

**2019 Exempt Org. Return**  
prepared for:

**YAMPA VALLEY COMMUNITY FOUNDATION**  
PO BOX 881869  
STEAMBOAT SPRINGS, CO 80488

**THPK**  
PO BOX 773027  
STEAMBOAT SPRINGS, CO 80477-3027

# Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047

**2019**Open to Public  
Inspection

<b>A</b> For the 2019 calendar year, or tax year beginning , 2019, and ending ,															
<b>B</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	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%; vertical-align: top;"> <b>C</b>            YAMPA VALLEY COMMUNITY FOUNDATION            PO BOX 881869            STEAMBOAT SPRINGS, CO 80488         </td> <td style="width:30%; vertical-align: top;"> <b>D</b> Employer identification number            84-0794536  <b>E</b> Telephone number            970-879-8632  <b>G</b> Gross receipts \$ 10,327,225.         </td> </tr> <tr> <td colspan="2"> <b>F</b> Name and address of principal officer: <b>TIM WOHLGENANT</b>            SAME AS C ABOVE         </td> </tr> <tr> <td colspan="2"> <b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No            If "No," attach a list. (see instructions)         </td> </tr> <tr> <td colspan="2"> <b>I</b> 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         </td> </tr> <tr> <td colspan="2"> <b>J</b> Website: ▶ WWW.YVCF.ORG         </td> </tr> <tr> <td colspan="2"> <b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶         </td> </tr> <tr> <td colspan="2"> <b>L</b> Year of formation: 1996 <b>M</b> State of legal domicile: CO         </td> </tr> </table>	<b>C</b> YAMPA VALLEY COMMUNITY FOUNDATION PO BOX 881869 STEAMBOAT SPRINGS, CO 80488	<b>D</b> Employer identification number 84-0794536 <b>E</b> Telephone number 970-879-8632 <b>G</b> Gross receipts \$ 10,327,225.	<b>F</b> Name and address of principal officer: <b>TIM WOHLGENANT</b> SAME AS C ABOVE		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)		<b>I</b> 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		<b>J</b> Website: ▶ WWW.YVCF.ORG		<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation: 1996 <b>M</b> State of legal domicile: CO	
<b>C</b> YAMPA VALLEY COMMUNITY FOUNDATION PO BOX 881869 STEAMBOAT SPRINGS, CO 80488	<b>D</b> Employer identification number 84-0794536 <b>E</b> Telephone number 970-879-8632 <b>G</b> Gross receipts \$ 10,327,225.														
<b>F</b> Name and address of principal officer: <b>TIM WOHLGENANT</b> SAME AS C ABOVE															
<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)															
<b>I</b> 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															
<b>J</b> Website: ▶ WWW.YVCF.ORG															
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶															
<b>L</b> Year of formation: 1996 <b>M</b> State of legal domicile: CO															

**Part I Summary**

<b>Activities &amp; Governance</b>	1	Briefly describe the organization's mission or most significant activities: <u>YAMPA VALLEY COMMUNITY FOUNDATION PROMOTES LOCAL CHARITABLE GIVING, WHILE WORKING AT THE HIGHEST LEVEL OF INTEGRITY TO CONNECT PEOPLE WHO CARE WITH CAUSES THAT MATTER IN NORTHWEST COLORADO.</u>			
	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	19	
	4	Number of independent voting members of the governing body (Part VI, line 1b).....	4	19	
	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a).....	5	6	
	6	Total number of volunteers (estimate if necessary).....	6	50	
	<b>Revenue</b>	7a	Total unrelated business revenue from Part VIII, column (C), line 12.....	7a	0.
b		Net unrelated business taxable income from Form 990-T, line 39.....	7b	0.	
8		Contributions and grants (Part VIII, line 1h).....	2,696,881.	3,475,398.	
9		Program service revenue (Part VIII, line 2g).....	259,878.	288,477.	
10		Investment income (Part VIII, column (A), lines 3, 4, and 7d).....	705,339.	1,493,227.	
11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e).....			
12		Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12).....	3,662,098.	5,257,102.	
<b>Expenses</b>		13	Grants and similar amounts paid (Part IX, column (A), lines 1-3).....	1,218,988.	1,326,644.
		14	Benefits paid to or for members (Part IX, column (A), line 4).....		
		15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10).....	294,880.	377,721.
	16a	Professional fundraising fees (Part IX, column (A), line 11e).....			
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 38,402.			
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e).....	225,467.	274,086.	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25).....	1,739,335.	1,978,451.	
<b>Net Assets or Fund Balances</b>	19	Revenue less expenses. Subtract line 18 from line 12.....	1,922,763.	3,278,651.	
	20	Total assets (Part X, line 16).....	16,083,592.	21,545,484.	
	21	Total liabilities (Part X, line 26).....	1,273,995.	1,790,010.	
	22	Net assets or fund balances. Subtract line 21 from line 20.....	14,809,597.	19,755,474.	

**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.

<b>Sign Here</b>	Signature of officer <u>TIM WOHLGENANT</u>	Date EXECUTIVE DIRECTOR		
	Type or print name and title			
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed PTIN
	GREG HENION	GREG HENION	7/20/20	P00335215
	Firm's name ▶ THPK			
	Firm's address ▶ PO BOX 773027 STEAMBOAT SPRINGS, CO 80477-3027	Firm's EIN ▶ 84-0773720		
				Phone no. (970) 879-1787

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



**Part III** Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III. ☒ **X**

- 1 Briefly describe the organization's mission:

SEE SCHEDULE O

- 2 Did the organization undertake any significant program services during the year which were not listed on the prior

Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

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

If "Yes," describe these changes on Schedule O.

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

4a (Code: ) (Expenses \$ 1,655,613. including grants of \$ 1,326,644.) (Revenue \$ 288,477.)

THE FOUNDATION IS NORTHWEST COLORADO'S PHILANTHROPIC AND NONPROFIT LEADER. OUR ABILITY TO BRING OUR COMMUNITY, GOVERNMENT, AND THE PRIVATE SECTOR TOGETHER RESULTED IN SEVERAL SUCCESSFUL PARTNERSHIPS, INCLUDING THE LAUNCH OF THE YAMPA RIVER ENDOWMENT FUND. OUR ANNUAL GRANT CYCLE AWARDED \$204,193 TO LOCAL NONPROFITS AND PROVIDED 130 SCHOLARSHIPS TOTALING MORE THAN \$206,000 TO LOCAL STUDENTS.

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

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

- 4d Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 1,655,613.



**Part IV Checklist of Required Schedules**

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



**Part IV Checklist of Required Schedules (continued)**

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III.	X	
23 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J.		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25a.		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? If 'Yes,' complete Schedule L, Part 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? If 'Yes,' complete Schedule L, Part 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? If 'Yes,' complete Schedule L, Part II.		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.		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? If 'Yes,' complete Schedule L, Part IV.		X
b A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV.		X
c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If 'Yes,' complete Schedule L, Part IV.		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M.	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M.		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I.		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I.		X
34 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1.		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)? If 'Yes,' complete Schedule R, Part V, line 2.		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2.		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI.		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
1 a 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
<b>2a</b> 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. .... <b>2a</b> 6		
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .....	<b>2b</b> X	
<b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year? .....	<b>3a</b>	X
<b>b</b> If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation on Schedule O. ....	<b>3b</b>	
<b>4a</b> 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)? .....	<b>4a</b>	X
<b>b</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).		
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? .....	<b>5a</b>	X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? .....	<b>5b</b>	X
<b>c</b> If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? .....	<b>5c</b>	
<b>6a</b> 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? .....	<b>6a</b>	X
<b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? .....	<b>6b</b>	
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b> 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? .....	<b>7a</b> X	
<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided? .....	<b>7b</b> X	
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? .....	<b>7c</b>	X
<b>d</b> If 'Yes,' indicate the number of Forms 8282 filed during the year. .... <b>7d</b>		
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? .....	<b>7e</b>	X
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .....	<b>7f</b>	X
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? .....	<b>7g</b>	
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? .....	<b>7h</b>	
<b>8 Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? .....	<b>8</b>	X
<b>9 Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b> Did the sponsoring organization make any taxable distributions under section 4966? .....	<b>9a</b>	
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? .....	<b>9b</b>	
<b>10 Section 501(c)(7) organizations.</b> Enter:		
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12. .... <b>10a</b>		
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities .... <b>10b</b>		
<b>11 Section 501(c)(12) organizations.</b> Enter:		
<b>a</b> Gross income from members or shareholders .... <b>11a</b>		
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) .... <b>11b</b>		
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? .....	<b>12a</b>	
<b>b</b> If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year. .... <b>12b</b>		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state? .....	<b>13a</b>	
<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.		
<b>b</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 .... <b>13b</b>		
<b>c</b> Enter the amount of reserves on hand. .... <b>13c</b>		
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year? .....	<b>14a</b>	X
<b>b</b> If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O. ....	<b>14b</b>	
<b>15</b> 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? .....	<b>15</b>	X
If 'Yes,' see instructions and file Form 720, Schedule N.		
<b>16</b> Is the organization an educational institution subject to the section 4968 excise tax on net investment income? .....	<b>16</b>	X
If 'Yes,' complete Form 4720, Schedule O.		



