			EXTENDED TO MAY 15, 2		noomo Tov		OMB No. 1545-0047
Form	Q	90	Return of Organization Exempt F Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue				0047
			Do not enter social security numbers on this form a			ions)	201/
		the Treasury tue Service	Go to www.irs.gov/Form990 for instructions and	ALCON AND A REAL PROPERTY AND A			Open to Public Inspection
AF	or the	2017 calend			JUN 30, 201	8	
Ba	heck if plicable	C Name o	forganization		D Employer ident	lificatio	on number
	Addres	THE	DENVER ROTARY CLUB FOUNDATION				
	Name change	Doing b	usiness as		23-	715	4562
	Initial return Final return/	1385		Room/suite A-304			3-1919
	ated	City or 1	town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$		1,802,097.
	Amend return	DEMA	BR, CO 80222		H(a) Is this a group		
L	Applica tion pendin		address of principal officer: DARLENE MAST		for subordinat		
	1994	SAME	AS C ABOVE	H(b) Are all subordinate			
			X 501(c)(3) 501(c) ()◀ (insert no.) 4947(a)(1) c DENVERROTARY.ORG	or 52	and the second se		(see instructions)
			X Corporation Trust Association Other	I Vez	H(c) Group exemp		ate of legal domicile: CO
	rtl	Summary		IL rea		T IM OU	ale of legal domiche. CO
T	1		be the organization's mission or most significant activities: SBRV	ICE AL	ND ASSISTAN	CB !	FO YOUTH
Activities & Governance	2	Check this bo	ex if the organization discontinued its operations or dispose	ed of mon	e than 25% of its net a	assets.	
- Nor						3	13
ğ	4	Number of in	dependent voting members of the governing body (Part VI, line 1b)			4	13
8			of individuals employed in calendar year 2017 (Part V, line 2a)			5	0
Ŧ			of volunteers (estimate if necessary)			6	100
Ŧ			d business revenue from Part VIII, column (C), line 12			7a	0.
-	b	Net unrelated	business taxable income from Form 990-T, line 34			7Ь	0.
				H	Prior Year		Current Year
9			and grants (Part VIII, line 1h)		85,243		155,033.
Revenue			ice revenue (Part VIII, line 2g)		139,195		98,166.
ŝ			come (Part VIII, column (A), lines 3, 4, and 7d)	1.11	98,920		6,693.
			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		323,358		259,892.
- 0			 add lines 8 through 11 (must equal Part VIII, column (A), line 12) milar amounts paid (Part IX, column (A), lines 1-3) 	1	162,857		187,918.
			to or for members (Part IX, column (A), line 4)				0.
			er compensation, employee benefits (Part IX, column (A), lines 5-10)		and shall be a set of the set of		0.
enses			fundraising fees (Part IX, column (A), line 11e)		the state of the s).	0.
E			sing expenses (Part IX, column (D), line 25)				
ě			ses (Part IX, column (A), lines 11a-11d, 11f-24e)		139,524		55,258.
	18	Total expense	es. Add lines 13-17 (must equal Part IX, column (A), line 25)	L	302,381		243,176.
	19	Revenue less	expenses. Subtract line 18 from line 12		20,977	1.	16,716.
LOS SOL				E	Beginning of Current Yes		End of Year
Assets			(Part X, line 16)		3,040,677		3,162,097.
at A	21		s (Part X, line 26)	····· -	517		3,042.
Net		Net assets or Signatur	fund balances. Subtract line 21 from line 20		3,040,160		3,159,055.
			e block و المعالية المعامل المع	n and states	mente and to the heat of	I mu kou	awledge and belief, it is
			e. Declaration of preparer (other that officer) is based on all information of wi			I IIIY KIA	owieuge and beiler, it is
<u>u uo,</u>	CONTOC		and the second of propage (other bar office) is bard off an information of w	nen propur		51	7/19
Sigr	,	Signale	re of officer		Date		
Her		DARI	LENE MAST, EXECUTIVE DIRECTOR/COO				
			print name and title				
		Print/Type pr	eparer's name Asignatu/e male	e de	Date 7/19 Check		PTIN
Paid		A. T. I	DUNNEBECKE A. T. DUNNEBECK	BEPA	Date / 1 9 Check	mployed	P00233166
Prep	1918		MOSS ADAMS LLP		Firm's EIN		91-0189318
Use	Onty	Firm's addres	S 1999 BROADWAY STE 4000				
	-		DENVER, CO 80202	-	Phone no.	303-	-298-9600
May	the l	and the second se	is return with the preparer shown above? (see instructions)				X Yes No
73200	01 11-2	8-17 LHA	For Paperwork Reduction Act Notice, see the separate instruction	ons.			Form 990 (2017)

Form	THE DENVER ROTARY CLUB FOUNDATION	23-7154562 Page 2
Pa		
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission: THE MISSION OF THE DENVER ROTARY CLUB IS TO PARTICIPA	Δ
	THE DIVERSE LIFE OF ITS COMMUNITY THROUGH THE GRANTS	
	YEAR. THE FOUNDATION'S GRANTS EMPHASIZE ITS BELIEF IN	
	VALUE OF YOUTH AND EDUCATION, AFFIRMING OUR COMMITMEN	
2	Did the organization undertake any significant program services during the year which were not listed on the organization undertake any significant program services during the year which were not listed on the organization undertake any significant program services during the year which were not listed on the organization undertake any significant program services during the year which were not listed on the organization undertake any significant program services during the year which were not listed on the organization undertake any significant program services during the year which were not listed on the organization undertake any significant program services during the year which were not listed on the organization undertake any significant program services during the year which were not listed on the organization undertake any significant program services during the year which were not listed on the organization undertake any significant program services during the year which were not listed on the organization undertake any significant program services during the year which were not listed on the organization undertake any significant program services during the year which were not listed on the organization undertake any significant program services during the year which were not listed on the organization undertake any significant program services during the year which were not listed on the organization undertake any significant program services during the year which were not listed on the organization undertake any significant program services during the year which were not listed on the organization undertake any significant program services during the year which were not listed on the organization undertake any significant program services during the year which were not listed on the organization undertake any services during the year which were not listed on the organization undertake any services during the year which were not listed on the organization undertake any services during the year which	
2		
	prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program serv	vices? Yes X No
U	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program service	ses, as measured by expenses
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations t	
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$222,932. including grants of \$187,918.)	(Bevenue \$
	EDUCATIONAL SCHOLARSHIPS & GRANTS TO EXEMPT ORGANIZAT	
4b	(Code:) (Expenses \$ including grants of \$)	(Revenue \$
	(), (), (), (,
4c	(Code:) (Expenses \$ including grants of \$)) (Revenue \$
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 222,932.	
		Form 990 (2017)
732002	2 11-28-17	
	2	

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Form 990 (2017)				CLUB	FOUNDATION			
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	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
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		Х
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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
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		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	<u>14a</u>		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			v
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
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	4-		v
10	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	10		v
47	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,	4-		v
40	column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I</i>	17		_X_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	10	y	
40	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? <i>If</i> "Yes,"	19		х
	complete Schedule G. Part III	נו ן		43

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Form 990 (2	2017)					FOUNDATION	
Part IV Checklist of Required Schedules (continued)							

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	0.51		x
	Schedule L, Part I	25b		<u> </u>
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If</i> "Yes,"	06		x
07	complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
		27		x
28	of any of these persons? If "Yes," complete Schedule L, Part III	21		
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а		28a		x
b	A current or former officer, director, trustee, or key employee? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28b		x
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
•	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		x
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			<u>-</u> -
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X 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	38	Х	

