** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

Form **990**

Department of the Treasury
Internal Revenue Service

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.

OMB No. 1545-0047

2024

Open to Public Inspection

A For the 2024 calendar year, or tax year beginning **and ending**

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/ terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
ASPEN COMMUNITY FOUNDATION

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
455 GOLD RIVERS COURT #515

City or town, state or province, country, and ZIP or foreign postal code
BASALT, CO 81621

F Name and address of principal officer: ERICA SNOW
455 GOLD RIVERS CT #515, BASALT, CO 81621

D Employer identification number
84-0829226

E Telephone number
(970) 925-9300

G Gross receipts $ 20,912,651.

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ 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

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 ☐ 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 2024 (Part V, line 2a)	5	9
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.

Revenue

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	16,808,024.	19,910,081.
9	Program service revenue (Part VIII, line 2g)	0.	0.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	578,869.	777,922.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	162,496.	186,437.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	17,549,389.	20,874,440.

Expenses

13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	15,623,118.	19,657,650.
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)	1,254,274.	1,279,048.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b	Total fundraising expenses (Part IX, column (D), line 25) 666,390.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,257,598.	1,650,504.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	18,134,990.	22,587,202.
19	Revenue less expenses. Subtract line 18 from line 12	-585,601.	-1,712,762.

Net Assets or Fund Balances

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	57,087,469.	62,335,898.
21	Total liabilities (Part X, line 26)	4,135,573.	4,728,355.
22	Net assets or fund balances. Subtract line 21 from line 20	52,951,896.	57,607,543.

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
ERICA SNOW, EXECUTIVE DIRECTOR
Type or print name and title

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	Check if self-employed	PTIN
PAUL J. BACKES, CPA			☐	P00175605

Firm's name MCMAHAN AND ASSOCIATES, L.L.C. Firm's EIN 84-1509269

Firm's address P.O. BOX 5850
AVON, CO 81620 Phone no. (970) 845-8800

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Part III Statement of Program Service Accomplishments

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

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 X No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ..... Yes X No
If "Yes," describe these changes on Schedule O.

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

4a (Code: _____) (Expenses $ 21,624,778. including grants of $ 19,657,650.) (Revenue $ _____)
IN 2024, THE FOUNDATION PROVIDED 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. ADDITIONALLY, THE FOUNDATION STOOD UP ITS COMMUNITY LEADERSHIP PROGRAM, WHICH IS DESIGNED TO ENSURE OUR REGION'S OPPORTUNITIES AREA ACCESSIBLE TO ALL BY CONNECTING LEADERS AND CATALYZING PROGRESS. THIS INCLUDED THE INAUGURAL NONPROFIT CENTER FOR EXCELLENCE, WHICH PROVIDED AN IMMERSIVE, 5-DAY ACADEMY FOCUSING ON

4b (Code: _____) (Expenses $ _____ including grants of $ _____) (Revenue $ _____)

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 21,624,778.

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)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors*? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		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? *If "Yes," complete Schedule C, Part II*	4		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 Rev. Proc. 98-19? *If "Yes," complete Schedule C, Part III*	5		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? *If "Yes," complete Schedule D, Part I*	6	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? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		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? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	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? *If "Yes," complete Schedule D, Part VI*	11a	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? *If "Yes," complete Schedule D, Part VII*	11b	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? *If "Yes," complete Schedule D, Part VIII*	11c		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? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	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)? *If "Yes," complete Schedule D, Part X*	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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? *If "Yes," complete Schedule F, Parts I and IV*	14b		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? *If "Yes," complete Schedule F, Parts II and IV*	15		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? *If "Yes," complete Schedule F, Parts III and IV*	16		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? *If "Yes," complete Schedule G, Part I.* See instructions	17		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? *If "Yes," complete Schedule G, Part II*	18	X	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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? *If "Yes," complete Schedule I, Parts I and II*	21	X	

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or 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? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		X
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in noncash contributions? *If "Yes," complete Schedule M*	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? **Note:** All Form 990 filers are required to complete Schedule O	38	X	

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 ☐

				Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	65		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c X	

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

				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	9		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	3a		X	
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation on Schedule O*	3b		X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			X
b	If "Yes," enter the name of the foreign country _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		X	
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note:** See the instructions for additional information the organization must report on Schedule O.	13a			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation on Schedule O*	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15			X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16			X
17	**Section 501(c)(21) organizations.** Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17			

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

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	20		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b	Enter the number of voting members included on line 1a, above, who are independent	1b	20		
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?	2			X
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?	3			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6	Did the organization have members or stockholders?	6			X
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?	7a			X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b		X	
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*	9			X

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe on 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*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe on Schedule O how this was done*	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
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?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
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?	16a		X
b	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?	16b		

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the 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/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/ 1099-NEC)	(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) ERICA SNOW EXECUTIVE DIRECTOR	40.00			X				230,000.	0.	39,529.
(2) KORTNEY HARTMAN FINANCE DIRECTOR	40.00					X		142,802.	0.	25,796.
(3) VALERIE CARLIN CHIEF IMPACT OFFICER	40.00					X		149,324.	0.	14,932.
(4) STEPHANIE GIANNESCHI PHILANTHROPY DIRECTOR	40.00					X		114,022.	0.	27,505.
(5) JENNIFER ELLIOT TREASURER	2.00			X				0.	0.	0.
(6) RAMONA BRULAND SECRETARY	2.00			X				0.	0.	0.
(7) JEFF BLACK BOARD MEMBER	2.00	X						0.	0.	0.
(8) GEOFF BUCHHEISTER BOARD MEMBER	2.00	X						0.	0.	0.
(9) SUSAN CROWN BOARD MEMBER	2.00	X						0.	0.	0.
(10) BRUCE ETKIN BOARD MEMBER	2.00	X						0.	0.	0.
(11) BOBBI HAPGOOD BOARD MEMBER	2.00	X						0.	0.	0.
(12) MIKE KAPLAN BOARD MEMBER	2.00	X						0.	0.	0.
(13) GRADY LENKIN BOARD MEMBER	2.00	X						0.	0.	0.
(14) KATHERINE LORENZ BOARD MEMBER	2.00	X						0.	0.	0.
(15) MELONY LEWIS BOARD MEMBER	2.00	X						0.	0.	0.
(16) SUSIE MERAZ BOARD MEMBER	2.00	X						0.	0.	0.
(17) MARIA TICSAY 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/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/ 1099-NEC)	(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) MARCIE MUSSER BOARD MEMBER	2.00	X						0.	0.	0.
(19) CRAIG NAVIAS BOARD MEMBER	2.00	X						0.	0.	0.
(20) ROB PEW BOARD MEMBER	2.00	X						0.	0.	0.
(21) SUSANA SALAMUN BOARD MEMBER	2.00	X						0.	0.	0.
(22) YESENIA SILVA ESTRADA BOARD MEMBER	2.00	X						0.	0.	0.
(23) JILL ASCHKENASY CHAIR	2.00			X				0.	0.	0.
1b Subtotal								636,148.	0.	107,762.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								636,148.	0.	107,762.

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 4

		Yes	No
3	Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*		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? *If "Yes," complete Schedule J for such individual*	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? *If "Yes," complete Schedule J for such person*		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) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	529,556.				
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	19,380,525.				
	g Noncash contributions included in lines 1a-1f	1g	$ 10,344,807.				
	h **Total.** Add lines 1a-1f			19,910,081.			
Program Service Revenue			**Business Code**				
	2a						
	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)			777,922.	777,922.		
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
			(i) Real / (ii) Personal				
	6a Gross rents	6a					
	b Less: rental expenses	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
			(i) Securities / (ii) Other				
	7a Gross amount from sales of assets other than inventory	7a					
	b Less: cost or other basis and sales expenses	7b					
	c Gain or (loss)	7c					
	d Net gain or (loss)						
	8a Gross income from fundraising events (not including $ 529,556. of contributions reported on line 1c). See Part IV, line 18	8a	111,223.				
	b Less: direct expenses	8b	38,211.				
	c Net income or (loss) from fundraising events			73,012.			73,012.
	9a Gross income from gaming activities. See Part IV, line 19	9a					
	b Less: direct expenses	9b					
	c Net income or (loss) from gaming activities						
	10a 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			**Business Code**				
	11a MISCELLANEOUS REVENUE		900099	113,425.	113,425.		
	b						
	c						
	d All other revenue						
	e **Total.** Add lines 11a-11d			113,425.			
	12 **Total revenue.** See instructions			20,874,440.	891,347.	0.	73,012.

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	19,528,400.	19,528,400.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	129,250.	129,250.		
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	1,279,048.	747,944.	207,004.	324,100.
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	29,669.	17,071.	4,910.	7,688.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	302,138.	302,138.		
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	410,840.	333,430.	8,345.	69,065.
12 Advertising and promotion	105,332.	68,857.	14,217.	22,258.
13 Office expenses	83,780.	60,929.	13,731.	9,120.
14 Information technology	65,599.	38,378.	10,610.	16,611.
15 Royalties				
16 Occupancy				
17 Travel	73,252.	53,941.	2,702.	16,609.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	21,291.	12,250.	3,524.	5,517.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	50,849.	29,257.	8,416.	13,176.
23 Insurance	11,288.	7,557.	1,454.	2,277.
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 DONOR CULTIVATION	270,980.	116,606.	5,282.	149,092.
b CONVENINGS AND DATA	95,814.	94,808.	392.	614.
c MISCELLANEOUS EXPENSE	90,000.	61,115.	8,889.	19,996.
d BOARD/COMMITTEE EXPENSE	12,353.	7,108.	2,044.	3,201.
e All other expenses	27,319.	15,739.	4,514.	7,066.
25 **Total functional expenses.** Add lines 1 through 24e	22,587,202.	21,624,778.	296,034.	666,390.
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) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing	3,840,468.	1	7,278,728.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	30,488.	4	37,015.
	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	1,599.	9	1,500.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 1,495,055.			
	b	Less: accumulated depreciation — 10b: 406,334.	1,139,571.	10c	1,088,721.
	11	Investments - publicly traded securities	21,569,341.	11	21,924,159.
	12	Investments - other securities. See Part IV, line 11	30,506,002.	12	31,155,775.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	0.	15	850,000.
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)	57,087,469.	16	62,335,898.
Liabilities	17	Accounts payable and accrued expenses	124,169.	17	146,364.
	18	Grants payable	342,875.	18	1,049,800.
	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	539,116.	23	479,724.
	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	3,129,413.	25	3,052,467.
	26	**Total liabilities.** Add lines 17 through 25	4,135,573.	26	4,728,355.
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here** ☒ **and complete lines 27, 28, 32, and 33.**			
	27	Net assets without donor restrictions	52,382,438.	27	56,956,720.
	28	Net assets with donor restrictions	569,458.	28	650,823.
		Organizations that do not follow FASB ASC 958, check here ☐ **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	52,951,896.	32	57,607,543.
	33	Total liabilities and net assets/fund balances	57,087,469.	33	62,335,898.

Form **990** (2024)

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	20,874,440.
2	Total expenses (must equal Part IX, column (A), line 25)	2	22,587,202.
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,712,762.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	52,951,896.
5	Net unrealized gains (losses) on investments	5	6,291,459.
6	Donated services and use of facilities	6	
7	Investment expenses	7	-302,138.
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	379,088.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	57,607,543.

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: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	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: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
	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: ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis			
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?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3a		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	3b		

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization

ASPEN COMMUNITY FOUNDATION

Employer identification number

84-0829226

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
8 ☒ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
f Enter the number of supported organizations .....
g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

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) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	20550855.	27836517.	13784554.	16026195.	19380525.	97578646.
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	20550855.	27836517.	13784554.	16026195.	19380525.	97578646.
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)						23284145.
6 **Public support.** Subtract line 5 from line 4.						74294501.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4	20550855.	27836517.	13784554.	16026195.	19380525.	97578646.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	-56,134.	256,050.	105,627.	578,869.	777,922.	1662334.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		209,716.	39,700.	162,496.	186,437.	598,349.
11 **Total support.** Add lines 7 through 10						99839329.

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

13 **First 5 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 2024 (line 6, column (f), divided by line 11, column (f))	14	74.41 %
15 Public support percentage from 2023 Schedule A, Part II, line 14	15	75.18 %

16a **33 1/3% support test - 2024.** 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 - 2023.** 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 - 2024.** 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 - 2023.** 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) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(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) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(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 on 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 5 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 2024 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2023 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2024** (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from **2023** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2024.** 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 - 2023.** 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 on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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? *If "No," describe in* **Part VI** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* **Part VI** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer lines 3b and 3c below.*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* **Part VI** *when and how the organization made the determination.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* **Part VI** *what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*	4b		
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)? *If "Yes," explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in* **Part VI,** *including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
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? *If "Yes," provide detail in* **Part VI.**	6		
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? *If "Yes," complete Part I of Schedule L (Form 990).*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*	8		
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))? *If "Yes," provide detail in* **Part VI.**	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* **Part VI.**	9b		
c	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* **Part VI.**	9c		
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)? *If "Yes," answer line 10b below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*	10b		

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 on lines 11b and 11c below, the governing body of a supported organization?	**11a**		
b	A family member of a person described on line 11a above?	**11b**		
c	A 35% controlled entity of a person described on line 11a or 11b above? *If "Yes" to line 11a, 11b, or 11c, provide detail in* **Part VI.**	**11c**		

Section B. Type I Supporting Organizations

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

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).*	**1**		

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?	**1**		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in* **Part VI** *how the organization maintained a close and continuous working relationship with the supported organization(s).*	**2**		
3	By reason of the relationship described on line 2, above, 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.*	**3**		

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** ☐ The organization satisfied the Activities Test. *Complete* **line 2** *below.*
- **b** ☐ The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*
- **c** ☐ The organization supported a governmental entity. *Describe in* **Part VI** *how you supported a governmental entity (see instructions).*

			Yes	No
2	Activities Test. **Answer lines 2a and 2b below.**			
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.*	**2a**		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* **Part VI** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	**2b**		
3	Parent of Supported Organizations. **Answer lines 3a and 3b 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? If "Yes" or "No," provide details in **Part VI**.	**3a**		
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.	**3b**		

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 0.015 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 0.035.	**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 0.85 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 ☐ 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	**1**	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	**2**	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	**3**	
4 Amounts paid to acquire exempt-use assets	**4**	
5 Qualified set-aside amounts (prior IRS approval required - *provide details in* **Part VI**)	**5**	
6 Other distributions (describe in **Part VI**). See instructions.	**6**	
7 **Total annual distributions.** Add lines 1 through 6.	**7**	
8 Distributions to attentive supported organizations to which the organization is responsive (*provide details in* **Part VI**). See instructions.	**8**	
9 Distributable amount for 2024 from Section C, line 6	**9**	
10 Line 8 amount divided by line 9 amount	**10**	

Section E - Distribution Allocations (see instructions)	**(i)** **Excess Distributions**	**(ii)** **Underdistributions Pre-2024**	**(iii)** **Distributable Amount for 2024**
1 Distributable amount for 2024 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2024 (reasonable cause required - *explain in* **Part VI**). See instructions.			
3 Excess distributions carryover, if any, to 2024			
a From 2019			
b From 2020			
c From 2021			
d From 2022			
e From 2023			
f **Total** of lines 3a through 3e			
g Applied to under distributions of prior years			
h Applied to 2024 distributable amount			
i Carryover from 2019 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2024 from Section D, line 7: $			
a Applied to underdistributions of prior years			
b Applied to 2024 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2024, 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 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, *explain in* **Part VI**. See instructions.			
7 **Excess distributions carryover to 2025.** Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2020			
b Excess from 2021			
c Excess from 2022			
d Excess from 2023			
e Excess from 2024			

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.)

Schedule B (Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Name of the organization

ASPEN COMMUNITY FOUNDATION

Employer identification number

84-0829226

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	[X] 501(c)(3) (enter number) organization
	[ ] 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	[ ] 527 political organization
Form 990-PF	[ ] 501(c)(3) exempt private foundation
	[ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation
	[ ] 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

[ ] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

[X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year ..... $ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization

ASPEN COMMUNITY FOUNDATION

Employer identification number

84-0829226

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		$ 2,978,578.	Person [X] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)
2		$ 1,000,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
3		$ 6,670,769.	Person [X] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)
4		$ 516,408.	Person [X] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)
5		$ 521,182.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
6		$ 488,030.	Person [X] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)

Name of organization

ASPEN COMMUNITY FOUNDATION

Employer identification number

84-0829226

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		$ 944,385.	Person [X] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization: ASPEN COMMUNITY FOUNDATION

Employer identification number: 84-0829226

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	PUBLICLY TRADED STOCK	$ 978,578.	03/20/24
3	PUBLICLY TRADED STOCK	$ 5,921,870.	02/16/24
4	PUBLICLY TRADED STOCK	$ 493,408.	08/05/24
6	PUBLICLY TRADED STOCK	$ 488,030.	12/23/24
7	REAL ESTATE (TRANSFERABLE DEVELOPMENT RIGHT) AND SKI PASSES	$ 904,000.	12/12/24
		$	

Name of organization: ASPEN COMMUNITY FOUNDATION

Employer identification number: 84-0829226

Part III **Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor.** Complete columns **(a)** through **(e) and** the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **$1,000 or less** for the year. (Enter this info. once.) $

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE D (Form 990)
(Rev. December 2024)
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

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	117	64
2	Aggregate value of contributions to (during year)	15,054,649.	4,855,432.
3	Aggregate value of grants from (during year)	16,806,233.	2,851,417.
4	Aggregate value at end of year	30,482,836.	26,685,185.

