-:(\990-PF

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

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June 30 For calendar year 2019 or tax year beginning July 1 2019, and ending A Employer identification number Name of foundation The Nancy L Nixon Foundation 01-0759072 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) 9787 West Roxbury Place 7208338707 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ► Littleton, CO 80128 Initial return of a former public charity D 1. Foreign organizations, check here **G** Check all that apply. ☐ Initial return ☐ Amended return Final return 2. Foreign organizations meeting the 85% test Address change Name change check here and attach computation H Check type of organization: ✓ Section 501(c)(3) exempt private foundation E If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation J Accounting method ☑ Cash ☐ Accrual Fair market value of all assets at F. If the foundation is in a 60-month termination under section 507(b)(1)(B), check here end of year (from Part II, col. (c), Other (specify) line 16) ▶ \$ 528104 (Part I, column (d), must be on cash basis) Pelaul Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and for charitable (b) Net investment (c) Adjusted net amounts in columns (b), (c), and (d) may not necessarily equal expenses per books purposes the amounts in column (a) (see instructions)) (cash basis only) 4244 1 - Contributions, gifts, grants, etc., received (attach schedule) Check ▶ ☐ If the foundation is not required to attach Sch B 3 Interest on savings and temporary cash investments Dividends and interest from securities . . . . ъ́а Net rental income or (loss) h 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain . . . Income modifications 10a Gross sales less returns and allowances Mark District Less: Cost of goods sold Gross profit or (loss) (attach schedule) . . . 34786 11 Other income (attach schedule) Operating and Administrative EXBERABINEU 39030 Total. Add lines 1 through 11 . Compensation of officers, directors, trustees, etc. 13 14 Other employee salaries and wages . 15 Pension plans, employee benefits 16a Legal fees (attach schedule) Accounting fees (attach schedule) Other professional fees (attach schedule) . Interest Taxes (attach schedule) (see instructions) . 19 Depreciation (attach schedule) and depletion . 20 Occupancy . . . . . . . . . . . . 21 Travel, conferences, and meetings 22 Printing and publications . . 23 Other expenses (attach schedule) Total operating and administrative expenses. 24 Add lines 13 through 23 35000 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 -Subtract line 26 from line 12. a Excess of revenue over expenses and disbursements MANUAL PARTIES **'b- Net investment income** (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)

Pa	HI	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	of year
		should be for end-of-year amounts only. (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	12473		6020
	2	Saving's and temporary cash investments	1268		1359
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶		,	
•	4	Pledges receivable >			
		Less: allowance for doubtful accounts ▶	•		
	5	Grants receivable	1		
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶	ուրաստուն գտորոկիրիկան և իկիստեւ մասիզայի Ա	նությանիկանին հուրանին, որոշանության	The state of the s
		Less, allowance for doubtful accounts ▶			
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges	٠	•	
Ä	10a	Investments—U.S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	4366		0
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶		4.4.0	THE PERSONS
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans	282000		432000
	13	Investments—other (attach schedule)	73967		88725
	14	Land, buildings, and equipment basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ▶)			•
	16	Total assets (to be completed by all filers-see the		المداعدا	
		instructions. Also, see page 1, item l)	374074	528104	• 528104
	17	Accounts payable and accrued expenses			
S	18	Grants payable			STAMPASTE STATE
itie	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons		·	
Lia	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶			
	23	Total liabilities (add lines 17 through 22)			
alances		Foundations that follow FASB ASC 958, check here			
au	-24	and complete lines 24, 25, 29, and 30.  Net assets without donor restrictions			
sal		Net exects with dense vectors			
Fund B	25	Net assets with donor restrictions			AND CONTRACTOR OF THE CONTRACT
Ĕ		Foundations that do not follow FASB ASC 958, check here ▶ □ and complete lines 26 through 30.		•	
Ē	26	Capital stock, trust principal, or current funds			
or	27 27	Paid-in or capital surplus, or land, bldg., and equipment fund			44000 - 40000 - 500000
ets	28	Retained earnings, accumulated income, endowment, or other funds		, ,	STATE OF THE STATE
SS	29	Total net assets or fund balances (see instructions)	<u> </u>	528104	
t A	30	Total liabilities and net assets/fund balances (see		228109	EMASSAULT DECLAS
Net Assets	30	instructions)			
	ts]]]	Analysis of Changes in Net Assets or Fund Balances	L	<u>-</u>	Tarticourtees Albert Ferb. 1888, Farth Chr.
		I net assets or fund balances at beginning of year—Part II, colu	mn (a), line 29 (mus	st agree with	
•				_	374074
2		r amount from Part I, line 27a		2	4030
3		er increases not included in line 2 (itemize) Assignment of mort		statemeņt 3	150000
4		lines 1, 2, and 3		4	528104
5	Decr	reases not included in line 2 (itemize)		5	0
6	Total	reases not included in line 2 (itemize)  I net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), lı	ne 29 <b>6</b>	528104

