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2020

OMB No. 1545-0052

Return of Private Foundation

Department of the Treasury Internal Revenue Service

Form 990-PF

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.
 Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

		ndar year 2020, or tax year begin	ning 01-01-20	20 , aı	nd en	nding 12-31-		
						A Employer ide	entification numbe	•
						84-6028055		
			ed to street address)	Room/suite		B Telephone nu	mber (see instructior	s)
						(303) 670-7944		
			postal code			C If exemption	application is pending	g, check here
G Ch	neck al	l that apply: 🔲 Initial return 🔲	Initial return of a f	former public charity		D 1. Foreign or	ganizations, check he	re
		☐ Final return ☐	Amended return				ganizations meeting	
		<u>_</u>				, i		· -
_			· — · ·				n 507(b)(1)(A), chec	
of '	year (f	rom Part II, col. (c), ▶\$ 2.180.714	Other (specify)		ıaı		n 507(b)(1)(B), checl	
Pa	rt I	Analysis of Revenue and Expen	SeS (The total	(a) Revenue and				(d) Disbursements
			ot necessarily	expenses per	(ь)	Net investment income	(c) Adjusted net income	for charitable purposes
				50013	-			(cash basis only)
	1	schedule)	d (attach					
	2	Check ▶ ☐ if the foundation is not requ	uired to attach					
	,			5		5		
			investments		-			
	-	Gross rents		101,005	1	101,003		
	b	Net rental income or (loss)	UNITATION RIVE or province, country, and ZIP or foreign postal code or province, country, and ZIP or foreign postal code or province, country, and ZIP or foreign postal code papply:					
<u>e</u>	6a	Net gain or (loss) from sale of assets not	on line 10					
Revenue	ь	Gross sales price for all assets on line 6a				0		
~			· ·		-	0		
	_							
	10a		1					
	ь	Less: Cost of goods sold						
	c	Gross profit or (loss) (attach schedule)	[
	11	Other income (attach schedule)						
	12	Total. Add lines 1 through 11		101,874	1	101,874		
	13	Compensation of officers, directors, trust	ees, etc.	34,000		8,000	8,000	34,000
	14	Other employee salaries and wages .	[
ès	15	, , ,						
ens	me of foundation of MARY BATES TRUST mber and street (or P.C. 8899 BLACK MOUNTAIN y or town, state or provinifer, CO 804339715 Check all that apply: Check bye of organi Section 4947(a)(1) air market value of a five are (from Part II, no and a five are (from Part II), and a five are (from Part II), no and a five are (from Part II), and a fiv	Legal fees (attach schedule)						
Š.	b	Accounting fees (attach schedule)		1,875	1	1,875		
/e	_	Other professional fees (attach schedule)		1			
a ci				os.1	1	2.25		
<u> </u>		Taxes (attach schedule) (see instructions	·	3,230	<u>'</u>	3,230		
Ē					1			
Ą		• •	ŀ	2 620	1	2 620		
<u> </u>		•	ŀ	2,630	1	2,030		
Operating and Administrative Expenses		· ·	L	%] 800		800		
at III			-		+			
že.		•	-	42,535	5	16,535	8,000	34,000
5	25		-		-	·		2,653,924
		Total expenses and disbursements.	Add lines 24 and	2,696,459		16,535	8,000	2,687,924
	27	Subtract line 26 from line 12:		2,030,433		10,555	0,000	2,007,925
		Excess of revenue over expenses an	d]			
	 	disbursements Net investment income (if negative, e	_	-2,594,585	1	05.00		
		Adjusted net income (if negative, enter	L		1	85,339		
or		work Reduction Act Notice, see instru			Щ,	Cat No. 11280	<u> </u>	m 990-PF (2020

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Form 990-PF (2020)

