			** PUBLIC DISCLOSURE COPY Return of Organization Exempt Fro		ocome Tax	OMB No. 1545-0047	
Form 990		QN	•			2022	
		50	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Cod Do not enter social security numbers on this form as it m	•	• •		
	epartment of the Treasury Iternal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.					Open to Public Inspection	
AF	or th	e 2022 calenda	ar year, or tax year beginning ${\tt APR}$ 1 , 2022 and endi	ing M	AR 31, 2023		
B	heck if	C Name of	organization		D Employer identific	ation number	
	⊐Addre						
	 Name	e <u>.I.HE</u>	WOMEN'S FOUNDATION OF COLORADO		04 102020	F	
	_chang Initial	e Doing bu	usiness as		84-103930	5	
F	_return]Final	1901	and street (or P.O. box if mail is not delivered to street address) Roor EAST ASBURY AVENUE	m/suite	E Telephone number 303-285-2	960	
	⊥return termii ated		own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	6,751,368.	
	Amen return		ER, CO 80208		H(a) Is this a group ret		
	Applic		nd address of principal officer: LAUREN Y. CASTEEL		for subordinates?		
	pendi		AS C ABOVE		H(b) Are all subordinates inc	luded? Yes No	
11	ax-ex	empt status:	X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	527		st. See instructions	
	Vebsi		WFCO.ORG		H(c) Group exemption	number	
		f organization:	X Corporation Trust Association Other	L Year of	of formation: 1986 M	State of legal domicile: CO	
Pa	art I	Summary					
ė	1	Briefly describ	e the organization's mission or most significant activities: CATALYZ	ZING	COMMUNITY T	O ADVANCE	
Governance		AND ACCELERATE ECONOMIC OPPORTUNITIES FOR COLORADO WOMEN AN 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net asse					
ern	2	Check this bo	-			23	
200	3		ing members of the governing body (Part VI, line 1a)			23	
Activities & (45		ependent voting members of the governing body (Part VI, line 1b) of individuals employed in calendar year 2022 (Part V, line 2a)			15	
	6		of volunteers (estimate if necessary)		····· +	190	
	-		business revenue from Part VIII, column (C), line 12			0.	
Ă			business taxable income from Form 990-T, Part I, line 11			0.	
					Prior Year	Current Year	
đ	8	Contributions	and grants (Part VIII, line 1h)		5,617,907.	5,839,459.	
nue	9	Program servi	ce revenue (Part VIII, line 2g)		0.	0.	
Revenue	10		come (Part VIII, column (A), lines 3, 4, and 7d)		1,169,050.	821,057.	
Œ	11		(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-202,297.	-194,492.	
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		6,584,660.	6,466,024.	
	13		nilar amounts paid (Part IX, column (A), lines 1-3)		2,116,817.	2,762,112.	
	14		o or for members (Part IX, column (A), line 4)		0.	0.	
es	15	Salaries, other	compensation, employee benefits (Part IX, column (A), lines 5-10)		1,548,918.	2,077,242.	
Expenses	16a	Professional fu	Indraising fees (Part IX, column (A), line 11e) ng expenses (Part IX, column (D), line 25) 562,071.		0.	0.	
	D				631,493.	905,023.	
	17 18		es (Part IX, column (A), lines 11a-11d, 11f-24e) s. Add lines 13-17 (must equal Part IX, column (A), line 25)		4,297,228.	5,744,377.	
	19		expenses. Subtract line 18 from line 12		2,287,432.	721,647.	
۲×	15				ginning of Current Year	End of Year	
ets (20	Total assets (F	Part X, line 16)		34,098,337.	32,423,293.	
Net Assets or	21		(Part X, line 26)		542,419.	840,252.	
Net -	22		fund balances. Subtract line 21 from line 20		33,555,918.	31,583,041.	
	art II	Signature				- 	
Und	er pena	alties of perjury,	declare that I have examined this return, including accompanying schedules and	stateme	nts, 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	Signature of officer		Date					
Here		RIM CFO						
	Type or print name and title							
	Print/Type preparer's name	Preparer's signature	Date Check PTIN					
Paid	KYLE FRITCH, CPA	KYLE FRITCH, CPA	08/21/23 self-employed P01313374					
Preparer	Firm's name EIDE BAILLY LLP		Firm's EIN 45-0250958					
Use Only	Firm's address 2950 E. HARMONY R	D., STE. 290						
	FORT COLLINS, CO	80528-3429	Phone no. 970 - 223 - 8825					
May the IF	May the IRS discuss this return with the preparer shown above? See instructions X Yes No							
232001 12-13	32001 12-13-22LHAFor Paperwork Reduction Act Notice, see the separate instructions.Form 990 (2022)							

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	1990 (2022)THE WOMEN'S FOUNDATION OF COLORADO84-1039305Page 2
Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: CATALYZING COMMUNITY TO ADVANCE AND ACCELERATE ECONOMIC OPPORTUNITIES
	FOR COLORADO WOMEN AND THEIR FAMILIES.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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?
	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 \$ 1,160,825. including grants of \$ 1,028,298.) (Revenue \$)
	DONOR-DRIVEN GRANTMAKING AND PHILANTHROPY - THE WOMEN'S FOUNDATION OF
	COLORADO (WFCO) HOLDS A NUMBER OF GIVING VEHICLES THAT ASSIST
	INDIVIDUALS AND GROUPS OF INDIVIDUALS IN THEIR PHILANTHROPIC GOALS TO
	PROMOTE PHILANTHROPY BY AND FOR WOMEN. THESE FUNDS INCLUDE
	DONOR-ADVISED FUNDS, FIELD OF INTEREST FUNDS, GROUP-ADVISED FUNDS, AND
	GIVING CIRCLES. WFCO STAFF CONDUCTS DUE DILIGENCE ON EACH GRANTMAKING
	RECOMMENDATION MADE BY FUND HOLDERS WHICH IS MONITORED BY THE BOARD.
	ON OCCASION, FUND ADVISORS CO-INVEST IN WFCO'S COMMUNITY INVESTMENTS
	AND GRANT PUBLIC POLICY SUPPORT.
4b	(Code:) (Expenses \$942,827. including grants of \$674,500.) (Revenue \$)
	COMMUNITY INVESTMENTS AND GRANTS - WFCO IMPROVES ECONOMIC OUTCOMES FOR
	WOMEN AND THEIR FAMILIES THROUGHOUT COLORADO BY INVESTING IN
	ORGANIZATIONS THAT HELP WOMEN EARN LIVABLE WAGES AND ADVANCE TOWARD
	ECONOMIC SECURITY. WITH GRANTS MADE THROUGH THE WFCO ENDOWMENT AND
	SEVERAL DONOR-ADVISED FUNDS, WFCO INVESTED IN DIRECT SERVICES THAT
	PROVIDE JOB TRAINING PROGRAMS, SUPPORT FOR SECURING AND MAINTAINING
	EMPLOYMENT, AND HOLISTIC SERVICES TO MEET THE NEEDS OF WOMEN AND THEIR
	FAMILIES.
4c	(Code:) (Expenses \$620,101. including grants of \$267,600.) (Revenue \$)
	PUBLIC POLICY SUPPORT - WFCO ADVOCATES FOR PUBLIC POLICIES THAT IMPROVE
	OPPORTUNITIES FOR COLORADO WOMEN AND FAMILIES TO ACHIEVE ECONOMIC
	SECURITY BY ADDRESSING ROOT CAUSES OF POVERTY AND ADVANCING EDUCATION
	AND JOB TRAINING, ACCESS TO WORK SUPPORTS SUCH AS CHILD CARE, AND PAY
	EQUITY. IN PURSUIT OF THESE PUBLIC POLICY PRIORITIES, WFCO AWARDS
	GRANTS TO PUBLIC POLICY ORGANIZATIONS WITH ALIGNED GOALS OF SUPPORTING
	PROGRESS FOR WOMEN AND GIRLS ON THE PATH TO ECONOMIC SECURITY. WECO

ALSO EDUCATES COMMUNITY MEMBERS ABOUT OUR PUBLIC POLICY PRIORITIES AND HOW TO ENGAGE IN ADVOCACY.

40	Other program serv	vices (Describe on Scr	iedule O.)			
	(Expenses \$	1,461,328.	including grants of \$	791,714.) (Revenue\$)	
4e	Total program serv	ice expenses	4,185,081.			
10	Total program berv		=/=••/••=•			

_		
Form	990	(2022)

			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	Х	
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		<u> </u>
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		<u> </u>
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		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			37
_	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?			v
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		v	
	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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	44-	х	
L	Part VI	<u>11a</u>	<u></u>	
D	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	446		х
~	assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part VII</i> Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	11b		
C	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
Ь	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			- 21
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	х	
۵	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)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	х	
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		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b				
	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? /f "Yes,"			
	complete Schedule G, Part III	19		X
20a		20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
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	Х	

Form 990 (2022)				FOUNDA
Part IV	Checklist o	of Require	d Schedu	les	(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	Х			
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				
С	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	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):					
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			x		
	"Yes," complete Schedule L, Part IV					
b	b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV					
С	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 non-cash contributions? If "Yes," complete Schedule M	29	Х			
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		<u> </u>		
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		<u> </u>		
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		
	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		<u> </u>		
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?					
Pa	Note: All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	38	Х			
rd						
	Check if Schedule O contains a response or note to any line in this Part V					
			Yes	No		
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a14	-				
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

Form	990 (2022) THE WOMEN'S FOUNDATION OF COLORADO	84-1039	305	Р	age 5
Par	t 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 15			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	s?	2b	Х	
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 ()	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other at				
	financial account in a foreign country (such as a bank account, securities account, or other financial ac	count)?	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 Ac	counts (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 transact	ion?	5b		X
с	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 contribution	ns or gifts			
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and serve	ices provided to the payor?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	Х	
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	s required			
	to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	ntract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	ct?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file For	m 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizat	on 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.				
а	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:				
а	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:				
а	Gross income from members or shareholders	11a			
	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.				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note: See the instructions for additional information the organization must report on Schedule O.				
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			
с	Enter the amount of reserves on hand	13c			
			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule	0	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration				
	excess parachute payment(s) during the year?		15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		X
	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust or any disqualified or other person engage in any act	vitios			

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.

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Form 990 (2022)

THE WOMEN'S FOUNDATION OF COLORADO

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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
Sec	tion 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	1 a	2	3		
	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 0.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	2	3		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship			-		
2				2		x
~			t ou por vioi o p	-		+ **
3	Did the organization delegate control over management duties customarily performed by or under the		•			x
			- 6110			X
4	Did the organization make any significant changes to its governing documents since the prior Form 9			. 4		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?				
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 ap	•				1 37
	more members of the governing body?			<u>7a</u>		<u> </u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st	ockho	lders, 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	r by th	e following:			
а	The governing body?			<u>8a</u>		<u> </u>
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ched a	t the			
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O			. 9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code.)			
					Yes	
10a	Did the organization have local chapters, branches, or affiliates?			10;	1	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters	, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10)	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	/ befoi	e filing the form?	11:	a 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			12	a X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12	x x	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y					
	on Schedule O how this was done			120	x x	
13	Did the organization have a written whistleblower policy?			13		
14	Did the organization have a written document retention and destruction policy?			14		
15	Did the process for determining compensation of the following persons include a review and approva					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	-	aoponaone			
а	The organization's CEO, Executive Director, or top management official			15	X	_
	Other officers or key employees of the organization			15		x
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.				-	
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	nent M	ith a			
100				16		x
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat				a	
b	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ					
				16		
Sec	exempt status with respect to such arrangements?			16		
	~~					
17			T (1:	2) I	A	. 1. 1
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar	10 990	-1 (Section 501(C)(ons only	y avalla	ane
	for public inspection. Indicate how you made these available. Check all that apply.					
	X Own website Another's website X Upon request Other (explain		,			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	nflict o	ot interest policy, a	nd fina	ncial	
	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 boo	oks an	d records			
	JENNIFER KILPATRICK - 303-285-2960					
	1901 EAST ASBURY AVENUE, DENVER, CO 80208					

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)	(B)	(C)		(D)	(E)	(F)				
Name and title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	box, unless person is both an officer and a director/trustee)		compensation	compensation	amount of			
	week		cer an	aad	Irecto	r/trus	tee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for related	e or di	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/	from the
	organizations	rustee	n stit utio nal tru stee		ee	npen		1099-NEC)	1099-NEC)	organization and related
	below	dual ti	ıtiona		nploy	st cor yee	-	1000 NEO		organizations
	line)	Individual trustee or director	In stit u	Officer	Key employee	Highest compensated employee	Former			o.gam_anono
(1) LAUREN Y. CASTEEL	40.00									
PRESIDENT/CHIEF EXECUTIVE OFFICER				х				246,553.	Ο.	19,793.
(2) JOHN DOBEY	40.00									
CHIEF FINANCIAL OFFICER				Х				169,628.	0.	13,639.
(3) RENEE FERRUFINO	40.00									
VP OF DEVELOPMENT						X		147,557.	0.	13,271.
(4) LOUISE MYRLAND	40.00									
VP OF PROGRAMS						X		142,527.	0.	13,098.
(5) LISA CHRISTIE	40.00									
VP OF COMMUNICATIONS						X		116,043.	0.	12,220.
(6) FAYE TATE	1.00									
CHAIR		Х		Х				0.	0.	0.
(7) TANIA ZIEGLER	1.00									
SECRETARY		Х		Х				0.	0.	0.
(8) SONYA MARQUES-CORREIA	1.00									
TREASURER		Х		Х				0.	0.	0.
(9) JOYCE VIGIL	1.00									
PAST CHAIR		Х		Х				0.	0.	0.
(10) COURTNEY ALLEN-LUSSENHOP	1.00									
BOARD MEMBER		Х						0.	0.	0.
(11) DANIELLE SHOOTS	1.00									
BOARD MEMBER		Х						0.	0.	0.
(12) DEBBIE CHANDLER	1.00									
BOARD MEMBER		Х						0.	0.	0.
(13) ELIZABETH WYLIE	1.00									
BOARD MEMBER		Х						0.	0.	0.
(14) JENNIFER COTTRELL	1.00									
BOARD MEMBER		Х						0.	0.	0.
(15) GRACIE GALLEGO	1.00									
BOARD MEMBER		Х						0.	0.	0.
(16) SANDY COOK	1.00									
BOARD MEMBER		Х						0.	0.	0.
(17) GERRI GOMEZ HOWARD	1.00	l						_		_
BOARD MEMBER		Х						0.	0.	0.