**Part VI Governance, Management, and Disclosure** For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.Check if Schedule O contains a response or note to any line in this Part VI. ☒ **X****Section A. Governing Body and Management**

	Yes	No
1 a Enter the number of voting members of the governing body at the end of the tax year . . . . . 1 a 19		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
b Enter the number of voting members included on line 1a, above, who are independent . . . . . 1 b 19		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . . . . SEE SCHEDULE O	X	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? . . . . .		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .		X
6 Did the organization have members or stockholders? . . . . .		X
7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . . . .		X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . .		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body? . . . . .	X	
b Each committee with authority to act on behalf of the governing body? . . . . .	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses on Schedule O. . . . .		X

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

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

**Section C. Disclosure**

17 List the states with which a copy of this Form 990 is required to be filed ▶ NONE

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. SEE SCHEDULE O

20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶

YAMPA VALLEY COMMUNITY FNDN P.O. BOX 881869 STEAMBOAT SPRINGS CO 80488 970 879-8632



**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****1 a** 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 dotted 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) MARK ANDERSEN EXECUTIVE DIREC	40 0			X				129,467.	0.	0.
(2) JAY FETCHER DIRECTOR	1 0	X						0.	0.	0.
(3) PAULA COOPER BLACK EMERITUS	1 0	X						0.	0.	0.
(4) ROD HANNA VICE CHAIR	1 0	X		X				0.	0.	0.
(5) DEBRA CONROY DIRECTOR	1 0	X						0.	0.	0.
(6) KATHRYN PEDERSEN SECTY/TREASURER	1 0	X		X				0.	0.	0.
(7) KELLY LANDERS DIRECTOR	1 0	X						0.	0.	0.
(8) TOM SHARP DIRECTOR	1 0	X						0.	0.	0.
(9) CAROL ATHA DIRECTOR	1 0	X						0.	0.	0.
(10) ROB PERLMAN DIRECTOR	1 0	X						0.	0.	0.
(11) GORDON HATTERSLEY DIRECTOR	1 0	X						0.	0.	0.
(12) TARA WEAVER DIRECTOR	1 0	X						0.	0.	0.
(13) CRAIG WASSERMAN DIRECTOR	1 0	X						0.	0.	0.
(14) CRAIG MACNAB DIRECTOR	1 0	X						0.	0.	0.

BAA

TEEA0107L 07/31/19

Form 990 (2019)



**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 dotted 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			
(15) RON KRALL CHAIR	5 0	X		X				0.	0.	0.
(16) PAM WILLIAMS DIRECTOR	1 0	X						0.	0.	0.
(17) PJ WHARTON DIRECTOR	1 0	X						0.	0.	0.
(18) BARBARA WINTERNITZ DIRECTOR	1 0	X						0.	0.	0.
(19) CHRIS DIAMOND DIRECTOR	1 0	X						0.	0.	0.
(20) DAVID FOSTER VICE CHAIR	1 0	X		X				0.	0.	0.
(21)										
(22)										
(23)										
(24)										
(25)										
<b>1 b Subtotal</b>								129,467.	0.	0.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								129,467.	0.	0.

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

**3** Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual

	Yes	No
<b>3</b>		X
<b>4</b>		X
<b>5</b>		X

**4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes,' complete Schedule J for such individual

**5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If 'Yes,' complete Schedule J for such person

**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

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



**Part VIII** Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII. ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns.....	1 a					
	b Membership dues.....	1 b	150,673.				
	c Fundraising events.....	1 c					
	d Related organizations.....	1 d					
	e Government grants (contributions)....	1 e					
	f All other contributions, gifts, grants, and similar amounts not included above....	1 f	3,324,725.				
	g Noncash contributions included in lines 1a-1f.....	1 g	801,325.				
	<b>h Total.</b> Add lines 1a-1f.....		3,475,398.				
Program Service Revenue	Business Code						
	2 a <u>PASSPORT CLUB</u> .....		288,477.	288,477.			
	b .....						
	c .....						
	d .....						
	e .....						
	f All other program service revenue....						
<b>g Total.</b> Add lines 2a-2f.....		288,477.					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts).....		410,379.	410,379.			
	4 Income from investment of tax-exempt bond proceeds.....						
	5 Royalties.....						
	6 a Gross rents.....	(i) Real	(ii) Personal				
		6 a					
		6 b Less: rental expenses.....	6 b				
	c Rental income or (loss).....	6 c					
	d Net rental income or (loss).....						
	7 a Gross amount from sales of assets other than inventory.....	(i) Securities	(ii) Other				
		7 a	6,152,971.				
		b Less: cost or other basis and sales expenses.....	7 b	5,070,123.			
		c Gain or (loss).....	7 c	1,082,848.			
	d Net gain or (loss).....		1,082,848.	1,082,848.			
	8 a Gross income from fundraising events (not including \$..... of contributions reported on line 1c). See Part IV, line 18.....	8 a					
		b Less: direct expenses.....	8 b				
c Net income or (loss) from fundraising events.....							
9 a Gross income from gaming activities. See Part IV, line 19.....	9 a						
	b Less: direct expenses.....	9 b					
	c Net income or (loss) from gaming activities.....						
10 a Gross sales of inventory, less..... returns and allowances.....	10 a						
	b Less: cost of goods sold.....	10 b					
	c Net income or (loss) from sales of inventory.....						
Miscellaneous Revenue	Business Code						
	11 a .....						
	b .....						
	c .....						
	d All other revenue.....						
<b>e Total.</b> Add lines 11a-11d.....							
<b>12 Total revenue.</b> See instructions.....			5,257,102.	1,781,704.	0.	0.	