732004 11-28-17

Form	1990 (2017) THE DENVER ROTARY CLUB FOUNDATION 23-7	15456	52	Pa	age 5
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance				
	Check if Schedule O contains a response or note to any line in this Part V				
			•	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	8			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming				
	(gambling) winnings to prize winners?	1	с	x	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return 2a	0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		а		х
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O				
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	····· -	~		
Ĩ	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4	2		х
h	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).				
50		5	-		Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	······			X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		-		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solici				
Ua			~		Х
h	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	⊢⁰	a		- 23
D		6	h		
7	Organizations that may receive deductible contributions under section 170(c).		D		
		avor2 7	а	x	
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the p			X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	······	D		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	-	_		х
لم			C		Λ
	, , , , , , , , , , , , , , , , , , , ,		_		Х
-	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?				X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		f		Δ
-	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required		g b		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098	3-C? 7	n		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the				
~	sponsoring organization have excess business holdings at any time during the year?		5		
9	Sponsoring organizations maintaining donor advised funds.		_		
a	Did the sponsoring organization make any taxable distributions under section 4966?				
b 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9	a		
10	Section 501(c)(7) organizations. Enter:				
a h	Initiation fees and capital contributions included on Part VIII, line 12 10a 10a 10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	_			
11	Section 501(c)(12) organizations. Enter:				
a	Gross income from members or shareholders 11a	_			
D	Gross income from other sources (Do not net amounts due or paid to other sources against				
40-	amounts due or received from them.)				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12	2a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?	13	3a		
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans				
	Enter the amount of reserves on hand				77
	Did the organization receive any payments for indoor tanning services during the tax year?				X
b	If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14			

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See	instruc

Form 990	(2017)
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THE DENVER ROTARY CLUB FOUNDATION

X

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

Check if Schedule O contains a response or note to any line in this Part VI	
Section A. Governing Body and Management	

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 13			
	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 in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 13			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	<u>8a</u>	X	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
0	organization's mailing address? If "Yes." provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No X
	Did the organization have local chapters, branches, or affiliates?	<u>10a</u>		<u> </u>
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	104		
44.	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		x
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		
b 12a		12a	x	
12a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe	120		<u> </u>
U	in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
-	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright CO			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailabl	е	
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	ial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records: ►			

6

			.1 0101				020		
1385	s.	COLORADO	BLVD,	NO.	A-304,	DENVER	, CO	8022	22

2017.05050 THE DENVER ROTARY CLUB FO 653846_1

Form **990** (2017)

Part VII	Compensation of	f Officers, Directors	, Trustees,	Key Employees,	Highest Con	npensated
	Employees, and	Independent Contra	actors			

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

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

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

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A)	(B)	(C)		(D)	(E)	(F)				
Name and Title	Average		Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per week					s both r/trus		compensation from	compensation from related	amount of other
	(list any	ctor						the	organizations	compensation
	hours for	trustee or director				ted		organization	(W-2/1099-MISC)	from the
	related	istee o	truste		æ	pensa		(W-2/1099-MISC)		organization
	organizations below	ual tru	ional		ploye	t com				and related
	line)	In dividual t	In stit utio nal tru stee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) ALISON J. CLARK-HARDESTY	1.00									
TRUSTEE		X						0.	0.	Ο.
(2) HARRIET S. DOWNER	1.00									
TRUSTEE		Х						0.	0.	0.
(3) WILLIAM M. HOUSTON, JR.	1.00									
TRUSTEE		Х						0.	0.	0.
(4) DONALD J. KANY	1.00									
TRUSTEE		Х						0.	0.	0.
(5) JAMES C. MACK	1.00									
TRUSTEE		Х						0.	0.	0.
(6) GERALD L. MIDDEL	1.00									
TRUSTEE		Х						0.	0.	0.
(7) CARTER SALES	1.00									
TRUSTEE		Х						0.	0.	0.
(8) VED P. NANDA	1.00									
TRUSTEE		Х						0.	0.	0.
(9) ROBERT G. HEISERMAN	1.00									
TRUSTEE (THROUGH JANUARY 2018)		Х						0.	0.	0.
(10) JENNIFER STITH	1.00									
TRUSTEE (THROUGH DECEMBER 2017)		Х						0.	0.	0.
(11) JULIEBETH FRESHMAN	1.00									_
SECRETARY		Х		X				0.	0.	0.
(12) JOHN A. GREEN	5.00									-
PRESIDENT		х		Х				0.	0.	0.
(13) DENNIS L. KUPER	2.00									-
TREASURER	1	Х		Х				0.	0.	0.
(14) VIRGIL SCOTT	1.00									•
PAST PRESIDENT	1 00	Х		х				0.	0.	0.
(15) CHARLES C. TURNER	1.00									•
VICE PRESIDENT	20.00	Х		X				0.	0.	0.
(16) DARLENE MAST	20.00	•		₋						•
EXECUTIVE DIRECTOR/COO		<u> </u>		X				0.	0.	0.
										- 000 (

732007 11-28-17

Form 990 (2017)

09310427 146892 653846

	990 (2017) THE DENV	ER ROTAR	Υ	CL	UΒ	F	'OU	NE	DATION	23-71	<u>154</u>	562	Pa	age 8
Part	VII Section A. Officers, Directors, Trus	stees, Key Emp	oloy	ees,	and	l Hig	ghes	st C	ompensated Employee	s (continued)				
	(A)	(B)			(0				(D)	(E)			(F)	
	Name and title	Average	(10		Pos				Reportable	Reportable	Reportable Estimated compensation amount of		d	
		hours per	box	, unles	ss per	rson i	than c s both	n an	compensation	compensatio			nount	of
		week	offi	cer an	d a di	irecto	r/trus	tee)	from	from related		elated othe		
		(list any	ctor						the	organization	s	com	pensa	tion
		hours for	r dire				ted		organization	(W-2/1099-MIS	3C)	fr	om the	Э
		related	tee o	ustee			ensai		(W-2/1099-MISC)			org	anizati	ion
		organizations	ll trus	nal tr		oyee	comp					and	d relate	ed
		below	Individual trustee or director	Institutional trustee	cer	Key employee	Highest compensated employee	Former				orga	inizatio	ons
		line)	Indi	Inst	Officer	Key	Hig emi	For						
			1											
			•											
			1											
			i											
16 9	Sub-total	1					-		0.		0.			0.
									0.		0.			0.
	Total from continuation sheets to Part V								0.		0.			0.
	Total (add lines 1b and 1c)													0.
	Total number of individuals (including but r	not limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable	;			•
(compensation from the organization												<u>v</u>	0
											1		Yes	No
3 [Did the organization list any former officer	, director, or tru	istee	e, ke	y en	nplo	yee,	or l	highest compensated er	nployee on				
I	ine 1a? If "Yes," complete Schedule J for s	such individual										3		X
4 F	For any individual listed on line 1a, is the s	um of reportabl	e co	mpe	ensa	tion	and	oth	ner compensation from t	he organization				
á	and related organizations greater than \$15	0,000? If "Yes.	" со	mple	ete S	Sche	dule	e J f	for such individual			4		х
	Did any person listed on line 1a receive or													
	rendered to the organization? If "Yes." cor											5		Х
	on B. Independent Contractors			01 00		2010						-		
	Complete this table for your five highest co	mnensated ind	lono	nder	nt co	ontra	actor	re th	nat received more than \$	100 000 of comr	hensal	ion fro	m	
	the organization. Report compensation for	•	•							•	/onload			
	(A)	the calcindar ye		indir	ig w	iun c			(B)			(C	••	
	(م) Name and business	address	M	ONE	7				Description of s	ervices	C	omper		n
			INC		-				2 coonpaint or c					·
										Т				
2	Fotal number of independent contractors (including but p	nt lin	niter	t to t	thor	e lie	ted	above) who received m	ore than				
			J. 11	meu		005 (.cu						
	\$100,000 of compensation from the organ					Ľ	,					Ee. (000 /	2017
												Form	23U (2	∠U17)

