

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2019 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization ASPEN COMMUNITY FOUNDATION		D Employer identification number 84-0829226
	Doing business as		E Telephone number (970) 925-9300
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	455 GOLD RIVERS COURT #515		G Gross receipts \$ 11,118,718.
	City or town, state or province, country, and ZIP or foreign postal code BASALT, CO 81621		
F Name and address of principal officer: TAMARA TORMOHLEN 455 GOLD RIVERS CT #515, BASALT, CO 81621		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶	

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: ▶ ASPENCOMMUNITYFOUNDATION.ORG

K Form of organization: Corporation Trust Association Other ▶ **L Year of formation:** 1982 **M State of legal domicile:** CO

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: ASPEN COMMUNITY FOUNDATION BUILDS PHILANTHROPY AND SUPPORTS NONPROFIT ORGANIZATIONS BY		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	20
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	20
	5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	13
	6 Total number of volunteers (estimate if necessary)	6	0
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	1,501.
b Net unrelated business taxable income from Form 990-T, line 39	7b	1,501.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	7,245,039.	10,579,409.
	9 Program service revenue (Part VIII, line 2g)	0.	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	283,870.	374,122.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	142,582.	140,201.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,671,491.	11,093,732.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	8,788,485.	10,087,488.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,131,936.	1,066,689.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 223,656.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	763,439.	983,066.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	10,683,860.	12,137,243.
19 Revenue less expenses. Subtract line 18 from line 12	-3,012,369.	-1,043,511.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 36,803,112.	End of Year 41,488,760.
	21 Total liabilities (Part X, line 26)	5,327,036.	5,596,610.
	22 Net assets or fund balances. Subtract line 21 from line 20	31,476,076.	35,892,150.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	▶ Signature of officer	Date			
	TAMARA TORMOHLEN, EXECUTIVE DIRECTOR Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name PAUL J. BACKES, CPA	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN P00175605
	Firm's name ▶ MCMAHAN AND ASSOCIATES, L.L.C.	Firm's EIN ▶ 84-1509269	Phone no. (970) 845-8800		
Firm's address ▶ P.O. BOX 5850 AVON, CO 81620					

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: ASPEN COMMUNITY FOUNDATION BUILDS PHILANTHROPY AND SUPPORTS NONPROFIT ORGANIZATIONS BY CONNECTING DONORS TO COMMUNITY NEEDS, BUILDING PERMANENT CHARITABLE FUNDS, AND BRINGING PEOPLE TOGETHER TO SOLVE COMMUNITY PROBLEMS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 10,462,291. including grants of \$ 9,391,678.) (Revenue \$) ASPEN COMMUNITY FOUNDATION PROVIDES GRANTMAKING IN THREE AREAS; 1. THE FOUNDATION'S UNRESTRICTED GRANTMAKING FOR ESSENTIAL SERVICES BY NONPROFITS IN THE FOUNDATION'S SERVICE AREA, FUNDED BY AN ANNUAL FUNDRAISING DRIVE. 2. DONOR ADVISED FUND GRANTMAKING IS SUPPORTED FROM OVER 100 DONOR ADVISED FUND, MEETING THE PHILANTHROPIC GOALS OF THE FOUNDATION'S DONORS. 3. DESIGNATED AND SCHOLARSHIP FUNDS PROVIDE GRANTS FOR SPECIFIED PURPOSES IDENTIFIED BY THE FUND'S DESIGN AND ADMINISTERED BY THE FOUNDATION.

4b (Code:) (Expenses \$ 1,214,096. including grants of \$ 695,810.) (Revenue \$) IN 2019 THE FOUNDATION CONTINUED ITS CRADLE-TO-CAREER INITIATIVE, A COLLECTIVE IMPACT PROJECT IN PARTNERSHIP WITH NONPROFITS, LOCAL GOVERNMENTS, SCHOOL DISTRICTS, CIVIC ORGANIZATIONS, DONORS AND BUSINESSES TOWARD ITS GOAL TO INCREASE AND ENRICH EDUCATIONAL OPPORTUNITIES FOR ALL CHILDREN FROM 0 - 18 TO BE PREPARED TO ENTER SCHOOL, TO BE SUCCESSFUL IN SCHOOL AND TO GRADUATE FROM SCHOOL PREPARED FOR COLLEGE AND CAREER.

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 11,676,387.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors?</i>	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	X	
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38 covering various organizational requirements and reporting obligations.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V []

Table with 3 columns: Question, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, description, and Yes/No checkboxes. Rows include questions 2a through 16 regarding employee reporting, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included on line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CO
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[X] Own website [X] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
ASPEN COMMUNITY FOUNDATION - 970-925-9300
455 GOLD RIVERS COURT, STE. 515, BASALT, CO 81621

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) PAM ALEXANDER BOARD MEMBER	2.00	X						0.	0.	0.
(2) KILLEEN BRETTMANN BOARD MEMBER	2.00	X						0.	0.	0.
(3) KIMBO BROWN-SCHIRATO BOARD MEMBER	2.00	X						0.	0.	0.
(4) CONNIE CALAWAY BOARD MEMBER	2.00	X						0.	0.	0.
(5) SUSAN CROWN BOARD MEMBER	2.00	X						0.	0.	0.
(6) TONY DILUCIA BOARD MEMBER	2.00	X						0.	0.	0.
(7) ALLEN GROSSMAN AT LARGE	2.00	X						0.	0.	0.
(8) JEANIE HUMBLE BOARD MEMBER	2.00	X						0.	0.	0.
(9) RICHARD JELINEK BOARD MEMBER	2.00	X						0.	0.	0.
(10) ADAM LEWIS BOARD MEMBER	2.00	X						0.	0.	0.
(11) JAKE MASCOTTE BOARD MEMBER	2.00	X						0.	0.	0.
(12) MARIA MORROW BOARD MEMBER	2.00	X						0.	0.	0.
(13) MIKE MURRAY BOARD MEMBER	2.00	X						0.	0.	0.
(14) MARCIE MUSSER BOARD MEMBER	2.00	X						0.	0.	0.
(15) SUSAN SALAMUN BOARD MEMBER	2.00	X						0.	0.	0.
(16) GAIL SCHWARTZ BOARD MEMBER	2.00	X						0.	0.	0.
(17) CARRIE WELLS BOARD MEMBER	2.00	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) BARBARA GOLD CHAIR	2.00			X				0.	0.	0.
(19) MIKE KAPLAN TREASURER	2.00			X				0.	0.	0.
(20) ROB PEW SECRETARY	2.00			X				0.	0.	0.
(21) TAMARA TORMOHLN EXECUTIVE DIRECTOR	40.00					X		168,280.	0.	0.
1b Subtotal								168,280.	0.	0.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								168,280.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 1

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	67,000.				
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	10,512,409.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 4,824,019.				
	h Total. Add lines 1a-1f		10,579,409.				
	Program Service Revenue	2 a _____	Business Code				
b _____							
c _____							
d _____							
e _____							
f All other program service revenue							
g Total. Add lines 2a-2f							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		374,122.	372,621.	1,501.		
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses ...	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities				
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b					
	c Gain or (loss)	7c					
d Net gain or (loss)							
8 a Gross income from fundraising events (not including \$ 67,000. of contributions reported on line 1c). See Part IV, line 18	8a		134,200.				
			24,986.				
			109,214.			109,214.	
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a MISCELLANEOUS REVENUE	Business Code	561000	30,987.	30,987.		
	b _____						
	c _____						
	d All other revenue						
	e Total. Add lines 11a-11d			30,987.			
12 Total revenue. See instructions			11,093,732.	403,608.	1,501.	109,214.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	9,551,725.	9,551,725.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	535,763.	535,763.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,066,689.	807,652.	133,325.	125,712.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	23,364.	13,803.	4,921.	4,640.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	363,245.	363,245.		
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	38,084.	23,507.	8,085.	6,492.
12 Advertising and promotion	21,840.	16,889.	2,548.	2,403.
13 Office expenses	65,420.	45,428.	10,290.	9,702.
14 Information technology	50,268.	33,716.	8,519.	8,033.
15 Royalties				
16 Occupancy	5,604.	3,311.	1,180.	1,113.
17 Travel	9,491.	7,127.	1,217.	1,147.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	32,162.	19,001.	6,774.	6,387.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	54,932.	32,453.	11,570.	10,909.
23 Insurance	4,397.	2,598.	926.	873.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a STRATEGIC PLANNING	187,261.	187,261.		
b DONOR CULTIVATION MGMT	39,651.		39,651.	
c DONOR CULTIVATION DEVEL	33,904.			33,904.
d MISCELLANEOUS EXPENSE	32,908.	32,908.		
e All other expenses	20,535.		8,194.	12,341.
25 Total functional expenses. Add lines 1 through 24e	12,137,243.	11,676,387.	237,200.	223,656.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