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? [X] Yes [ ] 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? [X] Yes [ ] 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 on line 2a 2c	
d	Number of conservation easements included on line 2c acquired after July 25, 2006, 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? [ ] Yes [ ] No

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 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? [ ] Yes [ ] No

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 $ _____

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 in 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	92,128.	83,749.	198,575.	89,015.	88,277.
b Contributions				100,000.	
c Net investment earnings, gains, and losses	12,818.	11,879.	-13,754.	9,560.	5,017.
d Grants or scholarships					
e Other expenditures for facilities and programs		3,500.	101,072.		4,279.
f Administrative expenses					
g End of year balance	104,946.	92,128.	83,749.	198,575.	89,015.

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 100 %
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?	3a(i)		X
(ii) Related organizations?	3a(ii)		X
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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.	266,666.	1,033,334.
c Leasehold improvements		59,328.	21,792.	37,536.
d Equipment		135,727.	117,876.	17,851.
e Other				
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, line 10c, column (B))*				1,088,721.

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	7,667,720.	END-OF-YEAR MARKET VALUE
(B) HEDGED EQUITY	7,439,483.	END-OF-YEAR MARKET VALUE
(C) FIXED INCOME	12,099,184.	END-OF-YEAR MARKET VALUE
(D) PRIVATE EQUITY	3,949,388.	END-OF-YEAR MARKET VALUE
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	31,155,775.	

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, line 13, col. (B))		

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, line 15, col. (B))*	

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	3,052,467.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, line 25, col. (B))*	3,052,467.

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	26,285,238.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	6,291,459.		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	18,080.		
e	Add lines 2a through 2d			2e	6,309,539.
3	Subtract line 2e from line 1			3	19,975,699.
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	302,138.		
b	Other (Describe in Part XIII.)	4b	596,603.		
c	Add lines 4a and 4b			4c	898,741.
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	20,874,440.

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	22,069,113.
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			
e	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	22,069,113.
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	302,138.		
b	Other (Describe in Part XIII.)	4b	215,951.		
c	Add lines 4a and 4b			4c	518,089.
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	22,587,202.

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	18,080.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

AGENCY INCOME	446,603.
AGENCY CONTRIBUTIONS	150,000.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	596,603.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

AGENCY GRANTS	215,951.

Part XIII Supplemental Information *(continued)*

SCHEDULE G (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

ASPEN COMMUNITY FOUNDATION

Employer identification number

84-0829226

Part I **Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- **a** ☐ Mail solicitations
- **b** ☐ Internet and email solicitations
- **c** ☐ Phone solicitations
- **d** ☐ In-person solicitations
- **e** ☐ Solicitation of nongovernment grants
- **f** ☐ Solicitation of government grants
- **g** ☐ Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ **Yes** ☐ **No**

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col. **(i)**	**(vi)** Amount paid to (or retained by) organization
Total						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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 ACF CONNECTED (event type)	(b) Event #2 (event type)	(c) Other events NONE (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	640,779.			640,779.
	2 Less: Contributions	529,556.			529,556.
	3 Gross income (line 1 minus line 2)	111,223.			111,223.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	38,211.			38,211.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				38,211.
	11 Net income summary. Subtract line 10 from line 3, column (d)				73,012.

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	☐ Yes_____ % ☐ No	☐ Yes_____ % ☐ No	☐ Yes_____ % ☐ 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: _____

11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	**13a**	%
b An outside facility	**13b**	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name _____

Address _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization $ _____ and the amount of gaming revenue retained by the third party $ _____

c If "Yes," enter the name and address of the third party:

Name _____

Address _____

16 Gaming manager information:

Name _____

Gaming manager compensation $ _____

Description of services provided _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year $

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Part IV **Supplemental Information** *(continued)*

SCHEDULE I (Form 990)
(Rev. December 2024)
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 instructions and the latest information.

OMB No. 1545-0047

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? ..... [X] 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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
UCLA FOUNDATION PO BOX 7145 PASADENA, CA 91109	95-2250801	501C3	1,000,000.	0.			GENERAL SUPPORT
ASPEN EDUCATION FOUNDATION P.O. BOX 2200 ASPEN, CO 81612	84-1181681	501C3	600,000.	0.			GENERAL SUPPORT
DANA-FARBER CANCER INSTITUTE P.O. BOX 849168 BOSTON, MA 02284	04-2263040	501C3	500,000.	0.			TO SUPPORT A RESEARCH PROJECT
HOTCHKISS SCHOOL 11 INTERLAKEN ROAD LAKEVILLE, CT 06039	06-0647018	501C3	500,000.	0.			TO SUPPORT AN ENDOWED FUND
DANA-FARBER CANCER INSTITUTE P.O. BOX 849168 BOSTON, MA 02284	04-2263040	501C3	300,000.	0.			TO SUPPORT DR. MARINAC'S RESEARCH
JAZZ ASPEN SNOWMASS 110 EAST HALLAM STREET, SUITE 118 ASPEN, CO 81611	84-1220222	501C3	275,000.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT.

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990. **Schedule I (Form 990) (Rev. 12-2024)**

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

LHA 432101 01-02-25

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DANA-FARBER CANCER INSTITUTE P.O. BOX 849168 BOSTON, MA 02284	04-2263040	501C3	250,000.	0.			TO SUPPORT THE FUND FOR EARLY DETECTION AND DR. MARINAC'S WORK
ENGLISH IN ACTION P.O. BOX 4856 BASALT, CO 81621	26-1254643	501C3	235,000.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT.
ANDERSON RANCH ARTS CENTER P.O. BOX 5598 SNOWMASS VILLAGE, CO 81615	23-7267983	501C3	200,000.	0.			THE PURPOSE OF THIS GRANT IS TO SUPPORT THE NATIONAL COUNCIL, A TITLE SPONSOR LEVEL FOR THE
COLORADO STATE UNIVERSITY FOUNDATION - P.O. BOX 1870 - FORT COLLINS, CO 80522	23-7098397	501C3	200,000.	0.			DR. MCGRATH'S RESEARCH
COMMUNITY OFFICE FOR RESOURCE EFFICIENCY - 129 EMMA ROAD, UNIT B - BASALT, CO 81621	84-1280543	501C3	200,000.	0.			GENERAL SUPPORT
CONSERVATION COLORADO EDUCATION FUND - 303 E. 17TH AVE. - DENVER, CO 80203	84-0614285	501C3	200,000.	0.			THIS GRANT IS UNRESTRICTED.
DANA-FARBER CANCER INSTITUTE P.O. BOX 849168 BOSTON, MA 02284	04-2263040	501C3	200,000.	0.			DR. MARINAC'S RESEARCH
THE ASPEN INSTITUTE 1000 NORTH 3RD STREET ASPEN, CO 81611	84-0399006	501C3	200,000.	0.			TO SUPPORT THE TRUSTEE ANNUAL FUND (50K), THE ANNUAL AWARDS DINNER (75K) AND UNRESTRICTED
THE SAVINGS COLLABORATIVE 959 CEDAR CREEK CARBONDALE, CO 81623	85-4176243	501C3	200,000.	0.			GENERAL SUPPORT

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOTCHKISS SCHOOL 11 INTERLAKEN ROAD LAKEVILLE, CT 06039	06-0647018	501C3	150,000.	0.			TO SUPPORT THE ENDOWED TEACHING CHAIR
ROARING FORK COMMUNITY DEVELOPMENT CORPORATION - 520 S. THIRD ST., STE. 22A - CARBONDALE, CO 81623	06-1781093	501C3	150,000.	0.			GENERAL OPERATIONS
VALLEY SETTLEMENT 1901 GRAND AVENUE, SUITE 206 GLENWOOD SPRINGS, CO 81601	81-2401368	501C3	150,000.	0.			IS TO SUPPORT A $100,000 CONTRIBUTION TO THE CAPITAL CAMPAIGN AND A $50,000 CONTRIBUTION TO
HAMMER MUSEUM OF ART AND CULTURAL CENTER, AT UCLA - 10899 WILSHIRE BOULEVARD - LOS ANGELES, CA 90024	95-4217197	501C3	140,000.	0.			TO SUPPORT THE PURCHASE OF AN ALLISON KATZ PAINTING
CLIMATE DEMOCRACY INITIATIVE 1536 WYNKOOP ST. SUITE 427 DENVER, CO 80202	92-0943342	501C3	130,000.	0.			GENERAL SUPPORT
CLIMATE DEMOCRACY INITIATIVE 1536 WYNKOOP ST. SUITE 427 DENVER, CO 80202	92-0943342	501C3	130,000.	0.			GENERAL SUPPORT
PLANNED PARENTHOOD OF THE ROCKY MOUNTAINS - P.O. BOX 732055 - DALLAS, TX 75373	84-0404253	501C3	125,000.	0.			GENERAL SUPPORT
ASPEN ART MUSEUM 637 EAST HYMAN AVENUE ASPEN, CO 81611	84-0746671	501C3	120,000.	0.			TO SUPPORT ARTCRUSH 2024 LIVE LOT 12: JASON MORAN: ARTCRUSH EXPERIENCE
DANCEASPEN 406 EAST HOPKINS AVENUE ASPEN, CO 81611	86-2924498	501C3	106,000.	0.			GENERAL SUPPORT

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLLIER COMMUNITY FOUNDATION 1110 PINE RIDGE RD, STE 200 NAPLES, FL 34108	59-2396243	501C3	103,948.	0.			FOR THE BOB AND JOYCE RANKIN TRUST
TREES, WATER & PEOPLE 633 REMINGTON STREET FORT COLLINS, CO 80524	84-1462044	501C3	102,904.	0.			THE PURPOSE OF THIS GRANT IS TO SUPPORT TREES, WATER, PEOPLE. THIS IS THE FINAL GRANT FROM THIS
AMERICA ABROAD MEDIA 1701 PENNSYLVANIA AVE, NW SUITE 200 WASHINGTON, DC 20003	01-0579796	501C3	100,000.	0.			GENERAL SUPPORT
ASPEN HOPE CENTER P.O. BOX 1115 BASALT, CO 81621	27-3703825	501C3	100,000.	0.			TO SUPPORT THE EXPANSION OF THEIR MENTAL HEALTH PROGRAM AND IS IN HONOR OF SANDY IGLEHART
CHILDREN'S HOSPITAL COLORADO FOUNDATION - 13123 EAST 16TH AVENUE, B045 - AURORA, CO 80045	84-0813462	501C3	100,000.	0.			DR. COST RESEARCH ONLY
COLORADO STATE UNIVERSITY FOUNDATION - P.O. BOX 1870 - FORT COLLINS, CO 80522	23-7098397	501C3	100,000.	0.			DR. MCGRATH'S RESEARCH
COLORADO STATE UNIVERSITY FOUNDATION - P.O. BOX 1870 - FORT COLLINS, CO 80522	23-7098397	501C3	100,000.	0.			THIS GRANT IS UNRESTRICTED.
COLORADO STATE UNIVERSITY FOUNDATION - P.O. BOX 1870 - FORT COLLINS, CO 80522	23-7098397	501C3	100,000.	0.			TO SUPPORT THE ENDOWMENT REGARDING DR. MC GRATH
DANCEASPEN 406 EAST HOPKINS AVENUE ASPEN, CO 81611	86-2924498	501C3	100,000.	0.			GENERAL SUPPORT

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EARTHJUSTICE 50 CALIFORNIA STREET, SUITE 500 SAN FRANCISCO, CA 94111	94-1730465	501C3	100,000.	0.			YOUR DISCRETION SUPPORTING ENDANGERED SPECIES
ENGLISH IN ACTION P.O. BOX 4856 BASALT, CO 81621	26-1254643	501C3	100,000.	0.			GENERAL SUPPORT
HABITAT FOR HUMANITY OF THE ROARING FORK VALLEY - 7025 HIGHWAY 82, BOX #2 - GLENWOOD SPRINGS, CO 81601	84-1499538	501C3	100,000.	0.			TO SUPPORT THEIR CAMPAIGN
HUNTER CREEK HISTORICAL FOUNDATION POST OFFICE BOX 1499 ASPEN, CO 81612	86-1726264	501C3	100,000.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT.
JAZZ ASPEN SNOWMASS 110 EAST HALLAM STREET, SUITE 118 ASPEN, CO 81611	84-1220222	501C3	100,000.	0.			GENERAL SUPPORT
JAZZ ASPEN SNOWMASS 110 EAST HALLAM STREET, SUITE 118 ASPEN, CO 81611	84-1220222	501C3	100,000.	0.			JAZZ CENTER - LAURIE, RICK AND CAMERON
PLANNED PARENTHOOD OF THE ROCKY MOUNTAINS - P.O. BOX 732055 - DALLAS, TX 75373	84-0404253	501C3	100,000.	0.			GENERAL SUPPORT
RESPONSE 325 E CODY LANE BASALT, CO 81621	74-2328814	501C3	100,000.	0.			THE PURPOSE OF THIS GRANT IS TO SUPPORT GENERAL OPERATING EXPENSES.
THE FARM COLLABORATIVE P.O. BOX 302 WOODY CREEK, CO 81656	26-3468420	501C3	100,000.	0.			TO SUPPORT A LEADERSHIP-LEVEL GIFT

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASPEN ART MUSEUM 637 EAST HYMAN AVENUE ASPEN, CO 81611	84-0746671	501C3	99,000.	0.			ART CRUSH 2024
ROARING FORK OUTDOOR VOLUNTEERS 520 SOUTH THIRD STREET, #32 CARBONDALE, CO 81623	84-1302819	501C3	97,166.	0.			PLANNING, DEVELOPMENT, AND IMPLEMENTATION OF 2024-25 YOUTH IN NATURE PROGRAM
ALPINE LEGAL SERVICES P.O. BOX 1890 GLENWOOD SPRINGS, CO 81602	84-1061991	501C3	90,000.	0.			PROGRAM EXPANSION
HARVEST FOR HUNGER P.O. BOX 5953 SNOWMASS VILLAGE, CO 81615	85-2031161	501C3	90,000.	0.			ONE-TIME IMPACT GRANT
HAMMER MUSEUM OF ART AND CULTURAL CENTER, AT UCLA - 10899 WILSHIRE BOULEVARD - LOS ANGELES, CA 90024	95-4217197	501C3	85,600.	0.			PURCHASE 3 ART WORKS AT BOARD OF ADVISORS MEET
ASPEN VALLEY SKI & SNOWBOARD CLUB 300 AVSC DRIVE ASPEN, CO 81611	84-6042225	501C3	82,000.	0.			THIS REPRESENTS AN ANNUAL DRAW.
VALLEY SETTLEMENT 1901 GRAND AVENUE, SUITE 206 GLENWOOD SPRINGS, CO 81601	81-2401368	501C3	79,424.	0.			KAF - ALMA PEER SUPPORT GROUPS
ASPEN ART MUSEUM 637 EAST HYMAN AVENUE ASPEN, CO 81611	84-0746671	501C3	76,991.	0.			TO SUPPORT GUEST ACCOMMODATIONS FOR ART CRUSH; 4 GUESTS AT INDEPENDENCE SQUARE AND 2
ASPEN VALLEY SKI & SNOWBOARD CLUB 300 AVSC DRIVE ASPEN, CO 81611	84-6042225	501C3	75,000.	0.			GENERAL SUPPORT

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLOBAL WARMING MITIGATION PROJECT 136 MADISON AVENUE, 6TH FLOOR NEW YORK, NY 10016	82-3056808	501C3	75,000.	0.			SUPPORT KEELING CURVE PRIZE
PLANNED PARENTHOOD OF THE ROCKY MOUNTAINS - P.O. BOX 732055 - DALLAS, TX 75373	84-0404253	501C3	75,000.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT.
ASPEN MUSIC FESTIVAL AND SCHOOL 225 MUSIC SCHOOL ROAD ASPEN, CO 81611	84-0445087	501C3	74,000.	0.			TO SUPPORT THE AUCTION
NEW YORK UNIVERSITY OFFICE OF GRANT ADMINISTRATION HAGERSTOWN, MD 21741	13-5562308	501C3	62,500.	0.			GENERAL SUPPORT FROM DONOR ID#0001738463/PLEDGE#10021 57203/ALLOCATION#22-62000-
COLORADO STATE UNIVERSITY FOUNDATION - P.O. BOX 1870 - FORT COLLINS, CO 80522	23-7098397	501C3	60,000.	0.			THE PURPOSE OF THIS GRANT IS TO SUPPORT THE SIEGELE CONSERVATION SCIENCE INTERNSHIP (75983).
COMPASS FOR LIFELONG DISCOVERY P.O. BOX 336 WOODY CREEK, CO 81656	84-0613297	501C3	60,000.	0.			GENERAL SUPPORT
HEADQUARTERS 23400 TWO RIVERS ROAD #46 BASALT, CO 81621	81-3353572	501C3	60,000.	0.			MENTAL HEALTH FUND SUBSIDIES
STEPPING STONES OF THE ROARING FORK VALLEY - 1010 GARFIELD AVENUE - CARBONDALE, CO 81623	46-4740539	501C3	60,000.	0.			GRANT FOR STAFF MEMBER AND ADMIN
THE ENVIRONMENT FOUNDATION ASPEN SKIING COMPANY ASPEN, CO 81612	84-1428863	501C3	57,500.	0.			TO SUPPORT THE WHAT IF LAB WORK IN THE ROARING FORK VALLEY