. (11.11	balance Sneets	should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interes	t-bearing			_
	2	Savings and tempo	orary cash investments	12,177	5,601	5,601
	3	Accounts receivabl	le ▶			
		Less: allowance fo	r doubtful accounts >			
	4	Pledges receivable	>			
		Less: allowance fo	r doubtful accounts 🕨			
	5	Grants receivable				
	6	Receivables due fr	om officers, directors, trustees, and other			
		disqualified person	ns (attach schedule) (see instructions)			
	7	Other notes and lo	ans receivable (attach schedule) 🕨			
		Less: allowance fo	r doubtful accounts >			
2	8	Inventories for sale	e or use			
Assets	9	Prepaid expenses	and deferred charges			
¥	10a	Investments—U.S.	and state government obligations (attach schedule)	14,040	13,110	13,110
	b	Investments—corp	oorate stock (attach schedule)	220,238	9 212,938	2,162,003
	c	Investments—corp	oorate bonds (attach schedule)			
	11	Investments—land	, buildings, and equipment: basis 🕨			_
		Less: accumulated	depreciation (attach schedule)			
	12	Investments-mor	tgage loans			
	13	Investments—other	er (attach schedule)			
	14	- ·	nd equipment: basis 🕨			
			depreciation (attach schedule) 🕨			
	15	Other assets (desc	eribe >)			
	16	Total assets (to b	pe completed by all filers—see the			
		instructions. Also,	see page 1, item I)	246,455	231,649	2,180,714
	17	Accounts payable a	and accrued expenses			
ا م	18					
Liabilities	19	Deferred revenue				
	20	Loans from officers	s, directors, trustees, and other disqualified persons			
Lia	21		ner notes payable (attach schedule)	-		
	22		escribe ►)	2,730		
	23	Total liabilities(a	dd lines 17 through 22)	2,730	0	
Š		Foundations that	t follow FASB ASC 958, check here 🕨 🗌			
2		and complete lin	es 24, 25, 29 and 30.			
ala	24	Net assets without	donor restrictions			
Fund Balances	25	Net assets with do	nor restrictions			
Ĕ۱		Foundations that	t do not follow FASB ASC 958, check here			
드			es 26 through 30.			
s or	26	_	t principal, or current funds			
Net Assets	27		surplus, or land, bldg., and equipment fund			
AS:	28	·	, accumulated income, endowment, or other funds	243,725	231,649	
e e	29	Total net assets	or fund balances (see instructions)	243,725	231,649	
Z	30	Total liabilities a	nd net assets/fund balances (see instructions) .	246,455	231,649	
Pa	rt III	Analysis of C	hanges in Net Assets or Fund Balances			

	of-year figure reported on prior year's return)				 		•			1	243,725
2	Enter amount from Part I, line 27a				 					2	-2,594,585
3	Other increases not included in line 2 (itemize)							9	į į	3	2,582,509
4	Add lines 1, 2, and 3				 					4	231,649
5	Decreases not included in line 2 (itemize) ▶							_		5	

Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-

6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

			kind(s) of property sold (e.g se; or common stock, 200 s			How acqu P—Purch D—Donat	ase	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	1					2 20114			
	-								
•									
•									
	(a)		(f)		1 ((g)		(1	h)
	(e) Gross sales price		Depreciation allowe	d		other basis			r (loss)
			(or allowable)		plus expe	ense of sale		(e) plus (r) minus (g)
a									
<u>b</u>									
c d									
e e									
	Complete only for assets	showi	ing gain in column (h) and	owned h	v the foundation o	n 12/31/69		,	I)
			(i)			(k)		Gains (Col. (I	h) gain minus
	(i) F.M.V. as of 12/31/69		Adjusted basis			of col. (i)			less than -0-) or
			as of 12/31/69		over col.	. (j), if any		Losses (fro	om col.(h))
a									
b									
d									
е									
				í If gai	in, also enter in Pa	art I. line 7	1		
2	Capital gain net income	or (ne	et capital loss)		ss), enter -0- in P		}	_	
_					->		, ,	2	
3	=		(loss) as defined in section	-					
	in Part I, line 8	rt I, IIr	ne 8, column (c) (see instru	-			. }	3	
							<u> </u>		
Part	t V Qualification U	Jnder	Section 4940(e) for	Reduce	ed Tax on Net	Investme	nt Inc	come	
ECT	ION 4940(e) REPEA	LED (ON DECEMBER 20, 20	19 - DO	NOT COMPLE	ETE			
1	Reserved								
	(a) Reserved		(b) Reserved		(c) Reserved			(d) Reserved	
							<u> </u>	-	
2	Reserved						2	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
3	Reserved						3		
4	Reserved						4		
5	Reserved						5		
6	Reserved						6		
7	Reserved						7		
8	Reserved ,						8		
-				_	- ,				