Form 990 (2022) THE WOME!	N'S FOUN	IDA	TI	ON	0	F	CC	LORADO	84-1039	305	Pa	age 8
Part VII Section A. Officers, Directors, Trus	tees, Key Emp	ploy	ees,	anc	l Hig	ghes	t C	ompensated Employee	s (continued)			
(A)	(B)			_ (0				(D)	(E)		(F)	
Name and title	Average		not c		more	than o		Reportable	Reportable		imate	
	hours per week					s both pr/trus		compensation	compensation		ount	of
	(list any	or						from the	from related organizations	comp	other	tion
	hours for	· director				_		organization	(W-2/1099-MISC/	· ·	om the	
	related	se or	stee			nsate		(W-2/1099-MISC/	1099-NEC)		nizati	
	organizations	truste	al tru		yee	im per		1099-NEC)	,	-	relat	
	below	Individual trustee or	Institutional trustee	er	Key employee	est co	ner			orgar	nizatio	ons
	line)	Indiv	Insti	Officer	Key (Highest compensated employee	Former					
(18) HELEN GAIR	1.00											
BOARD MEMBER	1 00	х						0.	0.			0.
(19) RAYMOND FOXWORTH	1.00								0			0
BOARD MEMBER	1 00	Х						0.	0.			0.
(20) KATHERINE GOLD	1.00								0			0
BOARD MEMBER	1 00	Х						0.	0.			0.
(21) JULIE GROVES	1.00								0			~
BOARD MEMBER	1 00	Х						0.	0.			0.
(22) DEBBIE HAMMONS	1.00								0			^
BOARD MEMBER	1 00	Х						0.	0.			0.
(23) SHANNON JONES	1.00								0			0
BOARD MEMBER	1.00	X						0.	0.			0.
(24) RAYNARD GRAY BOARD MEMBER	1.00	x						0.	0.			Ο.
(25) ADRIENNE MANSANARES	1.00	~						0.	0.	-		0.
BOARD MEMBER	1.00	x						0.	0.			0.
(26) SUE SHARKEY	1.00							0.	0.	+		<u> </u>
BOARD MEMBER	1.00	x						0.	0.			0.
th Subtatal								822,308.	0.	72	. 03	21.
c Total from continuation sheets to Part VI	I Section A						•	0.	0.	+	,	0.
<u>d</u> Total (add lines 1b and 1c)								822,308.	0.	72	. 02	21.
2 Total number of individuals (including but n											1.	
compensation from the organization		000		u un		,	0.10	, contou more than ¢roe,				5
compensation non the organization											Yes	No
3 Did the organization list any former officer,	director, truste	ee. k	ev e	Iame	ove	e. or	hia	hest compensated emp	lovee on			
line 1a? If "Yes," complete Schedule J for s			•	•	-		Ŭ	• •	•	3		Х
4 For any individual listed on line 1a, is the su												
and related organizations greater than \$150	-		-						-	4	X	
5 Did any person listed on line 1a receive or a												
rendered to the organization? If "Yes." com	plete Schedule	e J fo	or sı	ich i	oers	on .				5		Х
Section B. Independent Contractors	•											
1 Complete this table for your five highest co	mpensated ind	lepe	nder	nt co	ontra	actor	's th	nat received more than \$	100,000 of compensa	ation from	m	
the organization. Report compensation for	the calendar ye	ear e	ndir	ng w	ith c	or wi	thin	the organization's tax y	ear.			
(A)				_				(B)		(C)		
Name and business	address	NC	ONE	C				Description of s	ervices (Compen	satio	n
							_					
							\dashv					
							\dashv					
2 Total number of independent contractors (ii	ncluding but p	ot lin	niter	t to t	thos	se lie	ted	above) who received mo	ore than			
\$100,000 of componsation from the organi	•	. m			((

Form 990 THE WOME	N'S FOUN	IDA	TI	ON	0	F	CO	LORADO	84-103	9305
							est ([
(A) Name and title	(B) Average hours per	(C) Position (check all that apply)		(D) Reportable compensation from	(E) Reportable compensation	(F) Estimated amount of other				
	week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(27) KATHERINE ROSECHILD BOARD MEMBER	1.00	x						0.	0.	0.
(28) TARA SMITH	1.00	^						0.	0.	0.
BOARD MEMBER		x						0.	0.	0.
		-								
		-								
		-								
		-								
		-								
Total to Part VII, Section A, line 1c		<u></u>					<u></u>			

Forn	n 990 ((2022) THE	WOMEN'S	FOUNDATION	N OF COLOR	ADO	84-1039	305 Page 9
Pa	rt VII	I Statement of Rev	venue					
		Check if Schedule O c	contains a respon	se or note to any lin	(
					(A) Total revenue	(B) Related or exempt	(C) Unrelated	(D) Revenue excluded
					rotal revenue		business revenue	
								sections 512 - 514
ts t	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b					
و م م	с	Fundraising events	1c	1,005,692.				
ar /	d	Related organizations	1d					
n, Dila	е	Government grants (contri						
ŝ	f	All other contributions, gifts,						
but		similar amounts not included		4,833,767.				
ē	g			174,078.				
Sor	h	Total. Add lines 1a-1f			5,839,459.			
				Business Code				
Ø	2 a							
vic	b							
Ser	c							
Ē	d							
gra Re	u 0			_				
Program Service Revenue	f	All other program service	revenue	_				
_	a							
	3	Investment income (includ						
	Ŭ				820,394.			820,394.
	4	Income from investment o		d proceeds	010,0010			010,0010
	5	Royalties	-	-				
	5	noyanies	(i) Real	(ii) Personal				
	6 a	Gross rents	6a	(
	U a h		6b					
	U O	Less: rental expenses Rental income or (loss)	60 60					
	с с	· · · ·						
		Net rental income or (loss)	(i) Securitie	es (ii) Other				
	/ a	Gross amount from sales of						
		assets other than inventory	7a 66.	J•				
•	a	Less: cost or other basis		b .				
venue		and sales expenses	7b 7c 66					
		Gain or (loss)	· · · ·		663.			663.
r B		Net gain or (loss)			003.			005.
Other	8 a	Gross income from fundraisin						
0		including \$ 1,005						
		contributions reported on	-	- 00 025				
		Part IV, line 18		8a 90,025.				
		Less: direct expenses	••••••	<u>в</u> 285,344.	105 210			105 210
		Net income or (loss) from t	ů ľ	s	-195,319.			-195,319.
	9 a	Gross income from gamin	-					
		Part IV, line 19		9a				
		Less: direct expenses	•••••••	9b				
		Net income or (loss) from	1					
	10 a	Gross sales of inventory, l						
		and allowances		10a				
		Less: cost of goods sold		10b				
	С	Net income or (loss) from	sales of inventory					
s		MT CODT T ANDOUS		Business Code	0.07			0.07
Miscellaneous Revenue	11 a			900099	827.			827.
jan ent	b							<u> </u>
Sel	С			_				
Mis	d	All other revenue			0.07			
		Total. Add lines 11a-11d			827. 6,466,024.		0	626 565
	12	Total revenue. See instructio	ons		0,400,024.	0.	J U.	626,565.

THE WOMEN'S FOUNDATION OF COLORADO 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).

0000	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respons				
Doı	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	2,762,112.	2,762,112.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
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	507,735.	218,250.	227,342.	62,143.
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	1,328,256.	697,128.	354,247.	276,881.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	109,575.	57,813.	25,535.	26,227.
10	Payroll taxes	131,676.	67,123.	40,453.	24,100.
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
с	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	89,322.		89,322.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)	295,943.	150,599.	111,821.	33,523.
12	Advertising and promotion	16,881.	8,854.	4,836.	3,191.
13	Office expenses	40,375.	11,945.	25,621.	2,809.
14	Information technology	140,540.	91,718.	33,528.	15,294.
15	Royalties				
16	Occupancy	77,883.	39,005.	24,280.	14,598.
17	Travel	81,641.	46,861.	29,260.	5,520.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
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 0.)				
а	LOSS ON UNCOLLECTIBLE P	91,020.			91,020.
b					
С					
d					
е	All other expenses	71,418.	33,673.	30,980.	6,765.
25	Total functional expenses. Add lines 1 through 24e	5,744,377.	4,185,081.	997,225.	562,071.
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)				000

THE	WOMEN	' S	FOUNDATION	OF	COLORADO
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		Check if Schedule O contains a response or not	e to any	/ line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			111,920.	2	56,639.
	3	Pledges and grants receivable, net			532,385.	3	386,618.
	4	Accounts receivable, net			326,610.	4	289,471.
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes				5	
	6	Loans and other receivables from other disqualif					
		under section 4958(f)(1)), and persons described				6	
s	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
As	9	_			84,264.	9	78,302.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	67,680. 56,121.			
	b	Less: accumulated depreciation		56,121.	18,623.	10c	11,559.
	11	Investments - publicly traded securities			30,668,416.	11	28,564,897.
	12	Investments - other securities. See Part IV, line 1				12	660,505.
	13	Investments - program-related. See Part IV, line 1	11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			2,356,119.	15	2,375,302.
	16	Total assets. Add lines 1 through 15 (must equa			34,098,337.	16	32,423,293.
	17	Accounts payable and accrued expenses			331,494.	17	680,762.
	18	Grants payable			10,925.	18	59,490.
	19	Deferred revenue			200,000.	19	100,000.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete F	Part IV o	of Schedule D		21	
ŝ	22	Loans and other payables to any current or form	er offic	er, director,			
Liabilities		trustee, key employee, creator or founder, substa	antial c	ontributor, or 35%			
iab		controlled entity or family member of any of thes				22	
-	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines	17-24)	. Complete Part X			
		of Schedule D		······ -		25	040 050
	26			v	542,419.	26	840,252.
s		Organizations that follow FASB ASC 958, che	ck here	e X			
JCe		and complete lines 27, 28, 32, and 33.			17 502 520		16 020 260
alaı	27			<u>17,582,539</u> . 15,973,379.	27	16,828,269. 14,754,772.	
d B	28	Net assets with donor restrictions			15,915,519.	28	14,134,112.
'n		Organizations that do not follow FASB ASC 95	58, cne				
Net Assets or Fund Balances	20	and complete lines 29 through 33.				20	
ets	29 20	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or eq				29 30	
Ass	30 31					<u> </u>	
et∤	31	Retained earnings, endowment, accumulated inc			33,555,918.	31	31,583,041.
Ž	32 33	Total net assets or fund balances		····· -	34,098,337.	 33	32,423,293.
	00	I UTAL MADINITIES AND HEL ASSELS/ MINU DAIAI ICES				00	

Form **990** (2022)

Form 990 (2022) THE Part X Balance Sheet

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_	1990 (2022) THE WOMEN'S FOUNDATION OF COLORADO	84-1	039305	Pag	_{ge} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,466		
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,744		
3	Revenue less expenses. Subtract line 2 from line 1	3			<u>47.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	33,555		
5	Net unrealized gains (losses) on investments	5	-2,694	1,5	24.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	31,583	3,04	<u>41.</u>
Pa	rt 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 X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.			
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	Х	
	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:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				1
	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	red audit			_
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits				
				000	

Form **990** (2022)

Department of the Treasury

Name of the organization

Internal Revenue Service

(Form 990)

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
2022
Open to Public Inspection

Employer identification number

84-1039305

THE WOMEN'S FOUNDATION OF COLORADO Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I 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).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.)