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

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash - non-interest-bearing	4,233,805.	1	3,246,948.
	2 Savings and temporary cash investments	41,125.	2	191,327.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	53,467.	4	48,685.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	10,615.	9	14,311.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,569,356.		
	b Less: accumulated depreciation	10b 275,801.	1,340,079.	10c 1,293,555.
	11 Investments - publicly traded securities	16,314,234.	11	19,892,336.
	12 Investments - other securities. See Part IV, line 11	14,809,787.	12	16,801,598.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 33)	36,803,112.	16	41,488,760.	
Liabilities	17 Accounts payable and accrued expenses	82,220.	17	129,224.
	18 Grants payable	1,467,794.	18	1,425,478.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	802,196.	23	753,675.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	2,974,826.	25	3,288,233.
	26 Total liabilities. Add lines 17 through 25	5,327,036.	26	5,596,610.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	31,400,372.	27	35,803,873.
	28 Net assets with donor restrictions	75,704.	28	88,277.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	31,476,076.	32	35,892,150.
33 Total liabilities and net assets/fund balances	36,803,112.	33	41,488,760.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	11,093,732.
2	Total expenses (must equal Part IX, column (A), line 25)	2	12,137,243.
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,043,511.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	31,476,076.
5	Net unrealized gains (losses) on investments	5	5,773,793.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-314,208.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	35,892,150.

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____		

Form 990 (2019)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	9,442,478.	7,946,595.	9,193,745.	7,359,139.	10,713,609.	44,655,566.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
4 Total. Add lines 1 through 3	9,442,478.	7,946,595.	9,193,745.	7,359,139.	10,713,609.	44,655,566.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						6,384,919.
6 Public support. Subtract line 5 from line 4.						38,270,647.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4	9,442,478.	7,946,595.	9,193,745.	7,359,139.	10,713,609.	44,655,566.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...	21,797.	98,744.	160,059.	283,685.	374,122.	938,407.
9 Net income from unrelated business activities, whether or not the business is regularly carried on ...				185.		185.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	76,959.	44,035.	36,461.	52,371.	30,987.	240,813.
11 Total support. Add lines 7 through 10						45,834,971.

12 Gross receipts from related activities, etc. (see instructions) **12**

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	83.50 %
15 Public support percentage from 2018 Schedule A, Part II, line 14	15	74.48 %

16a 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
2 Activities Test. Answer (a) and (b) below.		Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
3 Parent of Supported Organizations. Answer (a) and (b) below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Multiple horizontal lines for supplemental information.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ **Attach to Form 990.**

▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization ASPEN COMMUNITY FOUNDATION **Employer identification number** 84-0829226

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	121	57
2 Aggregate value of contributions to (during year)	8,465,879.	2,247,730.
3 Aggregate value of grants from (during year)	6,245,288.	3,842,200.
4 Aggregate value at end of year	16,073,319.	25,415,441.
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	75,704.	81,777.	71,394.	69,128.	73,684.
b Contributions					
c Net investment earnings, gains, and losses	12,573.	-5,257.	11,123.	2,948.	-52.
d Grants or scholarships					-3,767.
e Other expenditures for facilities and programs		-816.	-740.	-682.	-737.
f Administrative expenses					
g End of year balance	88,277.	75,704.	81,777.	71,394.	69,128.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment _____ %
 - c Term endowment _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|-----|----|
| (i) Unrelated organizations | x | |
| (ii) Related organizations | | x |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		1,300,000.	100,000.	1,200,000.
c Leasehold improvements		17,936.	1,764.	16,172.
d Equipment		251,420.	174,037.	77,383.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				1,293,555.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) ABSOLUTE RETURN	5,870,010.	COST
(B) HEDGED EQUITY	6,172,079.	COST
(C) FIXED INCOME	993,980.	COST
(D) PRIVATE EQUITY	3,765,529.	COST
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	16,801,598.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) AGENCY FUNDS HELD FOR OTHERS	3,288,233.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	3,288,233.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII...

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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

1	Total revenue, gains, and other support per audited financial statements	1	15,973,245.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	5,773,793.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	15,829.
e	Add lines 2a through 2d	2e	5,789,622.
3	Subtract line 2e from line 1	3	10,183,623.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	364,046.
b	Other (Describe in Part XIII.)	4b	546,063.
c	Add lines 4a and 4b	4c	910,109.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	11,093,732.

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

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

1	Total expenses and losses per audited financial statements	1	11,557,171.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	25,787.
e	Add lines 2a through 2d	2e	25,787.
3	Subtract line 2e from line 1	3	11,531,384.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	364,046.
b	Other (Describe in Part XIII.)	4b	241,813.
c	Add lines 4a and 4b	4c	605,859.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	12,137,243.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

INTERNAL ADMINISTRATIVE FEE 15,829.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSE -25,787.

AGENCY INCOME 571,850.

TOTAL TO SCHEDULE D, PART XI, LINE 4B 546,063.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSE 25,787.

Part XIII Supplemental Information *(continued)*

PART XII, LINE 4B - OTHER ADJUSTMENTS:

AGENCY GRANTS 241,813.

INTERNAL AGENCY TRANSFERS

Multiple horizontal lines for supplemental information entry.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		QUALITY OF LIFE RECEPTION (event type)	(event type)	NONE (total number)	
Revenue	1 Gross receipts	201,200.			201,200.
	2 Less: Contributions	67,000.			67,000.
	3 Gross income (line 1 minus line 2)	134,200.			134,200.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages	24,986.			24,986.
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d)				24,986.
11 Net income summary. Subtract line 10 from line 3, column (d)				109,214.	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____
a Is the organization licensed to conduct gaming activities in each of these states? Yes No
b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No
b If "Yes," explain: _____

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Name of the organization **ASPEN COMMUNITY FOUNDATION** Employer identification number **84-0829226**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
FIRST LIGHT FOUNDATION 1755 SNOWMASS CREEK ROAD SNOWMASS, CO 81654	84-1637532	501(C)(3)	5,000.	0.			GENERAL SUPPORT
10TH MOUNTAIN DIVISION HUT ASSOCIATION - 1280 UTE AVENUE, SUITE 21 - ASPEN, CO 81611	74-2252484	501(C)(3)	10,000.	0.			GENERAL SUPPORT
A WAY OUT P.O. BOX 10825 ASPEN, CO 81612	46-1809899	501(C)(3)	97,000.	0.			GENERAL SUPPORT
ACCESS AFTERSCHOOL P.O. BOX 819 CARBONDALE, CO 81623	20-0369318	501(C)(3)	43,500.	0.			GENERAL SUPPORT
ACTION IN AFRICA 1875 CONNECTICUT AVENUE NORTHWEST, 10TH FLOOR - WASHINGTON DC, DC 20009	27-3538518	501(C)(3)	9,500.	0.			GENERAL SUPPORT
ADVOCATE SAFEHOUSE PROJECT P.O. BOX 2036 GLENWOOD SPRINGS, CO 81602	84-1047611	501(C)(3)	25,000.	0.			FAMILIE SERVICES

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 226.