Page **6**

Pai	rt VII-B	Statements Regarding	ng	Activities for Which	Form 4720 May Be	Required (continue)	d)				
5a	During the	e year did the foundation pa	у о	r incur any amount to:							Yes	No
	(1) Carry	on propaganda, or otherwis	se a	ttempt to influence legisl	ation (section 4945(e))?		Yes	V	No			
	(2) Influe	nce the outcome of any spe	cific	public election (see sect	tion 4955); or to carry		ies		140			
	on, di	rectly or indirectly, any vote	r re	gistration drive?			Yes	V	No			
	(3) Provid	de a grant to an individual fo	or tr	avel, study, or other sim	ilar purposes?		Yes		No			
	(4) Provid	de a grant to an organizatior	on other than a charitable, etc., organization described						140			
	in sec	tion 4945(d)(4)(A)? See ins	nstructions						No			
	(5) Provid	de for any purpose other tha	han religious, charitable, scientific, literary, or						140			
	educa	tional purposes, or for the p	e prevention of cruelty to children or animals?									
b	If any ans	swer is "Yes" to $5a(1)-(5)$, d	id a	iny of the transactions fa	ail to qualify under the ex	ceptions desc	└ Yes ribed in	ب	No			
	Regulation	ns section 53.4945 or in a co	urre	nt notice regarding disas	ter assistance? See instr	ructions				5b		
	Organizat	ions relying on a current not	tice	regarding disaster assist	ance check here		▶		1			
C	If the ans	wer is "Yes" to question 5a(4),	does the foundation clair	n exemption from the				•			
	tax becau	se it maintained expenditure	e re	sponsibility for the grant	?		Yes	П	No			
	If "Yes," a	ttach the statement require	d b	y Regulations section 53.	4945-5(d).		163		140			
6a	Did the fo	undation, during the year, r	ece	ive any funds, directly or	indirectly, to pay premi	ums on						
	a persona	l benefit contract?				•	☐ Yes		No			
b	Did the fo	undation, during the year, p	ау	premiums, directly or inc	lirectly, on a personal be	enefit contract			NO	6b		No
	If "Yes" to	6b, file Form 8870.										
7a	At any tim	ne during the tax year, was	the	foundation a party to a p	prohibited tax shelter tra	nsaction?	□ v	П	No			
b	If "Yes", d	lid the foundation receive ar	ту р	roceeds or have any net	income attributable to the	ne transaction	tes		NO	7b		
8	Is the fou	ndation subject to the section	n 4	960 tax on payment(s) o	of more than \$1,000,000	in remunerat	on or					
	excess pa	rachute payment during the	ye	ar?			Yes	П	No			
		Information About Of	fic	ers. Directors. Trust	tees. Foundation Ma	anagers. Hi		d Ei		vees.		
Pai	rt VIII	and Contractors		,,		 ,	5 ,			,,		
1	List all of	ficers, directors, trustees	, fo	oundation managers ar	nd their compensation	. See instruc	tions					
			(b) Title, and average	(c) Compensation (If		ributions t		(e)	Evner	se acc	ount
	(a) Na	ame and address		hours per week devoted to position	not paid, enter -0-)	employee be deferred o					lowand	
500	Additional D	Data Table		devoted to position	-0-)	deletted C	Jilipelisati	OH	+			
<u> </u>	-dultional L	vata Table										
									+			
									+			
									-			
	Compos			anlawaaa (athau thau t	hasa ingludad an lina i	1 in at	ations) T	·£		-tou "	NONE	71
	Compens	ation of five highest-paid	en	ipioyees (other than t		(d) Cont			-	iitei	NONE.	•
(a)	Name and a	address of each employee pa	aid	(b) Title, and average	(-) (ee benefit			Expens	se acco	ount,
. ,		ore than \$50,000		hours per week devoted to position	(c) Compensation	plans an	d deferred		ót	her all	owanc	es .
						comp	ensation					
Tota	I number o	f other employees paid over	\$5	0,000			. ▶					
									For	m 99	0-PF (2020

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Part VIII Information About Officers, Directors, Trus and Contractors (continued)	stees, Foundation Managers, Highly Paid I	Employees,
3 Five highest-paid independent contractors for professiona	l services (see instructions). If none, enter "NC	NE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional service	es	
Part IX-A Summary of Direct Charitable Activities		<u> </u>
List the foundation's four largest direct charitable activities during the tax year. In organizations and other beneficiaries served, conferences convened, research pape	iclude relevant statistical information such as the number of	Expenses
1 N/A	ers produced, etc.	0
2		
3		
4		
Part IX-B Summary of Program-Related Investments		T
Describe the two largest program-related investments made by the foundation	during the tax year on lines 1 and 2.	Amount
1 N/A 2		
		_
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	<u> </u>	
		Form 990-PF (2020)

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

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

Amounts set aside for specific charitable projects that satisfy the:

the section 4940(e) reduction of tax in those years.

3

4

5

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

2

За 3h

4

5

2,687,924

2,687,924

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e Excess from 2020. . . .

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Part XIII Undistributed Income (see instruc	ctions)			
	(a) Corpus	(b) Years prior to 2019	(c) 2019	(d) 2020
1 Distributable amount for 2020 from Part XI, line 7				170,336
2 Undistributed income, if any, as of the end of 2020:				
a Enter amount for 2019 only			167,615	
b Total for prior years: 20, 20				
3 Excess distributions carryover, if any, to 2020:				
a From 2015				
b From 2016				
c From 2017				
d From 2018				
e From 2019				
f Total of lines 3a through e				
4 Qualifying distributions for 2020 from Part XII, line 4: ► \$ 2,687,924				
a Applied to 2019, but not more than line 2a			167,615	
 Applied to undistributed income of prior years (Election required—see instructions) 				
c Treated as distributions out of corpus (Election required—see instructions)				
d Applied to 2020 distributable amount				170,336
e Remaining amount distributed out of corpus	2,349,973			