**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.	1,120,290.	1,120,290.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22.	206,354.	206,354.		
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.	129,467.	38,840.	77,680.	12,947.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0.	0.	0.	0.
7 Other salaries and wages.	199,619.	116,599.	65,232.	17,788.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	10,649.	5,037.	4,622.	990.
9 Other employee benefits.	11,047.	5,193.	4,807.	1,047.
10 Payroll taxes.	26,939.	12,742.	11,692.	2,505.
11 Fees for services (nonemployees):				
a Management.	39,437.		39,437.	
b Legal.	6,320.		6,320.	
c Accounting.	7,400.		7,400.	
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.	47,193.	47,193.		
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion.	4,794.	4,794.		
13 Office expenses.	15,265.		15,265.	
14 Information technology.				
15 Royalties.				
16 Occupancy.	37,458.		37,458.	
17 Travel.	1,514.		1,514.	
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.	2,084.	2,084.		
23 Insurance.	3,017.		3,017.	
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 <u>PASSPORT CLUB EXPENSES</u>	72,739.	72,739.		
b <u>DONOR RELATIONS</u>	23,748.	23,748.		
c <u>MEETINGS/WORKSHOPS</u>	4,941.		4,941.	
d <u>ANNUAL REPORT</u>	3,125.		3,125.	
e All other expenses.	5,051.		1,926.	3,125.
25 Total functional expenses. Add lines 1 through 24e.	1,978,451.	1,655,613.	284,436.	38,402.
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 <input type="checkbox"/> 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
<b>Assets</b>	1 Cash — non-interest-bearing .....	178,285.	1	428,521.
	2 Savings and temporary cash investments .....	582,770.	2	289,736.
	3 Pledges and grants receivable, net .....	351.	3	
	4 Accounts receivable, net .....		4	
	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 .....	4,318.	9	4,318.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	10a 137,130.		
	b Less: accumulated depreciation .....	10b 134,510.		
		4,705.	10c	2,620.
	11 Investments — publicly traded securities .....	14,685,015.	11	20,815,180.
	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 .....	628,148.	15	5,109.	
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	16,083,592.	16	21,545,484.	
<b>Liabilities</b>	17 Accounts payable and accrued expenses .....	9,763.	17	11,949.
	18 Grants payable .....		18	
	19 Deferred revenue .....		19	
	20 Tax-exempt bond liabilities .....		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D .....		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		22	
	23 Secured mortgages and notes payable to unrelated third parties .....		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 .....	1,264,232.	25	1,778,061.
	26 <b>Total liabilities.</b> Add lines 17 through 25 .....	1,273,995.	26	1,790,010.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here ▶</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	27 Net assets without donor restrictions .....	12,808,457.	27	16,325,966.
	28 Net assets with donor restrictions .....	2,001,140.	28	3,429,508.
	<b>Organizations that do not follow FASB ASC 958, check here ▶</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	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 <b>Total net assets or fund balances.</b> .....	14,809,597.	32	19,755,474.
	33 <b>Total liabilities and net assets/fund balances.</b> .....	16,083,592.	33	21,545,484.



**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	5,257,102.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,978,451.
3	Revenue less expenses. Subtract line 2 from line 1	3	3,278,651.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	14,809,597.
5	Net unrealized gains (losses) on investments	5	1,669,644.
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) SEE SCHEDULE O	9	-2,418.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	19,755,474.

**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?	2a	X
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:		
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
b Were the organization's financial statements audited by an independent accountant?	2b	X
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:		
<input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	X
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.	3b	

BAA

TEEA0112L 01/21/20

Form 990 (2019)



**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2019**

Open to Public  
Inspection

Name of the organization

YAMPA VALLEY COMMUNITY FOUNDATION

Employer identification number

84-0794536

**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		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>						



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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.') <b>Part VI</b>	929,869.	1,256,306.	1,380,621.	2,696,881.	2,875,398.	9,139,075.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4 <b>Total.</b> Add lines 1 through 3	929,869.	1,256,306.	1,380,621.	2,696,881.	2,875,398.	9,139,075.
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)						802,534.
6 <b>Public support.</b> Subtract line 5 from line 4						8,336,541.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4	929,869.	1,256,306.	1,380,621.	2,696,881.	2,875,398.	9,139,075.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	229,736.	267,125.	277,085.	343,471.	410,379.	1,527,796.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.
11 <b>Total support.</b> Add lines 7 through 10						10,666,871.
12 Gross receipts from related activities, etc. (see instructions)					12	0.
13 <b>First five years.</b> 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 <b>stop here.</b> ▶ <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	78.15 %
15 Public support percentage from 2018 Schedule A, Part II, line 14	15	78.59 %
16a <b>33-1/3% support test—2019.</b> If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization. ▶ <input checked="" type="checkbox"/>		
b <b>33-1/3% support test—2018.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
17a <b>10%-facts-and-circumstances test—2019.</b> 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 <b>stop here.</b> 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 <b>10%-facts-and-circumstances test—2018.</b> 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 <b>stop here.</b> 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 <b>Private foundation.</b> 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"/>		

BAA

Schedule A (Form 990 or 990-EZ) 2019



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

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

**Section A. Public Support**

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

**Section B. Total Support**

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

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

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

**Section D. Computation of Investment Income Percentage**

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

19a **33-1/3% support tests—2019.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization. ☐b **33-1/3% support tests—2018.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization. ☐20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. ☐



**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

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



**Part IV Supporting Organizations** (continued)

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

**Section B. Type I Supporting Organizations**

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

**Section C. Type II Supporting Organizations**

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

**Section D. All Type III Supporting Organizations**

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

**Section E. Type III Functionally Integrated Supporting Organizations**

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

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

b ☐ The organization is the parent of each of its supported organizations. Complete **line 3** below.

c ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions).

2 Activities Test. Answer (a) and (b) below.

	Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in <b>Part VI</b> identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a	
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b	
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in <b>Part VI</b> .	3a	
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in <b>Part VI</b> the role played by the organization in this regard.	3b	



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

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

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 <b>Adjusted Net Income</b> (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 <b>Total</b> (add lines 1a, 1b, and 1c)	1d		
e <b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 <b>Minimum Asset Amount</b> (add line 7 to line 6)	8		

Section C – Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 <b>Distributable Amount.</b> 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).			

BAA

Schedule A (Form 990 or 990-EZ) 2019



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

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

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

BAA

Schedule A (Form 990 or 990-EZ) 2019



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

**PART II, LINE 1 - UNUSUAL GRANTS**

2015	2016	2017	2018	2019	TOTAL
\$ 0.	\$ 0.	\$ 0.	\$ 706,334.	\$ 600,000.	\$ 1,306,334.



**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](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2019**

Name of the organization

YAMPA VALLEY COMMUNITY FOUNDATION

Employer identification number

84-0794536

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

Form 990-PF

☐ 527 political organization☐ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck 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, 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

Employer identification number

YAMPA VALLEY COMMUNITY FOUNDATION

84-0794536

**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 information once. See instructions.) ▶ \$

contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ..... \$            N/A  
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
-----	N/A		
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
-----			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
-----			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
-----			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee



**SCHEDULE D  
(Form 990)**Department of the Treasury  
Internal Revenue Service

Name of the organization

**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2019****Open to Public  
Inspection**

Employer identification number

YAMPA VALLEY COMMUNITY FOUNDATION

84-0794536

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year.....	71	
2 Aggregate value of contributions to (during year) .....	1,331,520.	
3 Aggregate value of grants from (during year) .....	776,003.	
4 Aggregate value at end of year.....	7,603,850.	

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?..... ☒ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?..... ☒ Yes ☐ No

**Part II Conservation Easements.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (for example, recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

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

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

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

4 Number of states where property subject to conservation easement is located ► .....

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?..... ☐ Yes ☐ No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?..... ☐ Yes ☐ No

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

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 8.

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

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

(i) Revenue included on Form 990, Part VIII, line 1..... ► \$ .....

(ii) Assets included in Form 990, Part X..... ► \$ .....

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

a Revenue included on Form 990, Part VIII, line 1..... ► \$ .....

b Assets included in Form 990, Part X..... ► \$ .....



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

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

- a ☐ Public exhibition  
 b ☐ Scholarly research  
 c ☐ Preservation for future generations  
 d ☐ Loan or exchange program  
 e ☐ Other \_\_\_\_\_

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1 a 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.....	1 c
d Additions during the year.....	1 d
e Distributions during the year.....	1 e
f Ending balance.....	1 f

2 a 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
1 a Beginning of year balance.....	1,985,103.	2,164,869.	1,683,756.	1,579,652.	585,105.
b Contributions.....	1,082,622.	200.	18,677.	975.	1,051,874.
c Net investment earnings, gains, and losses.....	430,064.	-134,351.	272,740.	142,927.	-20,911.
d Grants or scholarships.....	63,697.	25,100.	45,500.	24,500.	20,800.
e Other expenditures for facilities and programs.....				0.	
f Administrative expenses.....	21,438.	20,515.	16,868.	15,298.	15,616.
g End of year balance.....	3,412,654.	1,985,103.	1,912,805.	1,683,756.	1,579,652.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ▶ \_\_\_\_\_ %  
 b Permanent endowment ▶ \_\_\_\_\_ %  
 c Term endowment ▶ \_\_\_\_\_ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) Unrelated organizations.....