3 Enter total number of other organizations listed in the line 1 table

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Schedule I (Form 990) (2019)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALLIANCE FOR SUSTAINABLE COLORADO 1536 WYNKOOP STREET, SUITE100 DENVER, CO 80202	42-1622670	501(C)(3)	85,000.	0.			ENVIRONMENT&SUSTAINABILIT
ALPINE LEGAL SERVICES P.O. BOX 1890 GLENWOOD SPRINGS, CO 81602	84-1061991	501(C)(3)	37,290.	0.			GENERAL SUPPORT
AMERICAN ACADEMY IN ROME 7 EAST 60TH STREET NEW YORK, NY 10022	13-1623881	501(C)(3)	5,300.	0.			GENERAL SUPPORT
AMERICAN BRAIN FOUNDATION 201 CHICAGO AVENUE MINNEAPOLIS, MN 55415	41-1717098	501(C)(3)	55,640.	0.			HEALTH & BRAIN
AMERICAN CANCER SOCIETY, WEST REGION - 5333 MISSION CENTER ROAD, STE.105 - SAN DIEGO, CA 92108	13-1788491	501(C)(3)	10,000.	0.			CANCER RESEARCH
AMERICAN INDIAN COLLEGE FUND 8333 GREENWOOD BOULEVARD DENVER, CO 80221	52-1573446	501(C)(3)	20,000.	0.			GENERAL SUPPORT
AMERICAN RENEWABLE ENERGY INST. P.O. BOX 7784 ASPEN, CO 81612	27-5216186	501(C)(3)	10,000.	0.			GENERAL SUPPORT
ANDERSON RANCH ARTS CENTER P.O. BOX 5598 SNOWMASS VILLAGE, CO 81615	23-7267983	501(C)(3)	78,869.	0.			ARTS & CULTURE SUPPORT
ANDY ZANCA YOUTH EMPOWERMENT PROGRAM - P.O. BOX 1945 - CARBONDALE, CO 81623	84-1567171	501(C)(3)	6,000.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASCENDIGO AUTISM SERVICES 818 INDUSTRY PLACE CARBONDALE, CO 81623	20-0940000	501(C)(3)	14,100.	0.			AUTISM FAMILY SUPPORT
ASPEN ART MUSEUM 637 EAST HYMAN AVENUE ASPEN, CO 81611	84-0746671	501(C)(3)	223,969.	0.			GENERAL SUPPORT
ASPEN CENTER FOR ENIRON.STUDIES 100 PUPPY SMITH STREET ASPEN, CO 81611	23-7042291	501(C)(3)	69,150.	0.			GENERAL SUPPORT
ASPEN CHAPEL 77 MEADOWOOD DRIVE ASPEN, CO 81611	84-6059740	501(C)(3)	76,100.	0.			GENERAL SUPPORT
ASPEN COUNTRY DAY SCHOOL 85 COUNTRY DAY WAY ASPEN, CO 81611	23-7033239	501(C)(3)	23,950.	0.			GENERAL SUPPORT
ASPEN EDUCATION FOUNDATION P.O. BOX 2200 ASPEN, CO 81612	84-1181681	501(C)(3)	69,700.	0.			GENERAL SUPPORT
ASPEN FILM 110 EAST HALLAM STREET, SUITE 103 ASPEN, CO 81611	74-2483139	501(C)(3)	35,500.	0.			GENERAL SUPPORT
ASPEN FIRE PROTECTION DISTRICT 420 EAST HOPKINS AVENUE ASPEN, CO 81611	84-6014460	501(C)(3)	0.	0.			WILDFIRE ADAPTED COMMUNITY PROJECT
ASPEN HIGH SCHOOL 0235 HIGH SCHOOL ROAD ASPEN, CO 81611	84-6012220	501(C)(3)	7,578.	0.			SCHOLARSHIP SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASPEN HISTORICAL SOCIETY 620 WEST BLEEKER STREET ASPEN, CO 81611	84-6037756	501(C)(3)	60,125.	0.			GENERAL SUPPORT
ASPEN HOMELESS SHELTER 405 CASTLE CREEK ROAD, STE.16 ASPEN, CO 81611	30-0566563	501(C)(3)	16,350.	0.			GENERAL SUPPORT
ASPEN HOPE CENTER P.O. BOX 1115 BASALT, CO 81621	27-3703825	501(C)(3)	60,750.	0.			GENERAL SUPPORT
ASPEN JEWISH CONGREGATION 77 MEADOWOOD DRIVE ASPEN, CO 81611	84-0723135	501(C)(3)	5,450.	0.			GENERAL SUPPORT
ASPEN JOURNALISM 1280 SOUTH UTE AVENUE, STE.4 ASPEN, CO 81611	35-2400162	501(C)(3)	5,500.	0.			GENERAL SUPPORT
ASPEN JUNIOR HOCKEY P.O. BOX 3390 ASPEN, CO 81612	50-0143083	501(C)(3)	31,400.	0.			GENERAL SUPPORT
ASPEN MUSIC FESTIVAL AND SCHOOL 225 MUSIC SCHOOL ROAD ASPEN, CO 81611	84-0445087	501(C)(3)	130,496.	0.			GENERAL SUPPORT
ASPEN PUBLIC RADIO 110 EAST HALLAM STREET, STE.134 ASPEN, CO 81611	84-0884901	501(C)(3)	31,280.	0.			GENERAL SUPPORT
ASPEN SANTA FE BALLET 0245 SAGE WAY ASPEN, CO 81611	84-1150857	501(C)(3)	292,261.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASPEN SCHOOL DISTRICT-SUPER 0235 HIGH SCHOOL ROAD ASPEN, CO 81611	84-6002890	501(C)(3)	18,000.	0.			SUPPORT FAMILY SERVICES
ASPEN SCIENCE CENTER P.O. BOX 4669 ASPEN, CO 81612	84-1677611	501(C)(3)	10,000.	0.			GENERAL SUPPORT
ASPEN SNOWMASS NORDIC COUNCIL P.O. BOX 10815 ASPEN, CO 81612	84-0957449	501(C)(3)	5,000.	0.			GENERAL SUPPORT
ASPEN VALLEY HOSPITAL FOUNDATION 0401 CASTLE CREEK ROAD ASPEN, CO 81611	46-0865487	501(C)(3)	50,000.	0.			SUPPORT HEALTH ALLIANCE
ASPEN VALLEY HOSPITAL FOUNDATION 0401 CASTLE CREEK ROAD ASPEN, CO 81611	46-0865487	501(C)(3)	77,740.	0.			GENERAL SUPPORT
ASPEN VALLEY LAND TRUST 320 MAIN STREET, SUITE 204 CARBONDALE, CO 81623	84-0574754	501(C)(3)	23,600.	0.			GENERAL SUPPORT
ASPEN VALLEY SKI & SNOWBOARD CLUB 300 AVSC DRIVE ASPEN, CO 81611	84-6042225	501(C)(3)	164,780.	0.			GENERAL SUPPORT
ASPEN VALLEY SKI AND SNOWBOARD P.O. BOX 6444 SNOWMASS VILLAGE, CO 81615	84-6042225	501(C)(3)	25,000.	0.			ENDOWMENT GRANT
ASPEN WORDS 110 EAST HALLAM STREET, SUITE 116 ASPEN, CO 81611	84-0399006	501(C)(3)	20,300.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASPEN YOUTH CENTER P.O. BOX 8266 ASPEN, CO 81612	74-2554280	501(C)(3)	44,500.	0.			GENERAL SUPPORT
BALLROOM MARFA P.O. BOX 1661 MARFA, TX 79843	20-0126402	501(C)(3)	0.	0.			GENERAL SUPPORT
BANDERAS BAY CHARITIES 505 NORTH TOMAHAWK ISLAND DR. PORTLAND, OR 97217	47-4752247	501(C)(3)	8,000.	0.			MOBILE SPAY/NEUTER SUPPORT
BASALT BAND BOOSTERS 51 SCHOOL STREET BASALT, CO 81621	20-2423040	501(C)(3)	5,000.	0.			GENERAL SUPPORT
BETTYFLIES FOUNDATION P.O. BOX 11 ASPEN, CO 81612	83-2823176	501(C)(3)	10,500.	0.			GENERAL SUPPORT
BIG GREEN 1637 PEARL STREET, SUITE 201 BOULDER, CO 80302	27-5083595	501(C)(3)	50,000.	0.			ENVIRONMENT & SUSTAINABILITY
BIONEERS 215 LINCOLN AVENUE, SUITE 202 SANTA FE, NM 87501	85-0432731	501(C)(3)	5,000.	0.			ENVIRONMENT & SUSTAINABILITY
BLUE LAKE PRESCHOOL 0189 JW DRIVE, UNIT C CARBONDALE, CO 81623	84-1544750	501(C)(3)	26,000.	0.			EARLY CHILDHOOD SUPPORT
BOLL WEEVIL CHARITY FOUNDATION P.O. BOX 172143 MEMPHIS, TN 38187	81-0867057	501(C)(3)	26,717.	0.			PREVENTATIVE MAINTENANCE FUND

