Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

2010 Open to Public Inspection

Α	For the	2010 calendar year, or tax year beginning , and ending		_	
В	Check if app	oplicable: C Name of organization		D Emplo	oyer identification number
	Address ch	nange Colorado Fourteeners Initiative			
	Name chan	nge Doing Business As		84-	1354844
$\overline{\Box}$	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	-	none number
H	Terminated	60/ 10th Street 10/N		303	-278-7650
\Box		City of town, state of country, and zir + 4			F01 000
Ц	Amended r			G Gross rec	eipts\$ 501,898
	Application	F Name and address of principal officer:	H(a) Is this a g	group return for	affiliates? Yes X No
		Lloyd Athearn 607 10th Street 107N	H(b) Are all a	affiliates incli	uded? Yes No
		Golden CO 80401			list. (see instructions)
_	Tay ayar	mpt status:		.,	(,
÷		e: \triangleright www.14ers.org	H(c) Group 6	evemntion n	ımher
K			L Year of formation: 1		M State of legal domicile: CO
222222222	Part I	Summary	L real of formation. L	, , , , , , , , , , , , , , , , , , ,	State of regal dofflicite.
		riefly describe the organization's mission or most significant activities:			
ø		To protect and preserve the natural integrity of C	olorado's 1	4,000	foot
and		Peaks through active stewardship and public educat			
ern					
Š	2 C	check this box if the organization discontinued its operations or disposed of more		t assets.	
∞	3 N			1 _ 1	15
ies	4 N	lumber of independent voting members of the governing body (Part VI, line 1b)			15
Activities & Governance	5 To	otal number of individuals employed in calendar year 2010 (Part V, line 2a)		5	21
Act	6 To	otal number of volunteers (estimate if necessary)		6	1151
		otal unrelated business revenue from Part VIII, column (C), line 12		7a	
	b N	let unrelated business taxable income from Form 990-T, line 34		7b	0
		Contributions and grants (Part VIII line 1h)	Prior Ye	ar 1,131	Current Year 483,994
Jue	0 C	contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)		I, IJ I	103,331
Revenue	10 In	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		33	34
æ	11 0	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,075	17,870
		otal revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,239	501,898
		Grants and similar amounts paid (Part IX, column (A), lines 1–3)		•	
		enefits paid to or for members (Part IX, column (A), line 4)			
S	15 Sa	alaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	272	2,341	359,206
benses	16a Pi	rofessional fundraising fees (Part IX, column (A), line 11e)			
xbe	b To	otal fundraising expenses (Part IX, column (D), line 25) > 56,100			
Ä	17 0	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	190	0,666	214,224
	18 To	otal expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)		3,007	573,430
= 5	19 R	Levenue less expenses. Subtract line 18 from line 12		9,232	-71,532
Net Assets or	5 20 T	otal assets (Part X, line 16)	Beginning of Cu	0,660	End of Year 238,224
Ass	20 TO	otal liabilities (Dart V. line 26)		4,433	93,529
Net	22 N	let assets or fund balances. Subtract line 21 from line 20		5,227	144,695
	Part II	Signature Block		· / ·	
		alties of perjury, I declare that I have examined this return, including accompanying schedules and sta	atements, and to the b	est of my kr	nowledge and belief, it is
		ct, and complete. Declaration of preparer (other than officer) is based on all information of which prep	,	,	
Si	gn	Signature of officer		Date	
He	ere		<u>cutive Di</u>	recto	r
		Type or print name and title			
_		Print/Type preparer's name Preparer's signature Toui B. Baw	er, CPA Date	Check	
Pa	<u></u>	Lori B. Bauer, CPA Lori B. Bauer, CPA	07/14		nployed P01260252
		Firm's name JDS PROFESSIONAL GROUP		Firm's EIN	20-8019714
US	e Only	5670 GREENWOOD PLAZA BLVD STE 200			202 551 0100
N 4		Firm's address > GREENWOOD VILLAGE, CO 80111	F	Phone no.	303-771-0123
ivia	iy ine iRS	S discuss this return with the preparer shown above? (see instructions)			Yes X No

84-1354844

Page 2

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-			
	endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, 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	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	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, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? 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 assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some			
	Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a		Х
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) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			v
	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?	0.51-		х
26	If "Yes," complete Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	25b		Λ
26	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	20		21
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, 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, Parts II, III,			37
	IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Λ
а	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,			
	- · · · · · · · · · · · · · · · · · · ·			
36	Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
30	and the decree of the O. M. Warn and the O. Should be D. Double Co.	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		-22
51	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Port VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			_
_	19? Note. All Form 990 filers are required to complete Schedule O	38	X	