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RESPONSE 325 E CODY LANE BASALT, CO 81621	74-2328814	501C3	56,053.	0.			TO SUPPORT FURNITURE OUTFITTING FOR NEW SHELTER
ASPEN CENTER FOR ENVIRONMENTAL STUDIES - 100 PUPPY SMITH STREET - ASPEN, CO 81611	23-7042291	501C3	55,000.	0.			TO SUPPORT THE EVENING ON THE LAKE
ASPEN MUSIC FESTIVAL AND SCHOOL 225 MUSIC SCHOOL ROAD ASPEN, CO 81611	84-0445087	501C3	54,870.	0.			TO SUPPORT: $2,000 FOR THE OPERA BENEFIT, $2,000 FOR THE SEASON BENEFIT, $16,395 FOR THE LIVE
CHALLENGE ASPEN P.O. BOX 6639 SNOWMASS VILLAGE, CO 81615	84-1315910	501C3	53,000.	0.			ONE-TIME IMPACT GRANT
MOUNTAIN FAMILY HEALTH CENTERS 1905 BLAKE AVE., SUITE 101 GLENWOOD SPRINGS, CO 81601	84-0742145	501C3	52,100.	0.			TO SUPPORT THE HEALTH FOR ALL FUND TO PROVIDE MENTAL HEALTHCARE FOR UNINSURED PATIENTS
ROARING FORK VALLEY EARLY LEARNING FUND DBA RAISING A READER ASPEN TO PARACHUTE - P.O. BOX 2533 - GLENWOOD SPRINGS, CO 81602	55-0873041	501C3	50,250.	0.			PROGRAM EXPANSION
AMERICAN BRAIN FOUNDATION 201 CHICAGO AVENUE MINNEAPOLIS, MN 55415	41-1717098	501C3	50,000.	0.			GENERAL SUPPORT
ANDERSON RANCH ARTS CENTER P.O. BOX 5598 SNOWMASS VILLAGE, CO 81615	23-7267983	501C3	50,000.	0.			2024 YOUTH EMPOWERMENT ALLIANCE
ART21, INC. 231 WEST 29TH STREET, SUITE 706 NEW YORK, NY 10001	13-3920288	501C3	50,000.	0.			GENERAL SUPPORT

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ASPEN CENTER FOR ENVIRONMENTAL STUDIES - 100 PUPPY SMITH STREET - ASPEN, CO 81611	23-7042291	501C3	50,000.	0.			2024 YOUTH EMPOWERMENT ALLIANCE
ASPEN CHAPEL 77 MEADOWOOD DRIVE ASPEN, CO 81611	84-6059740	501C3	50,000.	0.			GENERAL SUPPORT
ASPEN FAMILY CONNECTIONS 235 HIGH SCHOOL RD ASPEN, CO 81611	84-6002890	501C3	50,000.	0.			2024 YOUTH EMPOWERMENT ALLIANCE
ASPEN SANTA FE BALLET 0245 SAGE WAY ASPEN, CO 81611	84-1150857	501C3	50,000.	0.			GENERAL SUPPORT
ASPEN SANTA FE BALLET 0245 SAGE WAY ASPEN, CO 81611	84-1150857	501C3	50,000.	0.			THIS GRANT IS UNRESTRICTED.
ASPEN SCIENCE CENTER 520 S. THIRD ST., STE. 9 CARBONDALE, CO 81623	84-1677611	501C3	50,000.	0.			2024 YOUTH EMPOWERMENT ALLIANCE
ASPEN VALLEY HOSPITAL FOUNDATION 0401 CASTLE CREEK ROAD ASPEN, CO 81611	46-0865487	501C3	50,000.	0.			GENERAL SUPPORT
ASPEN VALLEY LAND TRUST 320 MAIN STREET, SUITE 204 CARBONDALE, CO 81623	84-0574754	501C3	50,000.	0.			TO SUPPORT THE CAPITAL CAMPAIGN
ASPEN VALLEY LAND TRUST 320 MAIN STREET, SUITE 204 CARBONDALE, CO 81623	84-0574754	501C3	50,000.	0.			2024 YOUTH EMPOWERMENT ALLIANCE

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ASPEN VALLEY SKI & SNOWBOARD CLUB 300 AVSC DRIVE ASPEN, CO 81611	84-6042225	501C3	50,000.	0.			2024 YOUTH EMPOWERMENT ALLIANCE
CARBONDALE ARTS P.O. BOX 175 CARBONDALE, CO 81623	84-0729842	501C3	50,000.	0.			2024 YOUTH EMPOWERMENT ALLIANCE
CHALLENGE ASPEN P.O. BOX 6639 SNOWMASS VILLAGE, CO 81615	84-1315910	501C3	50,000.	0.			2024 YOUTH EMPOWERMENT ALLIANCE
COLLEGE OUTREACH 0235 HIGH SCHOOL ROAD ASPEN, CO 81611	45-4755540	501C3	50,000.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT.
COOK INCLUSIVE 50 WEANT BLVD., UNIT C CARBONDALE, CO 81623	87-3151808	501C3	50,000.	0.			2024 YOUTH EMPOWERMENT ALLIANCE
DEMOCRACY NOW 207 WEST 25TH STREET, 11TH FLOOR NEW YORK, NY 10001	01-0708733	501C3	50,000.	0.			GENERAL SUPPORT
DIA ART FOUNDATION 535 WEST 22ND STREET, 4TH FLOOR NEW YORK, NY 10010	23-7397946	501C3	50,000.	0.			FOR PUBLICATION
DIA ART FOUNDATION 535 WEST 22ND STREET, 4TH FLOOR NEW YORK, NY 10010	23-7397946	501C3	50,000.	0.			THE PURPOSE OF THIS GRANT IS TO SUPPORT THE PURCHASE OF ART.
DIA ART FOUNDATION 535 WEST 22ND STREET, 4TH FLOOR NEW YORK, NY 10010	23-7397946	501C3	50,000.	0.			THIS GRANT IS UNRESTRICTED AND MADE IN HONOR OF THE 50TH ANNIVERSARY CELEBRATION.

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (Schedule I (Form 990), Part II.)

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DIA ART FOUNDATION 535 WEST 22ND STREET, 4TH FLOOR NEW YORK, NY 10010	23-7397946	501C3	50,000.	0.			GENERAL SUPPORT
ENGLISH IN ACTION P.O. BOX 4856 BASALT, CO 81621	26-1254643	501C3	50,000.	0.			ONE-TIME IMPACT GRANT
EQUALITY NOW CHURCH STREET STATION NEW YORK, NY 10008	13-3660566	501C3	50,000.	0.			GENERAL SUPPORT
FAMILY RESOURCE CENTER OF THE ROARING FORK SCHOOLS - 400 SOPRIS AVENUE - CARBONDALE, CO 81623	84-6012220	501C3	50,000.	0.			2024 YOUTH EMPOWERMENT ALLIANCE
FOOD BANK OF THE ROCKIES 10700 EAST 45TH AVENUE DENVER, CO 80239	84-0772672	501C3	50,000.	0.			TO SUPPORT THE ETKIN DISTRIBUTION CENTER WESTERN SLOPE
GARFIELD COUNTY SCHOOL DISTRICT #16 - P.O. BOX 68 - PARACHUTE, CO 81635	84-6001236	501C3	50,000.	0.			TO SUPPORT G16 FRC'S PARTICIPATION IN THE YOUTH EMPOWERMENT ALLIANCE
HIGHWATER FARM 7001 COUNTY ROAD 346 SILT, CO 81652	84-3715918	501C3	50,000.	0.			2024 YOUTH EMPOWERMENT ALLIANCE
KISS THE GROUND P.O. BOX 515381 PMB 63508 LOS ANGELES, CA 90051	46-4507696	501C3	50,000.	0.			TO SUPPORT THE STEWARDSHIP CIRCLE
LIFT-UP (LIFE INTER FAITH TEAM ON UNEMPLOYMENT AND POVERTY) - 100 MIDLAND AVE UNIT 270 - GLENWOOD SPRINGS, CO 81601	84-0896081	501C3	50,000.	0.			THE PURPOSE OF THIS GRANT IS TO SUPPORT THE FARM 2 FOOD PANTRY PROGRAM.

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (Schedule I (Form 990), Part II.)

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MANAUS P.O. BOX 2026 CARBONDALE, CO 81623	20-2710588	501C3	50,000.	0.			THE PURPOSE OF THIS GRANT IS FOR GENERAL OPERATIONS.
REGENTS OF THE UNIVERSITY OF MICHIGAN - 777 E. EISENHOWER PARKWAY, SUITE 650 - ANN ARBOR, MI 48108	38-6006309	501C3	50,000.	0.			TO SUPPORT THE WORK OF DR. JOHN VARGA AND THE SCLERODERMA PROGRAM
ROARING FORK MOUNTAIN BIKE ASSOCIATION - P.O. BOX 2635 - ASPEN, CO 81612	46-5412595	501C3	50,000.	0.			GENERAL SUPPORT
ROARING FORK OUTDOOR VOLUNTEERS 520 SOUTH THIRD STREET, #32 CARBONDALE, CO 81623	84-1302819	501C3	50,000.	0.			2024 YOUTH EMPOWERMENT ALLIANCE
ROARING FORK PRECOLLEGIATE 400 SOPRIS AVENUE CARBONDALE, CO 81623	84-3221793	501C3	50,000.	0.			2024 YOUTH EMPOWERMENT ALLIANCE
ROCKY MOUNTAIN PBS 2101 ARAPAHOE STREET DENVER, CO 80205	84-0510785	501C3	50,000.	0.			TO SUPPORT THE GENERAL OR MATCH FUND
SQUARED NETWORK PO BOX 960003 BOSTON, MA 02196	92-1469219	501C3	50,000.	0.			THE PURPOSE OF THIS GRANT IS TO SUPPORT THE PARTICIPATION OF STUDENTS THROUGHOUT THE PROGRAM'S
STEPPING STONES OF THE ROARING FORK VALLEY - 1010 GARFIELD AVENUE - CARBONDALE, CO 81623	46-4740539	501C3	50,000.	0.			2024 YOUTH EMPOWERMENT ALLIANCE
SUMMIT54 625 EAST MAIN STREET, SUITE 102B-11 ASPEN, CO 81611	27-2978700	501C3	50,000.	0.			GENERAL SUPPORT

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TACAW (THE ARTS CAMPUS AT WILLITS) 400 ROBINSON STREET BASALT, CO 81621	47-3091347	501C3	50,000.	0.			2024 YOUTH EMPOWERMENT ALLIANCE
THACHER SCHOOL 5025 THACHER ROAD OJAI, CA 93023	95-1642398	501C3	50,000.	0.			TO SUPPORT THE MASTER TEACHER PROGRAM AT THE THACHER SCHOOL
THE ASPEN INSTITUTE 1000 NORTH 3RD STREET ASPEN, CO 81611	84-0399006	501C3	50,000.	0.			2024 YOUTH EMPOWERMENT ALLIANCE
THE BUDDY PROGRAM 110 EAST HALLAM STREET, SUITE 101 ASPEN, CO 81611	74-2594693	501C3	50,000.	0.			2024 YOUTH EMPOWERMENT ALLIANCE
THE FARM COLLABORATIVE P.O. BOX 302 WOODY CREEK, CO 81656	26-3468420	501C3	50,000.	0.			2024 YOUTH EMPOWERMENT ALLIANCE
THE MUSEUM OF MODERN ART 11 WEST 53 STREET NEW YORK, NY 10019	13-1624100	501C3	50,000.	0.			TO SUPPORT THE DIRECTORS COUNCIL
THE THINKING PROJECT INSTITUTE 1258 S 24TH STREET PHILADELPHIA, PA 19146	82-2269798	501C3	50,000.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT.
VALLEY VIEW HOSPITAL FOUNDATION P.O. BOX 1970 GLENWOOD SPRINGS, CO 81602	73-1664673	501C3	50,000.	0.			GENERAL USE
VOICES 520 S 3RD ST, #22B CARBONDALE, CO 81623	81-3931536	501C3	50,000.	0.			2024 YOUTH EMPOWERMENT ALLIANCE

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YOUTHENTITY P.O. BOX 1989 CARBONDALE, CO 81623	84-1601705	501C3	50,000.	0.			2024 YOUTH EMPOWERMENT ALLIANCE
ASPEN MUSIC FESTIVAL AND SCHOOL 225 MUSIC SCHOOL ROAD ASPEN, CO 81611	84-0445087	501C3	46,000.	0.			IS GENERAL SUPPORT
ASPEN FILM 110 EAST HALLAM STREET, SUITE 115 ASPEN, CO 81611	74-2483139	501C3	40,000.	0.			GENERAL SUPPORT
ASPEN VALLEY LAND TRUST 320 MAIN STREET, SUITE 204 CARBONDALE, CO 81623	84-0574754	501C3	40,000.	0.			ONE-TIME IMPACT GRANT
CLIMATE DEMOCRACY INITIATIVE 1536 WYNKOOP ST. SUITE 427 DENVER, CO 80202	92-0943342	501C3	40,000.	0.			GENERAL SUPPORT
VALLEY SETTLEMENT 1901 GRAND AVENUE, SUITE 206 GLENWOOD SPRINGS, CO 81601	81-2401368	501C3	40,000.	0.			TO SUPPORT A CHILDCARE APP
VALLEY SETTLEMENT 1901 GRAND AVENUE, SUITE 206 GLENWOOD SPRINGS, CO 81601	81-2401368	501C3	40,000.	0.			PROGRAM EXPANSION
VALLEY SETTLEMENT 1901 GRAND AVENUE, SUITE 206 GLENWOOD SPRINGS, CO 81601	81-2401368	501C3	37,850.	0.			TO STRENGTHEN PARENT AND CAREGIVER SKILLS IN SUPPORTING YOUNG CHILDRENS HEALTHY
ASPEN MUSIC FESTIVAL AND SCHOOL 225 MUSIC SCHOOL ROAD ASPEN, CO 81611	84-0445087	501C3	35,730.	0.			GENERAL SUPPORT

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ASPEN JOURNALISM 1280 SOUTH UTE AVENUE, SUITE 4 ASPEN, CO 81611	35-2400162	501C3	35,000.	0.			GENERAL SUPPORT ($25K) AND TO SUPPORT THE COLLABORATION WITH ASPEN PUBLIC RADIO ($10K)
ASPEN VALLEY SKI & SNOWBOARD CLUB 300 AVSC DRIVE ASPEN, CO 81611	84-6042225	501C3	35,000.	0.			GENERAL SUPPORT WITH THE EXCEPTION OF $5,000.00
FOREST CONSERVANCY 1012 BROOKIE DRIVE CARBONDALE, CO 81623	84-1583104	501C3	35,000.	0.			GENERAL SUPPORT
THEATRE ASPEN 110 E. HALLAM ST., STE. 102 ASPEN, CO 81611	74-2319032	501C3	35,000.	0.			TO SUPPORT THE AUCTION
GROWING YEARS SCHOOL 151 SCHOOL STREET BASALT, CO 81621	84-1477810	501C3	33,500.	0.			PITKIN CHILDCARE STAFF STIPEND Q1 2024
JUNIOR ACHIEVEMENT ROCKY MOUNTAIN 6500 GREENWOOD PLAZA BLVD. GREENWOOD VILLAGE, CO 80111	84-1267604	501C3	33,333.	0.			TO SUPPORT THE ENTERPRISE CENTER GIFT AGREEMENT
GROWING YEARS SCHOOL 151 SCHOOL STREET BASALT, CO 81621	84-1477810	501C3	30,500.	0.			PITKIN CHILDCARE STAFF STIPEND Q2 2024
2 FORKS CLUB P.O. BOX 302 WOODY CREEK, CO 81656	46-4162607	501C3	30,000.	0.			GENERAL SUPPORT
ENGLISH IN ACTION P.O. BOX 4856 BASALT, CO 81621	26-1254643	501C3	30,000.	0.			TO SUPPORT THE WELCOME HOME CAMPAIGN

