundation          | had \$5,000 or mo                                | re in assets                                     |
| at any time during the  | year-see inst         | tructions.)                   |                            |  |  |
| Information Regarding Foundation  | Managers:             |                               |                            |  |  |
| List any managers of the foundation who h   | _                     | e than 2% of the total con    | tributions received by the | foundation before the clos                       | se of any tax                                    |
| year (but only if they have contributed mor                                       | e than \$5,000). (See | section 507(d)(2).)           |                            |  | , o o, o, , ,,                                   |
|   |                       |                               |                            |  |  |
| List any managers of the foundation who o   | wn 10% or more of     | the stock of a corporation    | (or an equally large port) | on of the ownership of a pa                      | artnershin or                                    |
| other entity) of which the foundation has a                                       |                       |                               | (or arr oqually large port | on or the ownership or a pe                      | artificially of                                  |
| • ,   | •                     |                               |                            |  |  |
| Information Pagardine Contribution  | Grant Citt Las        | Cabalayahin ata D             |                            |  |  |
| Information Regarding Contribution  |                       |                               |                            |  | anto for friends. If                             |
| Check here I if the foundation only the foundation makes gifts, grants, etc. (see |                       |                               |                            |  |  |
| <del></del>   |                       |                               |                            |  |  |
| The name, address, and telephone number   | or e-mail address of  | the person to whom appl       | ications should be addres  | ssed:  |  |
| e Statement 1   |                       |                               |                            |  |  |
| The form in which applications should be s  | submitted and inform  | ation and materials they s    | hould include:             |  |  |
| Any submission deadlines:   |                       |                               |                            |  |  |
|   |                       |                               |                            |  |  |

3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Foundation Purpose of grant or Amount any foundation manager or substantial contributor status of recipient contribution Name and address (home or business) a Paid during the year American Red Cross ÞС General Purpose 431 18th Street NW Washington, DC 20006 25,500. Bethesda Ministries - One Child Þσ General Purpose Matters P.O. Box 62600 Colorado Springs, CO 80962 2,500. Boys & Girls Club PC General Purpose 102 E. Pikes Ave, Suite 500 Colorado Springs, CO 80903 5,000. CanCare General Purpose 9575 Katy Freeway, Suite 428 Houston, TX 77024 1,000. Cheyenne Mountain Zoological Society General Purpose 4250 Cheyenne Mountain Zoo Road Colorado Springs, CO 80906 1,000. See continuation sheet(s) 929,770. **b** Approved for future payment None Total

Form 990-PF (2016)

| Part XVI-A  | Analys  | is of Inco  | me-Produ    | cing Activities  |
|-------------|---------|-------------|-------------|------------------|
| Lairval-V i | Alialys | 13 OI 1110C | Jilie-Lioun | cilig Activities |