732008 11-28-17

Form 9	90 (2	2017) THE D	ENVER RO	TARY CLUE	FOUNDATIC	N	23-7154	562 Page 9
Part	VII	Statement of Rever	nue					
		Check if Schedule O cont	ains a response o	or note to any line	e 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
ts ts	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues						
5 G		Fundraising events		47,256.				
ifts ar A		Related organizations						
nis Distribution		Government grants (contribut						
Sis		All other contributions, gifts, gran						
her		similar amounts not included abo		107,777.				
ξġ	a	Noncash contributions included in lines						
Sor	-	Total. Add lines 1a-1f	-		155,033.			
				Business Code				
a l	2 a							
, Ki	b							
Ser	c							
E Z	d							
Program Service Revenue	e		,					
2 C		All other program service reve	200					
-		Total. Add lines 2a-2f						
_	<u>y</u> 3	Investment income (including						
	3	other similar amounts)			71,394.			71,394
	4	Income from investment of ta:			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			, , , , , , , , , , , , , , , , , , , ,
	4 5			Г				
	5	Royalties						
	^ -		(i) Real	(ii) Personal				
		Gross rents						
		Less: rental expenses						
		Rental income or (loss)						
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	1,484,281.					
	b	Less: cost or other basis	1 457 500					
		and sales expenses						
		Gain or (loss)			26 772			26 772
		Net gain or (loss) Gross income from fundraisin		▶	26,772.			26,772.
nu		including \$47	<u>,256.</u> of					
eve		contributions reported on line	1c). See					
۳. ۳		Part IV, line 18	аа	91,389.				
Other Revenue	b	Less: direct expenses		84,696.				
0		Net income or (loss) from fund		►	6,693.			6,693
		Gross income from gaming ad						
		Part IV, line 19	а					
	b	Less: direct expenses						
		Net income or (loss) from gam		►				
1	0 a	Gross sales of inventory, less	returns					
		and allowances	а					
	b	Less: cost of goods sold						
		Net income or (loss) from sale						
		Miscellaneous Revenu		Business Code				
1	1 a							
	b							
	с							
	d	All other revenue						
		Total. Add lines 11a-11d						
1	2	Total revenue. See instructions.			259,892.	0.	0.	104,859.
32009 1	11-28-							Form 990 (2017

THE DENVER ROTARY CLUB FOUNDATION Part IX Statement of Functional Expenses

<u>Secti</u>	on 501(c)(3) and 501(c)(4) organizations must compl Check if Schedule O contains a respons			, , ,	
	not include amounts reported on lines 6b, 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	172,910.	172,910.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	15,008.	15,008.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section $4958(f)(1)$) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
a	Management				
b		8,737.		8,737.	
с	Accounting	0,131.		0,131.	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17	7,617.		7,617.	
f	Investment management fees	/,01/.		/,01/•	
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion				
13	Office expenses	3,622.	3,260.	362.	
14	Information technology	• / • = = :			
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	REIMBURSEMENT - DRC	35,000.	31,500.	3,500.	
b					
с					
d					
е	All other expenses	282.	254.	28.	
25	Total functional expenses. Add lines 1 through 24e	243,176.	222,932.	20,244.	0.
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 Figure if following SOP 98-2 (ASC 958-720)				Earm 990 (2017)

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10 2017.05050 THE DENVER ROTARY CLUB FO 653846_1

Form 990 (2017)

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	THE	DENVER	ROTARY	CLUB	FOUNDATION	
Sheet						

23-7154562 Page 11

		Check if Schedule O contains a response or note to any line in this Part X			
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	54,656.	1	49,752.
	2	Savings and temporary cash investments		2	23,731.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	20.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined ur	nder		
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contribu	uting		
		employers and sponsoring organizations of section 501(c)(9) voluntary			
ts		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
Ä	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	3,150.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities	2,922,721.	11	3,085,444.
	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		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	3,040,677.	16	3,162,097.
	17	Accounts payable and accrued expenses	406.	17	731.
	18	Grants payable		18	
	19	Deferred revenue		19	2,311.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Ş	22	Loans and other payables to current and former officers, directors, trustee	S,		
litie		key employees, highest compensated employees, and disqualified persons	s.		
Liabilities		Complete Part II of Schedule L		22	
Ë	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	of		
		Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	517.	26	3,042.
		Organizations that follow SFAS 117 (ASC 958), check here 🕨 🔀	and		
S		complete lines 27 through 29, and lines 33 and 34.			
Net Assets or Fund Balances	27	Unrestricted net assets	2,989,345.	27	3,097,577.
alaı	28	Temporarily restricted net assets		28	33,609.
d B	29	Permanently restricted net assets	27,869.	29	27,869.
'n		Organizations that do not follow SFAS 117 (ASC 958), check here 🕨			
or		and complete lines 30 through 34.			
ets (30	Capital stock or trust principal, or current funds		30	
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
∋t A	32	Detained a series of the serie		32	
ž	33	Total net assets or fund balances	3,040,160.	33	3,159,055.
	34	Total liabilities and net assets/fund balances		34	3,162,097.

Form 990 (2017)

Form 990 (2017)
Part X Balance

	990 (2017) THE DENVER ROTARY CLUB FOUNDATION	23-7	154562	Page	12
Pa	rt XI Reconciliation of Net Assets				_
	Check if Schedule O contains a response or note to any line in this Part XI			🗌	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>,892</u>	
2	Total expenses (must equal Part IX, column (A), line 25)	2		,176	
3	Revenue less expenses. Subtract line 2 from line 1	3	16	,716	•
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,040		
5	Net unrealized gains (losses) on investments	5	102	,179	•
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 in Schedule O)	9		0	•
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	3,159	<u>,055</u>	•
Pa	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII			<u> L</u>	
			`	Yes No	0
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	<u> </u>	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	<u> </u>	<u>.</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	_	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3a	<u> </u>	<u>.</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits				
			Form	990 (201	17)

732012 11-28-17

SCHEDUL	E A.
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Department of the Treasury

(Form 990 or 990-EZ)

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.