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LITTLE STAR FOUNDATION 174 WATERCOLOR WAY, SUITE 103, B343 SANTA ROSA BEACH, FL 32459	86-0947944	501C3	30,000.	0.			TO SUPPORT THE ANNUAL FUND
SNOW CUBS P.O. BOX 1248 ASPEN, CO 81612	84-0994002	501C3	30,000.	0.			PITKIN CHILDCARE STAFF STIPEND Q1 2024
SNOW CUBS P.O. BOX 1248 ASPEN, CO 81612	84-0994002	501C3	30,000.	0.			PITKIN CHILDCARE STAFF STIPEND Q1 2024
THE ART BASE P.O. BOX 4300 BASALT, CO 81621	20-1188479	501C3	30,000.	0.			GENERAL SUPPORT
UNIVERSITY OF THE PACIFIC 3601 PACIFIC AVENUE STOCKTON, CO 95211	94-1156266	501C3	30,000.	0.			TO SUPPORT SCHOLARSHIPS
VOTE.ORG 1201 CONNECTICUT AVE NW STE 531 WASHINGTON, DC 20036	26-2094990	501C3	30,000.	0.			GENERAL SUPPORT
ASPEN EDUCATION FOUNDATION P.O. BOX 2200 ASPEN, CO 81612	84-1181681	501C3	28,200.	0.			TO SUPPORT THE EVENT
ASPEN HOPE CENTER P.O. BOX 1115 BASALT, CO 81621	27-3703825	501C3	26,000.	0.			2024 GALA
ASPEN JEWISH CONGREGATION 77 MEADOWOOD DRIVE ASPEN, CO 81611	84-0723135	501C3	26,000.	0.			MEMBERSHIP DONATION

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JAZZ ASPEN SNOWMASS 110 EAST HALLAM STREET, SUITE 118 ASPEN, CO 81611	84-1220222	501C3	25,700.	0.			TO SUPPORT THE JAS LABOR DAY EVENT
LA CLINICA DEL PUEBLO DBA THE PEOPLE'S CLINIC - 520 S 3RD ST - CARBONDALE, CO 81623	47-1805672	501C3	25,451.	0.			TO SUPPORT THE PURCHASE OF FURNITURE
5POINT FILM FESTIVAL P.O. BOX 355 CARBONDALE, CO 81623	38-3770309	501C3	25,000.	0.			GENERAL SUPPORT
AMERICAN FRIENDS OF MAGEN DAVID ADOM - 20 WEST 36TH STREET, SUITE 1100 - NEW YORK, NY 10018	13-1790719	501C3	25,000.	0.			GENERAL SUPPORT
ASPEN CENTER FOR ENVIRONMENTAL STUDIES - 100 PUPPY SMITH STREET - ASPEN, CO 81611	23-7042291	501C3	25,000.	0.			FOR GENERAL USE
ASPEN FILM 110 EAST HALLAM STREET, SUITE 115 ASPEN, CO 81611	74-2483139	501C3	25,000.	0.			VISIONARY MEMBERSHIP
ASPEN HISTORICAL SOCIETY 620 WEST BLEEKER STREET ASPEN, CO 81611	84-6037756	501C3	25,000.	0.			TO SUPPORT GENERAL OPERATIONS
ASPEN HOPE CENTER P.O. BOX 1115 BASALT, CO 81621	27-3703825	501C3	25,000.	0.			TO SUPPORT THE LIGHT UP THE NIGHT EVENT.
ASPEN JEWISH CONGREGATION 77 MEADOWOOD DRIVE ASPEN, CO 81611	84-0723135	501C3	25,000.	0.			TO SUPPORT THE ANNUAL FUND RAISER 2024

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ASPEN PUBLIC RADIO 110 EAST HALLAM ST, STE 134 ASPEN, CO 81611	84-0884901	501C3	25,000.	0.			GENERAL SUPPORT
ASPEN PUBLIC RADIO 110 EAST HALLAM ST, STE 134 ASPEN, CO 81611	84-0884901	501C3	25,000.	0.			TO SUPPORT THE APR ARTS DESK
ASPEN VALLEY LAND TRUST 320 MAIN STREET, SUITE 204 CARBONDALE, CO 81623	84-0574754	501C3	25,000.	0.			GENERAL SUPPORT
ASPEN VALLEY SKI & SNOWBOARD CLUB 300 AVSC DRIVE ASPEN, CO 81611	84-6042225	501C3	25,000.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT IN HONOR OF DAVE STAPLETON.
BASALT REGIONAL LIBRARY DISTRICT 14 MIDLAND AVENUE BASALT, CO 81621	84-1598357	501C3	25,000.	0.			TO SUPPORT NEW FURNITURE
CHARITY: WATER 230 FRANKLIN RD, STE 11-II FRANKLIN, TN 37064	22-3936753	501C3	25,000.	0.			GENERAL SUPPORT
COMMUNITY BUILDING ART WORKS 11140 ROCKVILLE PIKE, SUITE 100 - 6 ROCKVILLE, MD 20852	81-4784695	501C3	25,000.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT.
EARLY CHILDHOOD NETWORK 1317 GRAND AVE., STE. 125 GLENWOOD SPRINGS, CO 81601	27-1447905	501C3	25,000.	0.			GROW FFN NETWORK WITH COMMUNITY AND ENHANCE TRAINING OPPORTUNITIES
EARLY LEARNING CENTER OF ASPEN 215 N GARMISCH ST. ASPEN, CO 81611	84-1160185	501C3	25,000.	0.			TO PROVIDE TUITION ASSISTANCE TO KEEP CHILDCARE ACCESSIBLE AND AFFORDABLE FOR LOCAL

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ENGLISH IN ACTION P.O. BOX 4856 BASALT, CO 81621	26-1254643	501C3	25,000.	0.			THE SUMMER BENEFIT 2024
GADEN SHARTSE CULTURAL FOUNDATION 3500 EAST 4TH STREET LONG BEACH, CA 90814	20-5126355	501C3	25,000.	0.			GENERAL SUPPORT
GLO GOOD FOUNDATION 923 5TH AVENUE NEW YORK, NY 10021	82-3876191	501C3	25,000.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT.
GREAT EXPECTATIONS P.O. BOX 1845 GLENWOOD SPRINGS, CO 81602	84-1001484	501C3	25,000.	0.			GENERAL OPERATING SUPPORT.
JAZZ ASPEN SNOWMASS 110 EAST HALLAM STREET, SUITE 118 ASPEN, CO 81611	84-1220222	501C3	25,000.	0.			TO SUPPORT THE PURCHASE OF INSTRUMENTS FOR LOCAL MUSIC STUDENTS
LOTUS CAMPAIGN PO BOX 29097 CHARLOTTE, NC 28229	82-4662347	501C3	25,000.	0.			TO SUPPORT THE HOMELESS PAPER
MERIDIAN INTERNATIONAL CENTER 1630 CRESCENT PLACE NW WASHINGTON, DC 20009	53-0259663	501C3	25,000.	0.			THE PURPOSE OF THIS GRANT IS TO SUPPORT THE CULTUREFIX EVENT 2024.
MOUNTAIN FAMILY HEALTH CENTERS 1905 BLAKE AVE., SUITE 101 GLENWOOD SPRINGS, CO 81601	84-0742145	501C3	25,000.	0.			GENERAL SUPPORT
NORTHWESTERN UNIVERSITY FEINBERG SCHOOL OF MEDICINE CHICAGO, IL 60611	36-2167817	501C3	25,000.	0.			TO SUPPORT THE INSTITUTE FOR GLOBAL HEALTH IN HONOR OF DR. ROBERT J. HAVEY

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PATHFINDERS P.O. BOX 11799 ASPEN, CO 81612	20-1710899	501C3	25,000.	0.			GENERAL OPERATING
RESPONSE 325 E CODY LANE BASALT, CO 81621	74-2328814	501C3	25,000.	0.			CAPITAL GIFT
TACAW (THE ARTS CAMPUS AT WILLITS) 400 ROBINSON STREET BASALT, CO 81621	47-3091347	501C3	25,000.	0.			THE PURPOSE OF THIS GRANT IS TO SUPPORT THE FOUNDERS CIRCLE MEMBERSHIP LEVEL.
THE ASPEN INSTITUTE 1000 NORTH 3RD STREET ASPEN, CO 81611	84-0399006	501C3	25,000.	0.			TO SUPPORT ASPEN IDEAS: CLIMATE CHICAGO FUND ON BEHALF OF JAMES STAR
THE ASPEN INSTITUTE 1000 NORTH 3RD STREET ASPEN, CO 81611	84-0399006	501C3	25,000.	0.			CLIMATE CHICAGO FROM JON STAR
THE ASPEN INSTITUTE 1000 NORTH 3RD STREET ASPEN, CO 81611	84-0399006	501C3	25,000.	0.			TO SUPPORT ASPEN IDEAS: CLIMATE CHICAGO FUND ON BEHALF OF STEPHANIE STAR AND DANIEL SCHLESSINGER
THE ASPEN INSTITUTE 1000 NORTH 3RD STREET ASPEN, CO 81611	84-0399006	501C3	25,000.	0.			TO SUPPORT THE ASPEN IDEAS: CLIMATE CHICAGO FUND ON BEHALF OF RACHEL STAR (JAMES AND SARA
THE BUDDY PROGRAM 110 EAST HALLAM STREET, SUITE 101 ASPEN, CO 81611	74-2594693	501C3	25,000.	0.			GENERAL SUPPORT
THE MUSEUM OF MODERN ART 11 WEST 53 STREET NEW YORK, NY 10019	13-1624100	501C3	25,000.	0.			THIS GRANT IS UNRESTRICTED.MODERN FUND

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THE UTAH FILM CENTER 50 WEST 300 BROADWAY NO 1125 SALT LAKE CITY, UT 84101	75-3077559	501C3	25,000.	0.			THE PURPOSE OF THIS GRANT IS TO SUPPORT "LOVE TO THE MAX."
WHITNEY MUSEUM OF AMERICAN ART 99 GANSEVOORT STREET NEW YORK, NY 10014	13-1789318	501C3	25,000.	0.			TO SUPPORT THE LICHTENSTEIN EXHIBITION
WILDERNESS WORKSHOP P.O. BOX 1442 CARBONDALE, CO 81623	74-1900412	501C3	25,000.	0.			GENERAL SUPPORT
WILDERNESS WORKSHOP P.O. BOX 1442 CARBONDALE, CO 81623	74-1900412	501C3	25,000.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT.
YOUTH RENEWAL FUND 1460 BROADWAY NEW YORK, NY 10036	13-3641489	501C3	25,000.	0.			GENERAL SUPPORT AND IS IN HONOR OF ROZ RUBIN AND ELEVEN CITY DINER
YOUTH SERVICE AMERICA PO BOX #65525 WASHINGTON, DC 20035	52-1500870	501C3	25,000.	0.			OTHER
ASPEN SANTA FE BALLET 0245 SAGE WAY ASPEN, CO 81611	84-1150857	501C3	22,500.	0.			FOLKLRICO PROGRAM
YOUTHZONE 413 NINTH STREET GLENWOOD SPRINGS, CO 81601	84-0712993	501C3	22,500.	0.			UNRESTRICTED
THE ENVIRONMENT FOUNDATION ASPEN SKIING COMPANY ASPEN, CO 81612	84-1428863	501C3	22,019.	0.			ENVIRONMENT FOUNDATION MATCH, JAN-MAR 2024

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THE SAVINGS COLLABORATIVE 959 CEDAR CREEK CARBONDALE, CO 81623	85-4176243	501C3	21,405.	0.			FINANCIAL SERVICES FOR THE FEC OF ROCKIES
A WAY OUT P.O. BOX 1124 CARBONDALE, CO 81623	46-1809899	501C3	20,000.	0.			GENERAL SUPPORT
ACTION IN AFRICA P.O. BOX 3853 ASPEN, CO 81612	27-3538518	501C3	20,000.	0.			GENERAL SUPPORT
ALPINE LEGAL SERVICES P.O. BOX 1890 GLENWOOD SPRINGS, CO 81602	84-1061991	501C3	20,000.	0.			GENERAL SUPPORT
AMERICAS FOUNDATION OF THE SERPENTINE GALLERIES - C/O GELLER & CO. - NEW YORK, NY 10022	47-2264962	501C3	20,000.	0.			THIS GRANT IS UNRESTRICTED.
ARC OF THE CENTRAL MOUNTAINS PO BOX 2112 GLENWOOD SPRINGS, CO 81602	81-4190750	501C3	20,000.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT.
ASPEN ART MUSEUM 637 EAST HYMAN AVENUE ASPEN, CO 81611	84-0746671	501C3	20,000.	0.			TO SUPPORT THE AAM FUTURE FUND
ASPEN JOURNALISM 1280 SOUTH UTE AVENUE, SUITE 4 ASPEN, CO 81611	35-2400162	501C3	20,000.	0.			MULTIMEDIA BILINGUAL SOCIAL JUSTICE REPORTER IN COLLABORATION WITH APR
ASPEN YOUTH CENTER P.O. BOX 8266 ASPEN, CO 81612	74-2554280	501C3	20,000.	0.			PROGRAM EXPANSION

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (Schedule I (Form 990), Part II.)

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BLUE LAKE PRESCHOOL 0189 JW DRIVE, STE. C CARBONDALE, CO 81623	84-1544750	501C3	20,000.	0.			TO OFFER A TUITION ASSISTANCE PROGRAM AT OUR THREE LOCATIONS.
CASA OF THE NINTH P.O. BOX 3004 GLENWOOD SPRINGS, CO 81602	45-2663126	501C3	20,000.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT.
CLIMATE EMERGENCY FUND 8605 SANTA MONICA BLVD #56492 WEST HOLLYWOOD, CA 90069	84-2151545	501C3	20,000.	0.			GENERAL SUPPORT
ENGLISH IN ACTION P.O. BOX 4856 BASALT, CO 81621	26-1254643	501C3	20,000.	0.			TO SUPPORT AN ANNUAL GIFT OF $5,000, EVENT SPONSORSHIP AT $5,000 AND THE NEW BUILDING FUND AT
ENGLISH IN ACTION P.O. BOX 4856 BASALT, CO 81621	26-1254643	501C3	20,000.	0.			GENERAL SUPPORT
FRIENDS OF NEW CURATORS INC. C/O NIXON PEABODY LLP WASHINGON, DC 20001	86-3172782	501C3	20,000.	0.			GENERAL SUPPORT
GARFIELD SCHOOL DISTRICT RE-2 839 WHITERIVER AVENUE RIFLE, CO 81650	84-0525428	501C3	20,000.	0.			THE PURPOSE OF THIS GRANT IS TO SUPPORT THE ONE DOOR RE-2 FAMILY RESOURCE CENTER.
HEADQUARTERS 23400 TWO RIVERS ROAD #46 BASALT, CO 81621	81-3353572	501C3	20,000.	0.			TO SUPPORT CLIENTS WITH EDMR THERAPY
HIGH COUNTRY VOLUNTEERS 1402 BLAKE AVENUE GLENWOOD SPRINGS, CO 81601	86-1766079	501C3	20,000.	0.			THIS GRANT IS UNRESTRICTED.