	2-story brick warehou	nd(s) of property sold (for example, real ease, or common stock, 200 shs MLC Co		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr )
1a	•					
<u>b</u>						
<u>c</u>						
<u>d</u>						
е			<del>   </del>	l		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		n or (loss) (f) minus (g))
a						
<u> </u>						·
<u>c</u>						· · · · · · · · · · · · · · · · · · ·
<u>d</u>						<del></del>
е	Complete only for accets the	owing gain in column (h) and owing	Lby the foundation	on 10/21/60		· <del></del>
	Complete only for assets sno	owing gain in column (h) and owned	1	-		l (h) gain minus t less than -0-) <b>or</b>
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	, ,	s of col (i) (j), if any		rom col (h))
a			<del>                                     </del>	u// ·· =y		
<u>b</u>			***			
		<del></del>				
d		2.0-2011				
<u>u</u>						
2	Capital gain net income o		, also enter in Pa ), enter -0- in Pai		2	
3		n or (loss) as defined in section:	s 1222(5) and (6)			1
		I, line 8, column (c) See instru			_	•
Part	Part I, line 8	ler Section 4940(e) for Red			3	
If sect	tion 4940(d)(2) applies, leav	ivate foundations subject to the e this part blank. section 4942 tax on the distribu qualify under section 4940(e). De	utable amount of	any year in the t	ŕ	☐ Yes ☐ No
1		ount in each column for each ye			akıng anv entries.	
Cale	(a) Base period years endar year (or tax year beginning in	(b)		(c) f noncharitable-use as	Dis	(d) tribution ratio divided by col. (c))
	2018				, , , ,	
	2017		"			
	2016					
	2015					
	2014					
2	Total of line 1, column (d)				. 2	
3		for the 5-year base period-di		line 2 by 5.0 or		
		oundation has been in existence				
4	Enter the net value of non	charitable-use assets for 2019	from Part X, line	5	. 4	520183
5	Multiply line 4 by line 3				. 5	
6	Enter 1% of net investme	nt income (1% of Part I, line 27t	o)		. 6	
7	Add lines 5 and 6				7	
8		ons from Part XII, line 4			. 8	
	If line 8 is equal to or great Part VI instructions.	ater than line 7, check the box i	in Part VI, line 1b	, and complete t	that part using a 1	% tax rate. See the

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—	-see i	nstru	ctio	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1	### 8				
	Date of ruling or determination letter. (attach copy of letter if necessary—see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1		-		
	here ▶ ☐ and enter 1% of Part I, line 27b	****			<b>3.3</b>	
С	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	2				
3	Add lines 1 and 2	3				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4				
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5				
6	Credits/Payments.			#12.3		
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a			1 H 1		
b	Exempt foreign organizations—tax withheld at source					
С	Tax paid with application for extension of time to file (Form 8868) 6c					
d	Backup withholding erroneously withheld					
7	Total credits and payments. Add lines 6a through 6d	7	e pade act in " as a s	.354#*Ob50%	Al-mark, Shrindra, A	
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here [] if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be. Credited to 2020 estimated tax ▶ Refunded ▶	11				
Part						
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or of	tı bıt		Yes	No ·	
	participate or intervene in any political campaign?	•	1a		V	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See instructions for the definition	the	1b.		~	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mate	orials		海髓的		
	published or distributed by the foundation in connection with the activities.					
С	Did the foundation file Form 1120-POL for this year?		1c		· ·	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.		菱絲			
	(1) On the foundation. ▶ \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impos	sed				
	on foundation managers.   \$					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? .		2.		~	
	If "Yes," attach a detailed description of the activities.		<b>A</b>			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, artiof incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		~	
b	If "Yes," has it filed a tax return on Form 990-T for this year?		4b		~	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		~	
	If "Yes," attach the statement required by General Instruction T		100	OF U		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or		333			
	• 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			
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 Pa	rt XV	7 20053	Bodraw.	NAME   1	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions ▶					
					3.00	
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Ger	neral	12		AND THE	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	•	8b	52054	रू-दर्भ	
9	Is the foundation clairning status as a private operating foundation within the meaning of section 4942(j)(3)		2000		TANK A	
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV If "Y	'es,"				
10	complete Part XIV		9			
10	and a state of the	ıneır	10	ارا		
	names and addresses	<u> </u>	- 0			