OMB No. 1545-0047
2017
Open to Public Inspection

Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Inspection							nspection					
Nam	e of t	the organizati	on							Employer identification num		
					ARY CLUB FOUN					3-71	.54562	
Pa	rt I	Reason	for Public C	Charity Status (/	All organizations must co	mplete th	is part.) Se	e instructions	S.			
The	organ	ization is not a	a private found	ation because it is: (I	For lines 1 through 12, cl	heck only	one box.)					
1		A church, cor	nvention of chu	urches, or associatio	n of churches described	in sectio	n 170(b)(1	l)(A)(i).				
2		A school des	cribed in secti	ion 170(b)(1)(A)(ii). (Attach Schedule E (Form	n 990 or 99	90-EZ).)					
3		A hospital or	a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	i).				
4		A medical res	search organiza	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(iii). Enter	the hos	pital's name,	
		city, and state	e:									
5		An organizati	on operated fo	or the benefit of a col	llege or university owned	or operat	ed by a go	vernmental u	nit describe	ed in		
		section 170	(b)(1)(A)(iv). (C	Complete Part II.)								
6		A federal, sta	te, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).				
7	X		-	-	ntial part of its support fr				ne general p	oublic d	escribed in	
		-		omplete Part II.)		•			.			
8		-			(1)(A)(vi). (Complete Parl	t II.)						
9		-			in section 170(b)(1)(A)(ed in conju	nction with a	land-grant	college		
		-	-		ulture (see instructions).		-		-	-		
		university:	0		(, , , , , , , , , , , , , , , , , , ,				0			
10			on that normal	Ilv receives: (1) more	than 33 1/3% of its supp	port from o	contributio	ns. membersl	nip fees, an	d aross	receipts from	
		-		•	ct to certain exceptions,				-	-	-	
				-	(less section 511 tax) fro					-		
				mplete Part III.)				,				
11				• •	vely to test for public sat	etv. See	section 50)9(a)(4).				
12	\square	-	-	-	vely for the benefit of, to	•			rrv out the	purpose	es of one or	
		-	-	-	d in section 509(a)(1) o				•			
				-	f supporting organizatior							
а		7	-	• •	upervised, or controlled				-	aivina		
					gularly appoint or elect a	• • • •	-				a	
			-	complete Part IV, Se							9	
b		¬ -			or controlled in connect	ion with its	s supporte	d organizatio	n(s), by hay	rina		
				-	anization vested in the sa			-		-		
			-	t complete Part IV,		and perce			90o oo.pr			
с		¬ ~		-	g organization operated	in connect	tion with a	and functional	llv integrate	d with		
•		••	-). You must complete F				iy intograte	a man,		
d		7	-		porting organization oper				ted organiz	vation(s)	1	
u	L		-		ation generally must sati				-		'	
			-		nplete Part IV, Sections	-		-	i un uttoriti	chees		
е		- ·		,	written determination from				II Type III			
Ũ			•		nally integrated supportir			19901, 1990	n, rype m			
f	Ente	er the number		raopizationa		ig organiz	ation.					
				about the supporte	d organization(s)							
<u> </u>		i) Name of supp		(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed	(v) Amount o	f monetary	(vi) A	Amount of other	
		organization	ı		(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	nstructions)	support	t (see instructions)	
Tota	1											
								1				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 732021 10-06-17 Schedule A (Form 990 or 990-EZ) 2017 13

Schedule A (Form 990 or 990 EZ) 2017 THE DENVER ROTARY CLUB FOUNDATION Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv)

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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	154,384.	109,363.	80,936.	85,243.	155,033.	584,959.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	154,384.	109,363.	80,936.	85,243.	155,033.	584,959.
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)						66,671.
6	Public support. Subtract line 5 from line 4.						518,288.
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4	154,384.	109,363.	80,936.	85,243.	155,033.	584,959.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	84,751.	83,849.	73,226.	57,557.	71,394.	370,777.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)		1,266.				1,266.
11	Total support. Add lines 7 through 10						957,002.
12	Gross receipts from related activities,	etc. (see instructio	ons)			12	845,327.
13	First five years. If the Form 990 is for	r the organization's	s first, second, third	l, fourth, or fifth ta	x year as a sectior	1 501(c)(3)	
	organization, check this box and stop						
Se	ction C. Computation of Publi					 	
14	Public support percentage for 2017 (I					14	54.16 %
15	Public support percentage from 2016					15	58.42 %
16 a	a 33 1/3% support test - 2017. If the o						
	stop here. The organization qualifies						
k	33 1/3% support test - 2016. If the o						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test	-					
	and if the organization meets the "fac			-	-	-	
	meets the "facts-and-circumstances"	-		• • • •	-		
k	o 10% -facts-and-circumstances test	0				-	
	more, and if the organization meets th						,
	organization meets the "facts-and-circ						
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	i, 16b, 17a, or 17b			
					Sche	edule A (Form 990	or 990-EZ) 2017

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Schedule A (Form 990 or 990-EZ) 2017 THE DENVER ROTARY CLUB FOUNDATION 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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do no	ot					
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the						
organization's tax-exempt purpos	.e					
3 Gross receipts from activities that	t					
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ						
ization's benefit and either paid to	>					
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit	to					
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, a						
3 received from disqualified perso	ns					
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 growth on line 12 for the vorce						
amount on line 13 for the year c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6						
Section B. Total Support	<u>.</u> ,					
Calendar year (or fiscal year beginning in)) ► (a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6				(4) 2010		
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 busines	ses					
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated busine activities not included in line 10b, whether or not the business is regularly carried on	ess					
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 1						
14 First five years. If the Form 990 i	s for the organization'	s first, second, thi	rd, fourth, or fifth t	tax year as a sectio	n 501(c)(3) organiz	ation,
						>
Section C. Computation of Pu	Jblic Support Per	rcentage			, ,	
15 Public support percentage for 20	17 (line 8, column (f) d	ivided by line 13, o	column (f))		15	%
16 Public support percentage from 2					16	%
Section D. Computation of In	vestment Income	e Percentage				
17 Investment income percentage for	r 2017 (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17	%
18 Investment income percentage from					18	%
19a 33 1/3% support tests - 2017. If						7 is not
more than 33 1/3%, check this bo	ox and stop here. The	e organization qua	lifies as a publicly	supported organiz	ation	▶□]
b 33 1/3% support tests - 2016. If	the organization did r	not check a box o	n line 14 or line 19	a, and line 16 is mo	ore than 33 1/3%, a	and
line 18 is not more than 33 1/3%,	check this box and st	top here. The orga	anization qualifies	as a publicly suppo	orted organization	▶□
20 Private foundation. If the organiz	zation did not check a	box on line 14, 19	a, or 19b, check t	his box and see ins	structions	
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		15)			

Schedule A (Form 990 or 990-EZ) 2017 THE DENVER ROTARY CLUB FOUNDATION

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Yes No

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

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

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3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b

Schedule A (Form 990 or 990-EZ) 2017

Schedule A (Form 990 or 990-EZ) 2017 THE DENVER ROTARY CLUB FOUNDATION Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described 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		
с	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a. b. or c. provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations		-	
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
0	supported organizations played in this regard.	3		
Sec	tion 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. <i>Complete</i> line 2 <i>below.</i>			
b	The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 <i>below.</i>			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions,		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	-		
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	~		
~	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or tructors of each of the supported organizations? Description details in Part VI	30		
h	trustees of each of the supported organizations? <i>Provide details in</i> Part VI.	3a		
U	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3b		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	30		1

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Schedule A (Form 990 or 990-EZ) 2017

Schedule A	(Form 990 or 990-EZ) 2017	THE	DENVER	ROTARY	CLUB	FOUNDATION
Part V	Type III Non-Function	nally	Integrated	509(a)(3) S	upporti	ng Organizations

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.