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HIGHWATER FARM 7001 COUNTY ROAD 346 SILT, CO 81652	84-3715918	501C3	20,000.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT.
JOURNEY HOME ANIMAL CARE CENTER 1500 PREFONTAINE AVENUE RIFLE, CO 81650	84-1500637	501C3	20,000.	0.			GENERAL SUPPORT
LITERACY OUTREACH 1127 SCHOOL STREET GLENWOOD SPRINGS, CO 81601	26-4713475	501C3	20,000.	0.			GENERAL SUPPORT
MEMORIAL SLOAN KETTERING CANCER CENTER - P.O. BOX 27106 - NEW YORK, NY 10087		501C3	20,000.	0.			TO SUPPORT DR. KUMAR'S MANTEL CELL LYMPHOMA RESEARCH AND IS IN HONOR OF DR. ANITA KUMAR
PATHFINDERS P.O. BOX 11799 ASPEN, CO 81612	20-1710899	501C3	20,000.	0.			GENERAL SUPPORT
RED BRICK CENTER FOR THE ARTS 110 EAST HALLAM STREET, SUITE 118 ASPEN, CO 81611	84-0632118	501C3	20,000.	0.			GENERAL SUPPORT
ROARING FORK VALLEY EARLY LEARNING FUND DBA RAISING A READER ASPEN TO PARACHUTE - P.O. BOX 2533 - GLENWOOD SPRINGS, CO 81602	55-0873041	501C3	20,000.	0.			SUZANNE WHEELER-DEL PICCOLO
TACAW (THE ARTS CAMPUS AT WILLITS) 400 ROBINSON STREET BASALT, CO 81621	47-3091347	501C3	20,000.	0.			GENERAL SUPPORT
THE ALLIANCE FOR COLLECTIVE ACTION 1536 WYNKOOP STREET, SUITE 100 DENVER, CO 80202	42-1622670	501C3	20,000.	0.			GENERAL SUPPORT

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UNITED NEGRO COLLEGE FUND ATTN: DENISE SCOTT, DIRECT RESPONSE PROGRAMS - WASHINGTON, DC 20001	13-1624241	501C3	20,000.	0.			GENERAL SUPPORT
YOUTHENTITY P.O. BOX 1989 CARBONDALE, CO 81623	84-1601705	501C3	20,000.	0.			GENERAL SUPPORT
GARFIELD COUNTY SCHOOL DISTRICT #16 - P.O. BOX 68 - PARACHUTE, CO 81635	84-6001236	501C3	19,200.	0.			SUPPORT PRESCHOOL TUITION ASSISTANCE TO BREAK DOWN BARRIERS OF ACCESSING EARLY CHILDHOOD
TIGER TIGER, LLC 158 WILD ROSE DRIVE GLENWOOD SPRINGS, CO 81601	82-0976665	501C3	19,041.	0.			INVOICE 059, REIMBURSEMENT FLIGHTS
BLUE LAKE PRESCHOOL 0189 JW DRIVE, STE. C CARBONDALE, CO 81623	84-1544750	501C3	19,000.	0.			STOTT'S MILL - PITKIN CHILDCARE STAFF STIPEND Q4 2024
BLUE LAKE PRESCHOOL 0189 JW DRIVE, STE. C CARBONDALE, CO 81623	84-1544750	501C3	19,000.	0.			PITKIN CHILDCARE STAFF STIPENDS Q3 2024
JEWBELONG 37 WEST 20TH STREET, SUITE #307 NEW YORK, NY 10011	81-3739789	501C3	18,000.	0.			UNRESTRICTED
NJS KINDER COTTAGE LLC 400 ALEXANDER LANE BASALT, CO 81621	30-0963807	501C3	17,395.	0.			NEW HEATING SYSTEM
ASPEN ART MUSEUM 637 EAST HYMAN AVENUE ASPEN, CO 81611	84-0746671	501C3	17,050.	0.			TO SUPPORT APRES SERIES AT THE MUSEUM

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ASPEN JEWISH CONGREGATION 77 MEADOWOOD DRIVE ASPEN, CO 81611	84-0723135	501C3	16,600.	0.			GENERAL SUPPORT
JAZZ ASPEN SNOWMASS 110 EAST HALLAM STREET, SUITE 118 ASPEN, CO 81611	84-1220222	501C3	16,100.	0.			THIS GRANT IS UNRESTRICTED.
COLORADO ROCKY MOUNTAIN SCHOOL 500 HOLDEN WAY CARBONDALE, CO 81623	84-0425174	501C3	16,000.	0.			TO SUPPORT (HS)2 SCHOLARSHIPS
ROARING FORK OUTDOOR VOLUNTEERS 520 SOUTH THIRD STREET, #32 CARBONDALE, CO 81623	84-1302819	501C3	15,755.	0.			YOUTH IN NATURE PROGRAM IMPLEMENTATION 2023-24
COLORADO STATE UNIVERSITY FOUNDATION - P.O. BOX 1870 - FORT COLLINS, CO 80522	23-7098397	501C3	15,500.	0.			TO SUPPORT THE COLORADO NATURAL HERITAGE PROGRAM SIEGELE CONSERVATION SCIENCE INTERNSHIP
CR BOCES - YAMPAH MOUNTAIN HIGH SCHOOL - 695 RED MT DRIVE - GLENWOOD SPRINGS, CO 81601	82-1662630	501C3	15,350.	0.			GENERAL OPERATING TO PROVIDE HIGH QUALITY FAMILY SUPPORT, LITERACY & RESPONSIVE CARE IN THE
ARIZONA MUSICFEST P.O. BOX 25455 SCOTTSDALE, AZ 85255	86-1034396	501C3	15,333.	0.			GENERAL SUPPORT
THE ENVIRONMENT FOUNDATION ASPEN SKIING COMPANY ASPEN, CO 81612	84-1428863	501C3	15,245.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT.
ACCESS AFTERSCHOOL P.O. BOX 3141 GLENWOOD SPRINGS, CO 81602	20-0369318	501C3	15,000.	0.			UNRESTRICTED

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ARC OF THE CENTRAL MOUNTAINS PO BOX 2112 GLENWOOD SPRINGS, CO 81602	81-4190750	501C3	15,000.	0.			UNRESTRICTED
ASPEN PUBLIC RADIO 110 EAST HALLAM ST, STE 134 ASPEN, CO 81611	84-0884901	501C3	15,000.	0.			GENERAL SUPPORT
BASALT BAND BOOSTERS 51 SCHOOL STREET BASALT, CO 81621	20-2423040	501C3	15,000.	0.			AND IS FROM JACOB OPP.
BEST BUDDIES COLORADO 2340 DAYTON ST. AURORA, CO 80010	52-1614576	501C3	15,000.	0.			GENERAL OPERATING FOR ROARING FORK VALLEY PROGRAMS
BRIDGING BIONICS FOUNDATION P.O. BOX 3766 BASALT, CO 81621	46-2182977	501C3	15,000.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT.
COLORADO RIVER BOCES P.O. BOX 68 PARACHUTE, CO 81635	82-1662630	501C3	15,000.	0.			TO SUPPORT STUDENT STIPENDS FOR INTERNSHIPS
DREPUNG LOSELING MONASTERY 1781 DRESDEN DRIVE ATLANTA, GA 30319	58-1953690	501C3	15,000.	0.			GENERAL SUPPORT
ECOFLIGHT 307 AABC, SUITE L ASPEN, CO 81611	80-0012615	501C3	15,000.	0.			GENERAL SUPPORT
ENGLISH IN ACTION P.O. BOX 4856 BASALT, CO 81621	26-1254643	501C3	15,000.	0.			GENERAL SUPPORT

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GARFIELD SCHOOL DISTRICT RE-2 839 WHITERIVER AVENUE RIFLE, CO 81650	84-0525428	501C3	15,000.	0.			TO PROVIDE TUITION SUPPORT TO INCREASE SERVICE TIME AT GARFIELD RE-2 PRESCHOOL
GLOBALGIVING FOUNDATION 1 THOMAS CIRCLE NW, SUITE 800 WASHINGTON, DC 20005	30-0108263	501C3	15,000.	0.			TO SUPPORT SCHOOLS: EDUCATING UNDERSERVED GIRLS IN PAKISTAN. PROJECT ID IS 39995
GRAND RIVER MEALS ON WHEELS P.O. BOX 912 RIFLE, CO 81650	84-0513889	501C3	15,000.	0.			PURCHASE REFRIGERATORS, INCREASE SERVICE CAPACITY
GRASSROOTS ASIA P.O. BOX 560 SOMERSET, CO 81434	02-0700384	501C3	15,000.	0.			ANNUAL DRAW
MUSEUM OF CONTEMPORARY ART DENVER (MCA DENVER) - 1485 DELGANY STREET - DENVER, CO 80202	84-1366092	501C3	15,000.	0.			GENERAL SUPPORT
RESPONSE 325 E CODY LANE BASALT, CO 81621	74-2328814	501C3	15,000.	0.			GENERAL SUPPORT
SMILING GOAT RANCH 315 FAWN DRIVE CARBONDALE, CO 81623	47-2019316	501C3	15,000.	0.			GENERAL SUPPORT
STUDENT DIPLOMACY CORPS 424 WEST 54TH STREET NEW YORK, NY 10019	46-2805875	501C3	15,000.	0.			GENERAL SUPPORT
SUMMIT54 625 EAST MAIN STREET, SUITE 102B-11 ASPEN, CO 81611	27-2978700	501C3	15,000.	0.			SUMMER ADVANTAGE AND AFTER-SCHOOL TUTORING PROGRAMS

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THE CENTER FOR ART & ADVOCACY 2320 SOUTH VIEW DRIVE LANCASTER, PA 17602	88-2015234	501C3	15,000.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT.
ASPEN COUNTRY DAY SCHOOL 300 MUSIC SCHOOL RD. ASPEN, CO 81611	23-7033239	501C3	14,626.	0.			PLAYGROUND FENCE AND SANDBOX COVER
BLUE LAKE PRESCHOOL 0189 JW DRIVE, STE. C CARBONDALE, CO 81623	84-1544750	501C3	14,500.	0.			SUPPLIES AND EQUIPMENT FOR STOTT'S MILL LOCATION
THE SAVINGS COLLABORATIVE 959 CEDAR CREEK CARBONDALE, CO 81623	85-4176243	501C3	14,467.	0.			FINANCIAL SERVICES FOR THE FEC OF THE ROCKIES
ASPEN CENTER FOR ENVIRONMENTAL STUDIES - 100 PUPPY SMITH STREET - ASPEN, CO 81611	23-7042291	501C3	13,500.	0.			ACES' EVENING ON THE LAKE
ASPEN YOUTH CENTER P.O. BOX 8266 ASPEN, CO 81612	74-2554280	501C3	13,500.	0.			UNRESTRICTED
ASPEN VALLEY SKI & SNOWBOARD CLUB 300 AVSC DRIVE ASPEN, CO 81611	84-6042225	501C3	13,310.	0.			TO SUPPORT THE SUBSCRIPTION FOR THREE YEARS FOR CONCENTRIC PEAK FORCE ASYMMETRY TESTING
ASPEN EDUCATION FOUNDATION P.O. BOX 2200 ASPEN, CO 81612	84-1181681	501C3	13,000.	0.			FLAMINGO PLUS
ASPEN HISTORICAL SOCIETY 620 WEST BLEEKER STREET ASPEN, CO 81611	84-6037756	501C3	13,000.	0.			IS GENERAL SUPPORT FOR WHICH $10,000 MAY BE USED. THE REMAINING $3,000 IS TO SUPPORT

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WILDWOOD SCHOOL P.O. BOX 9290 ASPEN, CO 81612	84-0616743	501C3	13,000.	0.			PITKIN CHILDCARE STAFF STIPEND Q1 2024
JAZZ ASPEN SNOWMASS 110 EAST HALLAM STREET, SUITE 118 ASPEN, CO 81611	84-1220222	501C3	12,750.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT.
ASPEN ART MUSEUM 637 EAST HYMAN AVENUE ASPEN, CO 81611	84-0746671	501C3	12,500.	0.			GENERAL SUPPORT
ASPEN ART MUSEUM 637 EAST HYMAN AVENUE ASPEN, CO 81611	84-0746671	501C3	12,500.	0.			TO SUPPORT THE BOARD OF TRUSTEES
ASPEN ART MUSEUM 637 EAST HYMAN AVENUE ASPEN, CO 81611	84-0746671	501C3	12,500.	0.			NATIONAL COUNCIL 2025
ASPEN ART MUSEUM 637 EAST HYMAN AVENUE ASPEN, CO 81611	84-0746671	501C3	12,500.	0.			TO SUPPORT BOARD DUES
ASPEN HOPE CENTER P.O. BOX 1115 BASALT, CO 81621	27-3703825	501C3	12,500.	0.			SCHOOL PROGRAMS
CHILDREN'S ROCKY MOUNTAIN SCHOOL 126 MAIN STREET CARBONDALE, CO 81623	84-1466269	501C3	12,500.	0.			CONTINUED TUITION SCHOLARSHIPS
ENVIROSOLUTIONS INSTITUTE BOXWOOD VENTURES, INC CHICAGO, IL 60606	88-2415194	501C3	12,500.	0.			FOR GENERAL USE

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FOCUSEDKIDS P.O. BOX 2042 CARBONDALE, CO 81623	81-4090184	501C3	12,500.	0.			TRAINING/COACHING UNDER-RESOURCED YOUTH, EDUCATORS AND FAMILIES ON THE FOCUSEDKIDS MODEL.
SNOW CUBS P.O. BOX 1248 ASPEN, CO 81612	84-0994002	501C3	12,100.	0.			PITKIN CHILDCARE STAFF STIPENDS Q3 2024
FOCUSEDKIDS P.O. BOX 2042 CARBONDALE, CO 81623	81-4090184	501C3	12,000.	0.			PROGRAM EXPANSION
MARBLE CHARTER SCHOOL 418 W. MAIN STREET MARBLE, CO 81623	26-0317428	501C3	12,000.	0.			MCS SOCIAL EMOTIONAL PROGRAM
ROARING FORK MUSIC SOCIETY, INC. P.O. BOX 503 CARBONDALE, CO 81623	46-5333149	501C3	12,000.	0.			ROARING FORK YOUTH ORCHESTRA MUSICA PROGRAM
WILDWOOD SCHOOL P.O. BOX 9290 ASPEN, CO 81612	84-0616743	501C3	12,000.	0.			PITKIN CHILDCARE STAFF STIPENDS Q3 2024
WILDWOOD SCHOOL P.O. BOX 9290 ASPEN, CO 81612	84-0616743	501C3	12,000.	0.			PITKIN CHILDCARE STAFF STIPEND Q2 2024
WILDWOOD SCHOOL P.O. BOX 9290 ASPEN, CO 81612	84-0616743	501C3	12,000.	0.			PITKIN CHILDCARE STAFF STIPEND Q4 2024
SNOW CUBS P.O. BOX 1248 ASPEN, CO 81612	84-0994002	501C3	11,620.	0.			TREEHOUSE PLAY YARD IMPROVEMENTS

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WOODY CREEK KIDS P.O. BOX 615 WOODY CREEK, CO 81656	81-2572813	501C3	11,000.	0.			PITKIN CHILDCARE STAFF STIPEND Q2 2024
WOODY CREEK KIDS P.O. BOX 615 WOODY CREEK, CO 81656	81-2572813	501C3	11,000.	0.			PITKIN CHILDCARE STAFF STIPENDS Q3 2024
THUNDER RIVER THEATRE COMPANY P.O. BOX 1773 CARBONDALE, CO 81623	84-1546404	501C3	10,949.	0.			THIS REPRESENTS AN ANNUAL DRAW FOR 2024.
THE ENVIRONMENT FOUNDATION ASPEN SKIING COMPANY ASPEN, CO 81612	84-1428863	501C3	10,923.	0.			GENERAL SUPPORT
JAZZ ASPEN SNOWMASS 110 EAST HALLAM STREET, SUITE 118 ASPEN, CO 81611	84-1220222	501C3	10,700.	0.			GENERAL SUPPORT
3 GENERATIONS PO BOX 20009 NEW YORK, NY 10011	20-8688513	501C3	10,000.	0.			TO SUPPORT THE ANNUAL FUND
A WAY OUT P.O. BOX 1124 CARBONDALE, CO 81623	46-1809899	501C3	10,000.	0.			GENERAL SUPPORT
ADVOCATE SAFEHOUSE PROJECT P.O. BOX 2036 GLENWOOD SPRINGS, CO 81602	84-1047611	501C3	10,000.	0.			UNRESTRICTED
ALPINE LEGAL SERVICES P.O. BOX 1890 GLENWOOD SPRINGS, CO 81602	84-1061991	501C3	10,000.	0.			UNRESTRICTED

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN ACADEMY OF PSYCHOTHERAPISTS - 1450 WESTERN AVENUE, SUITE 101 - ALBANY, NY 12203	58-1456523	501C3	10,000.	0.			TO SUPPORT THE SCHOLARSHIP FUND
AMERICAN CANCER SOCIETY - SOUTH REGION - PO BOX 370207 - DENVER, CO 80237	13-1788491	501C3	10,000.	0.			TO SUPPORT CANCER RESEARCH IN MEMORY OF MARIANNE KIPPER
ANDY ZANCA YOUTH EMPOWERMENT PROGRAM - P.O. BOX 1945 - CARBONDALE, CO 81623	84-1567171	501C3	10,000.	0.			UNRESTRICTED
APPALACHIAN VOICES 589 WEST KING STREET BOONE, NC 28607	56-2049956	501C3	10,000.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT.
ASCENDIGO AUTISM SERVICES 695 BUGGY CIRCLE CARBONDALE, CO 81623	20-0940000	501C3	10,000.	0.			UNRESTRICTED
ASPEN ART MUSEUM 637 EAST HYMAN AVENUE ASPEN, CO 81611	84-0746671	501C3	10,000.	0.			GENERAL SUPPORT
ASPEN CENTER FOR ENVIRONMENTAL STUDIES - 100 PUPPY SMITH STREET - ASPEN, CO 81611	23-7042291	501C3	10,000.	0.			UNRESTRICTED
ASPEN CENTER FOR ENVIRONMENTAL STUDIES - 100 PUPPY SMITH STREET - ASPEN, CO 81611	23-7042291	501C3	10,000.	0.			YOUTH IN NATURE 2024-25 PROGRAM PLANNING AND IMPLEMENTATION
ASPEN EDUCATION FOUNDATION P.O. BOX 2200 ASPEN, CO 81612	84-1181681	501C3	10,000.	0.			GENERAL SUPPORT