	2,007,321		I	
а	Applied to 2019, but not more than line 2a		167,615	
b	Applied to undistributed income of prior years (Election required—see instructions)			
С	Treated as distributions out of corpus (Election required—see instructions)			
d	Applied to 2020 distributable amount			170,336
е	Remaining amount distributed out of corpus	2,349,973		
5	Excess distributions carryover applied to 2020.			
	(If an amount appears in column (d), the same amount must be shown in column (a).)			
6	Enter the net total of each column as indicated below:			
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	2,349,973		
b	Prior years' undistributed income. Subtract line 4b from line 2b			
C	Enter the amount of prior years' undistributed			

	, , ,			
	(If an amount appears in column (d), the same amount must be shown in column (a).)			
6	Enter the net total of each column as indicated below:			
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	2,349,973		
b	Prior years' undistributed income. Subtract line 4b from line 2b			
С	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 2019. Subtract line 4a from line 2a. Taxable amount—see instructions			
f	Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020			0
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)			
8	Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions)			
9	Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a	2,349,973		

	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			
_	Undistributed income for 2019. Subtract line			
٦	4a from line 2a. Taxable amount—see			
	instructions			
_				
Т	Undistributed income for 2021. Subtract			
	lines 4d and 5 from line 1. This amount must			0
	be distributed in 2020			0
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)			
8	Excess distributions carryover from 2015 not			
	applied on line 5 or line 7 (see instructions)			
9	Excess distributions carryover to 2021.			
	Subtract lines 7 and 8 from line 6a	2,349,973		
10	Analysis of line 9:			
а	Excess from 2016			
b	Excess from 2017			
С	Excess from 2018	_		
d	Excess from 2019			

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2,349,973

P	art XIV Private Operating Found	ations (see instru	ictions and Part V	II-A, question 9)		
1a	If the foundation has received a ruling or del foundation, and the ruling is effective for 20			rating		
b	Check box to indicate whether the organizati	on is a private opera	ting foundation desc	cribed in section \Box	l 4942(j)(3) or □	4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(a) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2020	(b) 2019	(c) 2018	(d) 2017	(e) Total
	year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	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)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in					
	Part X, line 6 for each year listed					
С	"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(j)(3)(B)(iii)					
	(3) Largest amount of support					
	from an exempt organization					
	(4) Gross investment income					
Pa	supplementary Information			foundation had s	\$5,000 or more i	n
1	assets at any time during th Information Regarding Foundation Mana		ructions.)			
_	List any managers of the foundation who hav before the close of any tax year (but only if	e contributed more t				1
h	NA List any managers of the foundation who own	100% or more of the	a stack of a corporat	tion (or an oqually la	ergo portion of the	
D	ownership of a partnership or other entity) o				arge portion of the	
2	Information Regarding Contribution, Gra	ant, Gift, Loan, Sch	olarship, etc., Pro	ograms:		
	Check here ▶ ☐ if the foundation only mak				does not accept	
	unsolicited requests for funds. If the founda other conditions, complete items 2a, b, c, al	tion makes gifts, gra	nts, etc. to individua	als or organizations	under	
a	The name, address, and telephone number of	or e-mail address of	the person to whom	applications should	be addressed:	
	RYAN KARGOL					
	341 EUREKA ST					
	CENTRAL CITY, CO 80427 (303) 670-7944					
	The form in which applications should be sub	mitted and informat	ion and materials th	nev should include:		
_	LETTER			,		
С	Any submission deadlines: NONE					
d	Any restrictions or limitations on awards, sur	ch as by geographica	al areas, charitable f	ields, kinds of institu	utions, or other	
	factors:		·		·	
	HUMANE SOCIETIES					

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Part 1	XVI-A Analysis of Income-Producing	Activities				
Enter g	ross amounts unless otherwise indicated.		usiness income	·	n 512, 513, or 514	(e) Related or exempt function income
1 Prog	ram service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(See instructions.)
	ees and contracts from government agencies					
_	mbership dues and assessments					
3 Inte	erest on savings and temporary cash			14		
	dends and interest from securities			14		
	rental income or (loss) from real estate: ebt-financed property					
	ot debt-financed property.					
	rental income or (loss) from personal property					
	er investment income.			15		
	n or (loss) from sales of assets other than					
	entory			15		
	income or (loss) from special events:					
10 Gro	ss profit or (loss) from sales of inventory er revenue: a					
	er revenue. a					
	ototal. Add columns (b), (d), and (e)					
	al. Add line 12, columns (b), (d), and (e).			1	.3	
	e worksheet in line 13 instructions to verify calcul XVI-B Relationship of Activities to th		hment of Even	nt Durnoses		
		. ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		p p		
Line N ▼	Explain below how each activity for which the accomplishment of the foundation's ex instructions.)					
	1					

Part XVII	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations	
Did the same	-in-time discrete and in-the control in the control of the fellowing with the control of the con	Т