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRIDGING BIONICS FOUNDATION P.O. BOX 3766 BASALT, CO 81621	46-2182977	501(C)(3)	22,500.	0.			PREVENTATIVE MAINTENANCE FUND
CARBONDALE & RURAL FIRE PROT.DISTR. - 300 MEADOWOOD DRIVE - CARBONDALE, CO 81623	84-0758192	501(C)(3)	38,800.	0.			WILDFIRE ADAPTED COMMUNITY PROJECT
CARBONDALE ARTS P.O. BOX 175 CARBONDALE, CO 81623	84-0729842	501(C)(3)	21,100.	0.			GENERAL SUPPORT
CASA OF THE NINTH P.O. BOX 3004 GLENWOOD SPRINGS, CO 81602	45-2663126	501(C)(3)	11,000.	0.			GENERAL SUPPORT
CATHOLIC CHARITIES, WESTERN SLOPE 1004 GRAND AVENUE GLENWOOD SPRINGS, CO 81601	84-0686679	501(C)(3)	21,000.	0.			EMERGENCY ASSISTANCE SUPPORT
CATO INSTITUTE 1000 MASSACHUSETTS AVENUE, NW WASHINGTON DC, DC 20001	23-7432162	501(C)(3)	5,000.	0.			CIVIC ENHANCEMENT
CELEBRATE THE BEAT NATIONAL DANCE INSTITUTE - 3087 TEJON STREET, UNIT A - DENVER, CO 80211	20-0670553	501(C)(3)	6,500.	0.			GENERAL SUPPORT
CENTER FOR REPRODUCTIVE RIGHTS 199 WATER STREET NEW YORK, NY 10038	13-3669731	501(C)(3)	0.	0.			GENERAL SUPPORT
CHAPMAN UNIVERSITY ONE UNIVERSITY DRIVE ORANGE, CA 92866	95-1643992	501(C)(3)	185,000.	0.			GENERAL SUPPORT

Schedule I (Form 990)

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CHEETAH CONSERVATION FUND P.O. BOX 2496 ALEXANDRIA, VA 22314	31-1726923	501(C)(3)	10,000.	0.			GENERAL SUPPORT
CHILDREN'S HOSPITAL COLORADO FOUNDATION - 13123 EAST 16TH AVENUE, B045 - AURORA, CO 80045	84-0813462	501(C)(3)	100,000.	0.			HEALTH AND WELLNESS
CHRIS KLUG FOUNDATION P.O. BOX 64 ASPEN, CO 81612	84-1628444	501(C)(3)	5,500.	0.			GENERAL SUPPORT
COLLEGE OUTREACH 0235 HIGH SCHOOL ROAD ASPEN, CO 81611	45-4755540	501(C)(3)	37,500.	0.			EDUCATION SUPPORT
COLORADO ANIMAL RESCUE 2801 COUNTY ROAD 114 GLENWOOD SPRINGS, CO 81601	84-1208087	501(C)(3)	51,300.	0.			ANIMAL WELFARE
COLORADO MOUNTAIN COLLEGE 802 GRAND AVENUE GLENWOOD SPRINGS, CO 81601	74-2393418	501(C)(3)	10,000.	0.			EDUCATION SUPPORT
COLORADO OPEN LANDS 1546 COLE BOULEVARD, #200 GOLDEN, CO 80401	84-0866211	501(C)(3)	8,300.	0.			GENERAL SUPPORT
COLORADO ROCKY MOUNTAIN SCHOOL 500 HOLDEN WAY CARBONDALE, CO 81623	84-0425174	501(C)(3)	36,750.	0.			SUPPORT THE GLASS ART
COLORADO STATE UNIVERSITY FOUNDATION - P.O. BOX 1870 - FORT LLINS, CO 80522	23-7098397	501(C)(3)	64,850.	0.			SUPPORT NATURAL HERITAGE PROGRAM

Schedule I (Form 990)

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COLORADO STATE UNIVERSITY FOUNDATION - P.O. BOX 1870 - FORT LLINS, CO 80522	23-7098397	501(C)(3)	100,000.	0.			NEUROLOGY RESEARCH
COMMUNITY HEALTH SERVICES 0405 CASTLE CREEK ROAD, STE 201 ASPEN, CO 81611	84-0609057	501(C)(3)	6,000.	0.			FAMILY HEALTH SERVICES
CONSERVATION FUND 1942 BROADWAY, SUITE 323 BOULDER, CO 80302	52-1388917	501(C)(3)	5,000.	0.			ENVIRONMENT & SUSTAINABILITY
CONSERVATION INTERNATIONAL 2011 CRYSTAL DRIVE, SUITE 500 ARLINGTON, VA 22202	52-1497470	501(C)(3)	5,000.	0.			GENERAL SUPPORT
CORPORATE ACCOUNTABILITY 10 MILK STREET, SUITE 610 BOSTON, MA 02108	41-1322686	501(C)(3)	25,000.	0.			GENERAL SUPPORT
DENVER BIENNIAL OF THE AMERICAS CORPORATION - 1550 WEWATTA STREET, STE. 950 - DENVER, CO 80202	27-1297346	501(C)(3)	5,000.	0.			GENERAL SUPPORT
DIA ART FOUNDATION 535 WEST 22ND STREET, 4TH FLOOR NEW YORK, NY 10010	23-7397946	501(C)(3)	70,000.	0.			GENERAL SUPPORT
DOCTORS WITHOUT BORDERS USA 40 RECTOR STREET, 16TH FLOOR NEW YORK, NY 10006	13-3433452	501(C)(3)	40,250.	0.			GENERAL SUPPORT
DREPUNG LOSELING MONASTERY P.O. BOX 191931 ATLANTA, GA 31119	58-1953690	501(C)(3)	35,000.	0.			GENERAL SUPPORT

Schedule I (Form 990)

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EARLY CHILDHOOD NETWORK 1317 GRAND AVENUE, SUITE 125 GLENWOOD SPRINGS, CO 81601	27-1447905	501(C)(3)	80,000.	0.			FFN TRAINING SUPPORT
EARTH DAY NETWORK 1752 N STREET NORTHWEST, STE 700 WASHINGTON DC, DC 20036	13-3798288	501(C)(3)	10,000.	0.			ENVIRONMENT & SUSTAINABILITY
ECOFLIGHT 307 AABC, SUITE L ASPEN, CO 81611	80-0012615	501(C)(3)	77,500.	0.			ENVIRONMENT & SUSTAINABILITY
EDUCATE TOMORROW 1717 NORTH BAYSHORE DRIVE, SUITE 2 MIAMI, FL 33132	51-0493526	501(C)(3)	10,000.	0.			SCHOLARSHIP SUPPORT
EMPOWERS AFRICA 2 BEEKMAN PLACE, SUITE 18B NEW YORK, NY 10022	32-0403737	501(C)(3)	5,000.	0.			GENERAL SUPPORT
ENDEAVOR MIAMI 396 ALHAMBRA CIRCLE, SUITE 202 MIAMI, FL 33134	46-3605872	501(C)(3)	50,000.	0.			GENERAL SUPPORT
ENERGETICS EDUCATION DBA SOLAR ROLLERS - P.O. BOX 732 - CARBONDALE, CO 81623	37-1747297	501(C)(3)	5,000.	0.			EDUCATION SUPPORT
ENGLISH IN ACTION P.O. BOX 4856 BASALT, CO 81621	26-1254643	501(C)(3)	81,670.	0.			FAMILY SERVICES
EPISCOPAL SCHOOL OF LOS ANGELES 6325 SANTA MONICA BOULEVARD LOS ANGELES, CA 90038	26-4274906	501(C)(3)	25,000.	0.			EDUCATION SUPPORT

