

The Women's Foundation of Colorado

2020 Form 990

Year-End 03-2021

Public Disclosure Copy

STATEMENT THAT THIS IS A TAX RETURN NOT A FINANCIAL STATEMENT

The accompanying federal income tax return does **NOT** constitute a financial statement. We have not audited, reviewed or compiled the accompanying income tax return and, accordingly, do not express an opinion or any other form of assurance on it.

An income tax return is not intended to constitute financial statements prepared in accordance with generally accepted accounting principles. Accordingly, it does not necessarily include all financial information or disclosures required by generally accepted accounting principles. If the omitted financial information or disclosures were included with the tax return, they might influence the users' conclusions about the taxpayer's financial position, results of operations and cash flows. Accordingly, this income tax return is not designed to be used in lieu of financial statements.

RECORD RETENTION

Copies of your tax returns are enclosed for your files. It is your responsibility to retain copies of your tax information. We recommend the following guidelines:

- Tax returns – keep indefinitely.
- Supporting documentation – keep for 8 years.
- Records supporting your tax basis in personal, investment and business assets and gift documentation – keep indefinitely.

Please note: Eide Bailly retains copies of tax returns, workpapers and other tax information for a period of eight years. After that, we dispose of all records. If you have questions regarding retention of tax records, please contact us.

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2020

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2020 calendar year, or tax year beginning **APR 1, 2020** and ending **MAR 31, 2021**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE WOMEN'S FOUNDATION OF COLORADO		D Employer identification number 84-1039305
	Doing business as		E Telephone number 303-285-2960
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	1901 EAST ASBURY AVENUE		G Gross receipts \$ 9,728,818.
	City or town, state or province, country, and ZIP or foreign postal code DENVER, CO 80208		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number ▶
F Name and address of principal officer: LAUREN Y. CASTEEL SAME AS C ABOVE		I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
J Website: ▶ WWW.WFCO.ORG		K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	
		L Year of formation: 1986	M State of legal domicile: CO

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: CATALYZING COMMUNITY TO ADVANCE AND ACCELERATE OPPORTUNITIES FOR COLORADO WOMEN AND THEIR FAMILIES.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	26
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	26
	5 Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	14
	6 Total number of volunteers (estimate if necessary)	6	36
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 3,621,245.	Current Year 6,060,843.
	9 Program service revenue (Part VIII, line 2g)	0.	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	718,626.	550,722.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-30,038.	10,844.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,309,833.	6,622,409.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,134,263.
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,597,620.	1,516,332.
16a Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 388,389.			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		617,263.	555,962.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		3,349,146.	4,272,651.
19 Revenue less expenses. Subtract line 18 from line 12	960,687.	2,349,758.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 23,114,901.	End of Year 31,800,600.
	21 Total liabilities (Part X, line 26)	316,160.	336,967.
	22 Net assets or fund balances. Subtract line 21 from line 20	22,798,741.	31,463,633.

Part II Signature Block

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

Sign Here	Signature of officer		Date		
	JOHN DOBEY, CHIEF FINANCIAL OFFICER Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	KYLE FRITCH, CPA	KYLE FRITCH, CPA	08/25/21		P01313374
	Firm's name ▶ EIDE BAILLY LLP	Firm's EIN ▶ 45-0250958			
	Firm's address ▶ 2950 E. HARMONY RD., STE. 290 FORT COLLINS, CO 80528-3429		Phone no. 970-223-8825		

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

Part III Statement of Program Service Accomplishments

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

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? [] Yes [X] No

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 1,505,460. including grants of \$ 1,313,441.) (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.

4b (Code:) (Expenses \$ 673,291. including grants of \$ 564,221.) (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.

4c (Code:) (Expenses \$ 482,955. including grants of \$ 243,000.) (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. WFCO ALSO EDUCATES COMMUNITY MEMBERS ABOUT OUR PUBLIC POLICY PRIORITIES AND HOW TO ENGAGE IN ADVOCACY.

4d Other program services (Describe on Schedule O.) (Expenses \$ 545,980. including grants of \$ 79,695.) (Revenue \$)

4e Total program service expenses 3,207,686.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a 14		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
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?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X

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

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

Section A. Governing Body and Management

Table with columns for line number, description, and Yes/No checkboxes. Includes lines 1a-1b, 2-9.

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

Table with columns for line number, description, and Yes/No checkboxes. Includes lines 10a-16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CO
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection.
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) LAUREN Y. CASTEEL PRESIDENT/CHIEF EXECUTIVE OFFICER	40.00			X			212,012.	0.	13,126.	
(2) JOHN DOBEY CHIEF FINANCIAL OFFICER	40.00			X			122,251.	0.	23,590.	
(3) RENEE FERRUFINO VP OF DEVELOPMENT	40.00				X		116,838.	0.	21,917.	
(4) LOUISE MYRLAND VP OF PROGRAMS	40.00				X		114,593.	0.	10,777.	
(5) KATIE KELLEN CHAIR	1.00	X		X			0.	0.	0.	
(6) JOYCE VIGIL VICE CHAIR	1.00	X		X			0.	0.	0.	
(7) KELLEY DUKE SECRETARY	1.00	X		X			0.	0.	0.	
(8) JENNIFER COTTRELL TREASURER	1.00	X		X			0.	0.	0.	
(9) STEPHANIE BRUNO PAST CHAIR	1.00	X		X			0.	0.	0.	
(10) JENNIFER COLOSIMO BOARD MEMBER	1.00	X					0.	0.	0.	
(11) KIM DESMOND BOARD MEMBER	1.00	X					0.	0.	0.	
(12) KAMI GUILDNER BOARD MEMBER	1.00	X					0.	0.	0.	
(13) BROOK KRAMER BOARD MEMBER	1.00	X					0.	0.	0.	
(14) ADRIENNE MANSANARES BOARD MEMBER	1.00	X					0.	0.	0.	
(15) DEBBIE CHANDLER BOARD MEMBER	1.00	X					0.	0.	0.	
(16) PAT KENDALL BOARD MEMBER	1.00	X					0.	0.	0.	
(17) JOHANNA LEYBA BOARD MEMBER	1.00	X					0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) CHRISTINA ORTIZ BOARD MEMBER	1.00	X						0.	0.	0.
(19) GRACIE GALLEGO BOARD MEMBER	1.00	X						0.	0.	0.
(20) KENDRA OYEN BOARD MEMBER	1.00	X						0.	0.	0.
(21) SUE SHARKEY BOARD MEMBER	1.00	X						0.	0.	0.
(22) DANIELLE SHOOTS BOARD MEMBER	1.00	X						0.	0.	0.
(23) FAYE TATE BOARD MEMBER	1.00	X						0.	0.	0.
(24) HELEN GAIR BOARD MEMBER	1.00	X						0.	0.	0.
(25) KEN GART BOARD MEMBER	1.00	X						0.	0.	0.
(26) JULIE GROVES BOARD MEMBER	1.00	X						0.	0.	0.
1b Subtotal								565,694.	0.	69,410.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								565,694.	0.	69,410.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **4**