|   | Linrelated                                       | business income       | T Evolue         | led by section 512, 513, or 514 |                       |
|---|--|-----------------------|------------------|---------------------------------|-----------------------|
| Enter gross amounts unless otherwise indicated.                 | (a)<br>Business                                  | (b)                   | Exclu-<br>sion   | (d)                             | (e) Related or exempt |
| 1 Program service revenue:                                      | code   | Amount                | code             | Amount                          | function income       |
| a   | <u> </u>   |                       | $\bot$           |                                 |                       |
| b   | L  | . <u> </u>            | $\perp \perp$    |                                 |                       |
| c   |  |                       |                  |                                 |                       |
| d   |  |                       |                  |                                 |                       |
| e   | 1  |                       |                  |                                 |                       |
| t   |  |                       |                  |                                 |                       |
| g Fees and contracts from government agencies                   |  |                       |                  |                                 |                       |
| 2 Membership dues and assessments                               |  |                       |                  |                                 |                       |
| 3 Interest on savings and temporary cash                        |  |                       |                  |                                 |                       |
| investments   | 1 1  |                       | 1 1              |                                 |                       |
| 4 Dividends and interest from securities                        |  |                       |                  |                                 |                       |
| 5 Net rental income or (loss) from real estate:                 | <del> </del>                                     |                       | 1 1              |                                 |                       |
| a Debt-financed property  | <del>                                     </del> |                       | + -              |                                 |                       |
| b Not debt-financed property                                    |  |                       | ╅╾╌╅             |                                 |                       |
|   | <del>                                     </del> |                       | +                |                                 |                       |
| 6 Net rental income or (loss) from personal                     | 1 1  |                       | 1 1              |                                 | 1                     |
| property  | <del>   </del>                                   |                       | <del>1 - 1</del> |                                 |                       |
| 7 Other investment income                                       | <del> </del>                                     |                       | +-+              |                                 |                       |
| 8 Gain or (loss) from sales of assets other                     |  |                       | 1                |                                 |                       |
| than inventory  |  |                       | 4                |                                 |                       |
| 9 Net income or (loss) from special events                      | <b> </b>   |                       | ++               |                                 |                       |
| 10 Gross profit or (loss) from sales of inventory               | <b></b>  |                       | <del>↓</del>     |                                 |                       |
| 11 Other revenue:   | 1  |                       | 1                |                                 |                       |
| a   |  |                       | $\bot$           |                                 |                       |
| b   |  |                       | $\perp$          |                                 |                       |
| c   | <u> </u>   |                       |                  |                                 |                       |
| d   |  |                       |                  |                                 |                       |
| e   |  |                       |                  |                                 |                       |
| 12 Subtotal. Add columns (b), (d), and (e)                      |  | 0.                    |                  | 0.                              | 0.                    |
| 13 Total. Add line 12, columns (b), (d), and (e)                |  |                       |                  | 13                              |                       |
| (See worksheet in line 13 instructions to verify calculations.) |  |                       |                  |                                 |                       |
| Part XVI-B Relationship of Activities t                         | o the Accom                                      | plishment of Ev       | emnt i           | Burnoses                        |                       |
| Tare AVI-D Treatment of Activities                              |  |                       | empt i           |                                 |                       |
| Line No. Explain below how each activity for which inco         |  |                       | A contribu       | ited importantly to the accom   | plishment of          |
| ▼ the foundation's exempt purposes (other than                  | by providing fund:                               | s for such purposes). |                  |                                 |                       |
|   |  |                       |                  |                                 |                       |
|   |  |                       |                  |                                 |                       |
|   |  |                       |                  |                                 |                       |
| ,   |  |                       |                  |                                 |                       |
|   |  |                       |                  |                                 |                       |
|   |  |                       |                  |                                 |                       |
|   |  |                       |                  |                                 |                       |
|   |  |                       |                  |                                 |                       |
|   |  |                       |                  |                                 |                       |
|   |  |                       |                  |                                 | <del></del>           |
| <del></del>   |  |                       |                  | <del></del>                     |                       |
|   |  |                       |                  |                                 |                       |
| <del></del>   |  |                       |                  |                                 |                       |
|   | <del></del>                                      |                       |                  |                                 |                       |
|   |  |                       |                  |                                 |                       |
|   |  |                       |                  |                                 |                       |
|   |  |                       |                  |                                 |                       |
|   |  |                       |                  |                                 |                       |
|   |  |                       |                  |                                 |                       |
| _ <del></del>   |  |                       |                  |                                 |                       |