(Pan	Statements Regarding Activities (continued)			
		金製品	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		V
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	40		_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	12	~	-
	Website address ▶ (			J
14	The books are in care of ▶ Telephone no. ▶			
	Located at ► ZIP+4 ►			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here and enter the amount of tax-exempt interest received or accrued during the year ▶ 15	•	•	▶ 🗆
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
∜Dá"ri	the foreign country ►  **VIEE** Statements Regarding Activities for Which Form 4720 May Be Required	353.7	STEER ST	1
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	\$629	Yes	No
1a	During the year, did the foundation (either directly or indirectly):	"Cation	446	1000
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes	通常數		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b)		1
С	Organizations relying on a current notice regarding disaster assistance, check here	激频		然於
·	were not corrected before the first day of the tax year beginning in 2019?	1c	<b>Lan</b>	学等が
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019?			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  ▶ 20 , 20 , 20 , 20			34.5
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2019 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 Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019)	7. A. A. B.		
4a b	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 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 2019?	4a	ne	N.S.

	Statements Regarding Activiti	62 IOI A	AUICH LOUI	4/20	may be n	equire	i <b>u</b> (contin	iueu)			
5a	During the year, did the foundation pay or incu	ır any am	nount to.							Yes	No
	(1) Carry on propaganda, or otherwise attempt	t to influ	ence legislati	on (sect	tion 4945(e	))? .	☐ Yes	์ 🗹 No			
	(2) Influence the outcome of any specific pul	olic elect	ion (see sect	ion 495	5); or to ca	arry on,					
	directly or indirectly, any voter registration	drive?					☐ Yes	✓ No			
	(3) Provide a grant to an individual for travel, s	tudv. or	other similar	purpos	es?	:	Yes	☑ No			
<u>.</u>	(4) Provide a grant to an organization other th	•					-				
	section 4945(d)(4)(A)? See instructions	/		-			☐Yes	✓ No			
	(5) Provide for any purpose other than religion	us, charit	table, scientif	ic, litera	ary, or educ	cational					
	purposes, or for the prevention of cruelty t						☐Yes .	IZ No			
b	If any answer is "Yes" to 5a(1)-(5), did any of	the trans	sactions fail t	o quali	fy under th	e excep					
	in Regulations section 53.4945 or in a current	notice re	garding disas	ster ass	ıstance? Se	ee instru	uctions		5b	Line Company	HA MALAN ( an
	Organizations relying on a current notice regain	ding disa	aster assistar	ice, che	ck here .			▶ □	100	1	1
С	If the answer is "Yes" to question 5a(4), does	s the fou	indation clain	n exem	ption from	the tax					
	because it maintained expenditure responsibil	ity for the	e grant? .				☐ Yes	☐ No			
	If "Yes," attach the statement required by Reg	ulations	section 53.49	45-5(d)							
6a	Did the foundation, during the year, receive ar	ny funds,	directly or in	directly	, to pay pre	emiums				4.0	
	on a personal benefit contract?						Yes 🗌	✓ No			
b	Did the foundation, during the year, pay premi	ums, dire	ectly or indire	ctly, on	a personal	benefit	contract	γ.	6b		_
	If "Yes" to 6b, file Form 8870.										
7a	At any time during the tax year, was the foundation										
b	If "Yes," did the foundation receive any proceed							n? .	7b		
8	Is the foundation subject to the section 4960										
	remuneration or excess parachute payment(s)									<b>对</b> 数据	
Ran	Information About Officers, Dire	ectors,	Trustees, F	ounda	tion Mana	agers,	Highly F	Paid E	mploy	ees,	
1	and Contractors  List all officers, directors, trustees, and fou	ndation	managare ar	ad thair	· oomnone	otion C	oo instru	.otiono	- 45		
•	List all officers, directors, trustees, and rou	luation	manayers ar	iu tiieii	compens	auvii. Ş	ee iiisii t	10110112	ايره .		
		(b) Titl	le, and average	(c) Co	mpensation	(d) (	Contribution	s to	1 2 - 4.		_
	(a) Name and address	hou devo	le, and average urs per week ted to position	(If r	mpensation not paid, iter -0-)	emplo	Contribution yee benefit erred compe	plans	(e) Expe other	nse acc allowan	count,
	Maples ,	hou	urs per week ted to position	(If r	not paid,	emplo	yee benefit	plans	(e) Expe other	nse acc allowan	ces
9787 V	n Maples V Roxbury PI Littleton, CO 80128	Truste	urs per week ted to position ee	(If r	not paid, iter -0-)	emplo	yee benefit	plans	(e) Expe other	nse acc allowan	ces
9787 V Lonnie	n Maples V Roxbury PI Littleton, CO 80128 Nixon	hou devo	urs per week ted to position ee	(If r	not paid, iter -0-)	emplo	yee benefit	plans	(e) Expe other	nse acc allowan	count, ces