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

Section B. Independent Contractors

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

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

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

SEE PART VII, SECTION A CONTINUATION SHEETS

Part VII

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

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position (checkboxes for Individual trustee or director, Institutional trustee, Officer, Key employee, Highest compensated employee, Former), (D) Reportable compensation from the organization (W-2/1099-MISC), (E) Reportable compensation from related organizations (W-2/1099-MISC), (F) Estimated amount of other compensation from the organization and related organizations.

Total to Part VII, Section A, line 1c

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c	620,907.			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	243,100.			
	f	All other contributions, gifts, grants, and similar amounts not included above ...	1f	5,196,836.			
	g	Noncash contributions included in lines 1a-1f	1g	\$ 1,102,654.			
	h	Total. Add lines 1a-1f		6,060,843.			
Program Service Revenue	2 a	_____	Business Code				
	b	_____					
	c	_____					
	d	_____					
	e	_____					
	f	All other program service revenue					
	g	Total. Add lines 2a-2f					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		554,196.		554,196.	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross rents	(i) Real				
			(ii) Personal				
	b	Less: rental expenses ...	6b				
	c	Rental income or (loss)	6c				
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	(i) Securities				
			(ii) Other				
				3,083,168.			
	b	Less: cost or other basis and sales expenses	7b	3,086,642.			
	c	Gain or (loss)	7c	-3,474.			
d	Net gain or (loss)		-3,474.		-3,474.		
8 a	Gross income from fundraising events (not including \$ 620,907. of contributions reported on line 1c). See Part IV, line 18		29,278.				
		8b	19,767.				
c	Net income or (loss) from fundraising events		9,511.		9,511.		
9 a	Gross income from gaming activities. See Part IV, line 19						
		9b					
c	Net income or (loss) from gaming activities						
10 a	Gross sales of inventory, less returns and allowances						
		10b					
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue	11 a	MISCELLANEOUS	900099	1,333.		1,333.	
	b	_____					
	c	_____					
	d	All other revenue					
	e	Total. Add lines 11a-11d		1,333.			
12	Total revenue. See instructions		6,622,409.	0.	0.	561,566.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	2,200,357.	2,200,357.		
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	388,287.	165,920.	182,093.	40,274.
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	935,773.	477,763.	265,250.	192,760.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	97,239.	47,624.	26,014.	23,601.
10 Payroll taxes	95,033.	47,385.	30,679.	16,969.
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	58,913.		58,913.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	179,718.	126,534.	43,177.	10,007.
12 Advertising and promotion	10,363.	6,559.	295.	3,509.
13 Office expenses	42,707.	13,552.	24,979.	4,176.
14 Information technology	65,621.	46,150.	12,197.	7,274.
15 Royalties				
16 Occupancy	54,490.	26,545.	18,113.	9,832.
17 Travel	20,727.	16,147.	2,408.	2,172.
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	10,048.	4,895.	3,340.	1,813.
23 Insurance	16,138.	7,862.	5,364.	2,912.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a LOSS ON UNCOLLECTIBLE P	70,725.			70,725.
b DUES & SUBSCRIPTIONS	22,949.	17,654.	3,250.	2,045.
c PROFESSIONAL DEVELOPMEN	3,563.	2,739.	504.	320.
d _____				
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	4,272,651.	3,207,686.	676,576.	388,389.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	99,838.	2	114,196.
	3 Pledges and grants receivable, net	551,935.	3	347,792.
	4 Accounts receivable, net	51,213.	4	240,515.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	41,100.	9	55,395.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 67,680.		
	b Less: accumulated depreciation	10b 41,149.	10c	26,531.
	11 Investments - publicly traded securities	20,277,931.	11	28,924,028.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	2,056,305.	15	2,092,143.
16 Total assets. Add lines 1 through 15 (must equal line 33)	23,114,901.	16	31,800,600.	
Liabilities	17 Accounts payable and accrued expenses	298,618.	17	321,967.
	18 Grants payable	14,542.	18	15,000.
	19 Deferred revenue	3,000.	19	0.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	316,160.	26	336,967.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	10,463,136.	27	15,303,719.
	28 Net assets with donor restrictions	12,335,605.	28	16,159,914.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	22,798,741.	32	31,463,633.
	33 Total liabilities and net assets/fund balances	23,114,901.	33	31,800,600.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,622,409.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,272,651.
3	Revenue less expenses. Subtract line 2 from line 1	3	2,349,758.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	22,798,741.
5	Net unrealized gains (losses) on investments	5	6,315,134.
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	31,463,633.

Part XII Financial Statements and Reporting

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

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

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization THE WOMEN'S FOUNDATION OF COLORADO	Employer identification number 84-1039305
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Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

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

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	240,106.	3221226.	3195106.	3621245.	6060843.	16338526.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	240,106.	3221226.	3195106.	3621245.	6060843.	16338526.
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)						3059652.
6 Public support. Subtract line 5 from line 4.						13278874.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4	240,106.	3221226.	3195106.	3621245.	6060843.	16338526.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	45,856.	467,501.	753,711.	720,396.	554,196.	2541660.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)					1,333.	1,333.
11 Total support. Add lines 7 through 10						18881519.
12 Gross receipts from related activities, etc. (see instructions)					12	1,318,618.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f))	14	70.33 %
15 Public support percentage from 2019 Schedule A, Part II, line 14	15	74.06 %
16a 33 1/3% support test - 2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ►

Section C. Computation of Public Support Percentage

15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2019 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2019 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

b 33 1/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>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).</i>		
1		

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental 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? <i>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.</i>	Yes	No
2a		
b Did the activities described in 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? <i>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.</i>		
2b		
3 Parent of Supported Organizations. Answer lines 3a and 3b below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No" provide details in Part VI.</i>		
3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
3b		