A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6

7 🛛	Ζ	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.)

A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8

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.

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving а 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.

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having b 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.

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, С its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d 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.

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	n about the supporte	d organization(s).				
(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi	inization listed ng document?	(v) Amount of monetary	(vi) Amount of other
organization		above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
Total						

THE WOMEN'S FOUNDATION OF COLORADO

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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	3195106.	3621245.	6060843.	5617907.	5839459.	24334560.
2	Tax revenues levied for the organ-						
	ization'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	3195106.	3621245.	6060843.	5617907.	5839459.	24334560.
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)						5251073.
	Public support. Subtract line 5 from line 4.						19083487.
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total 24334560.
	Amounts from line 4	3195106.	3621245.	6060843.	5617907.	5839459.	24334560.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,		700 200		1100400	000 004	4000100
	and income from similar sources	753,711.	720,396.	554,196.	1173423.	820,394.	4022120.
9	Net income from unrelated business						
	activities, whether or not the			0 511			
	business is regularly carried on			9,511.			9,511.
10	Other income. Do not include gain						
	or loss from the sale of capital			1 222	242	0.07	
	assets (Explain in Part VI.)			1,333.	342.	827.	<u>2,502.</u> 28368693.
	Total support. Add lines 7 through 10		<u>}</u>				20300093.
12		•	,				
13	First 5 years. If the Form 990 is for th	-		-			
500	organization, check this box and stor ction C. Computation of Publi	o nere o Support Der	contago				······ L
			-	olumn (f))		14	67.27 %
	Public support percentage for 2022 (I Public support percentage from 2021					15	<u>67.27</u> % 70.82%
	33 1/3% support test - 2022. If the c						
104	stop here. The organization qualifies						V
h	33 1/3% support test - 2021. If the c		•				
~	and stop here. The organization qual						
17 a	10% -facts-and-circumstances test				13, 16a, or 16b, a		
.74	and if the organization meets the fact						
	meets the facts-and-circumstances te			-	-	vine organiz	
b	10% -facts-and-circumstances test	-		• • • •	•		
~	more, and if the organization meets th						
	organization meets the facts-and-circu						
18	Private foundation. If the organization		•				s
						Schedule A	(Form 990) 2022

THE WOMEN'S FOUNDATION OF COLORADO 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) 2018	(b) 2019	(c) 2020	(d) 2021	(e)	2022	(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 per- formed, 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 bus- iness under section 513							
4 Tax revenues levied for the organ- ization'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) 2018	(b) 2019	(c) 2020	(d) 2021	(e)	2022	(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.)		l	fourth an fifth to		1		
14 First 5 years. If the Form 990 is for the check this box and stop here	U U					·	·
Section C. Computation of Pub	lic Support Per	rcentage					
15 Public support percentage for 2022	(line 8, column (f), c	livided by line 13, o	column (f))		15		%
16 Public support percentage from 202	1 Schedule A, Part	III, line 15			16		%
Section D. Computation of Inve							
17 Investment income percentage for 2	022 (line 10c. colu	mn (f), divided by li	ne 13. column (f))		17		%
18 Investment income percentage from		'			18		%
19a 33 1/3% support tests - 2022. If th					<u> </u>	and line 1	
more than 33 1/3%, check this box a							
b 33 1/3% support tests - 2021. If th	e organization did r	not check a box on	line 14 or line 19a	a, and line 16 is mo	ore than	33 1/3%, a	nd
line 18 is not more than 33 1/3%, ch	eck this box and s t	t op here. The orga	nization qualifies a	as a publicly suppo	orted org	ganization	
20 Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check th	his box and see ins	struction	s	

1

2

3a

Yes

No

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

- 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.
- 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).
- **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.
- **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.
- 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.
- **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.
- **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.*
- **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.*
- 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).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.**
- 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).
- 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).*
- **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.**
- **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.**
- 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.**
- **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.*
 - **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.)

Schedule A (Form 990) 2022 THE WOMEN'S FOUNDATION OF COLORADO

Pa	t IV Supporting Organizations (continued)		
		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
а	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?		
b	A family member of a person described on line 11a above?		
с	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.		
Sec	tion 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? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>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, or trustees were allocated among the</i>		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2	Did the organization operate for the benefit of any supported organization other than the supported		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in		
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		
	supervised, or controlled the supporting organization. 2		
Sec	tion 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).		
Sec	tion 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		
	very (ii) a convert the Form 000 that was most report villed on of the data of patification, and (iii) conice of the		

1	Did the organization provide to each of its supported organizations, by the last day of the lifth 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	

supported organizations played in this regard. Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method	that the organization used to	o satisfy the Integral Part	Test during the year	(see instructions).
-				rest during the year	(000

a The organization satisfied the Activities Test. Complete line 2 below.

b		The organization	is the parent of e	each of its supported	d organizations.	Complete line 3 below.
---	--	------------------	--------------------	-----------------------	------------------	------------------------

с] The organization supported a g	governmental entity.	Describe in Part VI how w	vou supported a governmenta	l entity (see instructions).
---	--	----------------------------------	----------------------	---------------------------	-----------------------------	------------------------------

- 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.
- 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.*
- 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.**
- **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.*

Yes No

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 mus	t complete :	Sections A through E.	1	
Sect	ion 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			
Sect	ion 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):				
<u>a</u>	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			
е	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			
Sect	ion 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).

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

6

Schedule A (Form 990) 2022

2022			FOUNDATION		
Non-Function	onally	Integrated 5	09(a)(3) Supportii	ng O	rganizations

Schedule A		
Part V	Type III	Non-I

_		OUNDATION OF CO	
	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations (continue
	on D - Distributions		
1	Amounts paid to supported organizations to accomplish exer		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported	
	organizations, in excess of income from activity		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	<u>}</u>
4	Amounts paid to acquire exempt-use assets	-	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)	
6	Other distributions (<i>describe in</i> Part VI). See instructions.		
7	Total annual distributions. Add lines 1 through 6.		
8	Distributions to attentive supported organizations to which the	e organization is responsive	
	(provide details in Part VI). See instructions.		
9	Distributable amount for 2022 from Section C, line 6		
10	Line 8 amount divided by line 9 amount	~	
Sect	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022
1	Distributable amount for 2022 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2022 (reason-		
	able cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2022		
а	From 2017		
b	From 2018		
с	From 2019		
d	From 2020		
е	From 2021		
4	Total of lines 20 through 20		

_1	Distributable amount for 2022 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2022 (reason-		
	able cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2022		
а	From 2017		
b	From 2018		
с	From 2019		
d	From 2020		
e	From 2021		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2022 distributable amount		
i	Carryover from 2017 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2022 from Section D,		
	line 7: \$		
а	Applied to underdistributions of prior years		
b	Applied to 2022 distributable amount		
C	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2022, 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 2022. Subtract lines 3h		
	and 4b from line 1. For result greater than zero, explain in		
	Part VI. See instructions.		
7	Excess distributions carryover to 2023. Add lines 3j		
	and 4c.		
8	Breakdown of line 7:		
a	Excess from 2018		
b	Excess from 2019		
C	Excess from 2020		
d	Excess from 2021		
е	Excess from 2022		
		Sc	hedule A (Form 990) 2022

ontinued)

1

8 9 10 Current Year

(iii) Distributable Amount for 2022

Schedule A	(Form 990) 2022	THE V	VOMEN'S	FOUNDA	ATION O	F COLORA	.DO	84-1039305	Page 8
Part VI	Supplemental Inform Part IV, Section A, lines 1, line 1; Part IV, Section D, Section D, lines 5, 6, and (See instructions.)	mation. 2, 3b, 3c, lines 2 and	Provide the e: 4b, 4c, 5a, 6, 3; Part IV, Se	xplanations r 9a, 9b, 9c, 1 ction E, lines	equired by Pa 1a, 11b, and 1c, 2a, 2b, 3	art II, line 10; Pa 11c; Part IV, Se a, and 3b; Part	art II, line 17a or 1 ection B, lines 1 a V, line 1; Part V,	7b; Part III, line 12; and 2; Part IV, Sectio Section B, line 1e; P	n C,

223451 11-15-22

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

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

2022

Employer identification number

	THE WOMEN'S FOUNDATION OF COLORADO	84-1039305
Organization type (che	eck one):	
Filers of:	Section:	
Form 990 or 990-EZ	\fbox{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 for an *exclusively* set is the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set is the set in the set in the set is the set in the set is the set in the set in the set is the set is the set in the set is the set in the set is the set is the set in the set is the set in the set is t

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).

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

Schedule B (Form 990) (2022)

(a)

No.

<u> 1 </u>		\$ <u>250,000.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ <u>1,237,300.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>250,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$700,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$250,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$125,300 .	Person X Payroll Noncash (Complete Part II for noncash contributions.)

THE WOMEN'S FOUNDATION OF COLORADO

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

(b)

Name, address, and ZIP + 4

Employer identification number

84-1039305

(d)

Type of contribution

(c)

Total contributions

No.	Name, address, and ZIP + 4	Total contributions
-		\$
_		
(a)	(b)	(c)
No.	Name, address, and ZIP + 4	Total contributions
-		
-		\$
_		
(a)	(b)	(c)
No.	Name, address, and ZIP + 4	Total contributions
-		
-		\$
-		
(a)	(b)	(c)
No.	Name, address, and ZIP + 4	Total contributions
		•
-		\$
-		
(a)	(b)	(c)
No.	Name, address, and ZIP + 4	Total contributions
_		
-		\$

THE WOMEN'S FOUNDATION OF COLORADO

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

(b)

Name, address, and ZIP + 4

(b)

Employer identification number

Person Payroll

Noncash

Person Payroll Payroll Poncash (Complete Part II for noncash contributions.)

Person Payroll October Payroll October Payrol October Part II for noncash contributions.)

Person Payroll Payroll Occupient Payrol Payroll Payrol Pay

Person Payroll October Payroll October Payrol October Part II for noncash contributions.)

Person Payroll Payroll (Complete Part II for

(Complete Part II for noncash contributions.)

(d)

Type of contribution

(d) Type of contribution

(d)

Type of contribution

(d)

Type of contribution

(d) Type of contribution

(d)

Type of contribution

X

84-1039305

(c)

Total contributions

(c)

\$

154,000.

Schedule B (Form 990) (2022)

Name of organization

Part I

(a)

No.

(a)

7

Page 2

	ganization	
Part II	Noncash Property (see instructions). Use duplicate copies of Part II i	f additional space is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.)
		-
		_ \$
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.)

		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Employer identification number

(d)

Date received

84-1039305

Schedule B (Form 990) (2022)

Schedule	B (Form 990) (2022)		Page 4				
Name of o	rganization		Employer identification number				
THE W	OMEN'S FOUNDATION OF CO	LORADO	84-1039305				
Part III	Exclusively religious, charitable, etc., contributi from any one contributor. Complete columns (a)	ons to organizations described in section through (e) and the following line entry. F charitable, etc., contributions of \$1,000 or less	n 501(c)(7), (8), or (10) that total more than \$1,000 for the year				
(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, a	nd 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, a	nd 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, a	nd 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, a	nd ZIP + 4	Relationship of transferor to transferee				