(ii) Related organizations.....

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If 'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R?.....

4 Describe in Part XIII the intended uses of the organization's endowment funds. SEE PART XIII

**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
1 a Land.....				
b Buildings.....				
c Leasehold improvements.....	91,618.		89,799.	1,819.
d Equipment.....	45,512.		44,711.	801.
e Other.....				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ▶ 2,620.

BAA

Schedule D (Form 990) 2019



**Part VII Investments – Other Securities.**

N/A

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) .....		
(I) .....		
<b>Total.</b> (Column (b) must equal Form 990, Part X, column (B) line 12.) ..		

**Part VIII Investments – Program Related.**

N/A

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) .....		
(10) .....		
<b>Total.</b> (Column (b) must equal Form 990, Part X, column (B) line 13.) ..		

**Part IX Other Assets.**

N/A

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

(a) Description	(b) Book value
(1) .....	
(2) .....	
(3) .....	
(4) .....	
(5) .....	
(6) .....	
(7) .....	
(8) .....	
(9) .....	
(10) .....	
<b>Total.</b> (Column (b) must equal Form 990, Part X, column (B) line 15.) ..	

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes .....	
(2) ASSETS HELD FOR OTHERS .....	1,724,532.
(3) FUNDS HELD AS FISCAL AGENT .....	53,529.
(4) .....	
(5) .....	
(6) .....	
(7) .....	
(8) .....	
(9) .....	
(10) .....	
(11) .....	
<b>Total.</b> (Column (b) must equal Form 990, Part X, column (B) line 25.) ..	1,778,061.

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	6,846,107.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments.....	2a	1,669,644.
b	Donated services and use of facilities.....	2b	
c	Recoveries of prior year grants.....	2c	
d	Other (Describe in Part XIII.)... SEE PART XIII	2d	-72,739.
e	Add lines 2a through 2d.....	2e	1,596,905.
3	Subtract line 2e from line 1.....	3	5,249,202.
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	
b	Other (Describe in Part XIII.)... SEE PART XIII	4b	7,900.
c	Add lines 4a and 4b.....	4c	7,900.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).....	5	5,257,102.

**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	1,900,230.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities.....	2a	
b	Prior year adjustments.....	2b	
c	Other losses.....	2c	
d	Other (Describe in Part XIII.).....	2d	
e	Add lines 2a through 2d.....	2e	
3	Subtract line 2e from line 1.....	3	1,900,230.
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	
b	Other (Describe in Part XIII.)... SEE PART XIII	4b	78,221.
c	Add lines 4a and 4b.....	4c	78,221.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).....	5	1,978,451.

**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 - INTENDED USES OF ENDOWMENT FUND**

FUNDS ARE DESIGNATED TO SUPPORT EDUCATION, RECREATION AND OTHER NON PROFIT ORGANIZATIONS.

**SCHEDULE D, PART XI, LINE 2D****OTHER REVENUE INCLUDED IN F/S BUT NOT INCLUDED ON FORM 990**

PROGRAM EXP NETTED ON FINANCIAL STMT.....	\$	-72,739.
TOTAL	\$	-72,739.



**Part XIII** Supplemental Information (continued)**SCHEDULE D, PART XI, LINE 4B****OTHER REVENUE INCLUDED ON FORM 990 BUT NOT INCLUDED IN F/S**

CONTRIBUTIONS TO FISCAL AGENT ACCOUNTS.....	\$	7,900.
TOTAL	\$	<u>7,900.</u>

**SCHEDULE D, PART XII, LINE 4B****OTHER EXPENSES INCLUDED ON FORM 990 BUT NOT INCLUDED IN F/S**

DISBURSEMENTS FROM FISCAL AGENT ACCOUNTS.....	\$	5,482.
PROGRAM EXP NETTED ON FINANCIAL STMT.....		72,739.
TOTAL	\$	<u>78,221.</u>



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](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

2019

Open to Public  
Inspection

Name of the organization

YAMPA VALLEY COMMUNITY FOUNDATION

Employer identification number

84-0794536

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. SEE PART IV

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 non-cash assistance	(h) Purpose of grant or assistance
(1) SEE SCHEDULE ATTACHED SEE SCHEDULE SEE SCHEDULE, CO 80488			1,120,290.	0.			
(2) -----							
(3) -----							
(4) -----							
(5) -----							
(6) -----							
(7) -----							
(8) -----							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..... 65

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

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

TEEA3901L 07/10/19

Schedule I (Form 990) (2019)



**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 noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 SCHOLARSHIPS TO COLORADO SCHOOLS	66	104,404.			
2 SCHOLARSHIPS TO WYOMING SCHOOLS	13	23,000.			
3 SCHOLARSHIPS TO KANSAS SCHOOLS	1	250.			
4 SCHOLARSHIPS TO VERMONT SCHOOLS	2	7,250.			
5 SCHOLARSHIPS TO CALIF SCHOOLS	7	11,750.			
6 SCHOLARSHIPS TO MONTANA SCHOOLS	6	8,000.			
7 SCHOLARSHIPS TO WA SCHOOLS	3	5,500.			
<b>Part IV</b> Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.					

**PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANTS FUNDS IN U.S.**

FOR GRANTS REQUIRING DOCUMENTATION SUPPORTING THE USE OF THE FUNDS A FINAL ACCOUNTING

IS OBTAINED FROM THE GRANTEE



**Part III** Continuation of Grants and Other Assistance to Domestic Individuals (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS TO CONNECTICUT SCHOOLS	1	1,000.			
SCHOLARSHIPS TO HAWAII SCHOOLS	1	1,250.			
SCHOLARSHIPS TO ARIZONA SCHOOLS	5	6,000.			
SCHOLARSHIPS TO UTAH SCHOOLS	1	1,000.			
SCHOLARSHIPS TO MICHIGAN SCHOOLS	2	1,250.			
SCHOLARSHIPS TO INDIANA SCHOOLS	1	2,000.			
SCHOLARSHIPS TO TEXAS SCHOOLS	2	4,250.			
SCHOLARSHIPS TO NEBRASKA SCHOOLS	3	4,500.			
SCHOLARSHIPS TO OREGON SCHOOLS	1	750.			
SCHOLARSHIPS TO NEW HAMPSHIRE SCH	1	500.			
SCHOLARSHIP TO MASSACHUSETTS SCHOOL	3	1,500.			
SCHOLARSHIPS TO PENN SCHOOLS	1	2,250.			
SCHOLARSHIPS TO IDAHO SCHOOLS	1	750.			
SCHOLARSHIPS TO FLORIDA SCHOOLS	4	4,950.			
SCHOLARSHIPS TO NEW YORK SCHOOLS	2	3,500.			
SCHOLARSHIPS TO S. CAROLINA SCHOOLS	1	7,500.			
SCHOLARSHIPS TO TENNESSEE SCHOOLS	1	1,500.			
SCHOLARSHIPS TO WISCONSIN SCHOOLS	1	1,750.			



**SCHEDULE M**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Noncash Contributions**

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

OMB No. 1545-0047

**2019**

Open to Public  
Inspection

Name of the organization

**YAMPA VALLEY COMMUNITY FOUNDATION**

Employer identification number

**84-0794536**

**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	13	801,325.	PUBLIC EXCHANGE
10 Securities — Closely held stock .....				
11 Securities — Partnership, LLC, or trust interests .....				
12 Securities — Miscellaneous .....				
13 Qualified conservation contribution — Historic structures .....				
14 Qualified conservation contribution — Other .....				
15 Real estate — Residential .....				
16 Real estate — Commercial .....				
17 Real estate — Other .....				
18 Collectibles .....				
19 Food inventory .....				
20 Drugs and medical supplies .....				
21 Taxidermy .....				
22 Historical artifacts .....				
23 Scientific specimens .....				
24 Archeological artifacts .....				
25 Other ▶ ( ..... ) .....				
26 Other ▶ ( ..... ) .....				
27 Other ▶ ( ..... ) .....				
28 Other ▶ ( ..... ) .....				