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2020 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required - explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2020			
a From 2015			
b From 2016			
c From 2017			
d From 2018			
e From 2019			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, 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 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016			
b Excess from 2017			
c Excess from 2018			
d Excess from 2019			
e Excess from 2020			

Schedule B

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2020

Name of the organization

THE WOMEN ' S FOUNDATION OF COLORADO

Employer identification number

84-1039305

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

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

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

Name of organization THE WOMEN'S FOUNDATION OF COLORADO	Employer identification number 84-1039305
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ 200,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ 1,776,740.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ 244,255.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ 484,220.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
5	<hr/> <hr/> <hr/>	\$ 401,412.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
6	<hr/> <hr/> <hr/>	\$ 205,602.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE WOMEN'S FOUNDATION OF COLORADO	Employer identification number 84-1039305
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<hr/> <hr/> <hr/>	\$ 150,100.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	<hr/> <hr/> <hr/>	\$ 243,100.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE WOMEN'S FOUNDATION OF COLORADO	Employer identification number 84-1039305
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	STOCK DONATION _____ _____ _____	\$ <u>484,220.</u>	<u>03/12/21</u>
<u>5</u>	STOCK DONATION _____ _____ _____	\$ <u>401,412.</u>	<u>06/12/20</u>
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization THE WOMEN'S FOUNDATION OF COLORADO	Employer identification number 84-1039305
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527
 ► **Complete if the organization is described below.** ► **Attach to Form 990 or Form 990-EZ.**
 ► **Go to www.irs.gov/Form990 for instructions and the latest information.**

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- 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.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization

THE WOMEN'S FOUNDATION OF COLORADO

Employer identification number

84-1039305

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

- 2 Political campaign activity expenditures ► \$ _____
- 3 Volunteer hours for political campaign activities

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ► \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ► \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ► \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ► \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ► \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grassroots lobbying)	43,608.													
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	72,824.													
c	Total lobbying expenditures (add lines 1a and 1b)	116,432.													
d	Other exempt purpose expenditures	4,097,306.													
e	Total exempt purpose expenditures (add lines 1c and 1d)	4,213,738.													
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	360,687.													
<table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 50%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)	90,172.													
h	Subtract line 1g from line 1a. If zero or less, enter -0-	0.													
i	Subtract line 1f from line 1c. If zero or less, enter -0-	0.													
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
 See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2a Lobbying nontaxable amount	318,861.	302,309.	315,074.	360,687.	1,296,931.
b Lobbying ceiling amount (150% of line 2a, column(e))					1,945,397.
c Total lobbying expenditures	77,507.	122,528.	138,872.	116,432.	455,339.
d Grassroots nontaxable amount	79,715.	75,577.	78,769.	90,172.	324,233.
e Grassroots ceiling amount (150% of line 2d, column (e))					486,350.
f Grassroots lobbying expenditures	39,571.	44,812.	69,235.	43,608.	197,226.

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 each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
1 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:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	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?	2	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-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).	
a Current year	2a
b Carryover from last year	2b
c Total	2c
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4
5 Taxable amount of lobbying and political expenditures (See instructions)	5

Part IV Supplemental Information

Provide 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 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE C, PART II-A, LINE 1C:

LOBBYING EXPENSES REPORTED ON SCHEDULE C, PART II-A, LINE 1C ARE MADE UP OF ALLOCATED COSTS FROM SEVERAL OF THE ORGANIZATION'S OPERATIONAL EXPENSE CATEGORIES. THEREFORE, THE TOTAL LOBBYING EXPENSE REPORTED ON SCHEDULE C, PART II-A, LINE 1C DOES NOT SHOW UP ON THE STATEMENT OF FUNCTIONAL EXPENSES ON FORM 990, PART IX, LINE 11D.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization THE WOMEN'S FOUNDATION OF COLORADO Employer identification number 84-1039305

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions regarding donor property and grant fund usage.

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

Form with multiple questions (1-9) regarding conservation easements, including checkboxes for various purposes, a table for 2a-2d, and yes/no questions about monitoring and reporting.

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

Form with questions 1a, 1b, and 2 regarding art and historical treasures, including checkboxes and dollar amount fields for revenue and assets.

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

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

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	15,062,746.	17,345,972.	17,366,579.	15,340,603.	14,899,615.
b Contributions	305,360.	90,328.	459,139.	1,282,204.	106,942.
c Net investment earnings, gains, and losses	5,342,587.	-1,644,114.	584,962.	1,720,857.	702,085.
d Grants or scholarships	757,983.				
e Other expenditures for facilities and programs	111,787.	729,440.	1,064,708.	977,085.	368,039.
f Administrative expenses	38,114.				
g End of year balance	19,802,809.	15,062,746.	17,345,972.	17,366,579.	15,340,603.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 26.5800 %
 - b Permanent endowment 53.8400 %
 - c Term endowment 19.5800 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|-----|----|
| (i) Unrelated organizations | | X |
| (ii) Related organizations | | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		57,455.	41,149.	16,306.
e Other		10,225.		10,225.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				26,531.

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(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 11c. See Form 990, Part X, line 13.

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1) INVESTMENT IN BUILDING	2,000,000.
(2) DEPOSITS	48,073.
(3) CASH SURRENDER VALUE OF LIFE INSURANCE	44,070.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	2,092,143.

Part X Other Liabilities.

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

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

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

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

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

1	Total revenue, gains, and other support per audited financial statements		1	12,901,130.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	6,315,134.	
b	Donated services and use of facilities	2b	22,500.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e	6,337,634.	
3	Subtract line 2e from line 1	3	6,563,496.	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	58,913.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c	58,913.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	6,622,409.	

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

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

1	Total expenses and losses per audited financial statements		1	4,236,238.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	22,500.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e	22,500.	
3	Subtract line 2e from line 1	3	4,213,738.	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	58,913.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c	58,913.	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	4,272,651.	

Part XIII Supplemental Information.

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

PART V, LINE 4:

THE FOUNDATION'S ENDOWMENT (THE ENDOWMENT) CONSISTS OF SEVEN 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

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.

SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

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

2020

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

Open to Public
Inspection

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

Name of the organization

THE WOMEN'S FOUNDATION OF COLORADO

Employer identification number

84-1039305

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

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

<p>a <input type="checkbox"/> Mail solicitations</p> <p>b <input type="checkbox"/> Internet and email solicitations</p> <p>c <input type="checkbox"/> Phone solicitations</p> <p>d <input type="checkbox"/> In-person solicitations</p>	<p>e <input type="checkbox"/> Solicitation of non-government grants</p> <p>f <input type="checkbox"/> Solicitation of government grants</p> <p>g <input type="checkbox"/> Special fundraising events</p>
---	---

- 2 **a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- 2 **b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

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

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

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		ANNUAL LUNCHEON (event type)	(event type)	NONE (total number)	
Revenue	1	Gross receipts	650,185.		650,185.
	2	Less: Contributions	620,907.		620,907.
	3	Gross income (line 1 minus line 2)	29,278.		29,278.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	19,767.		19,767.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			19,767.
11	Net income summary. Subtract line 10 from line 3, column (d)			9,511.	

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

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

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

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

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

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

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer Employee Independent contractor

17 Mandatory distributions:

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

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

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

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Name of the organization **THE WOMEN'S FOUNDATION OF COLORADO** Employer identification number **84-1039305**

Part I General Information on Grants and Assistance

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
10 THOUSAND WINDOWS 2095 LAKESIDE CENTRE WAY STE 101 KNOXVILLE, TN 37922	27-2505761	501(C)(3)	8,644.	0.			DIRECT SERVICE GRANT FROM BEYOND OUR BORDERS SPECIAL INTEREST FUND
9TO5, NATIONAL ASSOCIATION OF WORKING WOMEN-COLORADO CHAPTER/9 TO 5 - 1634 DOWNING STREET, UNIT A - DENVER, CO 80218	34-1246311	501(C)(3)	52,500.	0.			WFCO RELIEF FUND, PUBLIC POLICY, PUBLIC POLICY GRANT AND DIRECT SERVICE GRANT FROM DONOR ADVISED
A TOUCH OF LOVE FOUNDATION 604 HUPA ST VENTURA, CA 93001	33-0914670	501(C)(3)	5,000.	0.			DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND
A WOMAN'S PLACE PO BOX 71 GREELEY, CO 80632	84-0811596	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
ADELANTE COMMUNITY DEVELOPMENT 7296 MAGNOLIA ST COMMERCE CITY, CO 80022	46-5745662	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
ADVOCATES AGAINST DOMESTIC ASSAULT PO BOX 696 TRINIDAD, CO 81082	74-2285205	501(C)(3)	10,000.	0.			WFCO RELIEF FUND

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 132.

3 Enter total number of other organizations listed in the line 1 table ▶ 0.

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

Schedule I (Form 990) 2020

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ADVOCATES OF LAKE COUNTY PO BOX 325 LEADVILLE, CO 80461	84-0912821	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
ECDC AFRICAN COMMUNITY CENTER 925 S NIAGRA ST DENVER, CO 80224	52-1308986	501(C)(3)	5,000.	0.			WFCO RELIEF FUND
ALIANZA NORCO 3220 MESA VERDE ST FORT COLLINS, CO 80525	83-2325518	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
ALLIANCE AGAINST DOMESTIC ABUSE PO BOX 173 SALIDA, CO 81202	84-0927490	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
AVENUES FOR JUSTICE 100 CENTRE ST RM 1541 NEW YORK, NY 10013	13-3267496	501(C)(3)	7,000.	0.			DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND
BOULDER VALLEY WOMEN'S HEALTH CENTER - 2855 VALMONT RD - BOULDER, CO 80301	84-0645786	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
BOYS & GIRLS CLUB OF FREMONT COUNTY - PO BOX 1537 - CANON CITY, CO 81215	27-1610981	501(C)(3)	7,500.	0.			WFCO RELIEF FUND
BOYS & GIRLS CLUBS OF LARIMER COUNTY - 103 SMOKEY ST - FT COLLINS, CO 80525	74-2425914	501(C)(3)	7,500.	0.			WFCO RELIEF FUND
BOYS & GIRLS CLUBS OF METRO DENVER INC. - 2017 W 9TH AVE - DENVER, CO 80204	84-0510404	501(C)(3)	7,500.	0.			WFCO RELIEF FUND

Schedule I (Form 990)

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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYS & GIRLS CLUBS OF PUEBLO COUNTY - 635 W CORONA AVENUE, STE 201 - PUEBLO, CO 81004	23-7307508	501(C)(3)	19,250.	0.			WFCO RELIEF FUND, WOMEN & GIRLS OF COLOR FUND
BRIDGES TO PROSPERITY 3858 WALNUT ST STE 219 DENVER, CO 80205	54-2031102	501(C)(3)	10,000.	0.			DIRECT SERVICE GRANT FROM BEYOND OUR BORDERS SPECIAL INTEREST FUND
BRIGHT FUTURE FOUNDATION FOR EAGLE COUNTY - PO BOX 2558 - AVON, CO 81620	84-0938374	501(C)(3)	17,500.	0.			DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND, WFCO RELIEF FUND
CENTRO HUMANITARIO PARA LOS TRABAJADORES - PO BOX 3190 - DENVER, CO 80201	03-0412235	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
CLAYTON EARLY LEARNING 3801 MARTIN LUTHER KING BLVD DENVER, CO 80205	84-0432238	501(C)(3)	15,000.	0.			DISCRETIONARY, WFCO RELIEF FUND
COBALT FOUNDATION PO BOX 22485 DENVER, CO 80222	84-6050191	501(C)(3)	13,000.	0.			WFCO RELIEF FUND & DIRECT SERVICE GRANT FROM DONOR ADVISED FUND
COLLABORATIVE HEALING INITIATIVE WITHIN COMMUNITIES/CHIC - 5405 E 33RD AVE - DENVER, CO 80207	82-1803800	501(C)(3)	54,500.	0.			DIRECT SERVICE, WFCO RELIEF FUND, DIRECT SERVICE GRANT FROM DONOR ADVISED FUND
COLORADO BALLET 1075 SANTA FE DR DENVER, CO 80204	84-6038137	501(C)(3)	5,500.	0.			DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND
COLORADO BLACK WOMEN ENDOWMENT FUND - P O BOX 371836 - DENVER, CO 80237	31-1697945	501(C)(3)	5,000.	0.			WFCO RELIEF FUND