9787 V Lonnie	n Maples V Roxbury PI Littleton, CO 80128	Truste	urs per week ted to position ee	(If r	not paid, iter -0-)	emplo	yee benefit	plans	(e) Expe other :	nse acc allowan	count, ces
9787 V Lonnie	n Maples V Roxbury PI Littleton, CO 80128 Nixon	Truste	urs per week ted to position ee	(If r	not paid, iter -0-)	emplo	yee benefit	plans	(e) Expe other	nse acc allowan	count, ces
9787 V Lonnie	n Maples V Roxbury PI Littleton, CO 80128 Nixon	Truste	urs per week ted to position ee	(If r	not paid, iter -0-)	emplo	yee benefit	plans	(e) Expe other ;	nse acc allowan	count, ces
9787 V Lonnie	n Maples V Roxbury PI Littleton, CO 80128 Nixon	Truste	urs per week ted to position ee	(If r	not paid, iter -0-)	emplo	yee benefit	plans	(e) Expe other :	nse acc	count, ces
9787 V Lonnie 6231 F	Nixon  Trospect Rd Longmont, CO 80503  Compensation of five highest-paid employ	Truste	ee	(If r	0	emplo and defe	yee benefit erred compe	plans	other a	allowan	ces
9787 V Lonnie 6231 F	n Maples V Roxbury PI Littleton, CO 80128 Nixon Prospect Rd Longmont, CO 80503	Truste	ee her than tho	(If i	0	emplo and defe	yee benefit erred compe	plans	other a	allowan	ces
9787 V Lonnie 6231 F	Nixon  Trospect Rd Longmont, CO 80503  Compensation of five highest-paid employ	Truste  Truste	ee	se inclusives	0	emplo and defe	yee benefit erred compe	uctions  utions to benefit deferred	other;	one, (	enter
9787 V Lonnie 6231 F	Naples V Roxbury PI Littleton, CO 80128 Nixon Prospect Rd Longmont, CO 80503  Compensation of five highest-paid employ "NONE."	Truste  Truste	ner than those (b) Title, and a hours per veek	se inclusives	ot paid, ter -0-)  0  uded on li	emplo and defe	yee benefit erred compe see instr (d) Contribu employee plans and o	uctions  utions to benefit deferred	other;	one, c	enter
9787 V Lonnie 6231 F	Naples V Roxbury PI Littleton, CO 80128 Nixon Prospect Rd Longmont, CO 80503  Compensation of five highest-paid employ "NONE."	Truste  Truste	ner than those (b) Title, and a hours per veek	se inclusives	ot paid, ter -0-)  0  uded on li	emplo and defe	yee benefit erred compe see instr (d) Contribu employee plans and o	uctions  utions to benefit deferred	other;	one, c	enter
9787 V Lonnie 6231 F	Naples V Roxbury PI Littleton, CO 80128 Nixon Prospect Rd Longmont, CO 80503  Compensation of five highest-paid employ "NONE."	Truste  Truste	ner than those (b) Title, and a hours per veek	se inclusives	ot paid, ter -0-)  0  uded on li	emplo and defe	yee benefit erred compe see instr (d) Contribu employee plans and o	uctions  utions to benefit deferred	other;	one, c	enter
9787 V Lonnie 6231 F	Naples V Roxbury PI Littleton, CO 80128 Nixon Prospect Rd Longmont, CO 80503  Compensation of five highest-paid employ "NONE."	Truste  Truste	ner than those (b) Title, and a hours per veek	se inclusives	ot paid, ter -0-)  0  uded on li	emplo and defe	yee benefit erred compe see instr (d) Contribu employee plans and o	uctions  utions to benefit deferred	other;	one, c	enter
9787 V Lonnie 6231 F	Naples V Roxbury PI Littleton, CO 80128 Nixon Prospect Rd Longmont, CO 80503  Compensation of five highest-paid employ "NONE."	Truste  Truste	ner than those (b) Title, and a hours per veek	se inclusives	ot paid, ter -0-)  0  uded on li	emplo and defe	yee benefit erred compe see instr (d) Contribu employee plans and o	uctions  utions to benefit deferred	other;	one, c	enter
9787 V Lonnie 6231 F	Naples V Roxbury PI Littleton, CO 80128 Nixon Prospect Rd Longmont, CO 80503  Compensation of five highest-paid employ "NONE."	Truste  Truste	ner than those (b) Title, and a hours per veek	se inclusives	ot paid, ter -0-)  0  uded on li	emplo and defe	yee benefit erred compe see instr (d) Contribu employee plans and o	uctions  utions to benefit deferred	other;	one, c	enter
9787 V Lonnie 6231 F	Naples V Roxbury PI Littleton, CO 80128 Nixon Prospect Rd Longmont, CO 80503  Compensation of five highest-paid employ "NONE."	Truste  Truste	ner than those (b) Title, and a hours per veek	se inclusives	ot paid, ter -0-)  0  uded on li	emplo and defe	yee benefit erred compe  see instr  (d) Contribu employee plans and c	uctions  utions to benefit deferred	other;	one, c	enter
9787 V Lonnie 6231 F	Naples V Roxbury PI Littleton, CO 80128 Nixon Prospect Rd Longmont, CO 80503  Compensation of five highest-paid employ "NONE."	Truste  Truste	ner than those (b) Title, and a hours per veek	se inclusives	ot paid, ter -0-)  0  uded on li	emplo and defe	yee benefit erred compe  see instr  (d) Contribu employee plans and c	uctions  utions to benefit deferred	other;	one, c	enter
9787 V Lonnie 6231 F	Naples V Roxbury PI Littleton, CO 80128 Nixon Prospect Rd Longmont, CO 80503  Compensation of five highest-paid employ "NONE."	Truste  Truste	ner than those (b) Title, and a hours per veek	se inclusives	ot paid, ter -0-)  0  uded on li	emplo and defe	yee benefit erred compe  see instr  (d) Contribu employee plans and c	uctions  utions to benefit deferred	other;	one, c	enter