Sect	ion A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount	_		Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		

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

Schedule A (Form 990 or 990-EZ) 2017

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Schedule A (Form 990 or 990 EZ) 2017 THE DENVER ROTARY CLUB FOUNDATION

Par	I V Type III Non-Functionally integrated 509	a)(3) Supporting Orga	inizations (continued)	1
Secti	on D - Distributions		· · · · · · · · · · · · · · · · · · ·	Current Year
_1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	S	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	ne organization is responsive	1	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017			
а				
b	From 2013			
с	From 2014			
d	From 2015			
е	From 2016			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
	Carryover from 2012 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
с	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, 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 2017. Subtract lines 3h			
-	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j			
-	and 4c.			
8	Breakdown of line 7:			
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
~				

Schedule A (Form 990 or 990-EZ) 2017

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Schedule A (Form 990 d									
Part VI Suppler	nental Inform	ation. Provide	the explanations	required by P	Part II, line 10; I	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,	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 instru	ictions.)								
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:									
NT GOELL NIEGUG TNGONE									
MISCELLANEOU	IS INCOME								

2014 AMOUNT: \$ 1,266.

Schedule A (Form 990 or 990-EZ) 2017

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Schedule A

Identification of Excess Contributions Included on Part II, Line 5

23-7154562

2017

	** Do Not File **	
***	Not Open to Public Inspection	***

Contributor's Name	Total Contributions	Excess Contributions
MELANIE KINNARD	35,150.	16,010
AMG NATIONAL TRUST BANK	60,000.	40,860
MICHAEL K. BRUNER MEMORIAL FUND	19,461.	321
GERALD MIDDEL (THE MIDDLE FAMILY FUND)	27,400.	8,260
COLORADO TRUST	19,500.	360
UMB BANK	20,000.	860.
otal Excess Contributions to Schedule A, Part II, Line 5		66,671

Schedule B (Form 990, 990-EZ. or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

Employer identification number

Name of the	organization
-------------	--------------

	THE DENVER	ROTARY	CLUB	FOUNDATION	23-7154562
Organization type (chec	k one):				
Filers of:	Section:				

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

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

General Rule

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

Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 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).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Employer identification number

23-7154562

THE DENVER ROTARY CLUB FOUNDATION

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

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
<u>1</u>	MELANIE KINNARD <u>300 SPRUCE STREET</u> <u>DENVER, CO 80230</u>	\$ <u>15,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2	CYRUS RAJABI 5380 SOUTH MONACO STREET GREENWOOD VILLAGE, CO 80111	\$ <u>10,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3	KENT A BOZARTH 8351 PARKWAY DRIVE LONE TREE, CO 80124	\$ <u> </u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
4	COLORADO TRUST <u>1600 SHERMAN ST</u> <u>DENVER, CO 80203</u>	\$ <u>7,500.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
5	THE MIDDEL FAMILY FUND C/O NATIONAL CHRISTIAN FOUNDATION 640 PLAZA DRIVE, STE. 290 HIGHLANDS RANCH, CO 80129	\$ <u>5,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
<u>6</u> 723452 11-0	DORSEY & WHITNEY, LLP 1400 WEWATTA ST, STE 400 DENVER, CO 80202	\$ <u>5 , 000 .</u> Schedule B (Form 9	Person X Payroll Noncash (Complete Part II for noncash contributions.) 990, 990-EZ, or 990-PF) (2017)

23

09310427 146892 653846

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization

Employer identification number

23-7154562

THE DENVER ROTARY CLUB FOUNDATION

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

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
<u>7</u>	DEANE FAMILY FOUNDATION C/O THE DENVER FOUNDATION 555 MADISON STREET, 8TH FLOOR DENVER, CO 80206	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
8	WILLIAM G. IMIG 1011 S. VALENTIA ST. DENVER, CO 80247	\$ <u> </u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
723452 11-0		\$	Person Payroll Oronauton Payroll Oronash Oronash Oronash contributions.) 990, 990-EZ, or 990-PF) (2017)

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Page 3

Employer identification number

23-7154562

THE DENVER ROTARY CLUB FOUNDATION

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

(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(b) Description of noncash property given	(c) FMV (or estimate)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	 \$	
	(b) (b) Description of noncash property given (b) Description of noncash property given	(b) FWV (or estimate) (See instructions.)

25

 $09310427 \ 146892 \ 653846$

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of orga	anization				Employer identification number
тне ре	NVER ROTARY CLUB FOUND	ATTON			23-7154562
Part III	Exclusively religious, charitable, etc., contr the year from any one contributor. Complete of	ributions to organizations de	scribed in sectio	n 501(c)(7), (8), or ((10) that total more than \$1,000 for
	completing Part III, enter the total of exclusively religious	, charitable, etc., contributions of	\$1,000 or less for the	e year. (Enter this info. once	s a.) ► \$
(a) No.	Use duplicate copies of Part III if additiona	al space is needed.			
from Part I	(b) Purpose of gift	(c) Use of g	ift	(d) Desc	ription of how gift is held
		(e) Transfe	er of gift		
			_		
-	Transferee's name, address, ar	nd ZIP + 4	R	elationship of tra	nsferor to transferee
(a) No.					
from Part I	(b) Purpose of gift	(c) Use of g	ift	(d) Desc	ription of how gift is held
		(e) Transfe	er of gift		
	Transferee's name, address, ar	nd ZIP + 4	в	elationship of tra	nsferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of g	ift	(d) Doso	ription of how gift is held
Part I				(u) Dest	siption of now girt is neid
-		(-) T urnet			
		(e) Transfe	er of gift		
	Transferee's name, address, ar	nd ZIP + 4	R	elationship of tra	nsferor to transferee
(-) N -					
(a) No. from	(b) Purpose of gift	(c) Use of g	ift	(d) Desc	ription of how gift is held
Part I					
⊢		(e) Transfe	er of gift		
-	Transferee's name, address, ar	nd ZIP + 4	R	elationship of tra	nsferor to transferee

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

SCHEDULE [)
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Department of the Treasury Internal Revenue Service

(Form	990)
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Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.



Name of the organization

THE DENVER ROTARY CLUB FOUNDATION

Employer identification number 23-7154562

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Ac	counts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	ne 6.		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	ed fund	ls
	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 a	dvisors in writing that grant funds can be	used or	nly
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	conferri	ng
D				
Par			Part IV,	line 7.
1	Purpose(s) of conservation easements held by the organizati			
	Preservation of land for public use (e.g., recreation or e		-	
	Protection of natural habitat	Preservation of a cer	tified his	storic structure
_	Preservation of open space		_	
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a cor	
	day of the tax year.			Held at the End of the Tax Year
-	Total number of conservation easements			
b				2b
c	Number of conservation easements on a certified historic str			2c
d	Number of conservation easements included in (c) acquired a			
~	listed in the National Register			2d
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by the	e organiz	zation during the tax
	year ► Number of states where property subject to conservation ea:	amont is leasted		
4 5	Does the organization have a written policy regarding the per			
5	violations, and enforcement of the conservation easements in			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,			
Ŭ			Servatio	
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations. and enforcing conserva	tion eas	sements during the year
	► \$			0, 1
8	Does each conservation easement reported on line 2(d) abov	e 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 conservati			
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes	the orga	anization's accounting for
	conservation easements.			
Par			iner S	imilar Assets.
	Complete if the organization answered "Yes" on Form			
1a	If the organization elected, as permitted under SFAS 116 (AS			
	historical treasures, or other similar assets held for public exl		nce of p	bublic service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri			
D	If the organization elected, as permitted under SFAS 116 (AS			
	treasures, or other similar assets held for public exhibition, en	ducation, or research in furtherance of pul	blic serv	lice, provide the following amounts
	relating to these items:			•
	(i) Revenue included on Form 990, Part VIII, line 1			► \$
0		agurage or other similar assets for financia		· · ·
2	If the organization received or held works of art, historical tre the following amounts required to be reported under SFAS 1		n yanı, p	n ovide
а	Revenue included on Form 990, Part VIII, line 1	. , .		▶ \$
	Assets included in Form 990, Part X			
	For Paperwork Reduction Act Notice, see the Instruction			Schedule D (Form 990) 2017
	10-09-17			(, ,
		27		