| Fait AVII     | Exempt Organ  |                                  | 5 10 2     | ind Transactions an   | iu Relationshi                                   | bs with Moncuar                 | царіе                      |            |                      |
|---------------|---|----------------------------------|------------|---|--|---------------------------------|----------------------------|------------|----------------------|
| 1 Did the o   |   |                                  | follower   | ng with any other organization                                      | n deposited in coate                             | n 501(a) of                     | $\overline{}$              | Yes        | No                   |
|               | =   |                                  |            | rg with any other organization<br>?7, relating to political organiz |  | 11 30 1(6) 01                   |                            |            |                      |
|               | s from the reporting founda                                 |                                  |            |   | zauons   |                                 | ł                          |            |                      |
| (1) Cast      | • =   | MONTE O A HONGHAMADIC CAR        | empt or    | yanızanını.   |  |                                 | 1a(1)                      |            | X                    |
| (2) Othe      |   |                                  |            |   |  |                                 | 1a(1)                      |            | X                    |
|               | nsactions:  |                                  |            |   |  |                                 | 10(2)                      |            |                      |
|               |   | hia ayamat arganization          |            |   |  |                                 | 15/1                       |            | $\mathbf{x}^{\perp}$ |
| • •           | s of assets to a noncharital<br>chases of assets from a noi | · -                              | ration     |   |  |                                 | 1b(1)<br>1b(2)             |            | X                    |
| • •           | tal of facilities, equipment,                               |                                  | Zacioni    |   |  |                                 | 1b(2)                      |            | X                    |
| • •           | nbursement arrangements                                     |                                  |            |   |  |                                 |                            |            | X                    |
|               | ns or loan guarantees                                       |                                  |            |   |  |                                 | 1b(4)<br>1b(5)             | $\vdash$   | X                    |
|               | ormance of services or me                                   | mharchin ar fundraicina ci       | olicitatio | inc   |  |                                 | 1b(6)                      |            | X                    |
| * *           | offialities, equipment, ma                                  | •                                |            |   |  |                                 | 10(0)                      | _          | X                    |
| _             |   | • .                              | •          | edule. Column ( <b>b)</b> should alw                                | rave chave the fair m                            | arket value of the goods        |                            | etc.       |                      |
|               |   |                                  |            | ed less than fair market value                                      |  |                                 |                            | cio,       |                      |
|               | d) the value of the goods,                                  |                                  |            | oo loos tilali ilali ilalikot valas                                 | in any danoadion o                               | a one my arrangomon, c          |                            |            |                      |
| (a)Line no    | (b) Amount involved   |                                  |            | e exempt organization   | (d) Description of                               | of transfers, transactions, and | sharing arr                | angemen    | nts                  |
| <del>``</del> | · · · · · · · · · · · · · · · · · · ·                       | <del></del>                      | N/A        |   | 1  |                                 |                            |            |                      |
|               |   | <del>-</del>                     | .,,        |   | <del> </del>                                     |                                 |                            |            |                      |
|               |   |                                  |            |   | <del> </del>                                     |                                 |                            |            |                      |
|               | <del></del>   | <del></del>                      |            |   | <del> </del>                                     |                                 |                            |            |                      |
|               |   |                                  |            |   | <del> </del>                                     |                                 |                            |            |                      |
|               |   |                                  |            |   | <del>                                     </del> |                                 |                            |            |                      |
|               |   |                                  |            |   | 1  |                                 |                            |            |                      |
|               |   |                                  |            |   | <del> </del>                                     |                                 |                            |            |                      |
|               |   |                                  |            | <del></del>   |  |                                 |                            |            |                      |
|               |   |                                  |            |   |  |                                 |                            |            |                      |
|               |   |                                  |            |   |  |                                 |                            |            |                      |
|               |   |                                  |            |   |  |                                 |                            |            |                      |
|               |   |                                  |            |   |  |                                 |                            |            |                      |
|               |   |                                  |            |   |  |                                 |                            |            |                      |
|               |   |                                  |            |   |  |                                 |                            |            |                      |
|               |   |                                  |            |   |  |                                 |                            |            |                      |
| 2a Is the fou | indation directly or indirect                               | ly affiliated with, or related   | to, one    | or more tax-exempt organiza   | ations described                                 |                                 |                            |            |                      |
|               | 1 501(c) of the Code (other                                 |                                  |            | • •   |  |                                 | Yes                        | X          | No                   |
|               | complete the following sche                                 |                                  |            |   |  | _                               |                            |            | _                    |
|               | (a) Name of org   | anization                        |            | (b) Type of organization  | (0   | ) Description of relations      | ship                       |            |                      |
|               | N/A   |                                  |            |   |  |                                 |                            |            |                      |
|               |   |                                  |            |   |  |                                 |                            |            |                      |
|               |   |                                  |            |   |  | <del>-</del>                    |                            |            |                      |
|               |   |                                  |            |   |  |                                 |                            |            |                      |
|               |   |                                  |            |   |  |                                 |                            |            |                      |
|               |   |                                  |            | accompanying schedules and stat                                     |  |                                 | ay the IRS o               | liscuss ti | nis                  |
| Sign   🔊      | relief, it is true, correct, and com                        | plete Declaration of preparer (o | ther than  | taxpayer) is based on all information                               | on of which preparer has                         | e any knowledge                 | turn with the<br>own below | prepare    | <b>*</b>             |
| Here          | 1 11  |                                  |            | _ 1./   | Preside  |                                 | X Yes                      |            | No                   |
| Sıg           | nature of officer or trustee                                |                                  |            | Date  | Title  |                                 |                            |            |                      |
|               | Print/Type preparer's na                                    | me Prep                          | aper's s   | ignature  | Date (   | Check If PTIN                   |                            |            |                      |
|               | Gregory L.  | Gandy,                           |            |   | D 12 -1 5  | self- employed                  |                            |            |                      |
| Paid          | CPA   |                                  |            |   | ווייוסי  | P0                              | 0294                       | 661        |                      |
| Preparer      | Firm's name ► Big   | gsKofford,                       | e          |   |  | Firm's EIN ► 84-0               | 8841                       | 24         |                      |
| Use Only      |   |                                  |            |   |  |                                 |                            |            |                      |
|               | Firm's address ► 63   | 0 Southpoint                     | e C        | ourt, Suite 2   | 00   |                                 |                            |            |                      |
|               | Co.   | lorado Sprin                     | ıgs,       | CO 80906  |  | Phone no. 719.5                 |                            |            |                      |
|               |   |                                  |            |   |  |                                 | orm <b>99</b> 0            |            | (2016)               |