SCHEDULE C	SCHEDULE C Political Campaign and Lobbying Activities					OMB No. 1545-0047		
(Form 990)	For Org	anizations Exempt From Income	Tax Under section 5	01(c) and section 5	27	2022		
Department of the Treasury Internal Revenue Service	nt of the Treasury Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.							
-	-	ı Form 990, Part IV, line 3, or Forı		e 46 (Political Camp	baign A	ctivities), then		
.,.,	 Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C. Section 501(c) (attention section 501(c)(0)) preprinting of complete Parts I-A and C halow. Do not complete Part I-B. 							
	 Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B. Section 527 organizations: Complete Part I-A only. 							
0		Form 990, Part IV, line 4, or Form	n 990-EZ, Part VI, lin	e 47 (Lobbying Act	ivities),	then		
	•	nave filed Form 5768 (election unde	()/	•		•		
	•	nave NOT filed Form 5768 (electior Form 990, Part IV, line 5 (Proxy)				•		
Tax) (See separate inst		r ronni 990, Part IV, inie 5 (Proxy	rax) (See Separate III		1990-E	Z, Part V, line SSC (Proxy		
), or (6) organizat	ions: Complete Part III.						
Name of organization					Emplo	yer identification number		
Part I-A Comple		EN'S FOUNDATION OB anization is exempt under		r is a section 5	27 ora	84-1039305 anization		
1 Provide a description	on of the organiz	ation's direct and indirect political	campaign activities in	Part IV.				
2 Political campaign	, ,				\$_			
3 Volunteer hours for	political campai	gn activities						
Part I-B Comple	ete if the org	anization is exempt under	section 501(c)(3).				
1 Enter the amount o	f any excise tax	incurred by the organization under	section 4955		\$			
		incurred by organization managers			\$_			
		n 4955 tax, did it file Form 4720 fo						
b If "Yes," describe in						Yes No		
Part I-C Comple	ete if the org	anization is exempt under	section 501(c), e	except section	501(c)	(3).		
1 Enter the amount d	lirectly expended	by the filing organization for section	on 527 exempt functio	on activities	\$			
	00	ization's funds contributed to othe	•		•			
		. Add lines 1 and 2. Enter here and			\$_			
			,		\$			
						Yes No		
made payments. For contributions received	or each organiza ved that were pro	nployer identification number (EIN) tion listed, enter the amount paid f pomptly and directly delivered to a s additional space is needed, provide	rom the filing organiza eparate political orgar	tion's funds. Also en nization, such as a s	nter the	amount of political		
(a) Name		(b) Address	(c) EIN	(d) Amount paid	from	(e) Amount of political		
				filing organization funds. If none, ent	on's	contributions received and promptly and directly delivered to a separate political organization. If none, enter -0		

Schedule C (Form 990) 2022	THE WOMEN'S	5 FOUNDATION	OF COLORADO	84-1	039305 Page 2		
Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under							
section 501(h)).							
	-	filiated group (and list in	Part IV each affiliated	group member's name	e, address, EIN,		
	re of excess lobbying	• •					
B Check if the filing organiza	tion checked box A a	and "limited control" pro	ovisions apply.	(a) Filing	(b) Affiliated group		
	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)						
1a Total lobbying expenditures to influ	uence public opinion	(grassroots lobbving)		76,135.			
b Total lobbying expenditures to influ				81,194.			
c Total lobbying expenditures (add li				157,329.			
d Other exempt purpose expenditure				5,497,726.			
e Total exempt purpose expenditure				5,655,055.			
f_Lobbying nontaxable amount. Ente	er the amount from th	e following table in both	n columns.	432,753.			
If the amount on line 1e, column (a) o	or (b) is: The lo	bbying nontaxable am	ount is:				
Not over \$500,000	20% oʻ	f the amount on line 1e.					
Over \$500,000 but not over \$1,000	<u>,000 \$100,0</u>	00 plus 15% of the exc	ess over \$500,000.				
Over \$1,000,000 but not over \$1,5	00,000 \$175,0	000 plus 10% of the exc	ess over \$1,000,000.				
Over \$1,500,000 but not over \$17,	000,000 \$225,0	00 plus 5% of the exce	ss over \$1,500,000.				
Over \$17,000,000	\$1,000	,000.					
g Grassroots nontaxable amount (en	ter 25% of line 1f)			108,188.			
h Subtract line 1g from line 1a. If zer	o or less, enter -0-			0.			
i Subtract line 1f from line 1c. If zero				0.			
j If there is an amount other than ze	ro on either line 1h oi	line 1i, did the organiza	ation file Form 4720	-			
reporting section 4911 tax for this					Yes No		
(Some organizations t	hat made a section	veraging Period Under 501(h) election do not l rate instructions for lir	have to complete all o	f the five columns be	low.		
	Lobbying Expe	enditures During 4-Yea	ar Averaging Period				
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total		
2a Lobbying nontaxable amount	315,074	. 360,687.	360,839.	432,753.	1,469,353.		
 b Lobbying ceiling amount (150% of line 2a, column(e)) 					2,204,030.		
c Total lobbying expenditures	138,872	116,432.	109,145.	157,329.	521,778.		
d Grassroots nontaxable amount	78,769	90,172.	90,210.	108,188.	367,339.		
 Grassroots ceiling amount (150% of line 2d, column (e)) 					551,009.		

43,608.

53,230.

69,235.

Schedule C (Form 990) 2022

242,208.

76,135.

f Grassroots lobbying expenditures

Schedule C (Form 990) 2022 THE WOMEN'S FOUNDATION OF COLORADO 84-10393 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(8	a)	(t	b)
	lobbying activity.	Yes	No	Amo	ount
1 a	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?			[
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities? Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)(ō), or sec	tion	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
_	t III-B Complete if the organization is exempt under section 501(c)(4), section	on 501(c)(b), or sec	tion	1
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	"No" OR	(b) Part I	II-A, line	3, is
	answered "Yes."				
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b	Carryover from last year				
	Total				
3	A sum where the second state (2000) (λ (4)(4) (A) is a bias of the second state of (200) (b) is a second state of (200) (c) is a second state of (200) (c) is a secon				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p				
	expenditures next year?		4		
5	Taxable amount of lobbying and political expenditures. See instructions		5		
Par	t IV Supplemental Information				
Provi	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-	A, lines 1 a	nd 2 (See	
	ctions); and Part II-B, line 1. Also, complete this part for any additional information.				
SCH	EDULE C, PART II-A, LINE 1C:				
LOE	BYING EXPENSES REPORTED ON SCHEDULE C, PART II-A, B	LINE 10	CARE	MADE U	JP
OF	ALLOCATED COSTS FROM SEVERAL OF THE ORGANIZATION'S	OPERAT	IONAL	EXPEN	ISE
CAT	EGORIES. THEREFORE, THE TOTAL LOBBYING EXPENSE RE	PORTED	ON SC	HEDULE	C,
PAF	T II-A, LINE 1C DOES NOT SHOW UP ON THE STATEMENT (OF FUNC	TIONA	L	
EXI	PENSES ON FORM 990, PART IX, LINE 11D.				

SCHEDULE D)
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(Form	990)
-------	------

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

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	THE WOMEN'S FOUNDA	TION OF COLORADO	84-1039305
Pa	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds or A	ccounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	ne 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	67	13
2	Aggregate value of contributions to (during year)	807,740.	271,716.
3	Aggregate value of grants from (during year)	806,700.	158,928.
4	Aggregate value at end of year		1,316,526.
5	Did the organization inform all donors and donor advisors in		
	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor o		
	impermissible private benefit?		×
Pa			
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (for example, recrea	· · · · · ·	orically important land area
	Protection of natural habitat		tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualit	fied conservation contribution in the form of a co	onservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	- · · · · · · · · · ·		2b
с	Number of conservation easements on a certified historic stru		2c
d	Number of conservation easements included in (c) acquired a		
		, , ,	2d
3	Number of conservation easements modified, transferred, rel		
	year	, , , , , ,	5
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements it		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation ea	asements during the year
			C <i>i</i>
8	Does each conservation easement reported on line 2(d) abov	ve satisfy the requirements of section 170(h)(4)(B	B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation		nent and
	balance sheet, and include, if applicable, the text of the footr	-	
	organization's accounting for conservation easements.		
Pa	t III Organizations Maintaining Collections of	f Art, Historical Treasures, or Other S	Similar Assets.
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement and ba	lance sheet works
	of art, historical treasures, or other similar assets held for put	blic exhibition, education, or research in furthera	nce of public
	service, provide in Part XIII the text of the footnote to its finar	ncial statements that describes these items.	
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue statement and balanc	e sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furtheranc	e of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		\$
			•
2	If the organization received or held works of art, historical tre		provide
-	the following amounts required to be reported under FASB A		
а	Revenue included on Form 990, Part VIII, line 1	-	\$
	Assets included in Form 990. Part X		\$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 232051 09-01-22

Schedule D (Form 990) 2022

Sche Par		EN'S FOUNDA				har		84-10			age 2
Fai									(contin	ued)	
3	Using the organization's acquisition, accession	on, and other records	, check a	ny of the f	ollowing that mal	ke sign	ificant ι	ise of its			
	collection items (check all that apply):										
а	Public exhibition	d		oan or excl	nange program						
b	Scholarly research	е	U Ot	ther							
С	Preservation for future generations										
4	Provide a description of the organization's co	llections and explain	how they	further th	e organization's o	exempt	t purpos	se in Part i	XIII.		
5	During the year, did the organization solicit o	r receive donations o	f art, histo	orical treas	ures, or other sin	nilar as	sets				
	to be sold to raise funds rather than to be ma	aintained as part of th	e organiza	ation's col	lection?				Yes		No
Par	t IV Escrow and Custodial Arrang		te if the o	rganizatio	n answered "Yes	" on Fo	orm 990	, Part IV, I	ine 9, or		
	reported an amount on Form 990, Par										
1a	Is the organization an agent, trustee, custodi								-		-
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the foll	owing tab	ole:							
									Amount		
С	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on Fo						?		Yes		No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the exp	planation I	has been p	provided on Part	XIII .					
Par	t V Endowment Funds. Complete i	f the organization and	swered "Y	es" on Fo	rm 990, Part IV, I	ine 10.					
		(a) Current year	(b) Pric	or year	(c) Two years ba	ck (d)) Three y	ears back	(e) Four	years	back
1a	Beginning of year balance	19,490,371.	19,8	02,809.	15,062,74	6.	17,3	45,972.	17,	366,	579.
	Contributions	1,300,560.		1,000.	305,36	0.		90,328.		459,	139.
	Net investment earnings, gains, and losses	-1,133,961.	5	31,079.	5,342,58		-1,6	44,114.		584,	962.
	Grants or scholarships	695,837.	7	49,917.	757,98						
	Other expenditures for facilities	,		,							
•				50,000.	111,78	7.	7	29,440.	1	064,	708.
f	Administrative expenses	39,509.		44,600.	38,11				,		
, ,		18,921,624.		90,371.	-		15 0	62,746.	17	345,	972
2	Provide the estimated percentage of the curr			-		- •	,-	-,	,	,	
		33.7800		column (a)) field as.						
	Board designated or quasi-endowment Permanent endowment 56.3500		_%								
	0 0 0 0 0 0 0	%									
с		%									
•	The percentages on lines 2a, 2b, and 2c show										
за	Are there endowment funds not in the posse	ssion of the organizat	tion that a	ire held an	d administered fo	or the			ſ	Yes	Ne
	organization by:									res	No
	(i) Unrelated organizations								3a(i)		X
	(ii) Related organizations								3a(ii)		X
b	If "Yes" on line 3a(ii), are the related organiza								3b		
4	Describe in Part XIII the intended uses of the		vment fun	ids.							
Par	t VI Land, Buildings, and Equipm										
	Complete if the organization answered	d "Yes" on Form 990,	, Part IV, li	ine 11a. S	ee Form 990, Pai	t X, lin	e 10.				
	Description of property	(a) Cost or ot basis (investm		(b) Cost basis (umulate eciation	ed	(d) Bool	k valu	e
1a	Land										
	Buildings										
	Leasehold improvements										
	Equipment				7,455.	5	56,12	21.		L,3:	34.
	Other		İ		0,225.),2	
	. Add lines 1a through 1e. (Column (d) must e		(column		· · ·					L, 5!	
		gaari onn ooo, i all /									

Schedule D (Form 990) 2022

Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1b. 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	r market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1		
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year	r market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"			
	Description	-	o) Book value
(1) INVESTMENT IN BUILDING		2	<u>2,235,000.</u>
(2) DEPOSITS			74,652.
(3) CASH SURRENDER VALUE OF L	IFE INSURANCE		65,650.
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15.)	2	2,375,302.
Part X Other Liabilities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability		(t	o) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25)		

THE WOMEN'S FOUNDATION OF COLORADO

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

X

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Schedule D (Form 990) 2022

	dule D (Form 990) 2022 THE WOMEN'S FOUNDATION OF		-			1039305	Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Stateme		h Revenu	ie per Re	turn.		
	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	3,709	,708.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:						
а	Net unrealized gains (losses) on investments		-2,69	4,524.			
b	Donated services and use of facilities	2 b	1	1,750.			
С	Recoveries of prior year grants	2c					
d	Other (Describe in Part XIII.)	2d					
е	Add lines 2a through 2d				2e	-2,682 6,392	<u>,774.</u>
3	Subtract line 2e from line 1				3	6,392	,482.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:						
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a		9,322.			
b	Other (Describe in Part XIII.)	4b	-1	5,780.			
	Add lines 4a and 4b				4c		,542.
С	Add lines 4a and 4b						
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)				5		,024.
5	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 12.</i>) rt XII Reconciliation of Expenses per Audited Financial Statemo						,024.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)	ents Wi				n.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)	ents Wi	ith Expen	ses per F		n.	,024. ,585.
5 Pa	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 12.</i>) t XII Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ents Wi	ith Expen	ses per F	Retur	n.	
5 Pa	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	ents Wi	ith Expen	ses per F	Retur	n.	
5 Par 1 2	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) t XII Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	ents Wi	ith Expen	ses per F	Retur	n.	
5 Pa 1 2 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) t XII Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	ents W	ith Expen	ses per F	Retur	n.	
5 Pa 1 2 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) rt XII Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	ents W	ith Expen	ses per F	Retur	n.	
5 Par 1 2 a b c d	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Other (Describe in Part XIII.)	ents W	ith Expen	ses per F	Retur	n. <u>5,682</u> 27	<u>,585.</u>
5 Par 1 2 a b c d	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	ents Wi 2a 2b 2c 2d	ith Expen	ses per F	1	n. <u>5,682</u> 27	,585.
5 Par 1 2 a b c d e	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Other (Describe in Part XIII.)	ents Wi 2a 2b 2c 2d	ith Expen	ses per F	1 2e	n. <u>5,682</u> 27	<u>,585.</u>
5 Par 1 2 a b c d e 3	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) t XII Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	ents Wi	ith Expen	ses per F	1 2e	n. <u>5,682</u> 27	<u>,585.</u>
5 Pa 1 2 a b c d e 3 4	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statemen Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	ents Wi 2a 2b 2c 2d	ith Expen	ses per F	1 2e	n. <u>5,682</u> 27	<u>,585.</u>
5 Pa 1 2 a b c d e 3 4 a b	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) t XII Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	ents Wi 2a 2b 2c 2d 4a 4b	ith Expen	ses per F	1 2e	n. 5,682 27 5,655 89	,585. ,530. ,055.
5 Pa 1 2 a b c d e 3 4 a b c 5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statements Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	ents Wi 2a 2b 2c 2d 4a 4b	ith Expen	ses per F	2e 3	n. 5,682 27 5,655 89	<u>,585.</u> <u>,530.</u> ,055.