Рē	ILT YAT	Exempt Or	ganizations										
1 (Did the organization directly or indirectly engage in any of the following with any other organization described in section 501 (c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?									Yes	No		
аΊ	ransfers	s from the reporting	g foundation to a r	oncha	ritable exe	empt organizatio	n c	of:					
(1) Cas	h								.	1a(1)		No
((2) Oth	er assets								1a(2)		No	
		er transactions:											
	(1) Sales of assets to a noncharitable exempt organization. (2) Purchases of assets from a noncharitable exempt organization.						ŀ	1b(1)		No			
							•			ŀ	1b(2)		No
		ital of facilities, equ					•			- t	1b(3)		No
		mbursement arrang								- t	1b(4) 1b(5)		No No
		ns or loan guarante ormance of services									1b(6)		No
		of facilities, equipm	•		-					·	1c		No
	_	swer to any of the	· · ·		=					market v			-110
c	of the go	ods, other assets,	or services given b	y the	reporting	foundation. If th	e f	oundation receive	d less than fair ma	rket value			
į	n any tr	ansaction or sharin	g arrangement, sh	ow in	column (c	1) the value of the	ne (goods, other asse	ts, or services rece	ived.			
(a) l	ine No.	(b) Amount involv	red (c) Name of	nonch	aritable exe	mpt organization		(d) Description of	transfers, transactions	s. and shar	ina arrar	naement	ts
` ,		(-,	(,,			, ,		()	,	,		<u> </u>	
	+												
2 a I	s the fo	undation directly or	indirectly affiliate	d with	, or relate	d to, one or mor	e t	ax-exempt organi	zations				
		d in section 501(c)	•		•					res 🔽] No		
		complete the follow	•	•	. , . , ,								
	,	(a) Name of orga	anization		(i	b) Type of organiza	tior	า	(c) Descriptio	n of relatio	nship		
	Un	der penalties of pe	rjury, I declare tha	t I ha	ve examin	ed this return, ir	nclu	uding accompanyi	ng schedules and s	tatement	s, and t	o the l	best
	of	my knowledge and	belief, it is true, c										
Sig		ich preparer has ar	ny knowleage.			I				May th	e IRS dis	cuce th	ic
He		*****				2021-10-14		*****		return			
								—) ——		with th below	e prepar	er show	/n
	'	Signature of office	er or trustee			Date		7 Title			str.)	Yes ☑	No I
		Print/Type prep	parer's name	Prep	arer's Sigr	nature		Date	Check if self-	PTIN			
									employed ▶ □		P00990	652	
Pai	id	Ryan Kargol						2021-10-14					
_	pare	Firm's name	Rocky Mountain	I Tax ஃ	Accounting	a Services Inc		<u> </u>	l				
	e Onl	i ii iii o maine P	.tocky Flouritain	. un u	ccoantall	g 30111003 1110				Firm's EI	N >		
		Firm's address	▶ 13640 Lake Av	e			_						
			Brighton, CO	30603						Phone no	o. (303)	450-7	7605

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, (e) other allowances hours per week not paid, enter Contributions to (b) devoted to position -0-) employee benefit plans and deferred compensation MARILYN C BRISCOE TRUSTEE 5,000 001.00 15842 WEST REMINGTON DRIVE SUPRISE, AZ 853742189 JANET WOLFF TRUSTEE 7,000 001.00 1500 LAS LOMAS NW TRUSTEE 8,000 010.00 341 EUREKA STREET CENTRAL CITY, CO 80427

ALBUQUERQUE, NM 87111			
REBECCA A WOLFE	TRUSTEE	7,000	
81 SKYLAND TIJERAS, NM 87059	001.00		
RYAN KARGOI	TRUSTEE	8 000	

7,000

TRUSTEE

001.00

DAN WOLFF

5206 MERIDIAN AVE SAN JOSE, CA 95118

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution

1,500

2,653,924

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

a Paid during the year			
ALLMOST HOME ADOPTIONS 6010 WEST 88TH AVENUE WESTMINSTER, CO 80031		DONATION	1,500

ARKANSAS VALLEY HUMANE SOCIETY		DONATION
ANIMAL RESCUE OF THE ROCKIES PO BOX 5531 BRECKENRIDGE, CO 80424		DONATION

any foundation manager

or substantial contributor

Name and address (home or business)

PO BOX 5531 BRECKENRIDGE, CO 80424			
ARKANSAS VALLEY HUMANE SOCIETY PO BOX 1335		DONATION	6,0

PO BOX 5531 BRECKENRIDGE, CO 80424			
ARKANSAS VALLEY HUMANE SOCIETY PO BOX 1335		DONATION	6,00

BRECKENRIDGE, CO 80424			
ARKANSAS VALLEY HUMANE SOCIETY PO BOX 1335 BUENA VISTA, CO 812111335		DONATION	6,000

ARKANSAS VALLEY HUMANE SOCIETY		DONATION	6,0
PO BOX 1335			
BUENA VISTA CO 812111335			

		I .	
UENA VISTA, CO 812111335			
O BOX 1335			

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
BOULDER VALLEY HUMANE SOCIETY 2323 55TH STREET		DONATION	4,500
BOULDER, CO 80301			