| 3 Grants and Contributions Paid During the Ye           | ar (Continuation)  | <del></del> _        |  | <u></u>  |
|---|--|----------------------|--|----------|
| Recipient   | If recipient is an individual,<br>show any relationship to<br>any foundation manager | Foundation status of | Purpose of grant or contribution                 | Amount   |
| Name and address (home or business)                     | or substantial contributor   | recipient            |  | <u> </u> |
|   | ļ  |                      |  |          |
| Cheyenne Village, Inc.                                  | }  | ₽C                   | General Purpose                                  | <b>\</b> |
| 6275 Lehman Drive                                       | <u>,</u>   |                      |  |          |
| Colorado Springs, CO 80918                              |  | <del> </del>         | <del> </del>                                     | 20,000   |
| Ohildana'a Tibanana Garbar                              |  |                      |  |          |
| Childern's Literacy Center<br>2928 Straus Lane          |  | PC                   | General Purpose                                  |          |
| Colorado Springs, CO 80907                              | ĺ  | <u> </u>             | )  | 3 000    |
| colorado springs, co soso,                              |  | <del> </del>         | +  | 3,000    |
| Colorado All Services Academy Ball                      | }  | PC                   | Canaral Rumnaga                                  |          |
| 2737 Bruan Court  | ţ  |                      | General Purpose                                  | İ        |
| Lakewood, CO 80228                                      |  |                      |  | 1,000    |
| Colorado Council for Economic                           |  | ₽C                   | General Purpose                                  |          |
| Education   |  |                      | Dencial Tarpose                                  |          |
| 3443 South Galena Street, Suite 190                     | 1  | İ                    |  |          |
| Denver, CO 80231  | <u> </u>   |                      |  | 5,000    |
|   |  |                      |  |          |
| Colorado Springs Children's Chorale                     |  | ₽C                   | General Purpose                                  | 1        |
| P.O. Box 7841   | }  |                      |  | Ì        |
| Colorado Springs, CO 80933                              |  |                      | <u> </u>   | 1,000    |
|   |  | ľ                    |  |          |
| Colorado Springs Youth Symphony                         | [  | PC                   | General Purpose                                  |          |
| P.O. Box 7846   |  | 4                    |  |          |
| Colorado Springs, CO 80933                              |  |                      | <del> </del>                                     | 1,000    |
|   |  |                      |  |          |
| Compassion International                                | ĺ  | PC                   | General Purpose                                  | }        |
| 12290 Voyager Way                                       |  | Ì                    |  |          |
| Colorado Springs, CO 80907                              | <del> </del>   | <del> </del>         | <del> </del>                                     | 201,620  |
|   |  |                      |  |          |
| Concrete Couch  |  | PC                   | General Purpose                                  |          |
| 214 E. Vermijo Avenue                                   | ĺ  | {                    |  |          |
| Colorado Springs, CO 80903                              |  | <del> </del>         | <del>                                     </del> | 1,000    |
|   | }  | }                    |  |          |
| Council of Neighborhood Organizations                   | }  | ₽C                   | General Purpose                                  | }        |
| 309 South Cascade Avenue                                |  |                      |  | 5 000    |
| Colorado SPrings, CO 80903                              | <del> </del>   |                      | +  | 5,000    |
|   |  |                      |  |          |
| Cystic Fibrosis   |  | PC .                 | General Purpose                                  |          |
| 400 S. Colorado Boulevard, Suite 840<br>Dever, CO 80246 |  | l                    |  | 10,000   |
| Total from continuation sheets                          | <del></del>  | <del></del>          | <del></del>                                      | 894,770  |