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

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COLORADO CENTER ON LAW & POLICY 789 SHERMAN ST., SUITE 300 DENVER, CO 80203-3529	84-1264154	501(C)(3)	5,000.	0.			RESEARCH
COLORADO CHILDREN'S CAMPAIGN 1580 LINCOLN ST., STE 420 DENVER, CO 80203-1506	74-2374672	501(C)(3)	40,000.	0.			WFCO RELIEF FUND,PUBLIC POLICY,DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND
COLORADO COALITION FOR THE HOMELESS - 2111 CHAMPA STREET - DENVER, CO 80205	84-0951575	501(C)(3)	35,500.	0.			DIRECT SERVICE,WFCO RELIEF FUND
COLORADO FISCAL INSTITUTE 1905 N. SHERMAN ST. STE 225 DENVER, CO 80203-1142	46-1281109	501(C)(3)	38,000.	0.			DIRECT SERVICE,WFCO RELIEF FUND,DIRECT SERVICE GRANT FROM DONOR ADVISED FUND
COLORADO GERONTOLOGICAL SOCIETY 1129 N PENNSYLVANIA ST DENVER, CO 80203	74-2139782	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
COLORADO MOUNTAIN COLLEGE FOUNDATION - 802 GRAND AVENUE - GLENWOOD SPRINGS, CO 81601	74-2393418	501(C)(3)	16,000.	0.			WOMEN & GIRLS OF COLOR FUND
COLORADO NONPROFIT DEVELOPMENT CENTER FISCAL SPONSOR FAMILIES FORWARD RESOURCE C - 789 SHERMAN ST. - DENVER, CO 80203	84-1493585	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
COLORADO ORGANIZATION FOR LATINA OPPORTUNITY AND REPRODUCTIVE RIGHTS - PO BOX 40991 - DENVER, CO 80204	84-1569021	501(C)(3)	15,500.	0.			WFCO RELIEF FUND,DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND
COLORADO SEMINARY DBA UNIVERSITY OF DENVER - 2148 S HIGH STREET - DENVER, CO 80208	84-0404231	501(C)(3)	72,000.	0.			GRANT FROM A DONOR ADVISED FUND

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COLORADO SPRINGS CHILD NURSERY CENTERS INC DBA EARLY CONNECTIONS LEARNING CENTER - 104 E RIO GRANDE ST - COLORADO SPRINGS, CO 80903	84-0632406	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
COLORADO STATEWIDE PARENT COALITION - 7150 HOOKER ST STE B - WESTMINSTER, CO 80030	74-2563848	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
COLORADO WOMEN'S EMPLOYMENT AND EDUCATION, INC. DBA CENTER FOR WORK EDUCATION EM - 1175 OSAGE ST., STE 300 - DENVER, CO	74-2202303	501(C)(3)	41,000.	0.			DIRECT SERVICE, WFCO RELIEF FUND
COMMUNITY ENTERPRISE DEVELOPMENT SERVICES - 1450 S. HAVANA ST., SUITE 620 - AURORA, CO 80012	45-3064996	501(C)(3)	5,000.	0.			WFCO RELIEF FUND
COMMUNITY PARTNERSHIP FOR CHILD DEVELOPMENT - 2330 ROBINSON ST. - COLORADO SPRINGS, CO 80904-3752	84-1071825	501(C)(3)	36,000.	0.			DIRECT SERVICE, WFCO RELIEF FUND
CONEJOS COUNTY CLEAN WATER INC 304 RIVER ST ANTONIO, CO 81120	27-2768961	501(C)(3)	11,000.	0.			WOMEN & GIRLS OF COLOR FUND
CRITERION INSTITUTE 81 CHURCH HILL ROAD HADDAM, CT 06438	27-3458737	501(C)(3)	10,000.	0.			DIRECT SERVICE GRANT FROM BEYOND OUR BORDERS SPECIAL INTEREST FUND
DELORES PROJECT PO BOX 1406 DENVER, CO 80201	20-1122039	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
DENVER ASSET BUILDING COALITION 2475 W 26TH AVE DENVER, CO 80211	77-0646873	501(C)(3)	5,000.	0.			WFCO RELIEF FUND

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DENVER EARLY CHILDHOOD COUNCIL 3532 FRANKLIN ST., SUITE F DENVER, CO 80205	27-3083665	501(C)(3)	5,000.	0.			WFCO RELIEF FUND
DENVER FILM SOCIETY 2510 E COLFAX AVE DENVER, CO 80206	84-0771070	501(C)(3)	25,000.	0.			DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND
DENVER HEALTH FOUNDATION 777 BANNOCK STREET NO MC0111 DENVER, CO 80204	84-1085196	501(C)(3)	5,000.	0.			DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND
DENVER METRO CHAMBER LEADERSHIP FOUNDATION - 1445 MARKET STREET, 5TH FLOOR - DENVER, CO 80202-1790	74-2489854	501(C)(3)	26,500.	0.			WFCO RELIEF FUND, PUBLIC POLICY
DENVER WALDORF SCHOOL ASSOCIATION/DENVER WALDORF SCHOOL - 2100 S PENNSYLVANIA ST - DENVER, CO 80210	84-0717615	501(C)(3)	30,000.	0.			DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND
DENVER YOUTH PROGRAM DBA METRO DENVER PARTNERS - 1625 E 35TH AVE - DENVER, CO 80205	74-2486208	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
DOMESTIC VIOLENCE INIATITIVE FOR WOMEN WITH DISABILITIES - 6825 E TENNESSEE AVE #475 - DENVER, CO 80224	84-1068953	501(C)(3)	5,000.	0.			WFCO RELIEF FUND
DREAM CENTERS 11025 VOYAGER PARKWAY COLORADO SPRINGS, CO 80921	27-4876080	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
DURANGO ADULT EDUCATION CENTER 701 CAMINO DEL RIO, STE 301 DURANGO, CO 81301-5595	84-1118878	501(C)(3)	41,000.	0.			DIRECT SERVICE, WFCO RELIEF FUND