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 V, LINE 4:

THE FOUNDATION'S ENDOWMENT (THE ENDOWMENT) CONSISTS OF NINE INDIVIDUAL

FUNDS ESTABLISHED AND RESTRICTED BY DONORS TO PROVIDE ANNUAL FUNDING FOR

SPECIFIC ACTIVITIES. THE ENDOWMENT ALSO INCLUDES CERTAIN NET ASSETS

WITHOUT DONOR RESTRICTIONS DESIGNATED FOR ENDOWMENT BY THE BOARD OF

TRUSTEES.

PART X, LINE 2:

THE FOUNDATION IS ORGANIZED AS COLORADO NONPROFIT CORPORATION AND HAS BEEN

RECOGNIZED BY THE INTERNAL REVENUE SERVICE (IRS) AS EXEMPT FROM FEDERAL

INCOME TAXES UNDER SECTION 501(A) OF THE INTERNAL REVENUE CODE AS

ORGANIZATIONS DESCRIBED IN SECTION 501(C)(3). THE FOUNDATION HAS BEEN

 Schedule D (Form 990) 2022
 THE WOMEN'S FOUNDATION OF COLORADO
 84-1039305 Page 5

 Part XIII
 Supplemental Information (continued)
 DETERMINED TO NOT BE A PRIVATE FOUNDATION. THE FOUNDATION IS ANNUALLY

 REQUIRED TO FILE A RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX (FORM

 990)
 WITH THE IRS. IN ADDITION, THE ENTITIES ARE SUBJECT TO INCOME TAX ON

 NET INCOME THAT IS DERIVED FROM BUSINESS ACTIVITIES THAT ARE UNRELATED TO

 THEIR EXEMPT PURPOSES. THE FOUNDATION DETERMINED THEY ARE NOT SUBJECT TO

 UNRELATED BUSINESS INCOME TAX AND HAVE NOT FILED AN EXEMPT ORGANIZATION

 BUSINESS INCOME TAX RETURN (FORM 990-T) WITH THE IRS.

THE FOUNDATION BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN AFFECTING ITS ANNUAL FILING REQUIREMENTS, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS. THE ENTITIES WOULD RECOGNIZE FUTURE ACCRUED INTEREST AND PENALTIES RELATED TO UNRECOGNIZED TAX BENEFITS AND LIABILITIES IN INCOME TAX EXPENSE IF SUCH INTEREST AND PENALTIES ARE INCURRED.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES NETTED WITH REVENUE ON FORM 990 -15,780.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES NETTED WITH REVENUE ON FORM 990

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	Iraisi	ng or Gaming A	ctivi	ties	OMB No. 1545-0047
(Form 990)		e organization answered "Yes" on organization entered more than \$1				r 19, c	or if the	2022
Department of the Treasury		Attach to Form 990 o	or Form	n 990	-EZ.			Open to Public
Internal Revenue Service	Go t	o www.irs.gov/Form990 for instru	ctions	and th	ne latest information	n.		Inspection
Name of the organization		EN'S FOUNDATION OF	CO	LOR	ADO		Employeri 84-103	dentification number 9305
Part I Fundrais required to	complete this part	Complete if the organization answe	ered "Y	'es" or	n Form 990, Part IV, li	ine 17	. Form 990-	EZ filers are not
 Indicate whether th a Mail solicitat b Internet and c Phone solici d In-person so 2 a Did the organization key employees list 	e organization rais itions email solicitations tations licitations on have a written o ed in Form 990, Pa) highest paid indiv	ed funds through any of the followin e Solicita f Solicita g Special or oral agreement with any individual art VII) or entity in connection with p viduals or entities (fundraisers) pursu	tion of tion of fundra (incluo rofessi ant to	non-g gover aising of ding of onal fu agreer	overnment grants nment grants events ficers, directors, trust undraising services?	ne fund	Y	4
(i) Name and addres or entity (func		(ii) Activity	have c or cor	Did raiser ustody ntrol of utions?	(iv) Gross receipts from activity	tò (or fi	retained by undraiser ed in col. (i)	(v) to (or retained by)
			Yes	No				
Total								
3 List all states in whi or licensing.	ich the organizatio	n is registered or licensed to solicit o	contrib	utions	or has been notified	it is e	xempt from	registration

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

Schedule G (Form 990) 2022

THE WOMEN'S FOUNDATION OF COLORADO

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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 ANNUAL LUNCHEON	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
1	Gross receipts	1,095,717.			1,095,717
2	Less: Contributions	1,005,692.			1,005,692
3	Gross income (line 1 minus line 2)	90,025.			90,025
4	Cash prizes				
5	Noncash prizes				
6	Rent/facility costs	6,252.			6,252
7	Food and beverages				
Q	Entertainment	78,592.			78 592
9	Other direct expenses	200,500.			78,592
-	Direct expense summary. Add lines 4 through		1 1		285,344
	Net income summary. Subtract line 10 from I	()			-195,319
		(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (
1	Gross revenue				
1 2	Gross revenue				
3	Cash prizes				
3 4	Cash prizes Noncash prizes Rent/facility costs				
3 4 5	Cash prizes	%	☐ Yes%	☐ Yes %	
3 4 <u>5</u>	Cash prizes Noncash prizes Rent/facility costs Other direct expenses	No		No	
3 4 5 6 7	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor	No	□ No	<u>No</u>	
3 4 5 6 7 8 Ent	Cash prizes	No N	No	<u>No</u>	
3 4 5 6 7 8 Ent Is ti	Cash prizes	No	states?	□ No	Yes N

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Schedule G (Form 990) 2022

Sch	edule G (Form 990) 2022 T	HE WOMEN'S FOUNDATION OF COLORADO 84-1	0393	305	Page 3
11	Does the organization conduct gamir	g activities with nonmembers?	<u> </u>	/es	No
	Is the organization a grantor, benefici	ary or trustee of a trust, or a member of a partnership or other entity formed			
			<u>Υ</u>	/es	No No
	Indicate the percentage of gaming ac				
			13a		%
			13b		%
14	Enter the name and address of the pe	erson who prepares the organization's gaming/special events books and records:			
	Name				
	Address				
15a	Does the organization have a contrac	t with a third party from whom the organization receives gaming revenue?	. 📖 Y	/es	No No
	If "Vec " enter the encurt of coming				
Ľ	 If "Yes," enter the amount of gaming of gaming revenue retained by the this 				
	If "Yes," enter name and address of t				
	Name				
	Address				
16	Gaming manager information:				
	Name				
	Gaming manager compensation	8			
	Description of services provided				
	Director/officer	Employee Independent contractor			
17	Mandatory distributions:				
a	Is the organization required under sta	te law to make charitable distributions from the gaming proceeds to			
			L Y	/es	└── No
k	 Enter the amount of distributions required organization's own exempt activities 	uired under state law to be distributed to other exempt organizations or spent in the			
Pa		during the tax year \$ I tion. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Par	t III. line	s 9, 9	b. 10b.
		plicable. Also provide any additional information. See instructions.	,		2, 102,
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Dart	V	- Cum	nlon

Part IV	Supplemental Information (continued)	

SCHEDULE I	G	arants and Oth	er Assistan	ce to Organ	izations.		OMB No. 1545-0047
(Form 990)	Go	vernments, an ete if the organization	d Individual	s in the Ŭni ⁻	ted States		2022
Department of the Treasury	Comp		Attach to Form		t iv, inte 2 i or 22.		Open to Public
Internal Revenue Service		Go to www.irs	.gov/Form990 for	the latest information	ation.		Inspection
Name of the organization THE WOMEN	I'S FOUNDA	TION OF COL	ORADO				Employer identification number $84 - 1039305$
Part I General Information on Grants a							
1 Does the organization maintain records criteria used to award the grants or assi	stance?	-					
2 Describe in Part IV the organization's pr	ocedures for monit	oring the use of grant	funds in the United	States.			
Part II Grants and Other Assistance to recipient that received more than	-				anization answered "Y	'es" on Form 990, Par	t IV, line 21, for any
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
9 TO 5 207 EAST BUFFALO STREET SUITE 211 MILWAUKEE, WI 53202	34-1246311	501(C)(3)	50,000.	0.			PUBLIC POLICY/PUBLIC POLICY GRANT FROM A DONOR ADVISED FUND
ADAM'S PURPOSE 4628 ANDES WAY DENVER, CO 80249	84-3747706	501(C)(3)	15,000.	0.			WOMEN AND GIRLS OF COLOR FUND
AFRICA DEVELOPMENT PROMISE 1031 33RD STREET, SUITE 174 DENVER, CO 80205	38-3909756	501(C)(3)	10,000.	0.			DIRECT SERVICE GRANT FROM BEYOND OUR BORDERS SPECIAL INTEREST FUND
ALIANZA NORCO 3220 MESA VERDE ST FORT COLLINS, CO 80525	83-2325518	501(C)(3)	59,570.	0.			DIRECT SERVICE
AMIGOS DE SANTA CRUZ 2226 EASTLAKE AVE E, #319 SEATTLE, WA 98102	91-2155843	501(C)(3)	10,500.	0.			DIRECT SERVICE GRANT FROM BEYOND OUR BORDERS SPECIAL INTEREST FUND
AMERICAN FRIENDS OF BEAN VOYAGE 2874 RESERVE VIEW BLVD, BLDG2-APT : LAKELAND, FL 33810	2 83-3945930	501(C)(3)	10,000.	0.			DIRECT SERVICE GRANT FROM BEYOND OUR BORDERS SPECIAL INTEREST FUND
2 Enter total number of section 501(c)(3) a	•	•					104.
3 Enter total number of other organization							<u> </u>
LHA For Paperwork Reduction Act Notice	e, see the Instructi	ons for Form 990.					Schedule I (Form 990) 2022

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. SEE PART IV FOR COLUMN (H) DESCRIPTIONS

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		TION OF COL		(- -	/=		94-1039303 Page 1
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa I	rt II.) T	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 non-cash assistance	(h) Purpose of grant or assistance
BLUE VENTURES CONSERVATION (CAF AMERICA) - 225 REINEKERS LANE SUITE 375 - ALEXANDRIA, VA 22314	43-1634280	501(C)(3)	10,000.	0.			DIRECT SERVICE GRANT FROM BEYOND OUR BORDERS SPECIAL INTEREST FUND
CAPITAL SISTERS INTERNATIONAL 601 16TH ST, STE C 310 GOLDEN, CO 80401	20-0458807	501(C)(3)	18,000.	0.			DIRECT SERVICE GRANT FROM BEYOND OUR BORDERS SPECIAL INTEREST FUND
CASA DE PAZ PO BOX 111351 AURORA, CO 80042	81-2239384	501(C)(3)	10,000.	0.			WOMEN AND GIRLS OF COLOR FUND
CENTER FOR COMMUNITY WEALTH BUILDING - 2900 N DOWNING ST #1B - DENVER, CO 80205	85-2257483	501(C)(3)	59,570.	0.			WOMEN AND GIRLS OF COLOR FUND
CENTER FOR WORK EDUCATION AND EMPLOYMENT - 1175 OSAGE ST #300 - DENVER, CO 80204	74-2202303	501(C)(3)	55,710.	0.			WOMEN AND GIRLS OF COLOR FUND
CENTRO DE LA FAMILIA 1645 S MURRAY BLVD COLORADO SPRINGS, CO 80916	84-1435999	501(C)(3)	59,570.	0.			WOMEN AND GIRLS OF COLOR FUND
COLLABORATIVE HEALING INITIATIVE WITHIN COMMUNITIES - 10115 E COLFAX AVE - AURORA, CO 80010	82-1803800	501(C)(3)	69,570.	0.			WOMEN AND GIRLS OF COLOR FUND/DIRECT SERVICE GRANT FROM DONOR ADVISED FUND
CLAYTON EARLY LEARNING 3801 MARTIN LUTHER KING BLVD DENVER, CO 80205	84-0432238	501(C)(3)	46,800.	0.			PUBLIC POLICY
CLEO PARKER ROBINSON DANCE 7995 E MISSISSIPPI AVE UNIT B10 DENVER, CO 80247	83-0586140	501(C)(3)	10,000.	0.			GRANT FROM A DONOR ADVISED FUND