		VER ROTARY C				23-71			_{age} 2
Par	rt III Organizations Maintaining C	ollections of Art,	Historical Tre	asures, or Othe	r Simila	r Assets	contin	nued)	
3	Using the organization's acquisition, accession	on, and other records,	check any of the f	ollowing that are a s	ignificant u	ise of its c	ollection	items	
	(check all that apply):								
а	Public exhibition	d	Loan or exc	hange programs					
b	Scholarly research	е	Other						
с	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain h	ow they further th	e organization's exe	mpt purpo	se in Part	XIII.		
5	During the year, did the organization solicit or	r receive donations of a	art, historical treas	sures, or other simila	r assets				
	to be sold to raise funds rather than to be ma						Yes		No
Par	t IV Escrow and Custodial Arrang	gements. Complete	if the organizatio	n answered "Yes" or	n Form 990), Part IV, I	line 9, or		
	reported an amount on Form 990, Par	t X, line 21.							
1a	Is the organization an agent, trustee, custodia	an or other intermediar	y for contributions	s or other assets not	included				
	on Form 990, Part X?						Yes		No
b	If "Yes," explain the arrangement in Part XIII a	and complete the follow	wing table:						
							Amount	ć	
с	Beginning balance				. 1c				
	Additions during the year								
	Distributions during the year								
f	Ending balance								
2a	Did the organization include an amount on Fo						Yes		No
	If "Yes," explain the arrangement in Part XIII.]
Par	rt V Endowment Funds. Complete i	f the organization answ	vered "Yes" on Fo	rm 990, Part IV, line	10.				
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three y	/ears back	(e) Four	years	back
1a	Beginning of year balance	50,815.	49,693.	47,475.		98,393.		63,	196.
b	Contributions	7,500.	47,262.	37,285.		46,884.		114,	571.
с	Net investment earnings, gains, and losses								
d	Grants or scholarships	6,644.	46,140.	35,067.		97,802.		79,	374.
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
g	End of year balance	51,671.	50,815.	49,693.		47,475.		98,	393.
2	Provide the estimated percentage of the curr	ent year end balance (l	ine 1g, column (a)) held as:					
а	Board designated or quasi-endowment		%						
b	Permanent endowment 58.00	%							
с	Temporarily restricted endowment ▶ 42	2.00 %							
	The percentages on lines 2a, 2b, and 2c should be a should be should be a should be a should be a should be should be a should	uld equal 100%.							
3a	Are there endowment funds not in the posses	ssion of the organizatio	on that are held ar	d administered for t	he organiza	ation	_		
	by:							Yes	No
	(i) unrelated organizations						3a(i)		Х
	(ii) related organizations						3a(ii)		Х
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as required	on Schedule R?				3b		
4	Describe in Part XIII the intended uses of the organization's endowment funds.								
Par	rt VI Land, Buildings, and Equipm	ent.							
	Complete if the organization answered	d "Yes" on Form 990, F	Part IV, line 11a. S	ee Form 990, Part X	, line 10.				
	Description of property	(a) Cost or othe	• • •		Accumulate		(d) Bool	k value	ə
		basis (investme	nt) basis	(other) de	epreciation				
1a	Land								
	Buildings								
с	Leasehold improvements								
d	Equipment								
	Other								
Tota	I. Add lines 1a through 1e. <i>(Column (d) must e</i>	qual Form 990, Part X.	column (B), line 10	0c.)					0.
						Schedule	D (Form	ı 990)	2017

Schedule D (Form 990) 2017	\mathbf{THE}	DENVER	ROTARY	CLUB	FOUNDATION
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n 000 Dart V line 10

Part VII Investments - Other Securities.

	TD. See Form 990, Part X, line 12.
(b) Book value	(c) Method of valuation: Cost or end-of-year market value
	, ,

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

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

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2017

732053 10-09-17

Sche	dule D (Form 990) 2017 THE DENVER ROTARY CLUB	FOUNDATION	23-7154562 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Sta	tements With Revenue	per Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.	
1	Total revenue, gains, and other support per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities		
с	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
с	Add lines 4a and 4b		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12))	
Pa	rt XII Reconciliation of Expenses per Audited Financial St	atements With Expense	es per Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.	
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1	
а	Donated services and use of facilities	<u>2</u> a	
b	Prior year adjustments	2b	
С	Other losses	2c	
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)	4b	
с	Add lines 4a and 4b		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	8.)	
Pa	rt 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.

732054 10-09-17

(Form 990 or 990-E2) Determined (in the "text) organization entered on or than \$500 on Form 990-E2. ▲ Attach to Form 990 or Form 990-E2. ▲ Attach to Form 990 or Form 990-E2. ▲ Attach to Form 990 or Form 990-E2. ▲ The the organization entered on or than \$500 on Form 990-E2. ▲ The the organization entered on or than \$500 on Form 990, Part IV, Ine 17. Form 990-E2 tiles are not TED DEVER COMPACT CLUB FOUNDATION TED DEVER COMPACT PLOTE Turnor and a domain clicitations ↓ Balance in the organization raiseed funds through any of the following activities. Check all that apply. ↓ Balance in the organization raise funds through any of the following activities. Check all that apply. ↓ Balance in the organization raise funds through any of the following activities. Check all that apply. ↓ Balance in the organization raise of the organization answered "Yes" on Form 990, Part IV, Ine 17. Form 990-E2 tiles are not received to complete the organization raise funds through any of the following activities. Check all that apply. ↓ Balance in the organization raise funds through any of the following activities. Check all that apply. ↓ Balance is the organization have a written or oral agreement with any individual (including officers, fundses, or key engloyees is teal of norm 900, Part IV (in orthorization englowerment grants ↓ Balance is the 10 highest paid individuals or entities (fundisers) pursuant to agreements under which the fundialies is to be compensated at least \$5,000 by the organization. (i) Name and address of individual or entity (fundraiser) ↓ Yes No ↓ Yes No ↓ Yes No ↓ Yes No ↓ Yes No ↓ Jalance is the individual (individual individuals or hits been notified it is exempt from registration or learning. ↓ Jalance is a which the organization is registered or licensed to solicit contributors or has been notified it is exempt from registration or learning. ↓ Jalance is a which the organization is registered or licensed to solicit contributors or has been notified it is exempt from registr	SCHEDULE G	Suppleme	ntal Information Regarding	Fund	Iraisi	ng or Gaming A	ctivi	ties –	OMB No. 1545-0047
Name of the organization Employer identification number 23 - 7154562 Part1 Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part VI, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations b Internet and email solicitations c Solicitation of government grants d Indicate whether the organization naised funds through any of the following activities. Check all that apply. a Mail solicitations c Solicitation of government grants d Indiperson solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990. Part VII) or entty in connection with professional fundraising services? Vss No (i) Name and address of individual or entity (fundraiser) (ii) Activity Implementation Implementation (iii) Activity Implementation Ves No Vss No Vss Implementation (iii) Activity Implementation isted in col. (i) Implementation Implementation Implementation Implementation	Department of the Treasury	•	organization entered more than \$15 Attach to Form 990	5,000 o or Fo	on Foi rm 99	m 990-EZ, line 6a. 0-EZ.	r 19, o		
Part Indicasing Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990/EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations Complete this part. b Indicate whether the organization raised funds through any of the following activities. Check all that apply. c Phone solicitations Complete this part. c Phone solicitations Complete this part. 2 Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundralsing services? Yes No complexate at least \$5,000 by the organization. (ii) Activity (iii) and the activity of the activit	Name of the organization		-						
required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations e Solicitation of non government grants b Internet and email solicitations f Solicitation of government grants c Organization have a written or oral agreement with any individual (including officers, furstees, or key employees listed in form 990, Part VII) or entity in connection with professional fundralising services? Ives in No 21 Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in form 990, Part VII) or entity in connection with professional fundralising services? Ives in No b If "Yes," list the 10 highest paid individuals or entities (fundralisers) pursuant to agreements under which the fundraliser is to be compensated at least \$5,000 by the organization. (ii) Activity (iii) Activity if the fundraliser is contained by fundraliser is contained by organization fund is contained by fundraliser is contained by organization. (v) Amount paid to or retained by organization (i) Name and address of individual or entity is contained by organization Ves No Ives individual fundraliser is contained by organization (ii) Name and address of individual organization (iii) Activity Ves No Ives individual is contained by organization (ives individual contained by organization Ives individual containe containe contained by organization Iv	Part I Fundraisi						ine 17		
(i) Name and address of individual or entity (fundraiser) (ii) Activity It is a case of individual is the case of individual or entity (fundraiser) (iii) Activity It is a case of individual is the case of individual or entity (fundraiser) (iv) Antonin paid (for retained by) organization Yes No Yes No It is a case of individual is the case of indin the case of individual is the case of in	 Indicate whether the a Mail solicitation b Internet and e c Phone solicitation d In-person solicitation key employees listen b If "Yes," list the 10 	e organization rais ons email solicitations ations icitations n have a written o ed in Form 990, Pa highest paid indiv	ed funds through any of the followin e Solicitat f Solicitat g Special r oral agreement with any individual art VII) or entity in connection with pur- viduals or entities (fundraisers) pursue	tion of tion of fundra (incluc	non-g gover aising ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		Ye	
Total Image: Second	.,		(ii) Activity	fùndr have c or cor	aiser ustody trol of		tò (o f	r retained by) undraiser	to (or retained by)
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration				Yes	No				
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration									
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration									
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration									
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3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration									
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration									
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration									
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration									
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration									
		ch the organizatio	n is registered or licensed to solicit o	ontrib	utions	or has been notified	it is e	xempt from re	egistration
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule G (Form 990 or 990-EZ) 2017	LHA For Paperwork Re	duction Act Noti	ce, see the Instructions for Form 9	90 or	990-E	Z. 9	Sched	ule G (Form	990 or 990-EZ) 2017