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EAGLE COUNTY DEPARTMENT OF HUMAN SERVICES - PO BOX 660 - EAGLE, CO 81631		STATE OF COLORAD	30,500.	0.			DIRECT SERVICE, WFCO RELIEF FUND
EARLY CHILDHOOD COUNCIL OF LARIMER COUNTY - 2850 MCCLELLAND DRIVE, SUITE 3400 - FORT COLLINS, CO 80525	01-0633672	501(C)(3)	5,000.	0.			WFCO RELIEF FUND
EARLY LEARNING VENTURES 18 INVERNESS PL E ENGLEWOOD, CO 80112	26-4053609	501(C)(3)	5,000.	0.			WFCO RELIEF FUND
EARTHLINKS INC 2746 W 13TH AVE DENVER, CO 80204	84-1343224	501(C)(3)	6,000.	0.			DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND
EMERGENCY FAMILY ASSISTANCE ASSOCIATION - 1575 YARMOUTH AVE. - BOULDER, CO 80304-0496	84-0454115	501(C)(3)	25,500.	0.			DIRECT SERVICE, WFCO RELIEF FUND
EXECUTIVES PARTNERING TO INVEST IN CHILDREN - 475 17TH STREET SUITE 950 - DENVER, CO 80202-1790	47-3951585	501(C)(3)	29,500.	0.			WFCO RELIEF FUND, PUBLIC POLICY
FLORENCE CRITTENTON SERVICES 96 S. ZUNI ST. DENVER, CO 80223-1208	84-0429686	501(C)(3)	43,500.	0.			DIRECT SERVICE, WFCO RELIEF FUND, DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND
FOUNDATION FOR BLACK ENTREPRENEURSHIP - 20340 E 40TH AVE - DENVER, CO 80249	82-5188795	501(C)(3)	7,000.	0.			DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND
FRACTAL3 265 DILLON RIDGE ROAD, C-238 DILLON, CO 80435	85-0537180	501(C)(3)	5,000.	0.			DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND

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FRIENDS OF THE HAVEN 3610 W PRINCETON CIR DENVER, CO 80236	20-5634004	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
FRIENDSHIP BRIDGE 405 URBAN ST., SUITE 140 LAKEWOOD, CO 80228	84-1141078	501(C)(3)	9,000.	0.			DIRECT SERVICE GRANT FROM BEYOND OUR BORDERS SPECIAL INTEREST FUND
GIRLS INC. OF METRO DENVER 1499 JULIAN STREET DENVER, CO 80204	74-2277668	501(C)(3)	7,500.	0.			WFCO RELIEF FUND
GLOBALGIVING 1110 VERMONT AVE, SUITE 500 WASHINGTON, DC 20005	30-0108263	501(C)(3)	8,644.	0.			DIRECT SERVICE GRANT FROM BEYOND OUR BORDERS SPECIAL INTEREST FUND
GRECCIO HOUSING 1015 E PIKES PEAK AVE, STE 110 COLORADO SPRINGS, CO 80903	84-1158819	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
GROWING TOGETHER PO BOX 1062 DILLON, CO 80435	83-4297210	501(C)(3)	11,000.	0.			WOMEN AND GIRLS OF COLOR FUND
HARVARD DIVINITY SCHOOL 45 FRANCIS STREET CAMBRIDGE, MA 02138	04-2103580	501(C)(3)	10,000.	0.			DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND
HEALTHY CHILD CARE COLORADO 1525 RALEIGH STREET, 5TH FLOOR DENVER, CO 80204	84-0685056	501(C)(3)	5,000.	0.			WFCO RELIEF FUND
HERBAL GARDENS WELLNESS PO BOX 387 HARTSEL, CO 80449	46-2243616	501(C)(3)	21,000.	0.			WOMEN AND GIRLS OF COLOR FUND

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HILLTOP COMMUNITY RESOURCES 1331 HERMOSA AVE GRAND JUNCTION, CO 81506	74-2321009	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
HISPANIC AFFAIRS PROJECT PO BOX 2024 MONTROSE, CO 81402	27-1276653	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
HOPE TANK 64 BROADWAY DENVER, CO 80203	90-0786440	501(C)(3)	5,000.	0.			DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND
HUERFANO COUNTY DEPARTMENT OF HUMAN SERVICES/LAS ANIMAS FAMILY RESOURCE CENTER - 121 W. 6TH STREET - WASLSENBURG, CO 81089	84-6000772	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
IMPACT CHARITABLE 1536 WYNKOOP ST STE 223 DENVER, CO 80202	47-1180598	501(C)(3)	10,000.	0.			DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND
INTEGRATED COMMUNITY PO BOX 880587 STEAMBOAT SPRINGS, CO 80487	84-1493585	501(C)(3)	11,000.	0.			WFCO RELIEF FUND
LA PLATA FAMILY CENTERS COALITION 10 TOWN PLAZA 316 DURANGO, CO 81301	84-0988973	501(C)(3)	5,000.	0.			WFCO RELIEF FUND
LA PUENTE HOME, INC. 911 STATE AVE ALAMOSA, CO 81101	74-2224631	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
LADY JUSTICE BREWING 9735 E COLFAX AVE AURORA, CO 80010	81-1628260	501(C)(3)	5,000.	0.			DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND

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LASTMILE 4D 3255 SUTTON PL NW A WASHINGTON, DC 20016	47-1516033	501(C)(3)	5,500.	0.			DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND
LATINA SAFEHOUSE PO BOX 11174 DENVER, CO 80211	32-0298603	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
LATINO CULTURAL ARTS CENTER 2645 W 7TH AVE DENVER, CO 80204	81-1705392	501(C)(3)	115,000.	0.			GRANT FROM A DONOR ADVISED FUND
LONGMONT COMMUNITY FOUNDATION 636 COFFMAN ST STE 203 LONGMONT, CO 80501	46-3894713	501(C)(3)	11,000.	0.			WOMEN AND GIRLS OF COLOR FUND
MI CASA RESOURCE CENTER 342 S GROVE STREET DENVER, CO 80219	84-0867773	501(C)(3)	41,000.	0.			DIRECT SERVICE, WFCO RELIEF FUND
MILE HIGH EARLY LEARNING 1799 PENNSYLVANIA STREET, 4TH FLOOR DENVER, CO 80203	84-0617972	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
MILE HIGH UNITED WAY 711 PARK AVENUE WEST DENVER, CO 80205	84-0404235	501(C)(3)	17,500.	0.			DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND, WFCO RELIEF FUND
MORGAN COUNTY FAMILY CENTER 411 MAIN ST STE 100 FORT MORGAN, CO 80701	84-1319815	501(C)(3)	10,600.	0.			WFCO RELIEF FUND, DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND
OMNI INSTITUTE 899 N LOGAN ST STE 600 DENVER, CO 80203	84-1307563	501(C)(3)	39,695.	0.			WFCO RELIEF FUND, EVALUATION, DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND