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

**29**

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

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

**Schedule M (Form 990) 2019**



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

---



**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](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2019**

Open to Public  
Inspection

Name of the organization

**YAMPA VALLEY COMMUNITY FOUNDATION**

Employer identification number

**84-0794536**

**FORM 990, PART III, LINE 1 - ORGANIZATION MISSION**

THE FOUNDATION'S HIGHEST MISSION IS TO SUPPORT A VIBRANT NONPROFIT COMMUNITY THROUGH THE POWER OF PHILANTHROPY. WE TAKE THE LEAD TO SUPPORT INNOVATIVE PROGRAMS THROUGH OUR COMMUNITY GRANT CYCLE AND WORK WITH PASSIONATE DONORS TO ACHIEVE THEIR PHILANTHROPIC GOALS. THE YAMPA VALLEY COMMUNITY FOUNDATION HAS BEEN SERVING MOFFAT AND ROUTT COUNTIES SINCE 1996.

**FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECTORS, ETC.**

PJ WHARTON AND ROB PERLMAN: BUSINESS RELATIONSHIP

**FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS**

FORM 990 IS REVIEWED BY THE TREASURER AND PRESENTED TO THE BOARD OF DIRECTORS FOR FINAL REVIEW TO ENSURE THE RETURN IS ACCURATE.

**FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS**

REVIEW OF POTENTIAL CONFLICTS DONE ON AN ONGOING BASIS. CONFLICT OF INTEREST POLICIES COVER BOARD OF DIRECTORS, OFFICERS, EMPLOYEES, COMMITTEE MEMBERS AND VOLUNTEERS. DETERMINATIONS OF CONFLICT OF INTEREST ARE MADE AT THE NEXT HIGHER LEVEL OF AUTHORITY. CONFLICT OF INTEREST DETERMINATIONS AT THE BOARD OF DIRECTOR LEVEL IS MADE BY REMAINING BOARD MEMBERS. POLICY RESTRICTS INDIVIDUALS WITH A CONFLICT FROM PARTICIPATING IN DELIBERATIONS AND DECISION MAKING.

**FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT**

SALARY OF THE EXECUTIVE DIRECTOR IS DETERMINED BY THE BOARD OF DIRECTORS. SURVEYS ARE USED TO DETERMINE COMPARABLE COMPENSATION FOR SIMILAR ORGANIZATIONS AND POSITIONS.

**FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE**

COPIES OF DOCUMENTS ARE PROVIDED TO THE REQUESTING PARTY AND ARE AVAILABLE ON THE FOUNDATION'S WEBSITE AT [WWW.YVCF.ORG](http://WWW.YVCF.ORG)



Name of the organization

YAMPA VALLEY COMMUNITY FOUNDATION

Employer identification number

84-0794536

**FORM 990, PART XI, LINE 9  
OTHER CHANGES IN NET ASSETS OR FUND BALANCES**

CONTRIBUTIONS TO FISCAL AGENT ACCOUNTS.....	\$	-7,900.
DISBURSEMENTS FROM FISCAL AGENT ACCOUNTS.....		5,482.
TOTAL	\$	<u>-2,418.</u>



Yampa Valley Community Foundation  
Schedule I - Part II  
Grants and Other Assistance to Domestic Organizations and Domestic Governments  
2019

Name		Amount	Description
Advocates of Routt County	84-0939362	250.00	Season 13 presentation
		2,000.00	Social Change Advocacy
PO Box 771424		4,600.00	Social Change Advocacy
Steamboat Springs, CO 80477		200.00	General Operating
		3,600.00	For client dental work: lab costs
		1,000.00	General Operating
		5,000.00	Fall Grant Cycle
		1,645.00	October Request
		50.00	General Operating
		300.00	General Operating from Alex Pond
		200.00	General Operating: From Dianne Bertini
		1,200.00	December Giving Circle Request
		5,000.00	Social Change Program
		<u>25,045.00</u>	
American Legion Post 44	90-1017997	9,514.63	General Operating = Boy Scout Troop #194
PO Box 772797		<u>9,514.63</u>	
Steamboat Springs			
BookTrails Inc.	47-2838786	1,500.00	Scholarships
		500.00	General Operating
68 9th Street		500.00	General Operating
Steamboat Springs, CO 80487		1,000.00	General Operating
		200.00	General Operating:
		1,000.00	General Operating
		100.00	General Operating
		500.00	2019 Community Grant Round
		1,000.00	2019 Community Grant Round
		2,500.00	2019 Community Grant Round
		500.00	2019 Community Grant Round
		500.00	2019 Community Grant Round
		2,500.00	General Operating
		2,500.00	General Operating
		250.00	General Operating: Jon and Wendy Wade
		<u>15,050.00</u>	
Boys and Girls Club of NW Colorado	75-3124416	10,000.00	General Operating - Steamboat Springs
PO Box 1251		200.00	General Operating: Gift from Derek Hodson
Craig, CO 81625		500.00	General Operating
		1,000.00	For Steamboat/Craig Summer Programs
		10,000.00	General Operating
		10,000.00	General Operating
		1,000.00	\$500Craig / \$500 Steamboat healthy breakfast and snacks
		1,000.00	General Operating
		10,000.00	General Operating Q2 disbursement
		100.00	General Operating:
		500.00	General Operating
		10,000.00	General Operating for Quarterly
		912.00	2019 Community Grant Round
		588.00	2019 Community Grant Round
		2,250.00	2019 Community Grant Round
		1,000.00	2019 Community Grant Round
		50.00	General Operating
		4,520.00	General Operating
		2,000.00	General Operating
		500.00	General Operating - From Derek Hodson
		922.00	November Request
		500.00	General Operating from Alex Pond
		10,000.00	General Operating for Quarterly
		<u>77,542.00</u>	
Chicago Shakespeare Theater	36-3467607	5,000.00	General Operating
800 E Grand Avenue		<u>5,000.00</u>	
Chicago, IL 60611			
36-3467607			
Chief Theater	27-3209466	1,350.00	Chief Players
		100.00	General Operating
PO BOX 776121		2,000.00	General Operating: Matching Challenge
Steamboat Springs, CO 80477		500.00	General Operating
		2,500.00	2019 Community Grant Round
		1,500.00	2019 Community Grant Round
		25.00	General Operating
		1,000.00	Production of SHORT & FUNNY: Take Two
		300.00	General Operating from Alex Pond



Yampa Valley Community Foundation  
Schedule I - Part II  
Grants and Other Assistance to Domestic Organizations and Domestic Governments  
2019