Form **990-PF** (2019)

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employ and Contractors (continued)						
3	Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE	" .				
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation				
None						
~	······································					
Total	I number of others receiving over \$50,000 for professional services					
Par	t IX-A Summary of Direct Charitable Activities					
	at the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses				
1	The foundation provides college scholarships to worthy and deserving high school seniors					
_						
2	······					
3						
-						
		•				
4		-				
		•				
<b>13.0</b> 00						
	Summary of Program-Related Investments (see Instructions) scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	्र्र Amount				
	Scholarships awarded during FY 6-30-2019 are listed in Part XIV 3	Allouti				
,	GON DELICITIES CHICAGO CONTROL	35000				
2						
_	other program-related investments. See instructions					
3						
Total	I. Add lines 1 through 3	35000				

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreit see instructions.)	gn found	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes.	,	
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	6020
C	Fair market value of all other assets (see instructions)	1c	522084
d	Total (add lines 1a, b, and c)	1d	528104
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	\$ 77	
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	528104
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	7922
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	520183
6	Minimum investment return. Enter 5% of line 5	6	26009
Part.		oundation	าร
1	Minimum investment return from Part X, line 6	1	26009
2a	Tax on investment income for 2019 from Part VI, line 5	,	
b	Income tax for 2019. (This does not include the tax from Part VI.)	1.7	
С	Add lines 2a and 2b	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	26009
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	<del></del>
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	26009
Part	XII Qualifying Distributions (see instructions)	<u> </u>	·
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	35000
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the.	J	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	· · · · · · · · · · · · · · · · · · ·
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	35000
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b. See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	35000
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whother	the foundation