OULDER, CO 80301				
REEDER RELEASE ADOPTION SERVICE 1500 COUNTY ROAD 477			DONATION	
NICADRO CO 01034	l I	l		

BREEDER RELEASE ADOPTION SERVICE 18500 COUNTY ROAD 477 BONCARBO, CO 81024		DONATION	1,000

BONCARBO, CO 81024			
CATS ALIVEPO BOX 84 ALAMOSA, CO 811010084		DONATION	1,000

BONCARBO, CO 81024			
CATS ALIVEPO BOX 84 ALAMOSA, CO 811010084		DONATION	1,000

▶ 3a

2,653,924

CATS ALIVEPO BOX 84		DONATION	1,0
ALAMOSA,CO 811010084			

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient

If recipient is an individual, show any relationship to status of contribution

Purpose of grant or contribution

2,653,924

any foundation manager

Marsa and address (home or business)

MORRISON, CO 804650242

Name and address (nome or business)	or substantial contributor	·		
a Paid during the year				
CAWS-DELTA COUNTY CITIZENS PO BOX 1736 PAONIA, CO 814281736			DONATION	3,000
COLORADO HUMANE SOCIETY & SPCA 2080 SOUTH QUEBEC STREET DENVER, CO 802313298			DONATION	5,000
COLORADO PEKE & POM RESCUE INC PO BOX 242			DONATION	1,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution

▶ 3a

2,653,924

any foundation manager

or substantial contributor

Name and address (home or business)

a Paid during the year			
DENVER DUMB FRIENDS LEAGUE 2080 SOUTH QUEBEC STREET DENVER, CO 802313298		DONATION	27,000
DIVINE EELINE EIV		DONATION	1 400

DENVER, CO 802313298			
DIVINE FELINE FIX 2600 W 2ND AVE SUITE 10 DENVER, CO 80219		DONATION	

2600 W 2ND AVE SUITE 10 DENVER, CO 80219		DONATION	1,400
EAGLE VALLEY HUMANE SOCIETY PO BOX 4105		DONATION	1,561

DENVER, CO 80219			
EAGLE VALLEY HUMANE SOCIETY PO BOX 4105		DONATION	1,561
EAGLE, CO 816314105	I		i

*		
EAGLE VALLEY HUMANE SOCIETY	DONATION	1,561
PO BOX 4105		
EAGLE, CO 816314105		

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

	or substantial continuation		
a Paid during the year			
EVERGREEN ANIMAL PROTECTIVE LEAGUE PO BOX 2517		DONATION	2,500

EVERGREEN, CO 804372517			
EVERY CREATURE COUNTS 1245 FACTORY CIRCLE		DONATION	
FORT LUPTON, CO 80621			

Total .

EVERY CREATURE COUNTS 1245 FACTORY CIRCLE FORT LUPTON, CO 80621		DONATION	5,500
FELINE RESCUE NETWORK		DONATION	1,000

1245 FACTORY CIRCLE FORT LUPTON, CO 80621		3,300
FELINE RESCUE NETWORK	DONATION	1,000

FORT LUPTON, CO 80621			
FELINE RESCUE NETWORK 2129 EAST BOULDER STREET COLORADO SPRINGS, CO 80909		DONATION	1,000

FELINE RESCUE NETWORK 2129 EAST BOULDER STREET COLORADO SPRINGS, CO 80909		DONATION	1,000
<u> </u>			

2,653,924

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution

▶ 3a

2,653,924

any foundation manager

or substantial contributor

Name and address (home or business)

	or substantial contributor		
a Paid during the year			
FOOTHILLS ANIMAL SHELTER 580 MCINTYRE STREET GOLDEN, CO 80401		DONATION	5,000
FORT COLLINS RESCUE SPAY & NEUTER 2321 E MULBERRY ST 12A FORT COLLINS, CO 80521		DONATION	900

FORT COLLINS RESCUE SPAY & NEUTER 2321 E MULBERRY ST 12A FORT COLLINS, CO 80521		DONATION	Ġ
FORT MORGAN HUMANE SOCIETY		DONATION	2,6

2321 E MULBERRY ST 12A FORT COLLINS, CO 80521		BONATION	366
FORT MORGAN HUMANE SOCIETY 900 EAST RAILROAD FORT MORGAN CO 80701		DONATION	2,600

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution

▶ 3a

2,653,924

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

any foundation manager

or substantial contributor

Name and address (home or business)

PAGOSA SPRINGS, CO 81147

a Paid during the year			
FREEDOM SERVICE DOGS INC 2000 WEST UNION AVENUE ENGLEWOOD, CO 80110		DONATION	4,000
HAMLETT SPAY & NEW CLINIC INC 3660 CITADEL DRIVE NORTH COLORADO SPRINGS, CO 80909		DONATION	4,000