Name		Amount	Description
		9,275.00	
City of Steamboat Springs		25,000.00	Park Expenses
		20,000.00	Penstemon Garden and Trails Upgrade Project
PO Box 775088		20,000.00	Trail Edging Project
Steamboat Springs		14,121.00	Reimburse the cost of the Trails Widening Project
CO 80487		2,420.00	2019 Trail Maintenance Endowment Fund Grant Award
		800.00	2019 Wildlife Habitat Improvement Local District
		10,000.00	Park Operations
		8,236.00	Trails Project
		100,577.00	
Community Clinics at Memorial Regional Health	26-2303349	3,000.00	August 2019 Women's Giving Circle Request
750 Hospital Loop		1,871.00	2019 Community Grant Round
Craig, CO 81625		1,129.00	2019 Community Grant Round
26-2303349		2,000.00	2019 Community Grant Round
		8,000.00	
Emerald Mountain School	84-1240640	100.00	General Operating
		3,500.00	STEAM Lab
PO Box 770723		1,500.00	Support of Annual Fund
Steamboat Springs, CO 80487		5,000.00	Emerald Fund
		5,000.00	General Operating
84-1240640		500.00	General Operating
		15,600.00	
Forward Edge International	91-1646598	2,500.00	General Operating: Sumo for SAHSAC
PO Box 1510		4,500.00	Sell a Home, Save a Child Program
Brush Prairien WA 98606		7,000.00	
91-1646598			
Freedom Hooves	46-0649506	5,000.00	2019 Community Grant Round
PO Box 963		1,247.54	General Operating: Yampa Valley Gives Gifts
Craig, CO 81625		6,247.54	
46-0649506			
Friends of the Yampa River	27-3657002	500.00	General Operating
		3,000.00	2019 Community Grant Round
PO Box 771654		1,000.00	General Operating
Steamboat Springs, CO 80477		250.00	Impact 100 Nonprofit Presenter
		500.00	General Operating from Alex Pond
27-3657002		12,000.00	General Operating
		17,250.00	
Friends of Wilderness	20-4597607	3,300.00	2019 Community Grant Round
PO Box 771318		989.80	Colorado Gives Gifts
Steamboat Springs, CO 80477		49.00	Yampa Valley Gives Gifts to FOW
		4,910.82	General Operating: Yampa Valley Gives Gifts
20-4597607		9,249.62	
Girl Scouts of Colorado	84-0410630	9,514.63	General Operating
3801 E. Florida Avenue, Ste. 720		25.00	Steamboat Springs Troop; Nancy Macklow
Denver, CO 80210		9,539.63	
84-0410630			
Hayden School District No. RE-1	84-6012221	3,000.00	Babson-Carpenter Career & Technical
PO Box 70		3,500.00	Babson-Carpenter Career and Technical E
Hayden, CO 81639		6,500.00	
84-6012221			
High Altitude Basketball		1,500.00	2019 Community Grant Round
PO Box 773836		1,500.00	2019 Community Grant Round
Steamboat Springs, CO 80477		1,897.00	2019 Community Grant Round
		103.00	2019 Community Grant Round

Yampa Valley Community Foundation  
Schedule I - Part II  
Grants and Other Assistance to Domestic Organizations and Domestic Governments  
2019

Name		Amount	Description
		691.64	General Operating:
		<u>5,691.64</u>	
Holy Name Catholic Church	84-1283292	4,618.26	Expenses for the Amal Production
PO Box 774198		500.00	Holy Name Enrichment Center Capital Campaign
Steamboat Springs, CO 80477		1,000.00	Enrichment Center Building Fund
		750.00	Video Production for Mozart Mass
		4,000.00	Good Shepherd Fund
		<u>5,000.00</u>	General Operating
		<u>15,868.26</u>	
Hope Pregnancy Center	84-0996670	1,000.00	2019 Community Grant Round
PO Box 761		2,515.00	2019 Community Grant Round
Craig, CO 81625		1,285.00	2019 Community Grant Round
		<u>200.00</u>	2019 Community Grant Round
		<u>5,000.00</u>	
Horizons Specialized Services	84-0705884	5,285.90	General Operating
PO Box 774867		1,070.00	Fall Grant Cycle
Steamboat Springs, CO 80477		<u>50.00</u>	General Operating
		<u>6,405.90</u>	
Humane Society of Moffat County	27-0074973	500.00	2019 Community Grant Round
PO BOX 1587		2,000.00	2019 Community Grant Round
Craig, CO 81625		2,500.00	2019 Community Grant Round
		<u>920.45</u>	General Operating: Yampa Valley Gives Gifts
		<u>5,920.45</u>	
Integrated Community	46-1325467	1,602.15	Spring Grant Cycle
PO BOX 880587		200.00	General Operating
Steamboat Springs, CO 80488		1,300.00	April grant request
		60.00	General Operating
		500.00	General Operating
		200.00	Raising a Reader Program:
		500.00	General Operating
		500.00	2019 Community Grant Round
		1,000.00	2019 Community Grant Round
		1,000.00	2019 Community Grant Round
		4,500.00	Fall Grant Cycle
		1,000.00	General Operating
		3,000.00	General Operating
		250.00	General Operating
		<u>2,000.00</u>	Simultaneous Interpretation Equipment
		<u>17,612.15</u>	
Junior Achievement Rocky Mountain	84-0430495	500.00	General Operating
1445 Market St, Suite 200		2,000.00	2019 Community Grant Round
Denver, CO		1,000.00	2019 Community Grant Round
		1,000.00	2019 Community Grant Round
		<u>500.00</u>	General Operating
		<u>5,000.00</u>	
Lift-Up Food Bank & Emergency Services	84-1385379	500.00	General Operating
2125 Curve Court		4,412.00	Match: December Produce Drive
Steamboat Springs, CO 80487		1,960.00	Food Bank - to purchase food
		1,000.00	Emergency Housing Assistance Program
		5,285.90	General Operating
		1,960.00	Food Bank - to purchase food
		4,880.00	July 2019 \$5,000 Produce Matching
		5,320.00	Lift-UP product Match -
		1,500.00	August Grant Request
		500.00	General Operating
		330.00	General Operating from Debbie Wilson
		1,960.00	Food Bank - to purchase food
		500.00	2019 Community Grant Round
		1,750.00	2019 Community Grant Round
		1,000.00	2019 Community Grant Round
		1,750.00	2019 Community Grant Round
		1,000.00	Emergency Financial Assistance Housing
		1,000.00	General Operating
		100.00	Emergency Fund from Derek Hodson
		50.00	General Operating
		1,960.00	Food Bank - to purchase food
		200.00	Produce Match: From Allison Montgomery
		240.00	Produce Match: From Michael Eggert
		200.00	Produce Match from Jon Kowalsky
		400.00	Produce Match: From Dianne Bertini



Yampa Valley Community Foundation  
Schedule I - Part II  
Grants and Other Assistance to Domestic Organizations and Domestic Governments  
2019

Name		Amount	Description
		200.00	General Operating
		200.00	Produce Match: From Derek Hodson
		40,157.90	
Moffat County United Way	84-0746208	3,000.00	2019 Community Grant Round
PO BOX 995		2,000.00	2019 Community Grant Round
Craig, CO 81625		5,000.00	
Mountain Valley Horse Rescue		4,500.00	2019 Community Grant Round
33933 Colorado River Rd		500.00	2019 Community Grant Round
McCoy, CO 80463		5,000.00	
Mountain Village Montessori Charter School	47-1682248	35,000.00	\$25K Gen. Operating, \$5K Playground, \$5K Project based learning pilot program
PO BOX 883141		9,247.14	General Operating: Yampa Valley Gives Gifts
Steamboat Springs, CO 80488		44,247.14	
North Routt Community Charter School	84-1606735	4,706.70	2019 North Routt Community Fund Grant Award
26990 Eagle Lane		2,500.00	Sancy Shaw Soccer Field Fund
Clark, CO 80428		7,206.70	
84-1606735			
Northwest Colorado Center for Independence	84-1473968	500.00	March grant request
		5,136.18	Spring Grant Cycle
1855 Shield Drive, Unit 300		1,425.00	3/22/19 Request
Steamboat Springs, CO 80487		3,000.00	June 2019 request: Bathroom remodel
		495.00	June Request: Rental assistance to remain independent
		200.00	General Operating - Derek Hodson
		2,500.00	Fall Grant Cycle
		275.00	October Grant Request
		2,000.00	Assist Steamboat Springs Youth to the Youth Leadership Forum
		500.00	General Operating from Derek Hodson
		1,000.00	Youth Transition Service Program
		17,031.18	
Northwest Colorado Community Health Partnership	81-2578785	1,750.00	March grant request
PO Box 881753		1,850.00	4/2/19 Request
Steamboat Springs, CO 80488		1,500.00	2/8/19 Request
		1,000.00	Choose When
81-2578785		75.00	Choose When
		6,175.00	
Northwest Colorado Health	84-0564998	5,000.00	General Operating
		2,400.00	Spring Grant Cycle
940 Central Park Drive #101		100.00	General Operating - Hospice
Steamboat Springs, CO 80487		5,285.90	The Haven - General Operating
		5,285.90	General Operating
		5,285.90	Hospice - General Operating
		5,285.90	Indigent Health Care
		100.00	Rubber Ducky Friend for Hospice
		1,000.00	General Operating
		1,000.00	2019 Community Grant Round
		2,000.00	2019 Community Grant Round
		4,000.00	Dental Health
		1,000.00	Aging Well Program
		500.00	General Operating
		500.00	Hospice
		38,743.60	
Northwest Rocky Mountain CASA	84-1257398	2,500.00	General Operating from Jon and Wendy Wade
		150.00	General Operating: Gift from Alex Pond
PO BOX 776292		900.00	General Operating: Gift from Jon Kowalsky
Steamboat Springs, CO 80487		250.00	General Operating: Gift from Dianne Bertini
		1,016.00	2019 Community Grant Round
		1,984.00	2019 Community Grant Round
		2,000.00	2019 Community Grant Round
		250.00	General Operating
		9,050.00	
Partners in Routt County	84-1339921	1,500.00	General Operating
		10,000.00	Snowball Grant Recipient 2019