732081 09-13-17

Schedule G (Form 990 or 990-EZ) 2017 THE DENVER ROTARY CLUB FOUNDATION 23-7154562 Page 2 Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000

		(a) Event #1 CLUB	(b) Event #2	(c) Other events	(d) Total events
			PEACH SALES	1	(add col. (a) through
		(event type)	(event type)	(total number)	col. (c))
				,	
1	Gross receipts	81,830.	55,957.	858.	138,645
2	Less: Contributions	45,107.	2,149.		47,256
3	Gross income (line 1 minus line 2)		53,808.	858.	91,389
4	Cash prizes				
5	Noncash prizes				
6	Rent/facility costs	4,060.			4,060
5 7	Food and beverages	19,222.			19,222
		4 0 5 1			4 0 - 1
8				20	4,951
8	Other direct expenses	21,026.	35,408.	29.	56,463
8 9 10	Other direct expenses Direct expense summary. Add lines 4 through	21,026.	35,408.		56,463 84,696
8 9 10	Other direct expenses Direct expense summary. Add lines 4 throu	21,026. ugh 9 in column (d)	35,408.	>	56,463 84,696
8 9 10	Other direct expenses Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 fror	21,026. ugh 9 in column (d)	35,408.	>	56,463 84,696
8 9 10 1 ⁻ art	Other direct expenses Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 fror III Gaming. Complete if the organization	21,026. ugh 9 in column (d)	35,408.	>	56,463 84,696 6,693 (d) Total gaming (add
8 9 10 1 ⁻ art	Other direct expenses Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 fror Gaming. Complete if the organizatio \$15,000 on Form 990-EZ, line 6a.	21,026. ugh 9 in column (d) n line 3, column (d) on answered "Yes" on Form (a) Bingo	35,408.	eported more than	56,463 84,696 6,693 (d) Total gaming (add
8 9 10	Other direct expenses Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 fror III Gaming. Complete if the organization	21,026. ugh 9 in column (d) n line 3, column (d) on answered "Yes" on Form (a) Bingo	35,408.	eported more than	56,463 84,696 6,693 (d) Total gaming (add
8 9 10 1 ⁻ art	Other direct expenses Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 fror Gaming. Complete if the organizatio \$15,000 on Form 990-EZ, line 6a.	21,026. ugh 9 in column (d) n line 3, column (d) on answered "Yes" on Form (a) Bingo	35,408.	eported more than	56,463 84,696 6,693 (d) Total gaming (add
8 9 10 1 ⁻ art	Other direct expenses Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from Gaming. Complete if the organizatio \$15,000 on Form 990-EZ, line 6a. Gross revenue	(a) Bingo	35,408.	eported more than	56,463 84,696 6,693 (d) Total gaming (add
8 9 10 1 ⁻ art	Other direct expenses Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from Gaming. Complete if the organizatio \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes	(a) Bingo	35,408.	eported more than	56,463 84,696 6,693 (d) Total gaming (add
8 9 10 11 art 2 3	Other direct expenses Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 fror Gaming. Complete if the organizatio \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs	(a) Bingo	35,408.	eported more than (c) Other gaming	4,951 56,463 84,696 6,693 (d) Total gaming (add col. (a) through col. (c
8 9 1(1 ⁻ art 2 3 4	Other direct expenses Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from Gaming. Complete if the organizatio \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses	(a) Bingo	35,408.	eported more than	56,463 84,696 6,693 (d) Total gaming (add
8 9 10 1 ⁻ 1 2 3 4 5	Other direct expenses Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from Gaming. Complete if the organizatio \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor	21,026. ugh 9 in column (d) n line 3, column (d) on answered "Yes" on Form (a) Bingo (a) Bingo <td>35,408.</td> <td>c) Other gaming</td> <td>56,463 84,696 6,693 (d) Total gaming (ad</td>	35,408.	c) Other gaming	56,463 84,696 6,693 (d) Total gaming (ad

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

a Is the organization licensed to conduct gaming activities in each of these states? Yes **b** If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? **b** If "Yes," explain:

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Schedule G (Form 990 or 990-EZ) 2017

Yes

No

No

Sch	edule G (Form 990 or 990-EZ) 2017 THE DENVER ROTARY CLUB FOUNDATION 23-	7154562	Page 3
	Does the organization conduct gaming activities with nonmembers?	Yes	No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	No
13	Indicate the percentage of gaming activity conducted in:		
	The organization's facility	13a	%
	An outside facility		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		,-
••			
	Name		
	Address		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	No
100		🖂 100	
F	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount		
	of gaming revenue retained by the third party > \$		
	s If "Yes," enter name and address of the third party:		
Ľ	and res, entername and address of the time party.		
	Nama		
	Name		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation 🕨 💲		
	Description of services provided 🕨		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	🗌 Yes	No No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
	organization's own exempt activities during the tax year 🕨 💲		
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III,	ines 9, 9b, 10	b, 15b,
	15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		
705		m 000 ar 000	E7 0047
/320	83 09-13-17 Schedule G (For 33	111 990 or 990	-62) 2017