| 3 Grants and Contributions Paid During the Y       |  | <del></del>          | <del></del>                      | <del> </del> |
|--|--|----------------------|----------------------------------|--------------|
| Recipient  | If recipient is an individual,<br>show any relationship to<br>any foundation manager | Foundation status of | Purpose of grant or contribution | Amount       |
| Name and address (home or business)                | or substantial contributor   | recipient            |                                  |              |
|  |  |                      |                                  |              |
| Oriving Skills Institute                           |  | PC                   | General Purpose                  |              |
| 3280 E Woodmen Rd # 100                            |  | ì                    |                                  | ì            |
| Colorado Springs, CO 80920                         |  |                      | <del> </del>                     | 1,00         |
|  |  |                      |                                  |              |
| Fostering Hope                                     |  | ₽C                   | General Purpose                  | i            |
| 111 S. Tejon St, Suite 112                         |  |                      |                                  | l            |
| Colorado Springs, CO 80903                         | <del></del>  |                      | <del> </del>                     | 10,00        |
|  |  |                      |                                  |              |
| Gazette-El Pomar Empty Stocking Fund               |  | ₽C                   | General Purpose                  | ł            |
| 30 East Pikes Peak Avenue                          |  |                      |                                  |              |
| Colorado Springs, CO 80903                         |  |                      | <del> </del>                     | 10,00        |
|  |  |                      |                                  |              |
| Girl Scouts of Colorado                            |  | ₽C                   | General Purpose                  |              |
| 3801 E. Florida Ave, Suite 720                     |  | 1                    | •                                |              |
| Denver, CO 80210                                   | <del></del>  | <del> </del>         | <del> </del>                     | 1,50         |
|  |  |                      |                                  |              |
| International Justice MIssion                      |  | ₽C                   | General Purpose                  |              |
| P.O. Box 58147                                     | ii   | l                    | į                                |              |
| Washington, DC 20037                               |  |                      | <del> </del>                     | 200,00       |
| KTLF -Education Communications of                  |  | PC                   | General Purpose                  |              |
| Colorado Springs                                   |  |                      |                                  |              |
| 1665 Briargate Boulevard                           |  |                      |                                  |              |
| Colorado Springs, CO 80920                         | <del> </del>   |                      |                                  | 1,00         |
|  |  |                      |                                  |              |
| Landmark Community School                          | İ  | ₽C                   | General Purpose                  |              |
| 332 E Willamette Ave<br>Colorado Springs, CO 80903 |  |                      |                                  | 5,00         |
|  |  |                      |                                  |              |
| Latigo   |  | PC                   | General Purpose                  |              |
| 13710 Halleluiah Trail                             |  |                      | 1                                |              |
| Elbert, CO 80106                                   | <del> </del>   |                      | <del> </del>                     | 8,15         |
|  |  |                      |                                  |              |
| Leadership Program of the Rockies                  | 1  | PC                   | General Purpose                  |              |
| 1777 S. Harrison Street, Suite 807                 | J  |                      | 1                                |              |
| Denver, CO 80210                                   | <del> </del>   |                      |                                  | 10,00        |
|  |  |                      |                                  |              |
| Limon School District RE-4J<br>912 Badger Way      |  | ₽C                   | General Purpose                  |              |
| Limon, CO 80828                                    |  |                      |                                  | 2,50         |
| Total from continuation sheets                     |  | <del></del>          | <del></del>                      | <del></del>  |

The Norwood Foundation

Part XV | Supplementary Information

| Part XV Supplementary Information                       |  |  |                                  | <del></del> |
|---|--|--|----------------------------------|-------------|
| 3 Grants and Contributions Paid During the Ye           |  |  | <del></del>                      |             |
| Recipient  Name and address (home or business)          | If recipient is an individual,<br>show any relationship to<br>any foundation manager | Foundation status of                             | Purpose of grant or contribution | Amount      |
| Name and address (name of business)                     | or substantial contributor   | recipient  |                                  |             |
| Manitou SpringsHistorical Society                       | 1  | ₽C   | General Purpose                  |             |
| 9 Capital Hill Avenue                                   |  | FC   | General Purpose                  |             |
| Manitou Springs, CO 80829                               |  | İ  |                                  | 2,500.      |
|   |  |  |                                  |             |
| Mayo Clinic   | Ì  | PC   | General Purpose                  |             |
| 200 First Street  | 1  |  |                                  |             |
| Rochester, MN 55905                                     | <del> </del>   |  | <del> </del>                     | 3,000.      |
|   |  |  |                                  |             |
| MDA   |  | PC   | General Purpose                  |             |
| 222 S. Riverside Plaza, Suite 1500                      |  |  |                                  |             |
| Chicago, IL 60606                                       | <del> </del>   | <del>                                     </del> | <del> </del>                     | 1,000.      |
|   |  |  | }                                |             |
| Newborn Hope  |  | PC   | General Purpose                  |             |
| P.O. Box 2515   |  |  |                                  | 4 500       |
| Colorado Springs, CO 80901                              | <del> </del>   |  | <del> </del>                     | 1,500.      |
| 0 d1- v   |  |  |                                  |             |
| One Simple Voice<br>228 N. Cascade Ave                  |  | PC   | General Purpose                  |             |
| Colorado Springs, CO 80903                              | Į.   |  |                                  | 1,000.      |
|   |  |  |                                  |             |
| Penrose St. Francis Health Foundation                   |  | PC   | General Purpose                  |             |
| 2222 N.Nevada Avenue                                    | 1  | 1  | }                                |             |
| Colorado Springs, CO 80907                              |  |  | <del> </del>                     | 10,000.     |
|   |  |  |                                  |             |
| Pikes Peak Hospice Foundation                           |  | PC   | General Purpose                  |             |
| 2550 Tenderfoot Hill Street                             | ļ  | Į  |                                  |             |
| Colorado Springs, CO 80906                              |  |  | <del> </del>                     | 5,000.      |
|   |  |  |                                  | li          |
| Pikes Peak or Bust Rodeo Foundation                     |  | PC   | General Purpose                  | 1           |
| 1045 Lower Gold Camp Road<br>Colorado Springs, CO 80905 |  |  |                                  | 7,500.      |
| solorado springo, co obsos                              |  |  |                                  | 7,300.      |
| Pikes Peal Therapeutic Riding Center                    |  | ₽C   | General Purpose                  |             |
| 13620 Halleluiah Trail                                  |  | [-   |                                  | :           |
| Colorado Springs, CO 80106                              |  |  |                                  | 1,000.      |
|   |  |  |                                  |             |
| Pine Creek High School                                  |  | ₽C   | General Purpose                  |             |
| P.O. Box 876<br>Colorado Springs, CO 80901              |  |  |                                  | 1,000.      |
| Total from continuation sheets                          | <del></del>  | <del></del>                                      | <del></del>                      | 1,000.      |