Schedule I (Form 990)

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FAMILY RESOURCE CENTER OF THE ROARING FORK SCHOOLS - 400 SOPRIS AVENUE - CARBONDALE, CO 81623	84-6012220	501(C)(3)	20,000.	0.			GENERAL SUPPORT
FAMILY VISITOR PROGRAMS P.O. BOX 1845 GLENWOOD SPRINGS, CO 81602	84-1001484	501(C)(3)	7,500.	0.			PROGRAM SUPPORT
FISHER ISLAND DAY SCHOOL 2 FISHER ISLAND DRIVE MIAMI BEACH, FL 33109	06-1650070	501(C)(3)	100,000.	0.			GENERAL SUPPORT
FOOD BANK OF THE ROCKIES 10700 EAST 45TH AVENUE DENVER, CO 80239	84-0772672	501(C)(3)	65,000.	0.			WESTERN SLOPE FOOD BANK
FORDHAM UNIVERSITY 45 COLUMBUS AVENUE, 8TH FLOOR NEW YORK, NY 10023	13-1740451	501(C)(3)	100,000.	0.			GENERAL SUPPORT
FORDHAM UNIVERSITY 45 COLUMBUS AVENUE, 8TH FLOOR NEW YORK, NY 10023	13-1740451	501(C)(3)	50,000.	0.			NEW CAMPUS CENTER
FOREST CONSERVANCY 1012 BROOKIE DRIVE CARBONDALE, CO 81623	84-1583104	501(C)(3)	36,250.	0.			ENVIRONMENT & SUSTAINABILITY
FOUNTAIN HOUSE 425 WEST 47TH STREET NEW YORK, NY 10036	13-1624009	501(C)(3)	15,000.	0.			HEALTH & WELLNESS
FRANKLIN UNIVERSITY SWIZERLAND 405 LEXINGTON AVENUE THE CHRYSLER BUILDING, 26TH FL. - NEW YORK, NY 10174	23-7075717	501(C)(3)	20,000.	0.			CAP. IMPROVEMENT

Schedule I (Form 990)

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FRIENDS OF THE ASPEN ANIMAL SHELTER - 101 ANIMAL SHELTER ROAD - ASPEN, CO 81611	84-1564816	501(C)(3)	5,900.	0.			ANIMAL WELFARE
GARFIELD COUNTY ANIMAL WELFARE FOUNDATION - P.O. BOX 1375 - RIFLE, CO 81650	84-1500637	501(C)(3)	61,500.	0.			ANIMAL WELFARE
GARFIELD COUNTY SCHOOL DISTR. 16 P.O. BOX 68 PARACHUTE, CO 81635	84-6001236	501(C)(3)	10,000.	0.			POST HIGH SCHOOL SUCCESS PROGRAM
GARFIELD SCHOOL DISTRICT RE2 839 WHITE RIVER AVENUE RIFLE, CO 81650	84-0525428	501(C)(3)	92,050.	0.			PRESCHOOL SUPPORT
GIVING SEED P.O. BOX 4746 ASPEN, CO 81612	84-2379230	501(C)(3)	5,000.	0.			GENERAL SUPPORT
GLENDA GREENWALD P.O. BOX 2055 ASPEN, CO 81612	27-0435998	501(C)(3)	5,000.	0.			HEALTH & WELLNESS
GLENWOOD SPRINGS FIRE DEPT. 101 WEST 8TH STREET GLENWOOD SPRINGS, CO 81601	84-6000589	501(C)(3)	35,500.	0.			WILDFIRE ADAPTED COMMUNITY PROJ.
GLO GOOD FOUNDATION 923 5TH AVENUE NEW YORK, NY 10021	82-3876191	501(C)(3)	25,000.	0.			GENERAL SUPPORT
GLOBAL LIVINGSTON INSTITUTE 3001 BRIGHTON BOULEVARD, STE.2662 DENVER, CO 80216	45-4683531	501(C)(3)	35,000.	0.			GENERAL SUPPORT

Schedule I (Form 990)

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GOOD PLUS FOUNDATION 306 WEST 37TH STREET, 8TH FLOOR NEW YORK, NY 10018	31-1777082	501(C)(3)	25,000.	0.			FAMILY SERVICES
GRASSROOTS ASIA P.O. BOX 6750 SNOWMASS VILLAGE, CO 81615	02-0700384	501(C)(3)	10,000.	0.			ORG.ENDOWMANT DISTR.
GROWING YEARS SCHOOL 151 SCHOOL STREET BASALT, CO 81621	84-1477810	501(C)(3)	28,500.	0.			EARLY CHILDHOOD SUPPORT
GULF OF MAINE RESEARCH INSTITUTE 350 COMMERCIAL STREET PORTLAND ME, ME 04101	01-0504905	501(C)(3)	25,000.	0.			GENERAL SUPPORT
HABITAT FOR HUMANITY OF THE ROARING FORK VALLEY - 7025 HIGHWAY 82, BOX #2 - GLENWOOD SPRINGS, CO 81601	84-1499538	501(C)(3)	101,870.	0.			GENERAL SUPPORT
HAMMER MUSEUM OF ART AND CULTURAL CENTER AT UCLA - 10899 WILSHIRE BOULEVARD - LOS ANGELES, CA 90024	95-4217197	501(C)(3)	520,000.	0.			MUSEUM SUPPORT
HARVARD BUSINESS SCHOOL SOLDIERS FIELD BOSTON, MA 02163	04-2103580	501(C)(3)	9,576.	0.			GENERAL SUPPORT
HEARTBEAT COLLECTIVE 162 MAIN STREET LEEDS, MA 01053	82-2888364	501(C)(3)	6,000.	0.			GENERAL SUPPORT
HOMECARE AND HOSPICE OF THE VALLEY 1901 GRAND AVENUE, SUITE 206 GLENWOOD SPRINGS, CO 81601	26-3651313	501(C)(3)	7,850.	0.			HOSPICE SUPPORT

Schedule I (Form 990)

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HOTCHKISS SCHOOL 11 INTERLAKEN ROAD LAKEVILLE, CT 06039	06-0647018	501(C)(3)	150,000.	0.			EDUCATION
IDEO.ORG 444 SPEAR STREET, SUITE 213 SAN FRANCISCO, CA 94105	27-3755556	501(C)(3)	100,000.	0.			CIVIC ENHANCEMENT
INDEPENDENCE PASS FOUNDATION P.O. BOX 1700 ASPEN, CO 81612	84-1133782	501(C)(3)	11,550.	0.			ENVIRONMENT & SUSTAINABILITY
INSTITUTE OF CURRENT WORLD AFFAIRS 1818 N STREET NW, SUITE 460 WASHINGTON DC, DC 20036	13-1621044	501(C)(3)	15,000.	0.			CIVIC ENHANCEMENT
JAZZ ASPEN SNOWMASS 110 EAST HALLAM STREET, STE. 104 ASPEN, CO 81611	84-1220222	501(C)(3)	79,150.	0.			ARTS & CULTURE
JEWISH FAMILY AND CHILDREN'S SERVICE OF GREATER PHILADELPHIA - 2100 ARCH STREET, 5TH FLOOR - PHILADELPHIA, PA 19013	23-1352026	501(C)(3)	5,000.	0.			GENERAL SUPPORT
JEWISH FAMILY SERVICE 3201 SOUTH TAMARAC DRIVE, STE.100 DENVER, CO 80231	84-0402701	501(C)(3)	5,000.	0.			GENERAL SUPPORT
JEWISHCOLORADO 300 SOUTH DAHLIA STREET, SE. 300 DENVER, CO 80246	01-0831698	501(C)(3)	1,000.	0.			GENERAL SUPPORT
KEELING CURVE PRIZE P.O. BOX 7774 ASPEN, CO 81612	82-3056808	501(C)(3)	50,000.	0.			ENVIRONMENT & SUSTAINABILITY