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ASPEN FAMILY CONNECTIONS 235 HIGH SCHOOL RD ASPEN, CO 81611	84-6002890	501C3	10,000.	0.			ASPEN/PITKIN HEALTHY FUTURES COALITION YOUTH ADVISORY COUNCIL (YAC)
ASPEN FAMILY CONNECTIONS 235 HIGH SCHOOL RD ASPEN, CO 81611	84-6002890	501C3	10,000.	0.			HOLIDAY FUND
ASPEN FAMILY CONNECTIONS 235 HIGH SCHOOL RD ASPEN, CO 81611	84-6002890	501C3	10,000.	0.			GENERAL SUPPORT
ASPEN FILM 110 EAST HALLAM STREET, SUITE 115 ASPEN, CO 81611	74-2483139	501C3	10,000.	0.			ASPEN FILMEDUCATES - ASPEN FILM'S EDUCATION DEPARTMENT
ASPEN FLY RIGHT PO BOX 10097 ASPEN, CO 81612	88-3534400	501C3	10,000.	0.			TO SUPPORT COMMUNICATIONS
ASPEN HISTORICAL SOCIETY 620 WEST BLEEKER STREET ASPEN, CO 81611	84-6037756	501C3	10,000.	0.			HIGH SCHOOL INTERNSHIP PROGRAM.
ASPEN JUNIOR HOCKEY P.O. BOX 3390 ASPEN, CO 81612	51-0143083	501C3	10,000.	0.			GENERAL SUPPORT
ASPEN PUBLIC RADIO 110 EAST HALLAM ST, STE 134 ASPEN, CO 81611	84-0884901	501C3	10,000.	0.			TO SUPPORT THE COLLABORATION WITH ASPEN JOURNALISM
ASPEN SANTA FE BALLET 0245 SAGE WAY ASPEN, CO 81611	84-1150857	501C3	10,000.	0.			GENERAL SUPPORT

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ASPEN SANTA FE BALLET 0245 SAGE WAY ASPEN, CO 81611	84-1150857	501C3	10,000.	0.			BALLET FOLKLORICO PROGRAMS
ASPEN SCIENCE CENTER 520 S. THIRD ST., STE. 9 CARBONDALE, CO 81623	84-1677611	501C3	10,000.	0.			UNRESTRICTED
ASPEN VALLEY LAND TRUST 320 MAIN STREET, SUITE 204 CARBONDALE, CO 81623	84-0574754	501C3	10,000.	0.			YOUTH IN NATURE 2024-25 PROGRAM PLANNING AND IMPLEMENTATION
ASPEN VALLEY SKI & SNOWBOARD CLUB 300 AVSC DRIVE ASPEN, CO 81611	84-6042225	501C3	10,000.	0.			UNRESTRICTED
ASPEN VALLEY SKI & SNOWBOARD CLUB 300 AVSC DRIVE ASPEN, CO 81611	84-6042225	501C3	10,000.	0.			TO SUPPORT THE SUBSCRIPTION FEES FOR 25 PROTERN DEVICES FOR TWO YEARS
ASPEN VALLEY SKI & SNOWBOARD CLUB 300 AVSC DRIVE ASPEN, CO 81611	84-6042225	501C3	10,000.	0.			GENERAL SUPPORT
ASPEN WILDFIRE FOUNDATION 420 E HOPKINS AVE. ASPEN, CO 81611	93-3769620	501C3	10,000.	0.			GENERAL SUPPORT
ASPEN WORDS 110 E HALLAM ST., STE 109 ASPEN, CO 81611	84-0399006	501C3	10,000.	0.			GENERAL SUPPORT
ASPEN WORDS 110 E HALLAM ST., STE 109 ASPEN, CO 81611	84-0399006	501C3	10,000.	0.			YOUTH LITERARY ARTS PROGRAMMING IN RFSD

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CARBONDALE ARTS P.O. BOX 175 CARBONDALE, CO 81623	84-0729842	501C3	10,000.	0.			UNRESTRICTED
CARE AND SHARE FOODBANK 2605 PREAMBLE COURT COLORADO SPRINGS, CO 80915	84-0731930	501C3	10,000.	0.			GENERAL SUPPORT
CASA OF THE NINTH P.O. BOX 3004 GLENWOOD SPRINGS, CO 81602	45-2663126	501C3	10,000.	0.			TO SUPPORT PROGRAM EXPANSION
CASA OF THE NINTH P.O. BOX 3004 GLENWOOD SPRINGS, CO 81602	45-2663126	501C3	10,000.	0.			UNRESTRICTED
CATHOLIC CHARITIES, WESTERN SLOPE 6240 SMITH RD, DENVER, CO 80216	84-0686679	501C3	10,000.	0.			EMERGENCY ASSISTANCE AND COMMUNITY INTEGRATION IN PARACHUTE TO ASPEN REGION
CENTER FOR REPRODUCTIVE RIGHTS 199 WATER STREET, 22ND FLOOR NEW YORK, NY 10038	13-3669731	501C3	10,000.	0.			GENERAL SUPPORT
CHALLENGE ASPEN P.O. BOX 6639 SNOWMASS VILLAGE, CO 81615	84-1315910	501C3	10,000.	0.			UNRESTRICTED
CHILDHELP 6730 NORTH SCOTTSDALE ROAD, SUITE 1 SCOTTSDALE, AZ 85253	95-2884608	501C3	10,000.	0.			THE PURPOSE OF THIS GRANT IS TO SUPPORT THE 2024 CHILDHELP DRIVE THE DREAM GALA.
COASTAL RANCHES CONSERVANCY 68 HOLLISTER RANCH RD GAVIOTA, CA 93117	68-0554135	501C3	10,000.	0.			TO SUPPORT THE HR SHORELINE PRESERVE

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COLORADO IMMIGRANT RIGHTS COALITION - 2525 WEST ALAMEDA AVENUE, #300 - DENVER, CO 80219	73-1675486	501C3	10,000.	0.			EXPAND OUTREACH IN THE ASPEN-PARACHUTE REGION
COLORADO RIVER VALLEY TEAM P.O. BOX 18770 DENVER, CO 80218	84-1493585	501C3	10,000.	0.			UNRESTRICTED
COLORADO ROCKY MOUNTAIN SCHOOL 500 HOLDEN WAY CARBONDALE, CO 81623	84-0425174	501C3	10,000.	0.			TO SUPPORT AFGHAN STUDENTS
COMMUNITY HEALTH SERVICES, INC 360 W SOPRIS CREEK ROAD BASALT, CO 81621	84-0609057	501C3	10,000.	0.			UNRESTRICTED
COOK INCLUSIVE 50 WEANT BLVD., UNIT C CARBONDALE, CO 81623	87-3151808	501C3	10,000.	0.			GENERAL SUPPORT
COOK INCLUSIVE 50 WEANT BLVD., UNIT C CARBONDALE, CO 81623	87-3151808	501C3	10,000.	0.			UNRESTRICTED
COOK INCLUSIVE 50 WEANT BLVD., UNIT C CARBONDALE, CO 81623	87-3151808	501C3	10,000.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT.
CREATIVE CAPITAL FOUNDATION 15 MAIDEN LANE, 18TH FLOOR NEW YORK, NY 10038	31-1605982	501C3	10,000.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT.
DANCE INITIATIVE 76 SOUTH 4TH STREET CARBONDALE, CO 81623	81-1805989	501C3	10,000.	0.			UNRESTRICTED

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DANCEASPEN 406 EAST HOPKINS AVENUE ASPEN, CO 81611	86-2924498	501C3	10,000.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT.
EARLY CHILDHOOD NETWORK 1317 GRAND AVE., STE. 125 GLENWOOD SPRINGS, CO 81601	27-1447905	501C3	10,000.	0.			THE PURPOSE OF THIS GRANT IS TO SUPPORT PROGRAM SUPPLIES.
ECOFLIGHT 307 AABC, SUITE L ASPEN, CO 81611	80-0012615	501C3	10,000.	0.			YOUNG LEADERS INITIATIVE
ECOFLIGHT 307 AABC, SUITE L ASPEN, CO 81611	80-0012615	501C3	10,000.	0.			GENERAL SUPPORT
ENGLISH IN ACTION P.O. BOX 4856 BASALT, CO 81621	26-1254643	501C3	10,000.	0.			GENERAL OPERATING
FAMILY RESOURCE CENTER OF THE ROARING FORK SCHOOLS - 400 SOPRIS AVENUE - CARBONDALE, CO 81623	84-6012220	501C3	10,000.	0.			GENERAL OPERATING SUPPORT FOR THE FAMILY RESOURCE CENTER OF RFSD.
FOCUSEDKIDS P.O. BOX 2042 CARBONDALE, CO 81623	81-4090184	501C3	10,000.	0.			GROUP SESSIONS WITH CAREGIVERS AND CHILDREN IN RIFLE AND PARACHUTE.
FRONTIER PHILANTHROPY 1980 FESTIVAL PLAZA DRIVE, SUITE 30 LAS VEGAS, NV 89135	88-0241420	501C3	10,000.	0.			TO SUPPORT NEVADA WOMEN'S PHILANTHROPY
GARFIELD COUNTY SCHOOL DISTRICT #16 - P.O. BOX 68 - PARACHUTE, CO 81635	84-6001236	501C3	10,000.	0.			UNRESTRICTED YOUTH EMPOWERMENT GRANT

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GARFIELD SCHOOL DISTRICT RE-2 839 WHITERIVER AVENUE RIFLE, CO 81650	84-0525428	501C3	10,000.	0.			UNRESTRICTED TO ONE DOOR
GREAT EDUCATION COLORADO FUND 1355 S COLORADO BLVD STE C-500 DENVER, CO 80222	56-2517232	501C3	10,000.	0.			GENERAL SUPPORT
GREAT EXPECTATIONS P.O. BOX 1845 GLENWOOD SPRINGS, CO 81602	84-1001484	501C3	10,000.	0.			THE PURPOSE OF THIS GRANT IS TO SUPPORT AT HOME MENTAL HEALTH CARE.
HAMMER MUSEUM OF ART AND CULTURAL CENTER, AT UCLA - 10899 WILSHIRE BOULEVARD - LOS ANGELES, CA 90024	95-4217197	501C3	10,000.	0.			GENERAL SUPPORT
HARVEST FOR HUNGER P.O. BOX 5953 SNOWMASS VILLAGE, CO 81615	85-2031161	501C3	10,000.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT.
HARVEST FOR HUNGER P.O. BOX 5953 SNOWMASS VILLAGE, CO 81615	85-2031161	501C3	10,000.	0.			GENERAL SUPPORT
HEADQUARTERS 23400 TWO RIVERS ROAD #46 BASALT, CO 81621	81-3353572	501C3	10,000.	0.			THE PURPOSE OF THIS GRANT IS TO SUPPORT MENTAL WELLNESS IN THE VALLEY.
JAZZ ASPEN SNOWMASS 110 EAST HALLAM STREET, SUITE 118 ASPEN, CO 81611	84-1220222	501C3	10,000.	0.			GENERAL SUPPORT
JEWISH FAMILY AND CHILDREN'S SERVICE OF GREATER PHILADELPHIA - 345 MONTGOMERY AVENUE - BALA CYNWYD, PA 19004	23-1352026	501C3	10,000.	0.			TO SUPPORT OCIYN

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LA CLINICA DEL PUEBLO DBA THE PEOPLE'S CLINIC - 520 S 3RD ST - CARBONDALE, CO 81623	47-1805672	501C3	10,000.	0.			GENERAL SUPPORT
LA CLINICA DEL PUEBLO DBA THE PEOPLE'S CLINIC - 520 S 3RD ST - CARBONDALE, CO 81623	47-1805672	501C3	10,000.	0.			TO SUPPORT LA CLINICA DEL PUEBLO
LA CLINICA DEL PUEBLO DBA THE PEOPLE'S CLINIC - 520 S 3RD ST - CARBONDALE, CO 81623	47-1805672	501C3	10,000.	0.			UNRESTRICTED
LATINA INITIATIVE COLORADO 6154 FLATTOP ST GOLDEN, CO 80403	86-2899816	501C3	10,000.	0.			GENERAL SUPPORT
LIFT-UP (LIFE INTER FAITH TEAM ON UNEMPLOYMENT AND POVERTY) - 100 MIDLAND AVE UNIT 270 - GLENWOOD SPRINGS, CO 81601	84-0896081	501C3	10,000.	0.			GENERAL SUPPORT
LIFT-UP (LIFE INTER FAITH TEAM ON UNEMPLOYMENT AND POVERTY) - 100 MIDLAND AVE UNIT 270 - GLENWOOD SPRINGS, CO 81601	84-0896081	501C3	10,000.	0.			GENERAL SUPPORT
LITERACY OUTREACH 1127 SCHOOL STREET GLENWOOD SPRINGS, CO 81601	26-4713475	501C3	10,000.	0.			UNRESTRICTED
MICHAEL J. FOX FOUNDATION FOR PARKINSON'S RESEARCH - GRAND CENTRAL STATION - NEW YORK, NY 10163	13-4141945	501C3	10,000.	0.			GENERAL SUPPORT
MOUNTAIN FAMILY HEALTH CENTERS 1905 BLAKE AVE., SUITE 101 GLENWOOD SPRINGS, CO 81601	84-0742145	501C3	10,000.	0.			GENERAL SUPPORT

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MVP EDUCATION FUND 218 E VALLEY RD, #104-PMB 141 CARBONDALE, CO 81623	83-4574148	501C3	10,000.	0.			GENERAL OPERATING MOUNTAIN VOICES PROJECT
MVP EDUCATION FUND 218 E VALLEY RD, #104-PMB 141 CARBONDALE, CO 81623	83-4574148	501C3	10,000.	0.			COMMUNITY OUTREACH IN SUPPORT OF CECE COALITION
NEW ERA COLORADO FOUNDATION PO BOX 181153 DENVER, CO 80218	26-1389272	501C3	10,000.	0.			GENERAL SUPPORT
NEW YORK PRESBYTERIAN FUND INC. 850 THIRD AVENUE, FLOOR 12 NEW YORK, NY 10022	13-3160356	501C3	10,000.	0.			THE PURPOSE OF THIS GRANT IS TO SUPPORT THE PROSTATE CANCER FUND, IN HONOR OF DR. HIMANSHU
NJS HOBBY FARM LLC 400 ALEXANDER LANE BASALT, CO 81621	45-5609706	501C3	10,000.	0.			MAINTENANCE & EQUIPMENT PROGRAM: GREENHOUSE
ONE COLORADO EDUCATION FUND 303 E 17TH AVE DENVER, CO 80203	27-1333378	501C3	10,000.	0.			GENERAL SUPPORT
PATHFINDERS P.O. BOX 11799 ASPEN, CO 81612	20-1710899	501C3	10,000.	0.			THIS GRANT IS UNRESTRICTED AND IS MADE IN MEMORY OF ALEC MUSSER.
PATHFINDERS P.O. BOX 11799 ASPEN, CO 81612	20-1710899	501C3	10,000.	0.			YOUTH AND FAMILY COUNSELING PROGRAMS FROM ASPEN TO PARACHUTE
PITKIN COUNTY LIBRARY 120 NORTH MILL STREET ASPEN, CO 81611	84-6000794	501C3	10,000.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT.

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PLANNED PARENTHOOD OF THE ROCKY MOUNTAINS - P.O. BOX 732055 - DALLAS, TX 75373	84-0404253	501C3	10,000.	0.			GENERAL SUPPORT
RESPONSE 325 E CODY LANE BASALT, CO 81621	74-2328814	501C3	10,000.	0.			UNRESTRICTED
RIVER BRIDGE REGIONAL CENTER 520 21ST STREET GLENWOOD SPRINGS, CO 81601	45-5464778	501C3	10,000.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT.
RIVER BRIDGE REGIONAL CENTER 520 21ST STREET GLENWOOD SPRINGS, CO 81601	45-5464778	501C3	10,000.	0.			UNRESTRICTED
RIVER CENTER OF NEW CASTLE, INC. P.O. BOX 272 NEW CASTLE, CO 81647	27-3837160	501C3	10,000.	0.			UNRESTRICTED
ROARING FORK OUTDOOR VOLUNTEERS 520 SOUTH THIRD STREET, #32 CARBONDALE, CO 81623	84-1302819	501C3	10,000.	0.			UNRESTRICTED
ROARING FORK PRECOLLEGIATE 400 SOPRIS AVENUE CARBONDALE, CO 81623	84-3221793	501C3	10,000.	0.			UNRESTRICTED
ROARING FORK VALLEY EARLY LEARNING FUND DBA RAISING A READER ASPEN TO PARACHUTE - P.O. BOX 2533 - GLENWOOD SPRINGS, CO 81602	55-0873041	501C3	10,000.	0.			GENERAL OPERATING FUNDS FOR EARLY LITERACY PROGRAMS SUPPORTING THE SKILLS OF CAREGIVERS.
ROOM TO READ 465 CALIFORNIA STREET, SUITE 1000 SAN FRANCISCO, CA 94104	91-2003533	501C3	10,000.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT.