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ONEMORGAN COUNTY 218 MAIN ST FORT MORGAN, CO 80701	35-2358103	501(C)(3)	63,000.	0.			DIRECT SERVICE, WFCO RELIEF FUND, DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND, WOMEN
PADRES & JOVENENS UNIDOS 3025 W 37TH AVE STE 206 DENVER, CO 80211	84-1426652	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
PEACEWORKS, INC. PO BOX 836 BAILEY, CO 80421	74-2472469	501(C)(3)	16,000.	0.			WOMEN AND GIRLS OF COLOR FUND
PLANNED PARENTHOOD OF THE ROCKY MOUNTAINS - 7155 E 38TH AVE - DENVER, CO 80207-1630	84-0404253	501(C)(3)	13,500.	0.			WFCO RELIEF FUND, DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND
POSADA 827 E. 4TH STREET PUEBLO, CO 81001	74-2473501	501(C)(3)	10,600.	0.			WFCO RELIEF FUND, DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND
PRAIRIE FAMILY CENTER 1040 ROSE AVENUE BURLINGTON, CO 80807	84-1355666	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
PROJECT SELF-SUFFICIENCY 375 W 37TH ST., STE 150 FORT COLLINS, CO 81401-4409	84-1206341	501(C)(3)	41,000.	0.			DIRECT SERVICE, WFCO RELIEF FUND
PROJECT WORTHMORE 1532 GALERA ST AURORA, CO 80010	45-0933835	501(C)(3)	30,000.	0.			GRANT FROM A DONOR ADVISED FUND
PUEBLO COMMUNITY COLLEGE FOUNDATION/PUEBLO COMMUNITY COLLEGE - 900 W ORMAN AVENUE - PUEBLO, CO 81004	84-0834567	501(C)(3)	31,941.	0.			DIRECT SERVICE, WFCO RELIEF FUND

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PUEBLO RESCUE MISSION PO BOX 9167 PUEBLO, CO 81003	51-0172426	501(C)(3)	10,000.	0.			WFCC RELIEF FUND
ROSE ANDOM CENTER 1330 FOX ST DENVER, CO 80204	90-0990929	501(C)(3)	5,000.	0.			WFCC RELIEF FUND
SERVICIOS DE LA RAZA 3131 W. 14TH AVE DENVER, CO 80204	84-0625478	501(C)(3)	5,000.	0.			WFCC RELIEF FUND
SISTAHBIZ GLOBAL NETWORK 4800 TELLURIDE ST, STE 5-156 DENVER, CO 80249	81-5188795	501(C)(3)	5,000.	0.			DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND
SMALL BUSINESS MAJORITY FOUNDATION INC. - 1015 15TH STREET, NW, SUITE 450 - WASHINGTON, DC 20005	03-0576666	501(C)(3)	5,000.	0.			WFCC RELIEF FUND
SOUL 2 SOUL SISTERS PO BOX 7632 DENVER, CO 80207	81-1006094	501(C)(3)	11,100.	0.			WFCC RELIEF FUND
SPRING INSTITUTE FOR INTERCULTURAL LEARNING - 1373 GRANT STREET - DENVER, CO 80203	84-0788093	501(C)(3)	10,000.	0.			WFCC RELIEF FUND
SUMMIT COUNTY FAMILY RESOURCE CENTER - HOPE - SILVERTHORNE, CO 80498	84-1252900	501(C)(3)	10,000.	0.			WFCC RELIEF FUND
THE BELL POLICY CENTER 1905 SHERMAN ST STE 900 DENVER, CO 80203	84-1550841	501(C)(3)	40,000.	0.			WFCC RELIEF FUND, PUBLIC POLICY

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THE CENTER FOR AFRICAN AMERICAN HEALTH - 3350 HUDSON STREET - DENVER, CO 80207	84-1477546	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
THE CENTER FOR TRAUMA & RESILIENCE PO BOX 18975 DENVER, CO 80218	74-2458153	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
THE CENTER ON COLFAX 1301 E COLFAX AVE DENVER, CO 80218	84-0738879	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
THE COLORADO CENTER ON LAW AND POLICY - 789 SHERMAN ST., SUITE 300 - DENVER, CO 80203-3529	84-1264154	501(C)(3)	45,000.	0.			WFCO RELIEF FUND, PUBLIC POLICY
THE EQUITY PROJECT 3455 RINGSBY CT DENVER, CO 80216	81-4657816	501(C)(3)	5,000.	0.			GRANT FROM A DONOR ADVISED FUND
THE FREEDOM STORY 337 17TH STREET OAKLAND, CA 94612	26-1587576	501(C)(3)	8,644.	0.			DIRECT SERVICE GRANT FROM BEYOND OUR BORDERS SPECIAL INTEREST FUND
THE GATHERING PLACE 1535 HIGH S DENVER, CO 80218	84-1021059	501(C)(3)	12,700.	0.			WFCO RELIEF FUND, DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND
THE GIVING BACK FUND 325 N MAPLE DR, STE 10389 BEVERLY HILLS, CA 90213	04-3367888	501(C)(3)	8,644.	0.			DIRECT SERVICE GRANT FROM BEYOND OUR BORDERS SPECIAL INTEREST FUND
THE LEARNING COUNCIL PO BOX 1744 PAONIA, CO 81428	84-1377794	501(C)(3)	21,000.	0.			WOMEN AND GIRLS OF COLOR FUND

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THE MANAUS FUND/VALLEY SETTLEMENT 520 S THIRD STREET, STE 9 CARBONDALE, CO 81623	81-2401368	501(C)(3)	10,600.	0.			WFCO RELIEF FUND, DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND
THE PINON PROJECT FAMILY RESOURCE CENTER - PO BOX 1510 - CORTEZ, CO 81321	84-1284735	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
THE VILLAGE INSTITUTE 1440 ELMIRA ST AURORA, CO 80010	84-1901568	501(C)(3)	5,000.	0.			DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND
TU CASA, INC. PO BOX 473 ALAMOSA, CO 81101	74-2227742	501(C)(3)	39,100.	0.			WFCO RELIEF FUND, DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND, WOMEN AND GIRLS OF COLOR FUND
UNITED WAY OF EAGLE RIVER VALLEY/NEIGHBORHOOD NAVIGATORS OF EAGLE COUNTY - PO BOX 4934 - EAGLE, CO 81631	84-1360915	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
URBAN LEADERSHIP FOUNDATION OF COLORADO - 1550 LARIMER ST SUITE #518 - DENVER, CO 80202	26-1393882	501(C)(3)	5,500.	0.			WFCO RELIEF FUND, DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND
WARREN VILLAGE 1323 GILPIN STREET DENVER, CO 80218	84-0644270	501(C)(3)	10,000.	0.			WFCO RELIEF FUND
WESTERN COLORADO ALLIANCE PO BOX 1929 GRAND JUNCTION, CO 81502	84-1159443	501(C)(3)	21,000.	0.			WOMEN AND GIRLS OF COLOR FUND
WILD PLUM CENTER FOR YOUNG CHILDREN AND FAMILIES - 82 21ST AVE STE B - LONGMONT, CO 80501	47-4709774	501(C)(3)	10,000.	0.			WFCO RELIEF FUND