Pan	Undistributed Income (see instruction	ons)		1	
	,	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7				26009
2 . a	Undistributed income, if any, as of the end of 2019 Enter amount for 2018 only				
ь 3	Total for prior years: 20, 20				
a b	From 2014	enning coontinuctions Monte 11.0 15.00	ក្សា (ប្រព្រៃពេលមេខានការបស់ក្រុមប្រព្រៃក្រុមប្រជុំជំនាញ ប្រ	To all high communic handlers in	And the state of t
, c	From 2016				
e e	From 2017	Area Area			
. 4	<b>Total</b> of lines 3a through e				
а	line 4 ▶ \$Applied to 2018, but not more than line 2a .			THE BUILD WAS TO THE BUILD WE WAS A STREET	
b	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)	0			
d e	Applied to 2019 distributable amount Remaining amount distributed out of corpus				26009
5	Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).)				0
6	Enter the net total of each column as indicated below:  Corpus. Add lines 3f, 4c, and 4e. Subtract line 5		APP CONTRACTOR OF THE STATE OF		
b ,	Prior years' undistributed income. Subtract line 4b from line 2b		0		
Ċ	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				
d	Subtract line 6c from line 6b. Taxable amount—see instructions				
е	Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions			. 0	
, <b>f</b>	Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)		486		
8	Excess distributions cárryover from 2014 not applied on line 5 or line 7 (see instructions).				
9	Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:				
a	Excess from 2015				
b c	Excess from 2016	and interior minimum or a relation of	a vi-Assi ilkin ilkesiikininininkin vi-Es	A May he have a companied a set of frequency	Constitution of the Country of the C
d- C	Excess from 2018				
е	Excess from 2019				

	XIV Private Operating Foundat	ions (see mstru	ctions and Part	VII-A, question 9	)	
	If the foundation has received a ruling foundation, and the ruling is effective for	or determination 2019, enter the da	letter that it is a ate of the ruling.	private operating		
	Check box to indicate whether the foun		operating foundat		ction 🗌 4942	(j)(3) or 4942(j)(5)
а	Enter the lesser of the adjusted net lincome from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for	(a) 2019	<b>(b)</b> 2018	(c) 2017	(d) 2016	
	each year listed					/
)	85% of line 2a					
;	Qualifying distributions from Part XII, line 4, for each year listed .					
t	Amounts included in line 2c not used directly for active conduct of exempt activities					
e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter			/		
-	(1) Value of all assets			/		
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)			7		
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in					
	Part X, line 6, for each year listed					
;	"Support" alternative test—enter.					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(i)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization .					
	(4) Gross investment income	1				
ť	Supplementary Informatio	n (Complete th	is part only if t	ne foundation h	ad \$5,000 or i	more in assets at
	any time during the year-		•			
	Information Regarding Foundation					
	List any managers of the foundation was before the close of any tax year (but or	no have contribu				
5	List any managers of the foundation ownership of a partnership or other en			•		large portion of the
	Information Regarding Contribution Check here ▶ ☑ If the foundation of unsolicited requests for funds. If the fo complete items 2a, b, c, and d. See in	only makes controlled	butions to prese	lected charitable o	_	
<u></u>	The name, address, and telephone nu		tress of the perso	n to whom applica	tions should be	addressed
•	The name, address, and telephone nu	or or ornali add	a. 350 or the perso	то чтот арриса	aono snodia de	444,000U
)	The form in which applications should	be submitted and	d information and	materials they sho	uld include:	19-94-1
	Any submission deadlines	· ·				