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KINO BORDER INITIATIVE P.O. BOX 159 NOGALES, AZ 85628	26-3623357	501(C)(3)	5,000.	0.			CIVIC ENHANCEMENT
KISS THE GROUND 2658 GRIFFITH PARK BLVD, #414 LOS ANGELES, CA 90039	46-4507696	501(C)(3)	25,000.	0.			ENVIRONMENT & SUSTAINABILITY
KUOW PUGET SOUND PUBLIC RADIO 4518 UNIVERSITY WAY NW, STE. 310 SEATTLE, WA 98105	91-2079402	501(C)(3)	5,000.	0.			GENERAL SUPPORT
LEAD WITH LOVE P.O. BOX 2272 ASPEN, CO 81612	82-5352697	501(C)(3)	50,000.	0.			GENERAL SUPPORT
LEHRMAN COMMUNITY DAY SCHOOL 727 77TH STREET MIAMI BEACH, FL 33141	65-1119268	501(C)(3)	5,000.	0.			EDUCATION SUPPORT
LGBTQ CENTER 1522 EAST MISHAWAKA AVENUE SOUTH BEND, IN 46615	20-3906347	501(C)(3)	9,000.	0.			CIVIC ENHANCEMENT
LIFE INTER-FAITH TEAM ON UNEMPLOYMENT AND POVERTY - P.O. BOX 1928 - RIFLE, CO 81650	84-0896081	501(C)(3)	29,000.	0.			EMERGENCY ASSISTANCE
LITERACY OUTREACH 1127 SCHOOL STREET GLENWOOD SPRINGS, CO 81601	26-4713475	501(C)(3)	11,000.	0.			GENERAL SUPPORT
LITTLE STAR FOUNDATION 174 WATERCOLOR WAY, SUITE 103, B34 SANTA ROSA BEACH, FL 32459	86-0947944	501(C)(3)	5,000.	0.			FAMILY SERVICES

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LUCKY DAY ANIMAL RESCUE OF COLORADO - P.O. BOX 8856 - ASPEN, CO 81612	45-3508032	501(C)(3)	22,750.	0.			ANIMAL WELFARE
MANAUS P.O. BOX 2026 CARBONDALE, CO 81623	20-2710588	501(C)(3)	435,000.	0.			GENERAL SUPPORT
MARSHALL DIRECT FUND P.O. BOX 4477 ASPEN, CO 81612	35-2308730	501(C)(3)	15,000.	0.			GENERAL SUPPORT
MASSACHUSETTS GENERAL HOSPITAL 125 NASHUA STREET, SUITE 540 BOSTON, MA 02114	04-1564655	501(C)(3)	25,000.	0.			EPILEPSY MGT.
MERCY CORPS P.O. BOX 80020 PRESTT, AZ 86304	91-1148123	501(C)(3)	15,000.	0.			GENERAL SUPPORT
MIND SPRINGS HEALTH 515 28 3/4 ROAD, BLDG. A GRAND JUNCTION, CO 81501	84-0625890	501(C)(3)	10,000.	0.			GENERAL SUPPORT
MIRACE HOUSE FOUNDATION 4124 MARINE AVENUE LAWNDALE, CA 90260	33-0279963	501(C)(3)	5,000.	0.			HEALTH & WELLNESS
MOUNT SOPRIS MONTESSORI SCHOOL 879 EUCLID AVENUE CARBONDALE, CO 81623	84-0864777	501(C)(3)	11,000.	0.			TUITION ASSISTANCE
MOUNTAIN RESCUE ASPEN 37925 HIGHWAY 82 ASPEN, CO 81611	84-6042237	501(C)(3)	9,850.	0.			GENERAL SUPPORT

Schedule I (Form 990)

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MUSEUM OF POLO AND HALL OF FAME 9011 LAKE WORTH ROAD LAKE WORTH, FL 33467	36-3308567	501(C)(3)	8,000.	0.			GENERAL SUPPORT
MUSIC THERAPY OF THE ROCKIES P.O. BOX 3536 ASPEN, CO 81612	83-1795782	501(C)(3)	7,500.	0.			GENERAL SUPPORT
NARAL PRO-CHOICE WASHINGTON FDN. 811 1ST AVENUE, SUITE 675 SEATTLE, WA 98104	91-1353222	501(C)(3)	20,000.	0.			CIVIC ENHANCEMENT
NESHAMA CENTER P.O. BOX 8064 ASPEN, CO 81612	14-1964306	501(C)(3)	11,040.	0.			GENERAL SUPPORT
NORTHWESTERN UNIVERSITY FEINBERG SCHOOL OF MEDICINE - 420 EAST SUPERIOR STREET, - CHICAGO, IL 60611	36-2167817	501(C)(3)	5,000.	0.			SUPPORT GLOBAL HEALTH INITIATIVE
OCEANA 1025 CONNECTICUT AVE. NW, STE. 200 WASHINGTON DC, DC 20036	51-0401308	501(C)(3)	24,220.	0.			GENERAL SUPPORT
OHIO CAMPUS COMPACT 615 NORTH PEARL STREET GRANVILLE, OH 43023	31-1577478	501(C)(3)	52,750.	0.			ELECTION ENGAGEMENT PROJECT
OTTERBEIN UNIVERSITY 1 SOUTH GROVE STREET WESTERVILLE, OH 43081	31-4379532	501(C)(3)	20,000.	0.			EDUCATION
OUR SCHOOL 3126 SOUTH GRAND AVENUE GLENWOOD SPRINGS, CO 81601	84-1406053	501(C)(3)	16,000.	0.			TUITION ASSISTANCE

Schedule I (Form 990)

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PATHFINDERS P.O. BOX 11799 ASPEN, CO 81612	20-1710899	501(C)(3)	12,000.	0.			HEALTH & WELLNESS
PENINSULA LIBRARY FOUNDATION P.O. BOX 292 PENINSULA, OH 44264	34-1751216	501(C)(3)	10,000.	0.			EDUCATION
PERFORMA 100 WEST 23RD STREET, FLOOR NEW YORK, NY 10011	20-1286572	501(C)(3)	10,000.	0.			GENERAL SUPPORT
PHILANTHROPY COLORADO P.O. BOX 48149 DENVER, CO 80204	71-0947313	501(C)(3)	10,000.	0.			SUPPORT RURAL FUNDERS LEARNING NETWORK
PITKIN COUNTY LIBRARY 120 NORTH MILL STREET ASPEN, CO 81611	84-6007940	501(C)(3)	6,500.	0.			GENERAL SUPPORT
PLANNED PARENTHOOD FEDERATION OF AMERICA - 123 WILLIAM STREET, 10TH FL. - NEW YORK, NY 10038	53-0204621	501(C)(3)	26,000.	0.			HEALTH & WELLNESS
PLANNED PARENTHOOD OF THE ROCKY MOUNTAINS - 7155 EAST 38TH AVENUE - DENVER, CO 80207	84-0404253	501(C)(3)	105,000.	0.			HEALTH & WELLNESS
PLANNED PARENTHOOD OF THE ROCKY MOUNTAINS DBA GLENWOOD SPRINGS HC - 50923 HIGHWAY 6 - GLENWOOD SPRINGS, CO 81601	84-0404253	501(C)(3)	48,350.	0.			HEALTH & WELLNESS
PLANT-IT 2020 9457 SOUTH UNIVERSITY BLVD, #310 HIGHLAND RANCH, CO 80126	06-1356691	501(C)(3)	15,000.	0.			GENERAL SUPPORT