HAMLETT SPAY & NEW CLINIC INC 3660 CITADEL DRIVE NORTH COLORADO SPRINGS, CO 80909		DONATION	4,000
HUMANE SOCIETY OF PAGOSA SPRINGS PO BOX 2230		DONATION	4,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

or substantial contributor

Total .

a Paid during the year			
HUMANE SOCIETY OF PIKES PEAK REGION 610 ABBOT LANE COLORADO SPRINGS, CO 80905		DONATION	6,000

COLORADO SPRINGS, CO 80905			
HUMANE SOCIETY SOUTH PLATTE VALLE 2129 WEST CHENANGO AVE LITTLETON, CO 80120		DONATION	5,000
INTERMOUNTAIN HUMANE SOCIETY		DONATION	2 500

2129 WEST CHENANGO AVE LITTLETON, CO 80120			
INTERMOUNTAIN HUMANE SOCIETY PO BOX 1250 CONIFER, CO 80433		DONATION	2,500

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2,653,924

LITTLETON, CO 80120			
INTERMOUNTAIN HUMANE SOCIETY PO BOX 1250		DONATION	2,5
CONTEED CO 90422			

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

any foundation manager

or substantial contributor

Name and address (home or business)

a Paid during the year			
INTERNATIONAL HEARING DOGS INC 5901 EAST 89TH AVE HEDERSON, CO 80640		DONATION	5,100
LARIMER HUMANE SOCIETY		DONATION	4,000

ONGMONT HUMANE COCTETY		DONATION	
ARIMER HUMANE SOCIETY 137 SOUTH COLLEGE AVE FORT COLLINS, CO 80525		DONATION	

5137 SOUTH COLLEGE AVE FORT COLLINS, CO 80525			
LONGMONT HUMANE SOCIETY 9595 NELSON RD		DONATION	4,0

5137 SOUTH COLLEGE AVE FORT COLLINS, CO 80525			
LONGMONT HUMANE SOCIETY 9595 NELSON RD		DONATION	4,0

4,000

LONGMONT HUMANE SOCIETY		DONATION	4,000
9595 NELSON RD			
LONGMONT, CO 80501			

LONGMONT HOMANE SOCIETY		DONATION	4,
9595 NELSON RD			
LONGMONT, CO 80501			

LONGMONT, CO 80501			
Total	 	> 3a	2,653,924

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution

▶ 3a

2,653,924

any foundation manager

Name and address (home or business)

PEYTON, CO 80831 Total .

	or substantial contributor		
a Paid during the year			
MAX FUND INC720 WEST 10TH AVENUE DENVER, CO 80204		DONATION	3,000
MONTROSE ANIMAL PROTECTIVE AGENCY PO BOX 2009 MONTROSE, CO 814022009		DONATION	3,000

MONTROSE ANIMAL PROTECTIVE AGENCY PO BOX 2009 MONTROSE, CO 814022009	DONATION	3,000
NATIONAL MILL DOG RESCUE 5335 JD JOHNSON RD	DONATION	2,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient

If recipient is an individual, show any relationship to status of contribution

Recipient

Recipient

Amount

Show any relationship to status of contribution

DONATION

▶ 3a

2,000

2,653,924

any foundation manager

or substantial contributor

Name and address (home or business)

SECOND CHANCE ANIMAL RESCUE

LAMAR, CO 810520044

PO BOX 44

a Paid during the year			
PAWS FOR LIFE ANIMAL PROTECTIVE AGENCY PO BOX 11208 PUEBLO, CO 81001		DONATION	3,000
PET AID COLORADO191 YUMA ST DENVER, CO 802231205		DONATION	1,500

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

	or substantial contributor		
a Paid during the year			
SECOND CHANCE HUMANE SOCIETY- RIDGEWAY PO BOX 2096		DONATION	3,000

PO BOX 2096 RIDGEWAY, CO 814322096			
SECOND CHANCE WILDLIFE REHAB 2730 COLFAX AVE		DONATION	500

•			
ECOND CHANCE WILDLIFE REHAB 730 COLFAX AVE JEBLO, CO 81003		DONATION	
OUTHERN COLORADO SPAY & NEUTER		DONATION	

2730 COLFAX AVE PUEBLO, CO 81003			
SOUTHERN COLORADO SPAY & NEUTER ASS'N 1700 SOUTH PRAIRIE AVE		DONATION	4,000

101010,00 01003			
SOUTHERN COLORADO SPAY & NEUTER ASS'N 1700 SOUTH PRAIRIE AVE PUEBLO, CO 81005		DONATION	4,000

SOUTHERN COLORADO SPAT & NEUTER		DONATION	7,000
ASS'N			·
1700 SOUTH PRAIRIE AVE			
PUEBLO, CO 81005			
		1	

PUEBLO, CO 81005		
Total	 ▶ 3a	2,653,924

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business)