Yampa Valley Community Foundation  
Schedule I - Part II  
Grants and Other Assistance to Domestic Organizations and Domestic Governments  
2019

Name	Amount	Description
PO BOX 774325	300.00	General Operating: Gift from Derek Hodson
Steamboat Springs, CO 80477	9,514.63	General Operating
	500.00	General Operating
	2,500.00	2019 Community Grant Round
	50.00	General Operating
	<u>24,364.63</u>	
Perry Mansfield Performing Arts Camp	500.00	General Operating
84-1158773	2,000.00	2019 Community Grant Round
40755 CR#36	500.00	General Operating
Steamboat Springs, CO 80487	6,500.00	Carolee D Atha Scholarship Fund
	25.00	General Operating
	250.00	General Operating
	<u>9,775.00</u>	
Planned Parenthood of the Rocky Mountains	500.00	General Operating
84-0404253	500.00	General Operating
PO Box 772865	500.00	General Operating
Steamboat Springs, CO 80477	2,000.00	2019 Community Grant Round
	3,000.00	2019 Community Grant Round
	1,500.00	General Operating
	<u>8,000.00</u>	
Reaching Everyone Preventing Suicide (REPS)	1,000.00	General Operating
45-4420603	1,500.00	2019 Community Grant Round
PO BOX 773324	1,500.00	2019 Community Grant Round
Steamboat Springs, CO 80477	1,000.00	2019 Community Grant Round
	1,000.00	2019 Community Grant Round
	50.00	General Operating
	3,540.00	QPR Programming and Youth Counseling
	200.00	General Operating: From Dianne Bertini
	<u>9,790.00</u>	
Rocky Mountain Down Syndrome Association	2,000.00	Spring Grant Cycle
74-2237307	4,000.00	2019 Community Grant Round
7200 E. Hampton Avenue Suite 301	500.00	2019 Community Grant Round
Denver, CO 80224	<u>6,500.00</u>	
Rocky Mountain Youth Corps	700.00	Yampa Valley Science School Scholarships
84-0404817	100.00	General Operating
991 Captain Jack Drive	1,000.00	General Operating
Steamboat Springs, CO 80487	500.00	General Operating
	500.00	2019 Community Grant Cycle
	2,500.00	2019 Community Grant Cycle
	500.00	2019 Community Grant Cycle
	500.00	General Operating
	50.00	General Operating
	<u>6,350.00</u>	
Rocky Mt Conference United	9,514.63	Youth Groups for United Methodist Church (Steamboat Springs)
84-0485022	<u>9,514.63</u>	
PO Box 773748		
Steamboat Springs, CO 80487		
Routt County 4H Council (Routt County Extension Office)	9,514.63	4-H Breeding Program
PO Box 772830	<u>9,514.63</u>	
Steamboat Springs, CO 80487		
Routt County 4-H Scholarship Foundation	5,285.90	Scholarships
20-1959721	1,500.00	General Operating
PO Box 771042	2,500.00	General Operating
Steamboat Springs, CO 80487	<u>9,285.90</u>	
Routt County Council on Aging	250.00	Senior Scholarships for Meals
84-0678596	2,000.00	Spring Grant Cycle
PO BOX 770207	500.00	2019 Community Grant Round
Steamboat Springs, CO 80487	2,500.00	Fall Grant Cycle
	100.00	In Memory of Cathy Borland
	150.00	General Operating
	250.00	General Operating from Derek Hodson
	1,000.00	Meal Scholarship for Seniors
	<u>6,750.00</u>	



Yampa Valley Community Foundation  
Schedule I - Part II  
Grants and Other Assistance to Domestic Organizations and Domestic Governments  
2019

Name		Amount	Description
Routt County Crisis Support PO BOX 771392 Steamboat Springs, CO 80487	81-1754979	1,000.00	First Responders Mental Health Program
		1,000.00	First Responder Mental Health Assistance Program
		2,500.00	2019 Community Grant Round
		415.00	2019 Community Grant Round
		85.00	2019 Community Grant Round
		2,000.00	2019 Community Grant Round
		<u>7,000.00</u>	
Routt County Foundation for Senior Citizens PO BOX 770246 Steamboat Springs, CO 80487	84-0679790	2,000.00	Capital improvement project to replace the common area lighting
		5,285.90	General Operating
		<u>7,285.90</u>	
Routt County Humane Society PO BOX 772080 Steamboat Springs, CO 80487	74-2393869	300.00	General Operating: Gift from Derek Hodson
		3,000.00	2019 Community Grant Round
		500.00	2019 Community Grant Round
		1,500.00	2019 Community Grant Round
		50.00	In Memory of Betty Leipold
		150.00	Luna the Dog's Surgery: Grant from Dianne Bertini
		250.00	General Operating
		<u>5,750.00</u>	
Routt County United Way  PO BOX 774005 Steamboat Springs, CO 80487	84-0920741	2,000.00	Spring Grant Cycle / Routt to Work
		250.00	General Operating
		5,285.90	General Operating
		1,000.00	General Operating
		1,000.00	General Operating
		500.00	Imagination Library
		1,000.00	Routt to Work Program - Routt County United Way 2019 Community Grant Cycle
		3,000.00	Routt to Work Program - Routt County United Way 2019 Community Grant Cycle
		500.00	Routt to Work Program - Routt County United Way 2019 Community Grant Cycle
		5,000.00	Routt to Work - Fall Grant Cycle
		5,000.00	Routt to Work - Fall Grant Cycle
		2,400.00	Routt to Work - Fall Grant Cycle
		500.00	General Operating
		500.00	Holiday Market - From Derek Hodson
		1,000.00	Holiday Market - From Wendy Wade
		1,000.00	Gift Made through YVCF to United Way from Gary Pon - General Operating
		500.00	General Operating
		1,500.00	Routt to Work: Women's Giving Circle December Request
		1,000.00	Holiday Exchange Market
		<u>32,935.90</u>	
Seminars At Steamboat  PO BOX 774731 Steamboat Springs, CO 80477	26-2760659	500.00	Macnab Fund to Seminars at Steamboat Fund
		250.00	General Operating
		2,000.00	General Operating
		500.00	General Operating
		100.00	General Operating
		500.00	General Operating
		550.00	General Operating
		1,750.00	2019 Community Grant Round
		1,500.00	2019 Community Grant Round
		<u>7,650.00</u>	
So. Routt Recreation Association  PO Box 103 Oak Creek, CO 80467		1,133.00	2019 Community Grant Round
		1,367.00	2019 Community Grant Round
		2,000.00	2019 Community Grant Round
		5,500.00	2019 Community Grant Round
		5,000.00	2019 Community Grant Round
		<u>15,000.00</u>	
STARS  PO BOX 770208 Steamboat Springs, CO 80477	20-5823688	5,000.00	General Operating
		1,000.00	Passthrough gift from Anonymous donor
		2,000.00	Challenge Grant for General Operating: Gift from Jon Wade
		300.00	General Operating from Wendy Wade
		1,000.00	General Operating
		1,500.00	General Operating from Ryan Shattuck
		2,205.00	2019 Community Grant Round
		295.00	2019 Community Grant Round
		500.00	2019 Community Grant Round
		300.00	General Operating from Alex Pond
		<u>14,100.00</u>	
Steamboat Art Museum  PO Box 883434 Steamboat Springs, CO 80477	20-3867662	16,280.00	General Operating
		500.00	General Operating
		100.00	General Operating
		100.00	Family Membership