Schedule I (Form 990)

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POLO TRAINING FOUNDATION 70 CLINTON STREET TULLY, NY 13159	36-2605713	501(C)(3)	6,500.	0.			GENERAL SUPPORT
PRESIDIO GRADUATE SCHOOL 1202 RALSTON AVENUE, SUITE 300 SAN FRANCISCO, CA 94129	94-3185612	501(C)(3)	100,000.	0.			GENERAL SUPPORT
PROGRESSNOW COLORADO EDUCATION 1536 WYNKOOP STREET, SUITE 300 DENVER, CO 80202	73-1674017	501(C)(3)	165,000.	0.			GENERAL SUPPORT
QF COMMUNITY LEADERSHIP FOUNDATION 3000 LAWRENCE STREET, SUITE 4 DENVER, CO 80205	45-2405700	501(C)(3)	5,000.	0.			BEST PRACTICES PROJECT
RAISBECK AVIATION HIGH SCHOOL PTSA P.O. BOX 81222 SEATTLE, WA 98108	68-0594524	501(C)(3)	50,000.	0.			SUPPORT OF THE SOLAR INITIATIVE
RAISING A READER ASPEN TO PARACHUTE - P.O. BOX 2533 - GLENWOOD SPRINGS, CO 81602	55-0873041	501(C)(3)	28,000.	0.			PROGRAM SUPPORT
RESPONSE 0405 CASTLE CREEK ROAD, STE. 203 ASPEN, CO 81611	74-2328814	501(C)(3)	24,150.	0.			GENERAL SUPPORT
RIVER BRIDGE REGIONAL CENTER 520 21ST STREET GLENWOOD SPRINGS, CO 81601	455464778	501(C)(3)	41,000.	0.			PROGRAM SUPPORT
RIVER CENTER OF NEW CASTLE P.O. BOX 272 NEW CASTLE, CO 81647	27-3837160	501(C)(3)	9,000.	0.			MEAL DELIVERY SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ROARING FORK FIRE RESCUE AUTHORITY 1089 JW DRIVE CARBONDALE, CO 81623	82-5130362	501(C)(3)	28,000.	0.			SUPPORT FIREFIGHTING EQUIPMENT
ROARING FORK MOUNTAIN BIKE ASSOC. P.O. BOX 2635 ASPEN, CO 81612	77-0204066	501(C)(3)	25,000.	0.			GENERAL SUPPOT
ROARING FORK MUSIC SOCIETY P.O. BOX 503 CARBONDALE, CO 81623	46-5333149	501(C)(3)	7,000.	0.			RF YOUTH ORCHESTRA SUPPORT
ROARING FORK OUTDOOR VOLUNTEERS P.O. BOX 1341 BASALT, CO 81621	84-1302819	501(C)(3)	12,000.	0.			ENVIRONMENT & SUSTAINABILITY
ROARING FORK PICKLEBALL ASSOC. P.O. BOX 1544 CARBONDALE, CO 81623	81-2677261	501(C)(3)	5,000.	0.			GENERAL SUPPORT
ROARING FORK PRECOLLEGIATE 400 SOPRIS AVENUE CARBONDALE, CO 81623	84-6012220	501(C)(3)	21,000.	0.			EDUCATION SUPPORT
ROARING FORK SCHOOL DISTRICT 1405 GRAND AVENUE GLENWOOD SPRINGS, CO 81601	84-6012220	501(C)(3)	59,617.	0.			EDUCATION SUPPORT
ROCKY MOUNTAIN INSTITUTE 22830 TWO RIVERS ROAD BASALT, CO 81621	74-2244146	501(C)(3)	10,850.	0.			ENVIRONMENT & SUSTAINABILITY
ROOM TO READ 465 CALIFORNIA STREET, STE. 1000 SAN FRANCISCO, CA 94104	91-2003533	501(C)(3)	10,000.	0.			EDUCATION

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SMILING GOAT RANCH 271 WILLOW LANE CARBONDALE, CO 81623	47-2019316	501(C)(3)	5,000.	0.			FAMILY SERVICES
STEPPING STONES 1010 GARFIELD AVENUE CARBONDALE, CO 81623	46-4740539	501(C)(3)	41,290.	0.			YOUTH SUPPORT
STUDENT DIPLOMACY CORPS 601 WEST 26TH STREET, SUITE325 NEW YORK, NY 10001	46-2805875	501(C)(3)	15,000.	0.			SCHOLARSHIP SUPPORT
SUMMIT54 625 EAST MAIN STREET, SUITE 102B ASPEN, CO 81611	27-2978700	501(C)(3)	71,750.	0.			YOUTH SUPPORT
SUSTAINABLE SETTINGS 6107 HIGHWAY 133 CARBONDALE, CO 81623	84-1610236	501(C)(3)	22,500.	0.			ENVIRONMENT & SUSTAINABILITY
THE 2 FORKS CLUB P.O. BOX 1147 CARBONDALE, CO 81623	46-4162607	501(C)(3)	51,000.	0.			ENVIRONMENT & SUSTAINABILITY
THE AMERICAN ISRAEL EDUCATION FDN. 251 H STREET NORTHWEST WASHINGTON DC, DC 20001	52-1623781	501(C)(3)	10,000.	0.			GENERAL SUPPORT
THE ART BASE 99 MIDLAND SPUR BASALT, CO 81621	20-1188479	501(C)(3)	19,000.	0.			ART SUPPORT
THE ARTS CAMPUS AT WILLITS 360 MARKET STREET BASALT, CO 81621	47-3091347	501(C)(3)	32,500.	0.			BUILDING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE ASPEN INSTITUTE 1000 NORTH 3RD STREET ASPEN, CO 81611	84-0399006	501(C)(3)	84,590.	0.			GENERAL SUPPORT
THE BUDDY PROGRAM 110 EAST HALLAM STREET, STE.125 ASPEN, CO 81611	74-2594693	501(C)(3)	52,350.	0.			PROGRAM SUPPORT
THE CLIMATE REALITY PROJECT 555 11TH STREET NW, STE. 601 WASHINGTON DC, DC 20004	87-0745629	501(C)(3)	5,000.	0.			GENERAL SUPPORT
THE ENVIRONMENT FOUNDATION ASPEN SKIING COMPANY ASPEN, CO 81611	84-1428863	501(C)(3)	60,139.	0.			GENERAL SUPPORT
THE EPILEPSY FOUNDATION 8301 PROFESSIONAL PLACE LANDOVER, MD 20785	52-0856660	501(C)(3)	10,000.	0.			HEALTH & WELLNESS
THE HAWN FOUNDATION 220 26TH STREET, SUITE 203 SANTA MONICA, CA 90402	20-0653982	501(C)(3)	25,000.	0.			EDUCATION
THE MANAGEMENT CENTER 1920 L STREET NW, STE. 775 WASHINGTON DC, DC 20036	20-5197607	501(C)(3)	100,000.	0.			CIVIC ENHANCEMENT
THE MUSEUM OF MODERN ART 11 WEST 53 STREET NEW YORK, NY 10019	13-1624100	501(C)(3)	25,000.	0.			GENERAL SUPPORT
THE NATURE CONSERVANCY 4245 NORTH FAIRFAX DRIVE, STE.100 ARLINGTON, VA 22203	53-0242652	501(C)(3)	5,000.	0.			ENVIRONMENT & SUSTAINABILITY