THE WOMEN'S FOUNDATION OF COLORADO

		TION OF COL					34-1039305 Page
Part II Continuation of Grants and Othe	er Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	urt II.)	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 non-cash assistance	(h) Purpose of grant or assistance
COBALT FOUNDATION							GRANT FROM A DONOR
PO BOX 22485							ADVISED FUND/STAFF
DENVER, CO 80222	84-6050191	501(C)(3)	82,000.	0.			DISCRETIONARY
,			, ,				STAFF DISCRETIONARY/GRANT
COLOR							FROM A DONOR ADVISED
PO BOX 40991							FUND/WOMEN AND GIRLS OF
DENVER, CO 80204	84-1569021	501(C)(3)	22,000.	٥.			COLOR FUND
COLORADO CHILDREN'S CAMPAIGN 1580 LINCOLN ST #420							
DENVER, CO 80203	74-2374672	501(C)(3)	56,200.	٥.			PUBLIC POLICY
COLORADO CIRCLES FOR CHANGE 430 W 9TH AVE DENVER, CO 80204	84-1313876	501(C)(3)	10,000.	0.			WOMEN AND GIRLS OF COLOR FUND
COLORADO FISCAL INSTITUTE 1905 SHERMAN STREET, SUITE 225 DENVER, CO 80203	46-1281109	501(C)(3)	46,200.	0.			PUBLIC POLICY/PUBLIC POLICY GRANT FROM A DONOF ADVISED FUND
COLORADO PUBLIC RADIO 7409 S ALTON CT CENTENNIAL, CO 80112	74-2324052	501(C)(3)	5,500.	0.			GRANT FROM A DONOR ADVISED FUND
CONEJOS CLEAN WATER 304 RIVER ST ATONITO, CO 81120	27-2768961	501(C)(3)	14,400.	0.			WOMEN AND GIRLS OF COLOR FUND
CULTIVANDO							GRANT FROM A DONOR
PO BOX 1040							ADVISED FUND/WOMEN AND
COMMERCE CITY, CO 80022	84-1499624	501(C)(3)	20,500.	0.			GIRLS OF COLOR FUND
CYSTIC FIBROSIS FOUNDATION 400 S COLORADO BLVD STE 840							GRANT FROM A DONOR
DENVER, CO 80246	71-0920635	501(C)(3)	10,000.	0.			ADVISED FUND

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Schedule I (Form 990) THE WOMEN Part II Continuation of Grants and Other A		mestic Organizations		vernments (Sche	edule I (Form 990), Pa		4-1039305 Page
(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
DENVER FILM SOCIETY (GREATER PURPOSE MEDIA) - 2510 E COLFAX AVE - DENVER, CO 80206	84-0771070	501(C)(3)	15,500.	0.			WOMEN AND GIRLS OF COLOR FUND/GRANT FROM A DONOR ADVISED FUND
DENVER HEALTH FOUNDATION 777 BANNOCK ST #MC0111 DENVER, CO 80204	84-1085196	501(C)(3)	10,000.	0.			GRANT FROM A DONOR ADVISED FUND
DENVER INDIAN FAMILY RESOURCE (CHECK FOR OTHER GRANTS THAN WGOF - 1633 FILLMORE ST, STE GL2 - DENVER, CO 80206	84-1568837	501(C)(3)	74,570.	0.			WOMEN AND GIRLS OF COLOR FUND
DENVER WALDORF SCHOOL ASSN 2100 S PENNSYLVANIA ST DENVER, CO 80210	84-0717615	501(C)(3)	16,000.	0.			GRANT FROM A DONOR ADVISED FUND
EAGLE VALLEY COMMUNITY FOUNDATION 56 EDWARDS VILLAGE BLVD STE 219 EDWARDS, CO 81632	47-1915583	501(C)(3)	10,000.	0.			WOMEN AND GIRLS OF COLOR FUND
ECO-CYCLE, INC. P O BOX 19006 BOULDER, CO 80308-2006	84-0730811	501(C)(3)	25,000.	0.			GRANT FROM A DONOR ADVISED FUND
FIRST SOUTHWEST COMMUNITY FUND P O BOX 1139 ALAMOSA, CO 81101	47-3061703	501(C)(3)	10,000.	0.			WOMEN AND GIRLS OF COLOR FUND
FOOD TO POWER 917 E MORENO AVE STE 130 COLORADO SPRINGS, CO 80903	46-3665741	501(C)(3)	10,000.	0.			WOMEN AND GIRLS OF COLOR FUND
FORT LEWIS COLLEGE FOUNDATION 1000 RIM DR DURANGO, CO 81301-3908	23-7122114	501(C)(3)	15,000.	0.			WOMEN AND GIRLS OF COLOR FUND

THE WOMEN'S FOUNDATION OF COLORADO

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		TION OF COL					34-1039305 Page 1
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa I	art II.)	Γ
(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
FULL CIRCLE OF LAKE COUNTY PO BOX 662 LEADVILLE, CO 80461	84-1386727	501(C)(3)	59,570.	0.			WOMEN AND GIRLS OF COLOR FUND
GLOBAL GREENGRANTS FUND 2840 WILDERNESS PL STE A BOULDER, CO 80301	84-1612422	501(C)(3)	45,000.	0.			DIRECT SERVICE GRANT FROM BEYOND OUR BORDERS SPECIAL INTEREST FUND/GRANT FROM A DONOR
HISPANIC WOMEN OF WELD COUNTY PO BOX 516 GREELEY, CO 80632	84-1350213		15,000.	0.			WOMEN AND GIRLS OF COLOR
, INTEGRATED COMMUNITY PO BOX 880587 STEAMBOAT SPRINGS, CO 80488	46-1325467		10,000.	0.			WOMEN AND GIRLS OF COLOR FUND
KAIZEN FOOD RESCUE 2900 S SHOSHONE ST ENGLEWOOD, CO 80110	83-4107744	501(C)(3)	10,000.	0.			WOMEN AND GIRLS OF COLOR FUND
KIDS ABOVE EVERYTHING (CURLS ON THE BLOCK) – 2840 FAIRFAX ST, STE 260 – DENVER, CO 80207	81-3757873	501(C)(3)	15,000.	0.			WOMEN AND GIRLS OF COLOR FUND
LATINA SAFEHOUSE PO BOX 11174 DENVER, CO 80219	32-0298603	501(C)(3)	15,500.	0.			WOMEN AND GIRLS OF COLOR FUND
MAMA BIRD DOULA SERVICES 15200 E GIRARD AVE, STE 3100 AURORA, CO 80014	88-0761760	501(C)(3)	37,500.	0.			WOMEN AND GIRLS OF COLOR FUND
MJCF COALITION 673 N GRANT ST DENVER, CO 80203	87-2314154	501(C)(3)	15,000.	0.			WOMEN AND GIRLS OF COLOR FUND

THE WOMEN'S FOUNDATION OF COLORADO

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Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	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 non-cash assistance	(h) Purpose of grant or assistance
MUSEUM OF CONTEMPORARY ART DENVER							
1485 DELGANY ST							GRANT FROM A DONOR
DENVER, CO 80202	84-1366092	501(C)(3)	20,000.	0.			ADVISED FUND
				.			
NATIONAL JEWISH HEALTH							
PO BOX 17169							GRANT FROM A DONOR
DENVER, CO 80217-0169	74-2044647	501(C)(3)	20,000.	0.			ADVISED FUND
NATIONAL WOMEN'S HEALTH NETWORK							
1413 K ST NW #400							GRANT FROM A DONOR
WASHINGTON, DC 20005	52-1081261	501(C)(3)	20,000.	0.			ADVISED FUND
NAMINE LOVE							
NATIVE LOVE PO BOX 544							WOMEN AND GIRLS OF COLOR
IGNACIO, CO 81137	86-3315453	501(C)(3)	25,000.	0.			FUND
	00-22T2422	501(0)(5)	23,000.	0.			FOND
NONVIOLENCE INTERNATIONAL							
PO BOX 39127, FRIENDSHIP STATION NW							GRANT FROM A DONOR
WASHINGTON, DC 20016	52-1645787	501(C)(3)	15,000.	0.			ADVISED FUND
OPENCOLLECTIVE FOUNDATION/OKIONU							
BIRTH FOUNDATION - 440 N BARRANCA							WOMEN AND GIRLS OF COLOR
AVE #3717 - COVINA, CA 91723	81-4004928	501(C)(3)	15,000.	0.			FUND
OMNI INSTITUTE							
899 LOGAN ST STE 600							
ATTN: FINANCE DEPT - DENVER, CO							
80203	84-1307563	501(C)(3)	12,775.	0.			RESEARCH
ONTIADD & LEGACK ECTIVES TON							
ONWARD A LEGACY FOUNDATION							NOMEN AND GIDLS OF GOLOD
PO BOX 26	26-0045741	501(C)(3)	25,000.	0.			WOMEN AND GIRLS OF COLOR FUND
CORTEZ, CO 81321	20-0045741	501(0)(5)	25,000.	0.			E OND
PEACEWORKS INC							
PO BOX 836							WOMEN AND GIRLS OF COLOR
BAILEY, CO 80421-0836	74-2472469	501(C)(3)	10,000.	0.			FUND

(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
PEOPLE AND POLLINATORS ACTION							
NETWORK - P O BOX 355 - NIWOT, CO							GRANT FROM A DONOR
80544	47-2260229	501(C)(3)	40,000.	0.			ADVISED FUND
ROCKY MOUNTAIN PLANNED PARENTHOOD							
INC 7155 E. 38TH AVENUE -							GRANT FROM A DONOR
DENVER, CO 80207	84-0404253	501(C)(3)	44,000.	0.			ADVISED FUND
POLITE TUMOR							
349 N WASHINGTON STREET							GRANT FROM A DONOR
DENVER, CO 80203	81-4814298	501(C)(3)	30,000.	0.			ADVISED FUND
PORCHLIGHT							CRANTE FROM & DONOR
11100 W 8TH AVE STE 200 LAKEWOOD, CO 80215	83-2789396	F(1/2)/2	10,000.	0.			GRANT FROM A DONOR ADVISED FUND
	03-2709390	501(0/(3)	10,000.	0.			RDVISED FOND
POSADA							
501 BELMONT AVE							WOMEN AND GIRLS OF COLOF
PUEBLO, CO 81004	74-2473501	501(C)(3)	55,960.	0.			FUND
PROJECT HELPING							
8811 E HAMPDEN AVE, SUITE 214							GRANT FROM A DONOR
DENVER, CO 80231	45-2442366	501(C)(3)	7,500.	0.			ADVISED FUND
PROJECT WORTHMORE							
1609 HAVANA ST							GRANT FROM A DONOR
AURORA, CO 80010	45-0933835	501(C)(3)	50,000.	0.			ADVISED FUND
				••			
KIDS ABOVE EVERYTHING/QUEENSHIPP							WOMEN AND GIRLS OF COLOR
2840 FAIRFAX ST, STE 260							FUND/GRANT FROM A DONOR
DENVER, CO 80207	81-3757873	501(C)(3)	17,000.	0.			ADVISED FUND
COMMUNITY INITIATIVES/RADICAL							
MONARCHS - 1000 BROADWAY, STE 480				-			WOMEN AND GIRLS OF COLOR
- OAKLAND, CA 94607	94-3255070	501(C)(3)	15,000.	Ο.	1		FUND