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SAFE AND ABUNDANT NUTRITION ALLIANCE SANA - 530 S THIRD ST STE 8 - CARBONDALE, CO 81623	84-1267213	501C3	10,000.	0.			UNRESTRICTED
SEEDS OF AFRICA 110 EAST 25TH STREET NEW YORK, NY 10010	35-2262033	501C3	10,000.	0.			GENERAL SUPPORT
SITE SANTA FE 1606 PASEO DE PERALTA SANTA FE, NM 87501	85-0413922	501C3	10,000.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT.
SOPRIS SUN 520 S THIRD ST., #36 CARBONDALE, CO 81623	26-4219405	501C3	10,000.	0.			YOUTH JOURNALISM PROGRAM
STAGE OF LIFE (SOL) THEATRE COMPANY - 520 SOUTH THIRD STREET, STUDIO 11 - CARBONDALE, CO 81623	45-4931401	501C3	10,000.	0.			UNRESTRICTED
STEADMAN PHILIPPON RESEARCH INSTITUTE - 181 WEST MEADOW DRIVE, SUITE 1000 - VAIL, CO 81657	88-0245022	501C3	10,000.	0.			DUSTY ANDERSON MD ASPEN FUND
STEPPING STONES OF THE ROARING FORK VALLEY - 1010 GARFIELD AVENUE - CARBONDALE, CO 81623	46-4740539	501C3	10,000.	0.			UNRESTRICTED
TACAW (THE ARTS CAMPUS AT WILLITS) 400 ROBINSON STREET BASALT, CO 81621	47-3091347	501C3	10,000.	0.			GENERAL SUPPORT
TACAW (THE ARTS CAMPUS AT WILLITS) 400 ROBINSON STREET BASALT, CO 81621	47-3091347	501C3	10,000.	0.			UNRESTRICTED

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THE ART BASE P.O. BOX 4300 BASALT, CO 81621	20-1188479	501C3	10,000.	0.			GENERAL SUPPORT
THE ASPEN INSTITUTE 1000 NORTH 3RD STREET ASPEN, CO 81611	84-0399006	501C3	10,000.	0.			SOCIETY OF FELLOWS
THE ASPEN INSTITUTE 1000 NORTH 3RD STREET ASPEN, CO 81611	84-0399006	501C3	10,000.	0.			GENERAL OPERATING FOR ASPEN COMMUNITY PROGRAMS
THE BUDDY PROGRAM 110 EAST HALLAM STREET, SUITE 101 ASPEN, CO 81611	74-2594693	501C3	10,000.	0.			YOUTH IN NATURE 2024-25 PROGRAM PLANNING AND IMPLEMENTATION
THE BUDDY PROGRAM 110 EAST HALLAM STREET, SUITE 101 ASPEN, CO 81611	74-2594693	501C3	10,000.	0.			UNRESTRICTED
THE FARM COLLABORATIVE P.O. BOX 302 WOODY CREEK, CO 81656	26-3468420	501C3	10,000.	0.			UNRESTRICTED
THE FARM COLLABORATIVE P.O. BOX 302 WOODY CREEK, CO 81656	26-3468420	501C3	10,000.	0.			YOUTH IN NATURE 2024-25 PROGRAM PLANNING AND IMPLEMENTATION
THE SAVINGS COLLABORATIVE 959 CEDAR CREEK CARBONDALE, CO 81623	85-4176243	501C3	10,000.	0.			SAVINGS COLLABORATIVE AMBASSADORS
THE UTAH FILM CENTER 50 WEST 300 BROADWAY NO 1125 SALT LAKE CITY, UT 84101	75-3077559	501C3	10,000.	0.			THE PURPOSE OF THIS GRANT IS TO SUPPOR THE FILM POSSIBLE SELVES.

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THEATRE ASPEN 110 E. HALLAM ST., STE. 102 ASPEN, CO 81611	74-2319032	501C3	10,000.	0.			CURTAIN UP ROARING FORK PROGRAM
THEATRE ASPEN 110 E. HALLAM ST., STE. 102 ASPEN, CO 81611	74-2319032	501C3	10,000.	0.			GENERAL SUPPORT
THEATRE ASPEN 110 E. HALLAM ST., STE. 102 ASPEN, CO 81611	74-2319032	501C3	10,000.	0.			IN SUPPORT OF THE 2024 PRODUCTION OF FIDDLER ON THE ROOF
THEATRE ASPEN 110 E. HALLAM ST., STE. 102 ASPEN, CO 81611	74-2319032	501C3	10,000.	0.			GENERAL SUPPORT
THIRD SECTOR NEW ENGLAND 89 SOUTH ST., STE. 700 BOSTON, MA 02111	04-2261109	501C3	10,000.	0.			TO SUPPORT MASS TEACHER RESOURCES
UNION OF CONCERNED SCIENTISTS TWO BRATTLE SQUARE, SUITE 6 CAMBRIDGE, MA 02138	04-2535767	501C3	10,000.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT.
UNIVERSITY OF COLORADO ANSCHUTZ MEDICAL CAMPUS - 13001 EAST 17TH PLACE - AURORA, CO 80045	84-6000555	501C3	10,000.	0.			GENERAL SUPPORT
USC ADVANCEMENT GIFT SERVICES 1150 SOUTH OLIVE STREET, 25TH FLOOR LOS ANGELES, CA 90015	95-1642394	501C3	10,000.	0.			TO SUPPORT THE TROJAN VICTORY FUND
USC ADVANCEMENT GIFT SERVICES 1150 SOUTH OLIVE STREET, 25TH FLOOR LOS ANGELES, CA 90015	95-1642394	501C3	10,000.	0.			TO SUPPORT THE MARSHALL ANNUAL FUND

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VALLEY SETTLEMENT 1901 GRAND AVENUE, SUITE 206 GLENWOOD SPRINGS, CO 81601	81-2401368	501C3	10,000.	0.			GENERAL OPERATING
VALLEY SETTLEMENT 1901 GRAND AVENUE, SUITE 206 GLENWOOD SPRINGS, CO 81601	81-2401368	501C3	10,000.	0.			GENERAL SUPPORT
VALLEY SETTLEMENT 1901 GRAND AVENUE, SUITE 206 GLENWOOD SPRINGS, CO 81601	81-2401368	501C3	10,000.	0.			FAMILY SUPPORT TEAM
VISIONSPRING PO BOX 756 NEW YORK, NY 10108	31-1811558	501C3	10,000.	0.			GENERAL SUPPORT
VOICE OF CALVARY MINISTRIES 531 W.CAPITOL STREET JACKSON, MS 39203	64-0564343	501C3	10,000.	0.			TO SUPPORT COOP NEW WEST JACKSON IN THE PURCHASE OF A RETREAT CENTER
WEST MOUNTAIN REGIONAL HEALTH ALLIANCE - 520 S. THIRD ST., STE. #30 - CARBONDALE, CO 81623	47-2360654	501C3	10,000.	0.			UNRESTRICTED
WHITNEY MUSEUM OF AMERICAN ART 99 GANSEVOORT STREET NEW YORK, NY 10014	13-1789318	501C3	10,000.	0.			TO SUPPORT THE ALVIN AILEY SHOW
WILDERNESS WORKSHOP P.O. BOX 1442 CARBONDALE, CO 81623	74-1900412	501C3	10,000.	0.			GENERAL SUPPORT
WOODY CREEK KIDS P.O. BOX 615 WOODY CREEK, CO 81656	81-2572813	501C3	10,000.	0.			PITKIN CHILDCARE STAFF STIPEND Q1 2024

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YAMPAH MOUNTAIN HIGH SCHOOL 695 RED MOUNTAIN DRIVE GLENWOOD SPRINGS, CO 81601	84-0602408	501C3	10,000.	0.			TO PROVIDE FOOD FOR STUDENTS
YOUTH SERVICE AMERICA PO BOX #65525 WASHINGTON, DC 20035	52-1500870	501C3	10,000.	0.			TO SUPPORT GUIDES.VOTE PROGRAM
YOUTHENTITY P.O. BOX 1989 CARBONDALE, CO 81623	84-1601705	501C3	10,000.	0.			CAREER EXPOS SPRING AND FALL 2024
JAZZ ASPEN SNOWMASS 110 EAST HALLAM STREET, SUITE 118 ASPEN, CO 81611	84-1220222	501C3	9,400.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT.
GROWING YEARS SCHOOL 151 SCHOOL STREET BASALT, CO 81621	84-1477810	501C3	9,230.	0.			PITKIN CHILDCARE STAFF STIPENDS Q3 2024
ASPEN COUNTRY DAY SCHOOL 300 MUSIC SCHOOL RD. ASPEN, CO 81611	23-7033239	501C3	9,000.	0.			PITKIN CHILDCARE STAFF STIPEND Q4 2024
ASPEN COUNTRY DAY SCHOOL 300 MUSIC SCHOOL RD. ASPEN, CO 81611	23-7033239	501C3	9,000.	0.			PITKIN CHILDCARE STAFF STIPEND Q1 2024
ASPEN COUNTRY DAY SCHOOL 300 MUSIC SCHOOL RD. ASPEN, CO 81611	23-7033239	501C3	9,000.	0.			PITKIN CHILDCARE STAFF STIPENDS Q3 2024
ASPEN COUNTRY DAY SCHOOL 300 MUSIC SCHOOL RD. ASPEN, CO 81611	23-7033239	501C3	9,000.	0.			PITKIN CHILDCARE STAFF STIPEND Q2 2024

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMENTARY INC 200 WEST 86TH ST #1M NEW YORK, NY 10024	13-3610041	501C3	9,000.	0.			GENERAL SUPPORT
LITTLE RED SCHOOL HOUSE DBA WOODY CREEK KIDS - P.O. BOX 615 - WOODY CREEK, CO 81656	81-2572813	501C3	9,000.	0.			PITKIN CHILDCARE STAFF STIPENDS Q3 2024
LITTLE RED SCHOOL HOUSE DBA WOODY CREEK KIDS - P.O. BOX 615 - WOODY CREEK, CO 81656	81-2572813	501C3	9,000.	0.			PITKIN CHILDCARE STAFF STIPEND Q1 2024
LITTLE RED SCHOOL HOUSE DBA WOODY CREEK KIDS - P.O. BOX 615 - WOODY CREEK, CO 81656	81-2572813	501C3	9,000.	0.			PITKIN CHILDCARE STAFF STIPEND Q2 2024
NORTH AMERICAN VALUES INSTITUTE 2935 E. MAIN ST., UNIT 9406 COLUMBUS, OH 43209	87-3619728	501C3	9,000.	0.			UNDERWRITE EVENTS
WOMENS EMERGENCY NETWORK P.O. BOX 566392 MIAMI, FL 33256	59-2985791	501C3	9,000.	0.			TO SUPPORT THE MIAMI-DADE IMPACT COLLECTIVE
WOODY CREEK KIDS P.O. BOX 615 WOODY CREEK, CO 81656	81-2572813	501C3	9,000.	0.			PITKIN CHILDCARE STAFF STIPEND Q4 2024
THE HAWN FOUNDATION 220 26TH STREET, SUITE 203 SANTA MONICA, CA 90402	20-0653982	501C3	8,800.	0.			THIS IS IN SUPPORT OF THE MINDUP PRGRAM
SNOW CUBS P.O. BOX 1248 ASPEN, CO 81612	84-0994002	501C3	8,700.	0.			PITKIN CHILDCARE STAFF STIPEND Q2 2024

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL JEWISH HEALTH P.O. BOX 17169 DENVER, CO 80217	74-2044647	501C3	8,600.	0.			TO SUPPORT REV THE RUNWAY
WILDWOOD SCHOOL P.O. BOX 9290 ASPEN, CO 81612	84-0616743	501C3	8,425.	0.			MAINTENANCE & EQUIPMENT PROGRAM: SKYLIGHT REPLACEMENT
ELBIE AND WILMA GANN MEMORIAL FOUNDATION DBA MOUNT SOPRIS MONTESSORI SCHOOL - 879 EUCLID AVENUE - CARBONDALE, CO 81623	84-0864777	501C3	8,000.	0.			TO SUPPORT STAFF AND PARENT EDUCATION INSIDE AND OUTSIDE OF THE CLASSROOM.
MIAMI FOUNDATION FOR MENTAL HEALTH 1450 BRICKELL AVE. SUITE 1900 MIAMI, FL 33131	83-2898069	501C3	8,000.	0.			MIAMI-DADE IMPACT COLLECTIVE DONATION (MDIC)
QUERENCIA FOUNDATION 1821 BLAKE STREET, SUITE 200 DENVER, CO 80202	88-1907658	501C3	8,000.	0.			THE PURPOSE OF THIS GRANT IS GENERAL SUPPORT.
PHILANTHROPY COLORADO 2900 WELTON ST., SUITE 200 DENVER, CO 80205	71-0947313	501C3	7,855.	0.			2024 MEMBERSHIP DUES
AMERICAN CIVIL LIBERTIES UNION FOUNDATION - 125 BROAD STREET, 18TH FLOOR - NEW YORK, NY 10004	13-6213516	501C3	7,500.	0.			GENERAL SUPPORT
ASPEN HISTORICAL SOCIETY 620 WEST BLEEKER STREET ASPEN, CO 81611	84-6037756	501C3	7,500.	0.			TO SUPPORT A PICNIC TABLE AT THE WELCOME AREA IN ASHCROFT
ASPEN JEWISH CONGREGATION 77 MEADOWOOD DRIVE ASPEN, CO 81611	84-0723135	501C3	7,500.	0.			GENERAL SUPPORT

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASPEN PUBLIC RADIO 110 EAST HALLAM ST, STE 134 ASPEN, CO 81611	84-0884901	501C3	7,500.	0.			GENERAL SUPPORT
GROWING YEARS SCHOOL 151 SCHOOL STREET BASALT, CO 81621	84-1477810	501C3	7,500.	0.			THE PURPOSE OF THIS GRANT IS TO SUPPORT TUITION ASSISTANCE.
LITTLE RED SCHOOL HOUSE DBA WOODY CREEK KIDS - P.O. BOX 615 - WOODY CREEK, CO 81656	81-2572813	501C3	7,500.	0.			PITKIN CHILDCARE STAFF STIPEND Q4 2024
LOOMIS CHAFFEE SCHOOL 4 BATCHELDER RD WINDSOR, CT 06095	06-0653119	501C3	7,500.	0.			TO SUPPORT THE LOOMIS BOY'S SOCCER TEAM TRIP TO GERMANY
PLANNED PARENTHOOD OF THE ROCKY MOUNTAINS, GLENWOOD SPRINGS HEALTH CENTER - 50923 HIGHWAY 6 - GLENWOOD SPRINGS, CO 81601	84-0404253	501C3	7,500.	0.			GENERAL SUPPORT
WARHORSES FOR VETERANS 5600 WEST 183RD STREET STILWELL, KS 66085	46-4539501	501C3	7,500.	0.			SUPPORT FOR OUR BRAVE VETS AND THEIR MENTAL HEALTH
ASPEN ART MUSEUM 637 EAST HYMAN AVENUE ASPEN, CO 81611	84-0746671	501C3	7,000.	0.			GENERAL SUPPORT
CROSSROADS CHURCH OF ASPEN 726 WEST FRANCIS STREET ASPEN, CO 81611	84-0724383	501C3	7,000.	0.			GENERAL SUPPORT
ENGLISH IN ACTION P.O. BOX 4856 BASALT, CO 81621	26-1254643	501C3	7,000.	0.			PROGRAM SUPPORT

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (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 noncash 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	501C3	7,000.	0.			TAX DEDUCTIBLE PORTION FOR 2 PATRON PASSES FOR ASPEN IDEAS FEST 2025
ASPEN ART MUSEUM 637 EAST HYMAN AVENUE ASPEN, CO 81611	84-0746671	501C3	6,600.	0.			IS TO SUPPORT ART CRUSH
SNOW CUBS P.O. BOX 1248 ASPEN, CO 81612	84-0994002	501C3	6,490.	0.			PITKIN CHILDCARE STAFF STIPEND Q4 2024
ASPEN CHAPEL 77 MEADOWOOD DRIVE ASPEN, CO 81611	84-6059740	501C3	6,000.	0.			5K FOR ANNUAL DONATION, 1K FOR TOM OVERTON'S MEMORIAL.
ASPEN GLOBAL CHANGE INSTITUTE 104 MIDLAND AVENUE, SUITE 205 BASALT, CO 81621	84-1305687	501C3	6,000.	0.			THIS GRANT IS UNRESTRICTED.
ASPEN MUSIC FESTIVAL AND SCHOOL 225 MUSIC SCHOOL ROAD ASPEN, CO 81611	84-0445087	501C3	6,000.	0.			GENERAL SUPPORT
ASPEN VALLEY SKI & SNOWBOARD CLUB 300 AVSC DRIVE ASPEN, CO 81611	84-6042225	501C3	6,000.	0.			TO SUPPORT A NATIONAL COUNCIL MEMBERSHIP
BIG DOG RANCH RESCUE 14444 OKEECHOBEE BOULEVARD LOXAHATCHEE GROVES, FL 33470	26-3184971	501C3	6,000.	0.			TO SUPPORT WINE, WOMEN AND SHOES
JAZZ ASPEN SNOWMASS 110 EAST HALLAM STREET, SUITE 118 ASPEN, CO 81611	84-1220222	501C3	6,000.	0.			TO SUPPORT NATIONAL COUNCIL

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OUR SCHOOL 3126 SOUTH GRAND AVENUE GLENWOOD SPRINGS, CO 81601	84-1406053	501C3	6,000.	0.			TO EXPAND INFANT CAPACITY FROM 3 CHILDREN TO 5 CHILDREN
RESPONSE 325 E CODY LANE BASALT, CO 81621	74-2328814	501C3	6,000.	0.			THE PURPOSE OF THIS GRANT IS TO SPPORT THE 24-HOUR CRISIS HELP LINE.
THEATRE ASPEN 110 E. HALLAM ST., STE. 102 ASPEN, CO 81611	74-2319032	501C3	6,000.	0.			GENERAL SUPPORT
WINDWALKERS EQUINE ASSISTED LEARNING AND THERAPY CENTER - P.O. BOX 504 - CARBONDALE, CO 81623	38-3716992	501C3	6,000.	0.			TO SUPPORT THE WINDWALKERS SCHOLARSHIPS PROGRAM.
PATHFINDERS P.O. BOX 11799 ASPEN, CO 81612	20-1710899	501C3	5,871.	0.			GENERAL OPERATING
TINY PINES DBA WOODY CREEK KIDS P.O. BOX 615 WOODY CREEK, CO 81656	81-2572813	501C3	5,741.	0.			TINY PINES PLAYGROUND PROJECT
BLUE LAKE PRESCHOOL 0189 JW DRIVE, STE. C CARBONDALE, CO 81623	84-1544750	501C3	5,500.	0.			INSTALL PHONE SYSTEM, FENCE, GATES AND GARDEN
WORLD CUP DREAMS FOUNDATION P.O. BOX 248 KEENE, NY 12942	20-4647706	501C3	5,400.	0.			THE PURPOSE OF THIS GRANT IS TO SUPPORT THE WORLD CUP DREAMS FOUNDATION ANNUAL FUNDRAISER.
ASPEN COUNTRY DAY SCHOOL 300 MUSIC SCHOOL RD. ASPEN, CO 81611	23-7033239	501C3	5,374.	0.			THE PURPOSE IS TO PURCHASE A PLAYHOUSE FOR THE PRESCHOOL PROGRAM

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASCENDIGO AUTISM SERVICES 695 BUGGY CIRCLE CARBONDALE, CO 81623	20-0940000	501C3	5,200.	0.			THE PURPOSE OF THIS GRANT IS GERNERAL SUPPORT.