Hame and dadress (nome or business)	or substantial contributor		
a Paid during the year			
TELLER COUNTY REGIONAL ANIMAL SHELTER PO BOX 904		DONATION	4,500

DIVIDE, CO 80814			
UPPER RIO GRANDE ANIMAL SOCIETY PO BOX 369 MONTE VISTA CO. 811440369		DONATION	5,

UPPER RIO GRANDE ANIMAL SOCIETY PO BOX 369 MONTE VISTA, CO 811440369		DONATION	5,000
WET MOUNTAIN WILDLIFE REHAB INC 743 CRESTVIEW DRIVE		DONATION	1,500

MONTE VISTA, CO 811440369			
WET MOUNTAIN WILDLIFE REHAB INC 743 CRESTVIEW DRIVE FLORENCE CO. 81226		DONATION	1,50

-			i .
WET MOUNTAIN WILDLIFE REHAB INC 743 CRESTVIEW DRIVE FLORENCE, CO 81226		DONATION	1,50

WET MOUNTAIN WILDLIFE REHAB INC 743 CRESTVIEW DRIVE FLORENCE, CO 81226		DONATION	1

LORENCE, CO 81226			
Total	 	▶ 3a	2,653,924

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of

2,653,924

MARY ELIZABETH BATES FOUNDATION			DONATION	2 510 363
a Paid during the year				
Name and address (nome or business)	or substantial contributor	,		

MARY ELIZABETH BATES FOUNDATION		DONATION	
8899 BLACK MOUNTAIN DRIVE			
CONIFER, CO 80433			

any foundation manager

MARY ELIZABETH BATES FOUNDATION 8899 BLACK MOUNTAIN DRIVE		DONATION	2,510
CONIFER, CO 80433			

efile GRAPHIC print - DO NOT P	ROCESS As Filed I	Data -	D	LN: 93491287017231		
TY 2020 Accounting Fees Schedule						
	Name: DR MAR	Y BATES TRUST FUN	ND			
	EIN: 84-6028	3055				
Softw	vare ID: 2001140	06				
Software V	/ersion: 20.0.2.0)				
Category Amount Net Investment Adjusted Net Disbursements Income Income Purposes						
ACCOUNTING	1,875	1,875				

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491287017231

TY 2020 Investments Corporate Stock Schedule

Name: DR MARY BATES TRUST FUND

EIN: 84-6028055

Software ID: 20011406

Software Version: 20.0.2.0

Name of Stock	End of Year Book Value	End of Year Fair Market Value
ATT CORP	20,340	145,917
CONSOLIDATED EDISON	14,496	182,424
CORNERSTONE	1,803	1,731
EXXON MOBILE CORP	18,897	646,836
FIRST ENERGY	7,908	29,624
FRONTIER COMMUNICATIONS	37	
HONEYWELL CORP	8,461	283,796
ILLINOIS TOOL WORKS INC		222,785
INGREDION	434	148,896
JANUS GROWTH AND INCOME FUND	105,501	140,301
MATTEL INC		87,136
PACIFIC GAS AND ELECTRIC	12,551	15,293
SEMPRA ENERGY		80,666
TUPPERWARE		15,270
VERIZON COMMUNICATIONS	4,600	72,236
VODAFONE GROUP	6,882	7,072
XCELL ENERGY	11,028	82,020

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	: 93491287017231		
TY 2020 Other Expenses Sche	dule					
Name:	DR MARY BATES	S TRUST FUND				
EIN:	: 84-6028055					
Software ID:	: 20011406					
Software Version:	20.0.2.0					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
OFFICE EXPENSE	800	800				

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491287017231			
TY 2020 Other Increases Schedule					
Name:	DR MARY BATES TRUST FUND				
EIN:	84-6028055				
Software ID:	20011406				
Software Version:	20.0.2.0				
Other Increases Schedule					
De	escription	Amount			
FAIR MARKET VALUE STOCK DISTRIBUT	ION	2,582,509			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		D	LN: 93491287017231		
TY 2020 Other Liabilities Schedule						
Name:	DR MARY BATI	ES TRUST FU	ND			
EIN:	84-6028055					
Software ID:	20011406					
Software Version:	20.0.2.0					
Description	n		Beginning of Year - Book Value	End of Year - Book Value		
FEDERAL EXCISE TAX			2,730			

efile GRAPHIC print - DO NOT PROCESS	S As Filed Data	-	DL	N: 93491287017231
TY 2020 Taxes Schedule				
Name	e: DR MARY B	ATES TRUST FUND		
II3	N: 84-6028055	j		
Software II	D: 20011406			
Software Version	n: 20.0.2.0			
Taxes Schedule		,		
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAXES	500	500		
FEDERAL EXCISE TAX	2,730	2,730		