Part II Continuation of Grants and Other				vernments (Sch	edule i (Foitti 990), Fa		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 non-cash assistance	(h) Purpose of grant or assistance	
RE:VISION								
3800 MORRISON RD							WOMEN AND GIRLS OF COLOR	
DENVER, CO 80219	26-1204343	501(C)(3)	10,000.	0.			FUND	
REDLINE CONTEMPORARY ART CENTER								
2350 ARAPAHOE STREET							GRANT FROM A DONOR	
DENVER, CO 80205-2613	26-0317963	501(C)(3)	10,000.	0.			ADVISED FUND	
RISE 5280								
18957 E RANDOLPH PL							WOMEN AND GIRLS OF COLOR	
DENVER, CO 80249	83-1241959	501(C)(3)	10,000.	0.			FUND	
ROCKY MOUNTAIN INSTITUTE								
2490 JUNCTION PL STE 200							GRANT FROM A DONOR	
BOULDER, CO 80301	74-2244146	501(C)(3)	20,000.	0.			ADVISED FUND	
ROCKY MOUNTAIN PLANNED PARENTHOOD								
7155 E. 38TH AVENUE							GRANT FROM A DONOR	
DENVER, CO 80207	84-0404253	501(C)(3)	15,000.	٥.			ADVISED FUND	
SAME CAFE 2023 E COLFAX AVE							GRANT FROM A DONOR	
DENVER, CO 80206	20-4765519	501(C)(3)	10,000.	0.			ADVISED FUND	
	20 4703313	501(0)(5)	10,000.					
SAN LUIS VALLEY GREAT OUTDOORS								
610 STATE AVE							WOMEN AND GIRLS OF COLOR	
ALAMOSA, CO 81101	82-2360438	501(C)(3)	13,000.	0.			FUND	
SAN LUIS VALLEY IMMIGRATION								
RESOURCE CENTER - P O BOX 1534 -							WOMEN AND GIRLS OF COLOR	
ALAMOSA, CO 81101	74-3064080	501(C)(3)	10,000.	0.			FUND	
CNDC/SHERIDAN RISING TOGETHER FOR								
EQUITY - 789 N SHERMAN ST STE 250							WOMEN AND GIRLS OF COLOR	
- DENVER, CO 80203-3539	84-1493585	501(C)(3)	10,000.	0.			FUND	

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		TION OF COL		<i>(</i> -			4-1039305 Page
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	overnments (Sche	edule I (Form 990), Pa	irt II.) T	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 non-cash assistance	(h) Purpose of grant or assistance
SHOW AND TELL CORPORATION							
3131 S VAUGHN WAY UNIT 214							WOMEN AND GIRLS OF COLOR
AURORA, CO 80014	84-4013721	501(C)(3)	10,000.	٥.			FUND
SOUL 2 SOUL							
PO BOX 7632							WOMEN AND GIRLS OF COLOR
DENVER, CO 80207	81-1006094	501(C)(3)	10,000.	٥.			FUND
SOUTHWEST ENERGY EFFICIENT PROJECT							
2334 N BROADWAY, STE A							GRANT FROM A DONOR
BOULDER, CO 80304	84-1593046	501(C)(3)	43,500.	0.			ADVISED FUND
			,				
STAR GIRLZ EMPOWERMENT INC							WOMEN AND GIRLS OF COLOR
10758 WHEELING DR							FUND/GRANT FROM A DONOR
COMMERCE CITY, CO 80022	46-5461875	501(C)(3)	17,000.	0.			ADVISED FUND
THE BELL POLICY CENTER							PUBLIC POLICY/PUBLIC
1905 SHERMAN STREET #900							POLICY GRANT FROM A DONOR
DENVER, CO 80203	84-1550841	501(C)(3)	35,900.	0.			ADVISED FUND
			,				
THE CHILDREN'S MUSEUM							
2121 CHILDREN'S MUSEUM DRIVE							GRANT FROM A DONOR
DENVER, CO 80211	84-0658142	501(C)(3)	10,000.	0.			ADVISED FUND
THE COLORADO CENTER ON LAW AND							
POLICY - 789 SHERMAN ST. #300 -							
DENVER, CO 80203	84-1264154	501(C)(3)	42,500.	٥.			PUBLIC POLICY
/			, .				
THE COMPOUND OF COMPASSION							
3819 S QUINTERO CIR							WOMEN AND GIRLS OF COLOR
AURORA, CO 80013	82-4631021	501(C)(3)	10,000.	0.			FUND
THE FAMILY CENTER/LA FAMILIA							
(TFC/LF) - 309 HICKORY ST UNIT 5 -							WOMEN AND GIRLS OF COLOR
FORT COLLINS, CO 80524	84-1318219	501(C)(3)	10,000.	٥.			FUND

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(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 GATHERING PLACE							WOMEN AND GIRLS OF COLOR
1535 HIGH ST							FUND/GRANT FROM A DONOR
DENVER, CO 80218	84-1021059	501(C)(3)	65,710.	0.			ADVISED FUND
THE I WILL PROJECTS							
2 WHITE DOVE CT							WOMEN AND GIRLS OF COLOF
PUEBLO, CO 81001-1871	46-0837450	501(C)(3)	15,000.	0.			FUND
THE INITIATIVE							
6825 E TENNEESSEE AVE, #475							WOMEN AND GIRLS OF COLOR
DENVER, CO 80224	84-1068953	501(C)(3)	59,570.	0.			FUND
THE LEARNING COUNCIL							
PO BOX 1744							WOMEN AND GIRLS OF COLOF
PAONIA, CO 81428	84-1377794	501(C)(3)	10,000.	0.			FUND
THE NATURE CONSERVANCY							
4245 N FAIRFAX DR, SUITE 100							GRANT FROM A DONOR
ARLINGTON, VA 22203	53-0242652	501(C)(3)	7,000.	0.			ADVISED FUND
THE SENIOR HUB							
10190 BANNOCK ST STE 105							WOMEN AND GIRLS OF COLOR
NORTHGLENN, CO 80260	74-2412032	501(C)(3)	60,670.	0.			FUND
TU CASA							
202 CARSON AVE							WOMEN AND GIRLS OF COLOR
ALAMOSA, CO 81101-2342	74-2227742	501(C)(3)	20,000.	0.			FUND
UJYALO FOUNDATION							
3424 S JERICHO CT							WOMEN AND GIRLS OF COLOR
AURORA, CO 80013	46-2715690	501(C)(3)	15,000.	0.			FUND
UNION OF CONCERNED SCIENTISTS							
TWO BRATTLE SQUARE							GRANT FROM A DONOR
CAMBRIDGE, MA 02138	04-2535767	501(C)(3)	50,000.	Ο.			ADVISED FUND

THE WOMEN'S FOUNDATION OF COLORADO

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Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	s and Domestic Go	vernments (Sche	edule I (Form 990), Pa	irt II.)	1
(a) Name and address of organization or government			(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNITED FOR A NEW ECONOMY							
7190 COLORADO BLVD, STE 400							WOMEN AND GIRLS OF COLOR
DENVER, CO 80022	26-0019190	501(C)(3)	21,000.	0.			FUND/STAFF DISCRETIONARY
UNIVERSITY OF COLORADO FOUNDATION							
1800 GRANT ST STE 725							GRANT FROM A DONOR
DENVER, CO 80203	84-6049811	501(C)(3)	81,500.	0.			ADVISED FUND
UNIVERSITY OF DENVER KORBEL SCHOOL							
P O BOX 910585							GRANT FROM A DONOR
DENVER, CO 80291-0585	84-0404231	501(C)(3)	25,000.	0.			ADVISED FUND
	01 0101201	501(0)(5)		.			
URBAN SANCTUARY NONPROFIT							
2745 WELTON							WOMEN AND GIRLS OF COLOR
DENVER, CO 80205	84-5141674	501(C)(3)	15,000.	0.			FUND
VAIL VALLEY FOUNDATION							
PO BOX 6550	F4 0015005	501 (2) (2)	0.500				GRANT FROM A DONOR
AVON, CO 81620	74-2215035	501(C)(3)	9,598.	0.			ADVISED FUND
VERMONT DAY SCHOOL							
6701 SHELBURNE RD							GRANT FROM A DONOR
SHELBURNE, VT 05482	47-2399104	501(C)(3)	10,000.	0.			ADVISED FUND
,			,				
VOCES UNIDAS FOR JUSTICE							
2519 AIRPORT RD							WOMEN AND GIRLS OF COLOR
COLORADO SPRINGS, CO 80910	27-1888868	501(C)(3)	20,000.	0.			FUND
VUELA FOR HEALTH							WOMEN AND CIDIC OF COLOR
3532 FRANKLIN ST, STE J DENVER, CO 80205	84-1444277	501(C)(3)	10,000.	0.			WOMEN AND GIRLS OF COLOR FUND
	01 11112//		10,000.	0.			
WARREN VILLAGE							
1323 GILPIN ST							GRANT FROM A DONOR
DENVER, CO 80218	84-0644270	501(C)(3)	10,000.	0.			ADVISED 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
WESTERN COLORADO ALLIANCE							
2481 COMMERCE BLVD							WOMEN AND GIRLS OF COLOR
GRAND JUNCTION, CO 81505	84-0837218	501(C)(3)	48,350.	0.			FUND
WIND BENEATH MY WINGS							
P O BOX 4083							GRANT FROM A DONOR
CLIFTON PARK, NY 12065	02-0549182	501(C)(3)	7,000.	0.			ADVISED FUND
YOUNG ASPIRING AMERICANS FOR							
SOCIAL AND POLITICAL ACTIVISM - P							
O BOX 202092 - DENVER, CO							WOMEN AND GIRLS OF COLOR
80220-8823	27-1970080	501(C)(3)	10,000.	0.			FUND
YOUTH EMPOWERMENT AGENCY							
18955 ROBINS DR							WOMEN AND GIRLS OF COLOR
DENVER, CO 80249	30-0803887	501(0)(3)	10,000.	0.			FUND
	50 0005007	501(0)(5)	10,000.	••			
YOUTH SEEN							
4495 HALE PKWY, STE 101							WOMEN AND GIRLS OF COLOR
DENVER, CO 80206	82-2882960	501(C)(3)	14,700.	0.			FUND/STAFF DISCRETIONARY
,			,				
ONEMORGAN COUNTY							
218 MAIN ST							WOMEN AND GIRLS OF COLOR
FORT MORGAN, CO 80701	35-2358103	501(C)(3)	54,490.	0.			FUND
							ļ

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Schedule I (Form 990) 2022

THE WOMEN'S FOUNDATION OF COLORADO

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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
Part IV Supplemental Information. Provide the information red	puired in Part I. lir	ne 2: Part III. column	(b): and any other ac	Iditional information.	•

PART I, LINE 2:

THE FOUNDATION REQUESTS AN APPLICATION AND FINAL REPORT FOR EACH PROJECT

FUNDED. IN ADDITION, THE FOUNDATION MIGHT PERFORM A SITE VISIT, MAKES

PERIODIC CALLS AND ENGAGES IN EMAIL CORRESPONDENCE REGARDING UPDATES TO

ENSURE GRANT FUNDS ARE USED PROPERLY. BY REQUIRING RIGOROUS REPORTING AND

MAKING A PERSONAL CONNECTION WITH EACH GRANTEE, THE FOUNDATION ENSURES

FUNDS ARE BEING USED FOR PROPER PURPOSES. THE FOUNDATION USES A MODIFIED

VERSION OF THE COLORADO COMMON GRANT APPLICATION AND REPORT THAT CLOSELY

ALIGNS WITH THE STRATEGIC FUNDING AREAS AND ALLOWS THE FOUNDATION TO GATHER

SPECIFIC AND TIMELY INFORMATION ON PROGRAMS AND ORGANIZATIONS.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: GLOBAL GREENGRANTS FUND

(H) PURPOSE OF GRANT OR ASSISTANCE: DIRECT SERVICE GRANT FROM BEYOND OUR

BORDERS SPECIAL INTEREST FUND/GRANT FROM A DONOR ADVISED FUND

SCH	IEDULE J	Compensation Information	1	OMB No. 1	545-004	47				
(For	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		20	99					
		Compensated Employees		20	22	-				
Depart	ment of the Treasury	Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.		Open to Inspe		ic				
	ternal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.									
Nam	Name of the organization Employer identities									
	THE WOMEN'S FOUNDATION OF COLORADO 84-1039 Part I Questions Regarding Compensation									
Pa	rt I Question	s Regarding Compensation								
					Yes	No				
		ate 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 s	pending account Personal services (such as maid, chauffer	ir, chet)							
		n line de que ele alcal distate a consciention falles, a conitare realize, conservation per mante ac								
D	•	on line 1a are checked, did the organization follow a written policy regarding payment or		1b						
2	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain									
	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?									
	trustees, and onice			2						
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's									
Ŭ		ctor. Check all that apply. Do not check any boxes for methods used by a related organization								
	establish compensation of the CEO/Executive Director, but explain in Part III.									
	X Compensation committee Written employment contract									
	Independent compensation consultant IX Compensation survey or study									
	Form 990 of other organizations X Approval by the board or compensation committee									
			onninttoo							
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 re									
а	Receive a severanc	e payment or change-of-control payment?		4a		X				
b	Participate in or rec	eive payment from a supplemental nonqualified retirement plan?		4b		X X				
с										
	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 o	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	'n							
	contingent on the re	evenues of:				x				
а	The organization?	organization?								
	Any related organization?									
	If "Yes" on line 5a o	r 5b, describe in Part III.								
6	For persons listed of	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	'n							
	contingent on the n	5				X				
а	The organization?	tion?								
	Any related organiz			6b		X				
		r 6b, describe in Part III.								
		persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments								
		described on lines 5 and 6? If "Yes," describe in Part III				X				
		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to th	1e							
				8		X				
		d the organization also follow the rebuttable presumption procedure described in								
		53.4958-6(c)?								
LHA	For Paperwork Re	eduction Act Notice, see the Instructions for Form 990.	Sched	ule J (Forn	n 990)) 2022				

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.