Schedule I (Form 990)

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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WIND BENEATH MY WINGS PO BOX 4083 CLIFTON PARK, NY 12065	02-0549182	501(C)(3)	5,000.	0.			GRANT FROM A DONOR ADVISED FUND
WOMEN MOVING MILLIONS 79 5TH AVE NEW YORK, NY 10003	45-2576859	501(C)(3)	25,000.	0.			GRANT FROM A DONOR ADVISED FUND
WOMEN'S RESOURCE CENTER 679 E 2ND AVE UNIT 6 DURANGO, CO 81301	74-2483766	501(C)(3)	5,000.	0.			WFCO RELIEF FUND
WOMPOST 10255 E 25TH AVE UNIT B-5 AURORA, CO 80010	83-1287814	501(C)(3)	5,000.	0.			GRANT FROM A DONOR ADVISED FUND
WORLD PULSE VOICES 401 NE 19TH AVE, SUITE 200 PORTLAND, OR 97232	41-2065177	501(C)(3)	10,000.	0.			DIRECT SERVICE GRANT FROM BEYOND OUR BORDERS SPECIAL INTEREST FUND
YMCA OF METROPOLITAN DENVER 2625 S COLORADO BLVD DENVER, CO 80222	84-0402696	501(C)(3)	7,500.	0.			WFCO RELIEF FUND
YOUNG INVINCIBLES 1411 K STREET, NW, FOURTH FLOOR WASHINGTON, DC 20005	46-2214021	501(C)(3)	29,000.	0.			WFCO RELIEF FUND, PUBLIC POLICY
YWCA BOULDER COUNTY 2222 14TH STREET BOULDER, CO 80302	84-0500276	501(C)(3)	7,500.	0.			WFCO RELIEF FUND
FOCUS POINTS FAMILY RESOURCE CENTER - 2501 E. 48TH AVE - DENVER, CO 80216	84-1353944	501(C)(3)	5,000.	0.			WFCO RELIEF FUND

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 required in Part I, line 2; Part III, column (b); and any other additional 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

Part IV Supplemental Information

SPECIFIC AND TIMELY INFORMATION ON PROGRAMS AND ORGANIZATIONS.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT:

9TO5, NATIONAL ASSOCIATION OF WORKING WOMEN-COLORADO CHAPTER/9 TO 5

(H) PURPOSE OF GRANT OR ASSISTANCE: WFCO RELIEF FUND, PUBLIC POLICY,
PUBLIC POLICY GRANT AND DIRECT SERVICE GRANT FROM DONOR ADVISED FUND

NAME OF ORGANIZATION OR GOVERNMENT: ONEMORGAN COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: DIRECT SERVICE, WFCO RELIEF
FUND, DIRECT SERVICE GRANT FROM A DONOR ADVISED FUND, WOMEN AND GIRLS OF
COLOR FUND

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2020

Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

Name of the organization: **THE WOMEN'S FOUNDATION OF COLORADO**
 Employer identification number: **84-1039305**

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain **1b**

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? **2**

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? **4a**
- b** Participate in or receive payment from a supplemental nonqualified retirement plan? **4b**
- c** Participate in or receive payment from an equity-based compensation arrangement? **4c**
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? **5a**
- b** Any related organization? **5b**
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? **6a**
- b** Any related organization? **6b**
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III **7**

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III **8**

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? **9**

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

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

Schedule J (Form 990) 2020

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) LAUREN Y. CASTEEL PRESIDENT/CHIEF EXECUTIVE OFFICER	(i)	203,405.	0.	8,607.	12,953.	173.	225,138.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

Multiple horizontal lines for providing supplemental information.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization **THE WOMEN'S FOUNDATION OF COLORADO** Employer identification number **84-1039305**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	18	1,097,654.	SALES PRICE
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	5,000.	ESTIMATED PURCHASE P
26 Other ()				
27 Other ()				
28 Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29** **0**

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

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

Schedule M (Form 990) 2020

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 ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTORS IN PART I,
COLUMN B.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public
Inspection

Name of the organization

THE WOMEN'S FOUNDATION OF COLORADO

Employer identification number

84-1039305

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 \$ 545,980. INCLUDING GRANTS OF \$ 79,695. REVENUE \$ 0.

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

THE EXECUTIVE COMMITTEE SHALL BE COMPRISED OF THE CHAIR OF THE BOARD, THE
CHAIR-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. THE
EXECUTIVE 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 QUORUM IS PRESENT SHALL
BE THE ACT OF THE EXECUTIVE COMMITTEE, EXCEPT AS PROVIDED BELOW. EXCEPT AS
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

Name of the organization THE WOMEN'S FOUNDATION OF COLORADO	Employer identification number 84-1039305
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AUTHORITY TO TAKE EMERGENCY ACTION ON BEHALF OF THE BOARD IF THE EXECUTIVE COMMITTEE DETERMINES THAT SUCH ACTION IS NECESSARY TO PROTECT 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 SUCH EMERGENCY ACTION ON BEHALF OF THE FULL BOARD, IT SHALL PROMPTLY NOTIFY ALL MEMBERS OF THE BOARD AND PROVIDE A REPORT ON THAT ACTION AND THE RATIONALE 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 CIRCUMSTANCES WHICH COULD POTENTIALLY CONSTITUTE A CONFLICT OF INTEREST AS DEFINED IN THE FOUNDATION'S CONFLICT OF INTEREST POLICY. FOR EACH EMPLOYEE, A SIGNED FORM IS OBTAINED, AND RETAINED IN THE EMPLOYEE'S

Name of the organization THE WOMEN'S FOUNDATION OF COLORADO	Employer identification number 84-1039305
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PERSONNEL FILE. FOR EACH BOARD MEMBER A SIGNED FORM IS RETAINED 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 HAVE SIGNED CONFLICT OF INTEREST STATEMENT ON FILE. WHENEVER A POTENTIAL CONFLICT 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 COMPENASTION 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 THE COLORADO ASSOCIATION OF NONPROFITS ANNUAL SALARY SURVEY, 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.