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Purpose of grant or contribution Foundation Amount any foundation manager status of Name and address (home or business) or substantial contributor recipient Rotary Foundation РC General Purpose 1560 Sherman Avenue Evanston, IL 60201 100,000. Shield 616 - Colorado Springs Police General Purpose 5575 Molly Court Colorado Springs, CO 80908 1,000. Sigma Phi Epsilon Educational ÞС General Purpose Foundation 310 South Bolevard Richmond, VA 23220 25,000. St. Mary's High School PC General Purpose 2501 E Yampa St Colorado Springs, CO 80909 1,000. Tessa General Purpose 435 Gold Pass Heights Colorado Springs, CO 80906 2,500. The Give! Campaign ÞС General Purpose 235 S. Nevada Ave Colorado Springs, CO 80903 12,500. The Home Front Cares ÞС General Purpose P.O. Box 38516 Colorado Springs, CO 80937 5,000. The Navigators ÞС General Purpose P.O. Box 6000 Colorado Springs, CO 56007 2,500. The Outreach Foundation ÞС General Purpose 381 Riverside Drive, Suite 110 Franklin, TN 37064 100,000. ULI Foundation РC General Purpose 1025 Thomas Jefferson Street, NW Suite 500W Washington, DC 20007 20,000. Total from continuation sheets

The Norwood Foundation

Part XV | Supplementary Information

| Part XV Supplementary Information                  |   |  |  |          |
|--|---|--|--|----------|
| 3 Grants and Contributions Paid During the Ye      |   |  |  |          |
| Recipient  | If recipient is an individual, show any relationship to | Foundation                                       | Purpose of grant or contribution                 | Amount   |
| Name and address (home or business)                | any foundation manager<br>or substantial contributor    | status of recipient                              | Contribution                                     | , and    |
|  |   |  |  |          |
| University of Colorado Foundation                  | ļ   | PC   | General Purpose                                  |          |
| 4740 Walnut Street                                 |   |  |  |          |
| Boulder, CO 80301                                  |   | <del> </del>                                     | <del> </del>                                     | 26,000.  |
|  |   |  |  | Ì        |
| USO  |   | PC   | General Purpose                                  |          |
| 1625 Ellis St                                      |   |  |  | ]        |
| Port Carson, CO 80913                              |   | <del> </del>                                     | <del></del>                                      | 10,000.  |
|  |   |  |  | }        |
| Various Grants                                     |   | PC   | General Purpose                                  | }        |
| Under \$1,000                                      |   |  | -  | 1        |
| Colorado Springs, CO 80903                         |   |  | <u> </u>   | 2,000.   |
|  |   |  |  | 1        |
| Voice of Truth                                     |   | PC   | General Purpose                                  |          |
| P.O. Box 15013                                     |   |  | Scheral Larpose                                  |          |
| Colorado Springs, CO 80935                         | ĺ   |  |  | 1,000.   |
|  | <del> </del>  | <del>                                     </del> | <del> </del>                                     | 1        |
|  | į   |  |  |          |
| YMCA of the Pikes Peak Region                      |   | PC   | General Purpose                                  |          |
| 316 N. Nevada Avenue<br>Colorado Springs, CO 80903 |   |  |  | 25,000.  |
| Colorado Springs, Co 80903                         | <del></del>   | <del>                                     </del> | <del> </del>                                     | 25,000.  |
|  |   |  |  |          |
| Young Life   |   | PC   | General Purpose                                  |          |
| P.O. Box 520                                       | }   | 1  |  | 05.000   |
| Colorado Springs, CO 80901                         |   | <del>                                     </del> |  | 25,000.  |
| Young Musicians Foundation of                      |   | PC   | General Purpose                                  |          |
| Colorado   | }   | 1  | ľ  |          |
| P.O. Box 78  |   | 1  | ľ  |          |
| Littleton, CO 80160                                |   | <del>                                     </del> |  | 5,000.   |
|  |   | 1  |  | }        |
|  |   | 1  |  |          |
|  |   | <b>†</b>   | 1  |          |
|  |   | <del> </del>                                     | <del>                                     </del> |          |
|  |   | 1  | 1  |          |
|  |   | 1  | 1  |          |
|  |   |  | 1  | <u> </u> |
|  |   |  |  |          |
|  |   |  |  | 1        |
|  |   |  |  |          |
|  | <u> </u>  | <u> </u>   | <u> </u>   | <u> </u> |
| Total from continuation sheets                     |   |  |  | <u> </u> |

### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www irs gov/form990.

OMB No 1545-0047

2016

Name of the organization

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

| т   | ne Norwood Foundation   | 01-0705471  |
|---|---|---|
| Organization type (check of                                     | one)  |   |
| Filers of:  | Section:  |   |
| Form 990 or 990-EZ  | 501(c)( ) (enter number) organization   |   |
|   | 4947(a)(1) nonexempt chantable trust not treated as a private foundation  |   |
|   | 527 political organization  |   |
| Form 990-PF   | X 501(c)(3) exempt private foundation   |   |
|   | 4947(a)(1) nonexempt charitable trust treated as a private foundation   |   |
|   | 501(c)(3) taxable private foundation  |   |
| • •   | s covered by the <b>General Rule</b> or a <b>Special Rule.</b><br>(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule   | e See instructions                                  |
|   | n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling<br>one contributor. Complete Parts I and II See instructions for determining a contributor's  |   |
| Special Rules   |   |   |
| sections 509(a)(1)<br>any one contributo                        | n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, cor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount, line 1. Complete Parts I and II  | or 16b, and that received from                      |
| year, total contribu  | n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a itions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educately to children or animals. Complete Parts I, II, and III.  |   |
| year, contributions<br>is checked, enter h<br>purpose Don't coi | n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a section | ore than \$1,000 If this box<br>, charitable, etc., |
| but it must answer "No" on                                      | nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fo<br>Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fo<br>he filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).   | •   |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2016) Name of organization Employer identification number The Norwood Foundation 01-0705471 Contributors (See instructions). Use duplicate copies of Part I if additional space is needed (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 1 Development Management, Inc. X Person **Payroli** P.O. Box 792 930,650. Noncash (Complete Part II for Manitou Springs, CO 80829 noncash contributions) (a) (b) (d) (c) Name, address, and ZIP + 4 Type of contribution No. Total contributions Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) (b) (d) (c) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person Payroll Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions) (a) (b) (d) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (a) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No.

Person Payrol! Noncash (Complete Part II for noncash contributions)

Employer identification number

| The No                       | orwood Foundation  |  | 01-0705471 |
|------------------------------|--|--|------------|
| Part II                      | Noncash Property (See instructions). Use duplicate copies of Part II i | f additional space is needed                 | 1.         |
| (a)<br>No.<br>from<br>Part I | (b)<br>Description of noncash property given                           | (c)<br>FMV (or estimate<br>(See instructions |            |
|                              |  | -<br>-<br>-<br>  \$                          |            |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                             | (c)<br>FMV (or estimate<br>(See instructions |            |
|                              |  | -<br>-<br>-<br>  \$                          |            |
| (a)<br>No.<br>from<br>Part I | (b)<br>Description of noncash property given                           | (c)<br>FMV (or estimate<br>(See instructions |            |
|                              |  | -<br>-<br>-<br>-<br>\$\$                     |            |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                             | (c)<br>FMV (or estimate<br>(See instructions |            |
|                              |  | -<br>-<br>-<br>-<br>\$                       |            |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                             | (c)<br>FMV (or estimate<br>(See instructions |            |
|                              |  | -<br>-<br>-<br>\$                            |            |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                             | (c)<br>FMV (or estimate<br>(See instructions |            |
|                              |  |  |            |

Schedule B (Form 990, 990-EZ, or 990-PF) (2016) Name of organization Employer identification number The Norwood Foundation 01-0705471 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Part III Use duplicate copies of Part III if additional space is needed (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Form 990-PF

Grant Application Submission Information Part XV, Lines 2a through 2d

Statement 1

Name and Address of Person to Whom Applications Should be Submitted

Christopher S. Jenkins PO Box 792 Manitou Springs, CO 80829

Telephone Number

719-593-2600

Form and Content of Applications

See attached application form required for scholarships.