(B) Breakdown of W-2 and/or 1099-MISC and/or - compensation			C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) LAUREN Y. CASTEEL	(i)	236,577.	0.	9,976.	19,724.	69.	266,346.	0.
PRESIDENT/CHIEF EXECUTIVE OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) JOHN DOBEY	(i)	155,919.	0.	13,709.	13,570.	69.	183,267.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) RENEE FERRUFINO	(i)	138,709.	0.	8,848.	11,805.	1,466.	160,828.	0.
VP OF DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) LOUISE MYRLAND	(i)	136,628.	0.	5,899.	11,402.	1,696.	155,625.	0.
VP OF PROGRAMS	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(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.

LHA

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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

Name of the organization

SCHEDULE M

Department of the Treasury Internal Revenue Service

(Form 990)

THE WOMEN'S FOUNDATION OF COLORADO

	THE WOMEN'S	FOUNDA	TION OF CO	DLORADO	84-	1039	305	
Pa	t 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) Method of noncash contri		0	s
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	13	167,803.	SALES PRIC	E		
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (GIVE AWAYS)	X	1	6,275.	ESTIMATED	PURCI	HAS	ΕP
26	Other ()							
27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organiz	zation during	g the tax year for c	ontributions				
	for which the organization completed Form 828	83, Part V, D	onee Acknowledg	ement			0	
							Yes	No
30a	During the year, did the organization receive by	y contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it			
	must hold for at least 3 years from the date of	the initial co	ntribution, and whi	ich isn't required to be used t	or			
	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 p	policy that re	equires the review of	of any nonstandard contribut	ions?	31	Х	
32a	Does the organization hire or use third parties	or related or	ganizations to solid	cit, process, or sell noncash				
	contributions?		•			32a		x
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	olumn (c) fo	r a type of property	/ for which column (a) is chec	ked,			
	describe in Part II.							

OMB No. 1545-0047

2022

LULL
Open to Public
Inspection

Employer identification number

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 M, PART I, COLUMN (B):

THE FOUNDATION IS REPORTING THE TOTAL NUMBER OF CONTRIBUTORS IN PART I,

COLUMN (B).

SCHEDULE O (Form 990)

Name of the organization

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 the latest information.

2022 Open to Public Inspection

OMB No. 1545-0047

THE WOMEN'S FOUNDATION OF COLORADO

Employer identification number 84 - 1039305

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

FAMILIES.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

COMMUNITY ENGAGEMENT - TO INSPIRE AND MOTIVATE INDIVIDUALS TO JOIN THE

MOVEMENT TO STRENGTHEN THE COMMUNITY BY IMPROVING ECONOMIC

OPPORTUNITIES AND OUTCOMES FOR COLORADO WOMEN AND THEIR FAMILIES, THE

WOMEN'S FOUNDATION OF COLORADO GATHERS AND SHARES RESEARCH TO INFORM

OUR PROGRAMMATIC AND POLICY WORK, CONNECTS WITH COMMUNITY MEMBERS AT

ITS ANNUAL LUNCHEON AND COMMUNITY EDUCATION EVENTS THROUGHOUT THE

STATE.

EXPENSES \$ 1,461,328. INCLUDING GRANTS OF \$ 791,714. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 1A:

THE EXECUTIVE COMMITTEE SHALL BE COMPRISED OF THE CHAIR OF THE BOARD, THECHAIR-ELECT, THE IMMEDIATE-PAST CHAIR, THE SECRETARY AND THE TREASURER OF THE FOUNDATION. THE CHAIR OF THE BOARD MAY APPOINT OTHER MEMBERS OF THE BOARD TO BE MEMBERS OF THE EXECUTIVE COMMITTEE AS APPROPRIATE. THEEXECUTIVE COMMITTEE SHALL BE STAFFED BY THE PRESIDENT AND CEO. THE CHAIR OF THE BOARD SHALL SERVE AS THE CHAIRPERSON OF THE EXECUTIVE COMMITTEE. THE EXECUTIVE COMMITTEE MAY MEET TO CONDUCT BUSINESS BETWEEN MEETINGS OF THE BOARD. A MAJORITY OF THE MEMBERS OF THE EXECUTIVE COMMITTEE SHALL CONSTITUTE A QUORUM FOR THE TRANSACTION OF BUSINESS AT ANY MEETING OF THE EXECUTIVE COMMITTEE, AND THE VOTE OF A MAJORITY OF THE EXECUTIVE COMMITTEE MEMBERS PRESENT IN PERSON AT A MEETING AT WHICH A OUORUM IS PRESENT SHALL THE ACT OF THE EXECUTIVE COMMITTEE, EXCEPT AS PROVIDED BELOW. EXCEPT AS BE Schedule O (Form 990) 2022 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2022	Page 2						
Name of the organization THE WOMEN'S FOUNDATION OF COLORADO	Employer identification number 84-1039305						
OTHERWISE LIMITED BY THESE BYLAWS OR BY LAW, THE EXECUTIVE	COMMITTEE SHALL						
BE RESPONSIBLE FOR OVERSEEING THE IMPLEMENTATION OF THE POLICIES AND							
PRIORITIES OF THE BOARD. THE EXECUTIVE COMMITTEE SHALL ALSO HAVE THE							
AUTHORITY TO TAKE EMERGENCY ACTION ON BEHALF OF THE BOARD	IF THE EXECUTIVE						
COMMITTEE DETERMINES THAT SUCH ACTION IS NECESSARY TO PROT	ECT THE INTEGRITY						
OR FINANCIAL INTERESTS OF THE FOUNDATION OR IS OTHERWISE IN THE BEST							
INTERESTS OF THE FOUNDATION AND THAT IT IS IMPOSSIBLE OR IMPRACTICAL FOR							
THE FULL BOARD TO CONSIDER AND DECIDE UPON THE MATTER IN A TIMELY MANNER.							
SUCH ACTION REQUIRES AN AFFIRMATIVE VOTE OF A MAJORITY OF	THE EXECUTIVE						
COMMITTEE MEMBERSHIP. WHEN THE EXECUTIVE COMMITTEE TAKES S	UCH EMERGENCY						
ACTION ON BEHALF OF THE FULL BOARD, IT SHALL PROMPTLY NOTI	FY ALL MEMBERS OF						
THE BOARD AND PROVIDE A REPORT ON THAT ACTION AND THE RATI	ONALE FOR IT AT						
THE NEXT MEETING OF THE BOARD.							

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

THE WOMEN'S FOUNDATION OF COLORADO PLACES INITIAL RESPONSIBILITY FOR REVIEW OF THE FORM 990 WITH THE AUDIT AND FINANCE COMMITTEE AS DESIGNATED IN THE AUDIT AND FINANCE COMMITTEE CHARTER. THE FORM 990 IS THEN DISTRIBUTED TO THE FULL BOARD FOR REVIEW IN ADVANCE OF ITS REGULARLY SCHEDULED BOARD MEETING. PRIOR TO, AND AT THE BOARD MEETING, THE BOARD MEMBERS ARE PROVIDED AN OPPORTUNITY TO ASK ANY QUESTIONS REGARDING THE FORM 990 AND THE FINANCIAL STATEMENTS PRIOR TO APPROVAL BY THE BOARD.

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

THE WOMEN'S FOUNDATION OF COLORADO DISTRIBUTES ITS CONFLICT OF INTEREST POLICY TO ALL EMPLOYEES AND BOARD MEMBERS. EACH BOARD MEMBER AND EMPLOYEES IS ALSO PROVIDED A CONFLCIT OF INTEREST STATEMENT, WHICH AFFORDS THE

INDIVIDUAL AN OPPORTUNITY TO DISCLOSE ANY RELATIONSHIPS, POSITIONS, OR 232212 10-28-22 Schedule O (Form 990) 2022

Schedule O (Form 990) 2022	Page 2
Name of the organization THE WOMEN'S FOUNDATION OF COLORADO	Employer identification number 84-1039305
CIRCUMSTANCES WHICH COULD POTENTIALLY CONSTITUTE A CONFLIC	T OF INTEREST AS
DEFINED IN THE FOUNDATION'S CONFLICT OF INTEREST POLICY.	FOR EACH
EMPLOYEE, A SIGNED FORM IS OBTAINED, AND RETAINED IN THE E	MPLOYEE'S
PERSONNEL FILE. FOR EACH BOARD MEMBER A SIGNED FORM IS RE	TAINED IN A FILE
LOCATED AT THE WOMEN'S FOUNDATION OF COLORADO OFFICE ALONG	WITH OTHER BOARD
MEMBER INFORMATION. IT IS THE RESPONSIBILITY OF THE CHIEF	FINANCIAL
OFFICER TO VERIFY THAT ALL EMPLOYEES AND BOARD MEMBERS HAV	E SIGNED CONFLICT
OF INTEREST STATEMENT ON FILE. WHENEVER A POTENTIAL CONFL	ICT EXISTS, THE
BOARD MEMBERS DETERMINES THE APPROPRIATE RESPONSE.	

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

THE EXECUTIVE COMMITTEE OF THE BOARD IS RESPONSIBLE FOR DETERMINING THE COMPENSATION OF THE PRESIDENT AND CEO AND THE PRESIDENT AND CEO IS RESPONSIBLE FOR DETERMINING THE BASE COMPENSATION OF KEY EMPLOYEES. THE DETERMINATION OF BASE SALARY OF THE PRESIDENT AND CEO AND KEY EMPLOYEES TAKES INTO ACCOUNT MARKET RATES AS DETERMINED BY ANNUAL SALARY SURVEYS, OTHER RECOGNIZED PUBLISHED SALARY DATA, OR BLEND AS DEEMED APPROPRIATE.

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

THE WOMEN'S FOUNDATION OF COLORADO MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANICAL STATEMENTS AVAILABLE TO THE PUBLIC AS FOLLOWS: POSTING THE INFORMATION ON ITS WEBSITE AT WWW.WFCO.ORG; PROVIDING COPIES UPON WRITTEN REQUEST. (Rev. January 2022)

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

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

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

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.

Type or print	r Name of exempt organization or other filer, see instructions.			Taxpayer identification number (TIN)				
•	THE WOMEN'S FOUNDATION OF C	TION OF COLORADO			84-1039305			
File by the due date f filing your return. See	Number, street, and room or suite no. If a P.O. box, so 1901 EAST ASBURY AVENUE	ee instruct	ions.					
instruction		oreign addı	ress, see instructions.					
Enter th	e Return Code for the return that this application is for (file	e a separat	e application for each return)			0 1		
Applica	tion	Return	Application			Return		
ls For		Code	Is For			Code		
Form 99	90 or Form 990-EZ	01	Form 1041-A			08		
Form 4	4720 (individual) 03 Form 4720 (other than individual)			09				
Form 990-PF 04 Form 5227				10				
Form 99	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11		
Form 99	90-T (trust other than above)	06	Form 8870			12		
Form 99	00-T (corporation) JENNIFER KILPAT	07						
Telephone No. ▶ <u>303-285-2960</u> Fax No. ▶ • If the organization does not have an office or place of business in the United States, check this box ▶ • 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 it is for part of the group, check this box ▶ • If request an automatic 6-month extension of time until FEBRUARY 15, 2024 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: • calendar year or • APR 1, 2022 , and ending MAR 31, 2023 2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return								
<u>a</u>	this application is for Forms 990-PF, 990-T, 4720, or 6069 ny nonrefundable credits. See instructions.			3a	\$	0.		
	this application is for Forms 990-PF, 990-T, 4720, or 6069	, ,				0		
	stimated tax payments made. Include any prior year overp			3b	\$	0.		
	alance due. Subtract line 3b from line 3a. Include your pa	•	· · · ·			0.		
	sing EFTPS (Electronic Federal Tax Payment System). See n: If you are going to make an electronic funds withdrawal ions.			3c 53-TE and	<u></u> ↓ Form 8879-TE			

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2022)