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	(Form 990 or 990-EZ)			CLUB	FOUNDATION
Part IV	Supplemental Infor	mation	(continued)		

	Schedule G (Form 990 or 990-EZ)

732084 04-01-17

SCHEDULE I (Form 990)	Go	Grants and Oth overnments, ar	nd Individual	s in the Ŭni	ted States		OMB No. 1545-0047		
Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for the latest information. Or									
Name of the organization	V DAMAG G	CLUB FOUNDA	MTON				Employer identification number $23 - 7154562$		
Part I General Information on Grants a		CLUB FOUNDA	110N				25-7154502		
1 Does the organization maintain records t	o substantiate the	e amount of the grants	or assistance. the	arantees' eligibility	for the grants or assis	stance, and the selection	on		
criteria used to award the grants or assis							Yes X No		
2 Describe in Part IV the organization's pro									
Part II Grants and Other Assistance to I	Domestic Organi	zations and Domestic	c Governments. C	complete if the org	anization answered "Y	′es" on Form 990, Part	IV, line 21, for any		
recipient that received more than					(f) Method of				
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	valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance		
DENVER KIDS INC									
1860 N. LINCOLN ST., FLOOR 9							GRANTS FOR PROGRAM		
DENVER, CO 80203	84-1244211	501(C)(3)	45,600.	0.			SUPPORT		
THE ROTARY FOUNDATION 1560 SHERMAN AVE.									
EVANSTON, IL 60201	36-3245072	501(C)(3)	45,575.	0.			DISASTER RELIEF		
FULL PASSAGE/COLLEGE COACH, INC. 600 GRANT ST., #630									
DENVER, CO 80203	84-1434803		10,000.	0.			COLLEGE COUNSELING		
COLORADO ART EDUCATION ASSOCIATION 5861 NOLAN ST.							SCHOLASTIC ART AWARDS,		
ARVADA, CO 80003	84-0705162	501(C)(3)	6,500.	0.			COLORADO REGION		
 2 Enter total number of section 501(c)(3) an 3 Enter total number of other organizations 	•	- 1 += = =	e line 1 table				<u>3.</u> 1.		

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

Schedule I (Form 990) (2017)

Schedule I (Form 990) (2017) THE DENVER ROTARY CLUB FOUNDATION

23-7154562

Page 2

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.

(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
24	15,008.	0.		
	recipients	recipients cash grant	recipients cash grant cash assistance	

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

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information.

Employer identification number 23-7154562

OMB No. 1545-0047

THE DENVER ROTARY CLUB FOUNDATION

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

HUMANITARIAN GOALS OF ROTARY.

FORM 990, PART VI, SECTION A, LINE 6:

THE FOUNDATION HAS ONE CLASS OF MEMBERS. ANY CURRENT MEMBER OF THE ROTARY

CLUB OF DEVENER WHO HAS CONTRIBUTED \$1,000 OR MORE TO THE FOUNDATION, OR

WHO HAS DEMONSTRATED A COMMITMENT TO CONTRIBUTE \$100 OR MORE PER YEAR UNTIL

A TOTAL OF AT LEAST \$1,000 HAS BEEN CONTRIBUTED TO THE FOUNDATION, SHALL BE

A MEMBER OF THE FOUNDATION.

FORM 990, PART VI, SECTION A, LINE 7A:

AN ANNUAL MEETING OF THE MEMBERS IS HELD EACH YEAR FOR THE PURPOSE OF

ELECTING TRUSTEES.

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

FORM 990 IS REVIEWED BY THE FOUNDATION'S COO/EXECUTIVE DIRECTOR, TREASURER,

AND FINANCE COMMITTEE PRIOR TO FILING. COPIES ARE SENT TO ALL BOARD

MEMBERS.

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

BOARD MEMBERS ARE REQUIRED TO SIGN THE CONFLICT OF INTEREST POLICY AT THE

START OF THEIR TERM OF OFFICE. EACH OFFICER, DIRECTOR, MEMBER OR EMPLOYEE

IS REQUIRED TO GIVE NOTICE OF ANY ISSUE IN WHICH THEY HAVE AN INTEREST OR

RELATIONSHIP THAT WOULD CAUSE CONFLICT OF INTEREST DURING THEIR TERM OF

SERVICE. IF A CONFLICT ARISES, THAT PERSON REFRAINS FROM DISCUSSION AND

VOTING ON THE TRANSACTION HE/SHE HAS AN INTEREST IN.

37

LHAFor Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.Schedule O (Form 990 or 990-EZ) (2017)73221109-07-17

TTTT (DRGANIZATIONS	GOVERNING	DOCUMENTS	ARE	AVAILAB	LE OI	N THE	WEBSITE	AND	UPON
REQUE										
32212 09-	07-17						Sched	lule O (Form 99	0 or 990	-EZ) (20 ⁻
				38				,		,,

THE DENVER ROTARY CLUB FOUNDATION

Employer identification number 23-7154562

Schedule O (Form 990 or 990-EZ) (2017) Name of the organization

(Rev. January 2017)

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

Department of the Treasury Internal Revenue Service File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

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

filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

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

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

					Enter filer's identifying number			
Type or print	Name of exempt organization or other filer, see instruct	Employer identification number (EIN) or $23 - 7154562$						
print	THE DENVER ROTARY CLUB FOUN							
File by the due date for filing your		Social security number (SSN)						
return. See instruction					_			
Enter th	e Return Code for the return that this application is for (file	a separat	e application for each return)			0 1		
Application			Application			Returi	n	
ls For		Code	Is For			Code		
Form 990 or Form 990-EZ			Form 990-T (corporation)	07	07			
Form 990-BL			Form 1041-A	08	08			
Form 4720 (individual)			Form 4720 (other than individual)	09	09			
Form 99	90-PF	04	Form 5227	10	10			
Form 99	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11	11			
Form 990-T (trust other than above)			Form 8870					
 If the If this box 1 fc 	bhone No. ► <u>303-893-1919</u> e organization does not have an office or place of business is for a Group Return, enter the organization's four digit C . If it is for part of the group, check this box ► request an automatic 6-month extension of time until or the organization named above. The extension is for the o calendar year or X tax year beginning JUL 1, 2017 the tax year entered in line 1 is for less than 12 months, ch	Group Exe	mption Number (GEN) If ch a list with the names and EINs of <u>X 15, 2019</u> , to file in's return for: d ending JUN 30, 2018	f this is fo all memb	r the whole g ers the exten npt organizat	roup, check this sion is for.	S	
	Change in accounting period	or 6060	anter the tentetive text less any				—	
	If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.				\$	0	•	
b If	this application is for Forms 990-PF, 990-T, 4720, or 6069,							
estimated tax payments made. Include any prior year overpayment allowed as a credit.				3b	\$	0	•	
с В	alance due. Subtract line 3b from line 3a. Include your pay	yment with	n this form, if required,					
	y using EFTPS (Electronic Federal Tax Payment System). S			3c	\$	0	_	
Caution instruct	n: If you are going to make an electronic funds withdrawal (ions.	(direct det	bit) with this Form 8868, see Form 84	53-EO an	id Form 8879	-EO for paymen	t	
LHA	For Privacy Act and Paperwork Reduction Act Notice,	see instru	ictions.		Form 8	868 (Rev. 1-201	7)	

MAIL TO: DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE CENTER OGDEN, UT 84201-0045

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