Any Submission Deadlines

None

Restrictions and Limitations on Awards

Individuals pursuing a college education must be a high school graduate. Individuals seeking trade or vocational skills need not be a high school graduate, but must comply with the admission requirements of the training institution. In addition the Foundation will support organizations and activities that pursue religious, charitable, scientific, literary or educational purposes and for the prevention of cruelty to children.

#### ·EXHIBIT A

#### THE NOR'WOOD FOUNDATION

#### SCHOLARSHIP FUND .

The Nor wood Foundation Scholership (200.) will be awarded to a worthy Colorado High School graduate who has been accepted to pursue a course of study or instruction at an accredited college or university granting undergraduate or graduate degrees, or at my institution to improve or enhance a literary, artistic, musical, scientific, teaching (or other similar espacity) skill, or talent of the grantee.

Applications will be reviewed by a committee of three persons: one member from the Foundation's Board and two members selected from the faculties of either the Colorado College, the University of Colorado, Colorado Springs, or School Districts in the Pikes Peak region. This committee will select as the recipient a student who has demonstrated an ability to excel in one or more academic disciplines and who has the potential for substantial additional schievement in the years ahead.

| This year, available funds will provide a scholarship of \$  | •       | The recipient               |
|--|---------|-----------------------------|
| will be eligible to receive a like sum each year (up to a m  | exinuu  | n of four years) that he or |
| she remains a student in good standing at a college, univers   | ità oco | ther institution.           |
| Applications must be received by the Foundation on or 200. The application package will consist of the following | pegore  | ۹                           |

- 1. Complete transcript of the student's academic record in high school:
- 2. Two references from high school teachers or comoselor, and one reference from high-school superintendent or principal; and
- 3. Application form completed by student.

# EXHIBIT B

# THE NOR'WOOD FOUNDATION

Scholarship Application Form

| NAME OF APPLICANT:  |
|---|
| HOME ADDRESS, ZIP:  |
| PHONE NUMBER:   |
| PARENTS' NAMES:   |
| HIGH SCHOOL, ADDRESS:   |
| CLASS STANDING BY PERCENTILE: HIGH SCHOOL GPA:  |
| COMPOSITE ACT OR SAT Verbal: ACT OR SAT Non-Verbal:   |
| ACADEMIC HONORS RECEIVED:   |
| (e.g., National Merit Scholarship Honorable Mention)  |
| INTENDED FIELD OF STUDY:  |
| APPLICATIONS SUBMITTED TO FOLLOWING SCHOOLS:  |
| APPLICANT ACCEPTED AT:  |
| Brief Summary of Extra-curricular activities and interests:   |
| Please strach to this application a short, handwritten (maximum two pages) description of your projected course of study in college and of your plans following college graduation. |
| Signed:   |
| Plates  |

# EXHIBIT C

# THE NOR WOOD FOUNDATION

# CONFIDENTIAL RECOMMENDATION FORM

High School Superintendent or Principal

| WALL | nd directly his.   |               |  |  |
|------|--|---------------|--|--|
|      | The Norwood Foundation   |               |  |  |
|      | P.O. Box 792   |               |  |  |
|      | Manitou Springs, CO 80829  |               |  |  |
|      |  |               |  |  |
| APPI | LICANT:  | <del></del> - |  |  |
| 1.   | Based on your overall knowledge, how do you rate this applicant's potential for noteworthy future achievements in the field or fields in which he/she is most talented and interested? |               |  |  |
|      |  |               |  |  |
|      | •  |               |  |  |
| 2.   | Applicant's financial need is:   |               |  |  |
|      | Greater than average   |               |  |  |
|      | Average  |               |  |  |
|      | Less than average  |               |  |  |
| J. , | Explain, if necessary:   |               |  |  |
|      | (School Name - Please Print)   |               |  |  |
|      | Signed:  |               |  |  |
|      | High School Superinten or Principal  | dent          |  |  |
|      | Date:  |               |  |  |