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year University of Colorado -Basey None Public Scholarship \$1000 00 University of Colorado Boulder, CO - Horton None Public \$1000 00 Scholarship Colorado Mesa University -Mertz None Public Scholarship \$1000 00 University of CO - CO Springs - Rooney Public None Scholarship \$1000 00 University of Colorado Boulder, CO - Moore Public None Scholarship \$1000 00 Colorado State University - Bollinger None Public Scholarship \$1000 00 Colorado State University - Johnson None Public Scholarship \$1000 00 Rensselaer Polytechnic Institute - Green None Public Scholarship \$1000 00 University of Oklahoma - Cooper None Public Scholarship \$1000 00 University of Oklahoma - Grunsted None Public Scholarship \$1000 00 Johns Hopkins University - Lorenzo Public None Scholarship \$1000 00 Colorado School of Mines - Rulon Public None Scholarship \$1000 00 Colorado School of Mines - Tempel None Public Scholarship \$1000 00 University of Central Oklahoma - Benton None Public Scholarship \$1000 00 University of Missouri - Martin None Public Scholarship \$1000 00 Univ of Northern CO - Moreno None Public Scholarship \$1000 00 CONTINUED ON SUPPLEMENT PAGE За 35,000 00 Approved for future payment None

3b

	Analysis of Income-Producing Ac	tivities				
nter	gross amounts unless otherwise indicated.	Unrelated bu (a) Business code	(b) Amount	(c) Exclusion code	on 512, 513, or 514 (d) Amount	Related or exempt function income
1	Program service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions.)
	a ••••••					
	b					<u>-</u>
	c					
	d					
	e					
	f					
	<b>g</b> Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities					
5	Net rental income or (loss) from real estate:		, , ,		5 P V	11,1
	a Debt-financed property					
	<b>b</b> Not debt-financed property		<u> </u>			
	Net rental income or (loss) from personal property					
	Other investment income					
	Gain or (loss) from sales of assets other than inventory		• • •			
	Net income or (loss) from special events					
	Gross profit or (loss) from sales of inventory					
11	Other revenue: a First mortgage interest				20150	·
	b Dividends and interest from securities				1902	
	c Unrealized gains in stock and bond funds				8581	
	d Sale of AT&T stock -Fidelity				4153	
	e			<del>+</del>		<del>`</del>
	e Subtotal Add columns (b), (d), and (e)				34786	
13	Total. Add line 12, columns (b), (d), and (e)				34786 <b>13</b>	34786
<b>13</b> See '	<b>Total.</b> Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation	s.)				
13 See ' Par	Total. Add line 12, columns (b), (d), and (e)	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Par Line	Total. Add line 12, columns (b), (d), and (e)	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See ' Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations  XVI-B Relationship of Activities to the A  No. Explain below how each activity for which	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Par Line	Total. Add line 12, columns (b), (d), and (e)	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	,
13 See Par Line	Total. Add line 12, columns (b), (d), and (e)	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	,
13 See Par Line	Total. Add line 12, columns (b), (d), and (e)	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	,
13 See Par Line	Total. Add line 12, columns (b), (d), and (e)	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Par Line	Total. Add line 12, columns (b), (d), and (e)	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	,
13 See Par Line	Total. Add line 12, columns (b), (d), and (e)	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	,
13 See Par Line	Total. Add line 12, columns (b), (d), and (e)	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	,
13 See Par Line	Total. Add line 12, columns (b), (d), and (e)	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	,
13 See Par Line	Total. Add line 12, columns (b), (d), and (e)	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Par Line	Total. Add line 12, columns (b), (d), and (e)	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Par Line	Total. Add line 12, columns (b), (d), and (e)	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Par Line	Total. Add line 12, columns (b), (d), and (e)	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Par Line	Total. Add line 12, columns (b), (d), and (e)	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Par Line	Total. Add line 12, columns (b), (d), and (e)	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Par Line	Total. Add line 12, columns (b), (d), and (e)	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Par Line	Total. Add line 12, columns (b), (d), and (e)	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Par Line	Total. Add line 12, columns (b), (d), and (e)	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Par Line	Total. Add line 12, columns (b), (d), and (e)	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Par Line	Total. Add line 12, columns (b), (d), and (e)	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Par Line	Total. Add line 12, columns (b), (d), and (e)	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Par Line	Total. Add line 12, columns (b), (d), and (e)	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	,
13 See Par Line	Total. Add line 12, columns (b), (d), and (e)	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	,