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE WORK FOUNDATION P.O. BOX 20310 SANTA BARBARA, CA 93120	87-0559189	501(C)(3)	70,000.	0.			GENERAL SUPPORT
THEATRE ASPEN 110 EAST HALLAM STREET, STE.126 ASPEN, CO 81611	74-2319032	501(C)(3)	43,550.	0.			GENERAL SUPPORT
THREE GENERATIONS 1133 BROADWAY, SUITE 310 NEW YORK, NY 10010	20-8688513	501(C)(3)	8,000.	0.			GENERAL SUPPORT
THUNDER RIVER THEATRE COMPANY 67 PROMENADE CARBONDALE, CO 81623	84-1546404	501(C)(3)	21,713.	0.			ENDOWMENT DISTRIBUTION
THUNDER RIVER THEATRE COMPANY 67 PROMENADE CARBONDALE, CO 81623	84-1546404	501(C)(3)	60,000.	0.			ORG. FUND DRAW
THUNDER RIVER THEATRE COMPANY 67 PROMENADE CARBONDALE, CO 81623	84-1546404	501(C)(3)	30,000.	0.			GENERAL SUPPORT
TIDES FOUNDATION P.O. BOX 29903 SAN FRANCIS, CA 94129	51-0198509	501(C)(3)	5,500.	0.			EDUCATION SUPPORT
TOUCHSTONES DISCUSSION PROJECT P.O. BOX 2329 ANNAPOLIS, MD 21404	52-2009938	501(C)(3)	5,000.	0.			GENERAL SUPPORT
UC SANTA BARBARA FOUNDATION 4219 CHEADLE HALL SANTA BARBARA, CA 93106	23-7314834	501(C)(3)	20,000.	0.			EDUCATION

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ULI FOUNDATION 2001 L STREET NW, STE. 200 WASHINGTON DC, DC 20036	23-7133957	501(C)(3)	10,000.	0.			GENERAL SUPPORT
UNION OF CONCERNED SCIENTISTS TWO BRATTLE SQUARE, SUITE 6 CAMBRIDGE, MA 02138	04-2535767	501(C)(3)	10,000.	0.			EDUCATION
UNITED JEWISH APPEAL 300 SOUTH DAHLIA STREET, STE.300 DENVER, CO 80246	37-1418235	501(C)(3)	11,500.	0.			GENERAL SUPPORT
UNITED NEGRO COLLEGE FUND 1805 7TH STREET NORTHWEST WASHINGTON, DC 20001	13-1624241	501(C)(3)	40,000.	0.			GENERAL SUPPORT
UNIVERSITY OF CALIFORNIA PRESS FOUNDATION - 155 GRAND AVENUE, SUITE 400 - OAKLAND, CA 94612	94-2682969	501(C)(3)	5,000.	0.			CIVIC ENHANCEMENT
UNIVERSITY OF COLORADO FOUNDATION P.O. BOX 17126 DENVER, CO 80217	84-6049811	501(C)(3)	10,000.	0.			PATIENT SERVICES SUPPORT
UNIVERSITY OF MICHIGAN 1221 BEAL AVENUE ANN ARBOR, MI 48109	38-6006309	501(C)(3)	10,000.	0.			FELLOWSHIP SUPPORT
UNIVERSITY OF PENNSYLVANIA, 2929 WALNUT STREET PHILADELPHIA, PA 19104	23-1352685	501(C)(3)	100,000.	0.			EDUCATION
UNIVERSITY SCHOOL 2785 S.O.M. CENTER ROAD HUNTING VALLEY, OH 44022	34-0714720	501(C)(3)	6,000.	0.			EDUCATION

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USA CYCLING 210 USA CYCLING POINT, STE. 100 LORADO SPRINGS, CO 80919	84-1284437	501(C)(3)	10,000.	0.			GENERAL SUPPORT
VALLEY SETTLEMENT 520 SOUTH THIRD STREET, STE. 9 CARBONDALE, CO 81623	81-2401368	501(C)(3)	177,760.	0.			GENERAL SUPPORT
VALLEY VIEW HOSPITAL FOUNDATION P.O. BOX 1970 GLENWOOD SPRINGS, CO 81602	73-1664673	501(C)(3)	52,500.	0.			HEALTH AND WELLNESS
VOICES 520 SOUTH THIRD STREET, #24A CARBONDALE, CO 81623	81-3931536	501(C)(3)	63,920.	0.			GENERAL SUPPORT
WE-CYCLE P.O. BOX 360 ASPEN, CO 81612	36-4679302	501(C)(3)	5,000.	0.			GENERAL SUPPORT
WESTERN RESOURCE ADVOCATES 2260 BASELINE ROAD, SUITE 200 BOULDER, CO 80302	84-1113831	501(C)(3)	13,500.	0.			ENVIRONMENT & SUSTAINABILITY
WHITNEY MUSEUM OF AMERICAN ART 99 GANSEVOORT STREET NEW YORK, NY 10014	13-1789318	501(C)(3)	60,000.	0.			GENERAL SUPPORT
WILDERNESS WORKSHOP P.O. BOX 1442 CARBONDALE, CO 81623	74-1900412	501(C)(3)	18,250.	0.			ENVIRONMENT & SUSTAINABILITY
WINDWALKERS EQUINE ASSISTED LEARNING AND THERAPY CENTER - P.O. BOX 504 - CARBONDALE, CO 81623	38-3716992	501(C)(3)	10,000.	0.			PROGRAM SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORLD DREAM FOUNDATION 9903 SANTA MONICA BLVD, STE.155 BEVERLY HILLS, CA 90212	83-2210796	501(C)(3)	150,000.	0.			GENERAL SUPPORT
YAMPAH MOUNTAIN HIGH SCHOOL & TEEN PARENT PROGRAM - 695 RED MOUNTAIN DRIVE - GLENWOOD SPRINGS, CO 81601	84-0602408	501(C)(3)	23,500.	0.			EDUCATION
YOUTHENTITY P.O. BOX 1989 CARBONDALE, CO 81623	84-1601705	501(C)(3)	69,750.	0.			YOUTH SUPPORT
YOUTHZONE 413 NINTH STREET GLENWOOD SPRINGS, CO 81601	84-0712993	501(C)(3)	26,500.	0.			YOUTH SUPPORT

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Name of the organization: **ASPEN COMMUNITY FOUNDATION**
Employer identification number: **84-0829226**

Part I Questions Regarding Compensation

- 1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.
- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |
- b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain
- 2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?
- 3** Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.
- | | |
|--|---|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |
- 4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:
- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.
- Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**
- 5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:
- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.
- 6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:
- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.
- 7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III
- 8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III
- 9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2019

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) TAMARA TORMOHLEN EXECUTIVE DIRECTOR	(i)	168,280.	0.	0.	0.	0.	168,280.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

- ▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
- ▶ **Attach to Form 990.**
- ▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Name of the organization: **ASPEN COMMUNITY FOUNDATION** Employer identification number: **84-0829226**

Part I	Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	18	4,824,019.	FAIR VALUE
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ()				
26	Other ()				
27	Other ()				
28	Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2019

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Multiple horizontal lines for supplemental information.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Open to Public
Inspection

Name of the organization

ASPEN COMMUNITY FOUNDATION

Employer identification number

84-0829226

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

CONNECTING DONORS TO COMMUNITY NEEDS, BUILDING PERMANENT CHARITABLE

FUNDS AND BRINGING PEOPLE TOGETHER TO SOLVE COMMUNITY PROBLEMS.

FORM 990, PART VI, SECTION B, LINE 11B:

REVIEW RETURN IN MEETINGS PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

REGULAR MEETINGS/REPORTS.

FORM 990, PART VI, SECTION B, LINE 15:

INDUSTRY DATA.

FORM 990, PART VI, SECTION C, LINE 19:

UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

AGENCY CONTRIBUTIONS -84,527.

AGENCY GRANTS 241,813.

AGENCY INVESTMENT INCOME -487,323.

AGENCY ADMINISTRATIVE FEES 15,829.

AGENCY INTERFUND 0.

TOTAL TO FORM 990, PART XI, LINE 9 -314,208.

PART XI LINE 2C

NO CHANGES IN THE AUDIT COMMITTEE PROCESS HAVE OCCURED.

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

Schedule O (Form 990 or 990-EZ) (2019)

932211 09-06-19