Yampa Valley Community Foundation  
Schedule I - Part II  
Grants and Other Assistance to Domestic Organizations and Domestic Governments  
2019

Name		Amount	Description
		650.00	General Operating
		500.00	General Operating
		50.00	General Operating
		30,000.00	General Operating
		4,409.92	General Operating from Stephen and Joanne Downes
		2,500.00	General Operating
		<u>55,089.92</u>	
Steamboat Creates	23-7170977	5,000.00	Winter Carnival Snow Sculpture Scholarships
		2,000.00	YAA School Days Off expansion
PO BOX 774284		500.00	General Operating
Steamboat Springs, CO 80477		50.00	Community Dance Program from Derek Hodson
		30,000.00	New Murals in Downtown Steamboat Springs
		8,000.00	Placement and Installation of Force V and Antonio Bronze Sculptures
		50.00	General Operating
		10,000.00	Conservation of Public Art
		<u>55,600.00</u>	
Steamboat Reading Inc.	83-2970520	50.00	General Operating
100 Park Avenue Suite 203		2,000.00	2019 Community Grant Round
Steamboat Springs, CO 80487		2,000.00	2019 Community Grant Round
		950.00	Study Friends Program
		2,204.50	General Operating: Yampa Valley Gives Gifts
		<u>7,204.50</u>	
Steamboat Skating Club	84-1286035	1,000.00	2019 Community Grant Round
PO BOX 771933		500.00	2019 Community Grant Round
Steamboat Springs, CO 80487		1,500.00	2019 Community Grant Round
		500.00	2019 Community Grant Round
		1,500.00	2019 Community Grant Round
		1,000.00	Purchase of Skate Library
		<u>6,000.00</u>	
Steamboat Soccer Club	84-1144406	1,000.00	Scholarships
PO BOX 770661		6,450.00	Craig Soccer Club Programming
Steamboat Springs, CO 80487		5,000.00	2019 Community Grant Round
		500.00	Youth Scholarships
		<u>12,950.00</u>	
Steamboat Springs Health & Recreation Association	84-0328030	1,000.00	Capital Campaign
PO BOX 771211		750.00	General Operating
Steamboat Springs, CO 80477		5,000.00	Capital Campaign
		5,000.00	Capital Campaign
		1,300.00	Capital Campaign
		2,500.00	General Operating
		1,000.00	Pool Renovation Project
		<u>16,550.00</u>	
Steamboat Springs School District RE:2		17,002.00	Request 2018/19 cycle
325 7th Street		500.00	Support of the Band
Steamboat Springs, CO 80487		500.00	After Prom
		750.00	Elementary School Trail Map Project - Erin Early
		<u>18,752.00</u>	
Steamboat Springs Winter Sports Club	84-0395500	3,000.00	Summer Cycling Program
PO BOX 774487		750.00	Nordic Combined Program: Gift from Jon and Wendy Wade
Steamboat Springs, CO 80477		2,500.00	Scholarship for Riley Jacobs
		2,500.00	Scholarship for Body Flanigan
		500.00	General Operating
		500.00	General Operating
		400.00	General Operating
		1,000.00	General Operating
		<u>11,150.00</u>	
Steamboat Symphony Orchestra	81-3913615	153.83	Yampa Valley Gives Day additional incentive bonus
PO BOX 771376		294.00	December Colorado Gives donations
Steamboat Springs, CO 80477		28,463.94	Expenses for the Amal Production
		10,000.00	Seven Last Words
		500.00	General Operating
		3,000.00	2019 Community Grant Round
		500.00	2019 Community Grant Round
		500.00	2019 Community Grant Round
		500.00	2019 Community Grant Round
		3,000.00	General Operating
		50.00	General Operating



Yampa Valley Community Foundation  
Schedule I - Part II  
Grants and Other Assistance to Domestic Organizations and Domestic Governments  
2019

Name		Amount	Description
		2,000.00	Education Fund
		14,901.92	General Operating: Yampa Valley Gives Gifts
		63,863.69	
Strings Music Festival	84-1101995	5,000.00	General Operating
PO BOX 774627		500.00	General Operating
Steamboat Springs, CO 80477		110.00	\$100 General Operating / \$10 Kids
		3,000.00	General Operating
		1,500.00	General Operating: Jon and Wendy Wade
		1,500.00	2019 Community Grant Round
		500.00	2019 Community Grant Round
		12,110.00	
Town of Oak Creek		1,200.00	Spring Grant Cycle
PO BOX 128		4,500.00	Spring Grant Cycle
Oak Creek, CO 80467		5,000.00	2019 Community Grant Round
		10,700.00	
Tread of Pioneers Museum	84-0378270	500.00	General Operating
PO Box 772372		5,000.00	Lufkin Library
Steamboat Springs, CO 80477		1,000.00	Steamboat Pilot & Today Photo Project
		50.00	General Operating
		500.00	General Operating
		250.00	General Operating
		7,300.00	
Yampa Valley Land Trust	84-1225573	0.00	Closed Fund
PO BOX 773014		1,511.81	Closed Fund
Steamboat Springs, CO 80477		41,475.31	Closed Fund
		500.00	General Operating
		43,487.12	
Yampa Valley Medical Center Foundation	31-1806773	10,000.00	Snow Ball Grant Recipient: Jan Bishop Cancer Center
PO BOX 883415		5,285.90	Indigent Health Care
Steamboat Springs, CO 80488		1,000.00	General Operating
		5,000.00	General Operating
		1,000.00	Emergency Department Renovation
		25.00	General Operating
		22,310.90	
Yampa Valley Performing Arts Council	81-1129278	98.00	December Colorado Gives donations
		60.74	Yampa Valley Gives Day
PO BOX 770181		250.00	General Operating
Steamboat Springs, CO 80477		245.00	Yampa Valley Gives March 2019 Gifts
		10.02	April Yampa Valley Gives Gifts
		882.00	Yampa Valley Gives: May Gifts
		100.00	Piknik Theater Festival -
		500.00	General Operating: Piknik Theater
		1,500.00	2019 Community Grant Round
		1,500.00	2019 Community Grant Round
		50.00	General Operating
		5,195.76	
Yampa Valley Sustainability Council	26-4753602	2,000.00	General Operating
PO BOX 881461		1,000.00	General Operating
Steamboat Springs, CO 80488		25.00	General Operating
		1,000.00	Energy Efficiency and Home Safety
		20,000.00	General Operating
		2,500.00	General Operating
		26,525.00	
Young Tracks Preschool and Child Care Center	84-1149964	1,500.00	Tuition Assistance Program
1647 Mid Valley Drive		2,000.00	General Operating
Steamboat Springs, CO 80487		4,995.00	2019 Community Grant Round
		250.00	Impact 100 Nonprofit Presenter
		400.00	\$200 - Scholarship / \$200 Classroom Supplies
		9,145.00	
		1,129,000.82	1,129,000.82

Note: schedule includes disbursements from agency funds held by Yampa Valley Community Foundation for unrelated nonprofit organizations and shown as liabilities on the foundations financial statements.