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
EMERGENCY ASSISTANCE AND RESPONSE.	1	3,000.	0.		
EDUCATION	21	81,250.	0.		
YOUTH	15	45,000.	0.		

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART II, LINE 1, COLUMN (H):
NAME OF ORGANIZATION OR GOVERNMENT: ANDERSON RANCH ARTS CENTER
(H) PURPOSE OF GRANT OR ASSISTANCE: THE PURPOSE OF THIS GRANT IS TO SUPPORT THE NATIONAL COUNCIL, A TITLE SPONSOR LEVEL FOR THE SUMMER SERIES AND THE RECOGNITION DINNER AND PADDLE RAISE.

NAME OF ORGANIZATION OR GOVERNMENT: THE ASPEN INSTITUTE
(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT THE TRUSTEE ANNUAL FUND (50K), THE ANNUAL AWARDS DINNER (75K) AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: VALLEY SETTLEMENT
(H) PURPOSE OF GRANT OR ASSISTANCE: IS TO SUPPORT A $100,000 CONTRIBUTION TO THE CAPITAL CAMPAIGN AND A $50,000 CONTRIBUTION TO GENERAL OPERATING EXPENSES.

NAME OF ORGANIZATION OR GOVERNMENT: TREES, WATER & PEOPLE
(H) PURPOSE OF GRANT OR ASSISTANCE: THE PURPOSE OF THIS GRANT IS TO SUPPORT TREES, WATER, PEOPLE. THIS IS THE FINAL GRANT FROM THIS FUND.

Part IV Supplemental Information

IT WILL BE RETIRED.

NAME OF ORGANIZATION OR GOVERNMENT: ASPEN ART MUSEUM
(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT GUEST ACCOMMODATIONS FOR ART CRUSH; 4 GUESTS AT INDEPENDENCE SQUARE AND 2 GUESTS AT MOLLIE

NAME OF ORGANIZATION OR GOVERNMENT: NEW YORK UNIVERSITY
(H) PURPOSE OF GRANT OR ASSISTANCE: GENERAL SUPPORT FROM DONOR ID#0001738463/PLEDGE#1002157203/ALLOCATION#22-62000-T3087

NAME OF ORGANIZATION OR GOVERNMENT: ASPEN MUSIC FESTIVAL AND SCHOOL
(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT: $2,000 FOR THE OPERA BENEFIT, $2,000 FOR THE SEASON BENEFIT, $16,395 FOR THE LIVE AUCTION, $5,975 FOR PADDLE RAISE, $25,000 FOR THE 75TH ANNIVERSARY FUND, AND $1,500 FOR A BENEFIT WITH ROBERT MCDUFFIE

NAME OF ORGANIZATION OR GOVERNMENT: SQUARED NETWORK
(H) PURPOSE OF GRANT OR ASSISTANCE: THE PURPOSE OF THIS GRANT IS TO SUPPORT THE PARTICIPATION OF STUDENTS THROUGHOUT THE PROGRAM'S DURATION. THIS IS THE FIRST OF THREE CONTRIBUTIONS.

NAME OF ORGANIZATION OR GOVERNMENT: VALLEY SETTLEMENT
(H) PURPOSE OF GRANT OR ASSISTANCE: TO STRENGTHEN PARENT AND CAREGIVER SKILLS IN SUPPORTING YOUNG CHILDRENS HEALTHY DEVELOPMENT.

NAME OF ORGANIZATION OR GOVERNMENT: EARLY LEARNING CENTER OF ASPEN
(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE TUITION ASSISTANCE TO KEEP CHILDCARE ACCESSIBLE AND AFFORDABLE FOR LOCAL FAMILIES.

NAME OF ORGANIZATION OR GOVERNMENT: THE ASPEN INSTITUTE
(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT THE ASPEN IDEAS: CLIMATE CHICAGO FUND ON BEHALF OF RACHEL STAR (JAMES AND SARA STAR'S DAUGHTER)

NAME OF ORGANIZATION OR GOVERNMENT: ENGLISH IN ACTION
(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT AN ANNUAL GIFT OF $5,000, EVENT SPONSORSHIP AT $5,000 AND THE NEW BUILDING FUND AT $10,000 IN HONOR OF MELONY LEWIS

NAME OF ORGANIZATION OR GOVERNMENT: GARFIELD COUNTY SCHOOL DISTRICT #16
(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT PRESCHOOL TUITION ASSISTANCE TO BREAK DOWN BARRIERS OF ACCESSING EARLY CHILDHOOD EDUCATION.

NAME OF ORGANIZATION OR GOVERNMENT:
CR BOCES - YAMPAH MOUNTAIN HIGH SCHOOL
(H) PURPOSE OF GRANT OR ASSISTANCE: GENERAL OPERATING TO PROVIDE HIGH QUALITY FAMILY SUPPORT, LITERACY & RESPONSIVE CARE IN THE NURSERY.

NAME OF ORGANIZATION OR GOVERNMENT: ASPEN VALLEY SKI & SNOWBOARD CLUB
(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT THE SUBSCRIPTION FOR THREE YEARS FOR CONCENTRIC PEAK FORCE ASYMMETRY TESTING DEVICES AND SOFTWARE (FORCE PLATES)

NAME OF ORGANIZATION OR GOVERNMENT: ASPEN HISTORICAL SOCIETY
(H) PURPOSE OF GRANT OR ASSISTANCE: IS GENERAL SUPPORT FOR WHICH $10,000 MAY BE USED. THE REMAINING $3,000 IS TO SUPPORT SUSTAINING FREE ADMISSION

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: NEW YORK PRESBYTERIAN FUND INC.
(H) PURPOSE OF GRANT OR ASSISTANCE: THE PURPOSE OF THIS GRANT IS TO SUPPORT THE PROSTATE CANCER FUND, IN HONOR OF DR. HIMANSHU NAGAR, FOR THE INCREDIBLE CARE HE HAS GIVEN MR. JELINEK AND FOR HIS EXPERTISE, BEDSIDE MANNER AND COMPASSION.

NAME OF ORGANIZATION OR GOVERNMENT: COOK INCLUSIVE
(H) PURPOSE OF GRANT OR ASSISTANCE: THE PURPOSE OF THIS GRANT IS TO SUPPORT THE QUEER-CENTERED CAMP PROGRAM AT ASPEN CAMP FOR THE DEAF.

SCHEDULE J (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

ASPEN COMMUNITY FOUNDATION

Employer identification number

84-0829226

Part I Questions Regarding Compensation

			Yes	No
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.			
	☐ First-class or charter travel	☐ Housing allowance or residence for personal use		
	☐ Travel for companions	☐ Payments for business use of personal residence		
	☐ Tax indemnification and gross-up payments	☐ Health or social club dues or initiation fees		
	☐ Discretionary spending account	☐ 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	**1b**		
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?	**2**		
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.			
	☐ Compensation committee	☐ Written employment contract		
	☐ Independent compensation consultant	☒ Compensation survey or study		
	☐ Form 990 of other organizations	☒ 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?	**4a**		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	**4b**		X
c	Participate in or receive payment from an equity-based compensation arrangement?	**4c**		X
	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?	**5a**		X
b	Any related organization?	**5b**		X
	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?	**6a**		X
b	Any related organization?	**6b**		X
	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	**7**		X
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	**8**		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	**9**		

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 and/or 1099-NEC 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) ERICA SNOW	(i)	230,000.	0.	0.	24,000.	15,529.	269,529.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) KORTNEY HARTMAN	(i)	142,802.	0.	0.	14,280.	11,516.	168,598.	0.
FINANCE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) VALERIE CARLIN	(i)	149,324.	0.	0.	14,932.	0.	164,256.	0.
CHIEF IMPACT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No. 1545-0047

2024

Open to Public Inspection

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	47	9,433,902.	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	X	1	850,000.	FAIR VALUE
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other (SKI PASSES)	X	1	54,000.	FAIR VALUE
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 V, Donee Acknowledgement 29

			Yes	No
30a	During the year, did the organization receive by contribution any property reported on Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	30a		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?	31	X	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		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.			

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.

SCHEDULE O (Form 990)
(Rev. December 2024)
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 Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

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 III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
STRENGTHENING LOCAL NONPROFIT ORGANIZATIONS BY BUILDING CAPACITY AND HELPING TO ENSURE THEIR SUSTAINABILITY.

FORM 990, PART VI, SECTION B, LINE 11B:
AFTER PREPARATION BY THE FOUNDATION'S CPA, THE AUDIT AND FINANCE COMMITTEE AND FINANCE DIRECTOR CONDUCT AN IN-DEPTH REVIEW OF THE 990. ONCE THE AUDIT AND FINANCE COMMITTEE ACCEPTS THE 990, IT IS DIRECTED TO THE EXECUTIVE COMMITTEE FOR FINAL REVIEW AND APPROVAL, AND THEN EMAILED TO BOARD MEMBERS AND POSTED ON THE BOARD PORTAL WEBSITE.

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	150,000.
AGENCY GRANTS	-215,951.
AGENCY INVESTMENT INCOME	446,603.
AGENCY ADMINISTRATIVE FEES	-1,564.
TOTAL TO FORM 990, PART XI, LINE 9	379,088.

Name: ASPEN COMMUNITY FOUNDATION FEIN: 84-0829226

Type and Entity: PARTNERSHIP INVESTMENT POST-2017 NO

DETAIL CARRYOVER SCHEDULE

Section 382 Annual Limitation | Section 382 Carryover

	Year Originated	Original Carryover Amount	Total Amount Used	Amount Used for 12/31/21	Amount Used for 12/31/23	Amount Used for _____	Amount Used for _____	Amount Used for _____	Amount Used for _____	Amount Used for _____	Amount Used for _____	Amount Used for _____
A	2020	51,157.	40,093.	33,749.	6,344.							
B	2022	12,372.										
C	2024	29,473.										
D												
E												
F												
G												
H												
I												
J												
K												
L												
M												
N												
O												
P												
Q												
R												
S												
T												
U												
V												
W												

	Detail Type	ESBC	Amount Used for _____	Amount Used for _____	Amount Used for _____	Amount Used for _____	Amount Used for _____	Amount Used for _____	Amount Used for _____	Amount Used for _____	Amount Used for _____	Amount Used for _____	Amount Used for _____
A													
B													
C													
D													
E													
F													
G													
H													
I													
J													
K													
L													
M													
N													
O													
P													
Q													
R													
S													
T													
U													
V													
W													

Name: ASPEN COMMUNITY FOUNDATION FEIN: 84-0829226

Type and Entity: PARTNERSHIP INVESTMENT POST-2017 NO

DETAIL CARRYOVER SCHEDULE

Section 382 Annual Limitation | Section 382 Carryover

	Year Originated	Original Carryover Amount	Total Amount Used	Amount Used for 12/31/21	Amount Used for 12/31/23	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
A	2022	649.										
B												
C												
D												
E												
F												
G												
H												
I												
J												
K												
L												
M												
N												
O												
P												
Q												
R												
S												
T												
U												
V												
W												

	Detail Type	ESBC	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
A													
B													
C													
D													
E													
F													
G													
H													
I													
J													
K													
L													
M													
N													
O													
P													
Q													
R													
S													
T													
U													
V													
W													

Form **8879-TE**

Department of the Treasury
Internal Revenue Service

IRS E-file Signature Authorization for a Tax Exempt Entity

For calendar year 2024, or fiscal year beginning _____ , 2024, and ending _____ , 20 ___

Do not send to the IRS. Keep for your records.
Go to www.irs.gov/Form8879TE for the latest information.

OMB No. 1545-0047

2024

Name of filer
ASPEN COMMUNITY FOUNDATION

EIN or SSN
84-0829226

Name and title of officer or person subject to tax
ERICA SNOW
EXECUTIVE DIRECTOR

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line **1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a,** or **10a** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b,** or **10b,** whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a	**Form 990** check here	☐	**b** **Total revenue,** if any (Form 990, Part VIII, column (A), line 12)	1b	
2a	**Form 990-EZ** check here	☐	**b** **Total revenue,** if any (Form 990-EZ, line 9)	2b	
3a	**Form 1120-POL** check here	☐	**b** **Total tax** (Form 1120-POL, line 22)	3b	
4a	**Form 990-PF** check here	☐	**b** **Tax based on investment income** (Form 990-PF, Part V, line 5)	4b	
5a	**Form 8868** check here	☐	**b** **Balance due** (Form 8868, line 3c)	5b	
6a	**Form 990-T** check here	☒	**b** **Total tax** (Form 990-T, Part III, line 4)	6b	0.
7a	**Form 4720** check here	☐	**b** **Total tax** (Form 4720, Part III, line 1)	7b	
8a	**Form 5227** check here	☐	**b** **FMV of assets at end of tax year** (Form 5227, Item D)	8b	
9a	**Form 5330** check here	☐	**b** **Tax due** (Form 5330, Part II, line 19)	9b	
10a	**Form 8038-CP** check here	☐	**b** **Amount of credit payment requested** (Form 8038-CP, Part III, line 22)	10b	

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that ☒ I am an officer of the above entity or ☐ I am a person subject to tax with respect to (name of entity) _____ , (EIN) _____ and that I have examined a copy of the 2024 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS **(a)** an acknowledgement of receipt or reason for rejection of the transmission, **(b)** the reason for any delay in processing the return or refund, and **(c)** the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

☒ I authorize MCMAHAN AND ASSOCIATES, L.L.C. to enter my PIN 81611

ERO firm name

Enter five numbers, but do not enter all zeros

as my signature on the tax year 2024 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2024 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax

Date 10/10/25

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. 84207081611

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2024 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163,** Modernized e-File (MeF) Information for Authorized IRS *e-file* Providers for Business Returns.

ERO's signature _____ Date _____

ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

Form **8868**
(Rev. January 2025)

Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

File a separate application for each return.
Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Part I - Identification

Type or Print	Name of exempt organization, employer, or other filer, see instructions.	Taxpayer identification number (TIN)
File by the due date for filing your return. See instructions.	ASPEN COMMUNITY FOUNDATION	84-0829226
	Number, street, and room or suite no. If a P.O. box, see instructions. 455 GOLD RIVERS COURT #515	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. BASALT, CO 81621	

Enter the Return Code for the return that this application is for (file a separate application for each return) 07

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08	Form 990-T (governmental entities)	15

- After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330.
- If this application is for an extension of time to file Form 5330, you must enter the following information.

Plan Name _____
Plan Number _____
Plan Year Ending (MM/DD/YYYY)

Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions)

The books are in the care of ASPEN COMMUNITY FOUNDATION
455 GOLD RIVERS COURT, STE. 515 - BASALT, CO 81621

Telephone No. 970-925-9300 Fax No. _____

- If the organization does not have an office or place of business in the United States, check this box ..... ☐
- If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ..... ☐. If it is for part of the group, check this box ... ☐ and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until NOVEMBER 15, 20 25, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

☒ calendar year 20 24 or

☐ tax year beginning _____, 20 _____, and ending _____, 20 _____

2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	**3a**	$	0.
b	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	**3b**	$	0.
c	**Balance due.** Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	**3c**	$	0.

For Privacy Act and Paperwork Reduction Act Notice, see instructions. Form **8868** (Rev. 1-2025)

LHA 423841 01-02-25