Part XVII

Part	XVII	Informatio Organizati		nsfers to and Trans	actions and F	lelationshi	ps With	Noncha	ritable		mpt
1	ın s orga	the organization of section 501(c) (canizations?	directly or indirectly other than section	engage in any of the f 501(c)(3) organizatio	ns) or in secti	on 527, re				Yes	No
а	(1)	Cash	porting foundation t	o a noncharitable exer	npt organization	of. 			1a(1)		النفعا
b	Othe	Other assets . er transactions							1a(2)	· ,	<u>,</u>
	<b>(2)</b> F	Purchases of asse	ets from a noncharit	empt organization table exempt organizat	ion		· · ·		1b(1) 1b(2)		<i>V</i>
	(4)	Reimbursement a	rrangements	er assets			 		1b(3) 1b(4)		V V
С	(6) F	Performance of se	ervices or members	hip or fundraising solice ists, other assets, or parts.	itations				1b(5) 1b(6) 1c		V
d	If the	e answer to any e of the goods, o	of the above is "Ye other assets, or serv	es," complete the follo rices given by the repo gement, show in colum	wing schedule. Irling foundation	Column <b>(b)</b> :	should a Jation red	lways sho	w the	fair m	arket
(a) Line		(b) Amount involved		charitable exempt organization		iption of transfe					
										······································	
******											
		- 4									
	-					······································			_		
										-	
		<del></del>		<del></del>			<u> </u>			,	
2a	desc	cribed in section 5	501(c) (other than se	affiliated with, or relate ection 501(c)(3)) or in se		ore tax-exer	npt orga	anizations	Ye	es 🗹	No
b	It "Y	es," complete the	e following schedule	(b) Type of orga	nization		(c) Descrip	otion of relation	nship		~
							•			-	
										<del></del>	
	111.2	In a second seco					An Abraha ta		<b></b>		-
ign Iere	corr		laration of preparer (other th	ed this return, including accomman taxpayer) is based on all info				May the I with the p	RS discu	ss this	return elow?
aid repa	arer	Print/Type preparer	's name	Preparer's signature		Date		eck  if	PTIN		
Jse (							Firm's EIN	1 -			
	/	Europ's address					Dhone oe				

## Schedule B

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

Department of the Treasury Internal Revenue Service Name of the organization

The Nancy L Nixon Foundation

## **Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

**Employer identification number** 

01-0759072

Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation ☐ 527 political organization Form 990-PF ✓ 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions 

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization Employer identification number
The Nancy L Nixon Foundation 01-0759072

Part I	Contributors (see instructions). Use duplicate co	pies of Part I if additional space is	needed.
(a) No.	(b) • Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_1	Nixon Family Irrevocable Trust 9787 W Roxbury Place	\$ 4243.90	Person  Payroll  Noncash
	Littleton, CO 80128		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Lonnie Nixon 6231 Prospect Road Longmont, CO 80503	\$\$ 	Person Payroll Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person

## Part III, Line 3 Supplementary Information

## **Assignment of Mortgages**

The following gifts were made to the Foundation by Lonnie Nixon.

 4132 West Orchard Drive, Hart, MI 49420 Recorded May 21, 2019 Oceana County, MI Document No. 201900003023 \$80,000.00

 1928-1930 Grove Street, Boulder, CO 80301 Recorded May 23, 2019 Boulder County, CO Document No. 03714003 Reception No. 03419208

\$70,000.00

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year

Recipient	Relationship	Foundation status	Purpose of grant	Amount
University of Colorado – Boulder -Bardwell	None	Public	Scholarship	\$1,000.00
Colorado State University -Hodges	None	Public	Scholarship	\$1,000.00
Front Range Community College -Gonzalez	None	Public	Scholarship	\$1,000.00
Colorado State University -Schmidt	None	Public	Scholarship	\$1,000.00
Colorado State University -Ferry	None	Public	Scholarship	\$1,000.00
Baylor University Waco, Texas -Chou	None	Public	Scholarship	\$1,000.00
Grand Canyon University Phoenix, <i>i</i> -Parker	AZ None	Public	Scholarship	\$1,000.00
Northwest Missouri State - Barnett	None	Public	Scholarship	\$1,000.00
University of Colorado – Boulder -Bhatta	None	Public	Scholarship	\$1,000.00
University of Colorado – Boulder -Tran	None	Public	Scholarship	\$1,000.00
Brigham Young University Provo, U -McKell	T None	Public	Scholarship	\$1,000.00
Colorado State University - Slama	None	Public	Scholarship	\$1,000.00
Longmont Symphony	None	Public	Scholarships	\$2,000.00
Saint Vrain Valley School District Longmont, Colorado	None	Public	Scholarships	\$5,000.00
Total Line 3a				\$35,000.00