Form 990 (2010) Colorado Fourteeners Initiative 84-13
Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Pa	art V					
		1 1			,	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	3				
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 are	nd					
	reportable gaming (gambling) winnings to prize winners?			10	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	21				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax			2	b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instruction)	ctions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3			X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3	b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or of		-				
	over, a financial account in a foreign country (such as a bank account, securities account, or other	er finar	icial	١.			v
	account)?				a		X
b	If "Yes," enter the name of the foreign country: ► See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Finar						
5 0	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year		counts.	5			v
5a	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter tra			5	_		X
b	If "Vos" to line 52 or 5h, did the organization file Form 9996 T2			50		-+	
c 6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and or					-	
va	organization policit any contributions that were not tay deductible?			6	a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contri				_		
~	gifts were not tay deductible?	bationi		61	b		
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly	for go	ods				
	and services provided to the payor?	_		78	а	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7		Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which	it was					
	required to file Form 8282?			70	С		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d					
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal beneat	efit con	tract?	70	е		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit of	ontrac	t?	71	f L		X
g	If the organization received a contribution of qualified intellectual property, did the organization fil						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		on file a Form 1	098-C? 7 I	h	X	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	-					
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponso	ring					
	organization, have excess business holdings at any time during the year?			8	3		
9	Sponsoring organizations maintaining donor advised funds.						
а	Did the council of a few conditions design from the advanced design and design and details a consequence of						
b 10	***************************************			9	O		
10	Section 501(c)(7) organizations. Enter:	400					
a h	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a 10b					
b 11	Section 501(c)(12) organizations. Enter:	וטטו					
а	Cross income from mambars or charabelders	11a					
a b	Gross income from other sources (Do not net amounts due or paid to other sources	114					
	against amounts due or received from them	11b					
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of F		041?	12	2a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.						
а	Is the organization licensed to issue qualified health plans in more than one state?			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	13b					
С	Enter the amount of reserves on hand	13c					
14a	Did the erganization receive any payments for indeer tanning convices during the tay year?			14	la		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Sche	edule C)	14	lb		

Form 990 (2010) Colorado Fourteeners Initiative 84-1354844 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 to any question in this Part VI. X **Section A. Governing Body and Management** Yes No 1a Enter the number of voting members of the governing body at the end of the tax year Enter the number of voting members included in line 1a, above, who are independent 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? X 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Does the organization have members or stockholders? Does the organization have members, stockholders, or other persons who may elect one or more members X of the governing body? X Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? X Each committee with authority to act on behalf of the governing body? X 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a Does the organization have local chapters, branches, or affiliates? 10a X **b** If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the 11a X Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 X 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X describe in Schedule O how this is done 12c Does the organization have a written whistleblower policy? X 13 Does the organization have a written document retention and destruction policy? X 14 14 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? The organization's CEO, Executive Director, or top management official X 15a Other officers or key employees of the organization X 15b If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) 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 Х b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the 20 organization: ▶ The Organization 607 10th Street 107N 303-278-7650

CO 80401

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Form 990 (2010) Colorado Fourteeners Initiative

84-1354844

Page 7

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

Check if Schedule O contains a response to any question 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.

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

(A) Name and Title	(B) Average			(0	;)	hat a	oply)	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) Nate Palmer Vice Chair	3.00	x		х	A		1			0
(2) Warren Buettner					n		т		F Y	<u> </u>
Director	1.00	X						0	0	0
(3) Kathleen Brenna	n									
Director	1.00	X						0	0	0
(4) Steve Dayney Director	1.00	x						0	0	0
(5) Alice Jennison	2.00									
Director	1.00	X						0	0	0
(6) Trygve Kjellsen										
Secretary	3.00	X		X				0	0	0
(7) Norbert Klebl										
Director	1.00	X						0	0	0
(8) Tim Leddy										
Director	1.00	X						0	0	0
(9) Michael McCabe										
Chair	3.00	X		X				0	0	0
(10) Bill Middlebroo	k									
Director	1.00	X						0	0	0
(11) Jim Schoettler										
Treasurer	3.00	X		X				0	0	0
(12)Mark Soane										
Director	1.00	X						0	0	0
(13) Anne Vickery										
Director	1.00	X						0	0	0
(14) Charles Barthol										
Director	1.00	X						0	0	0
(15) Matthew McConne								_	_	_
Director	1.00	X						0	0	0
(16) Lloyd Athearn	40.00							60 -60		6 500
Executive Director	40.00			X				68,562	0	6,790
DAA										Form 990 (2010)

Form 990 (2010) Colorado Fourteeners Initiative 84-1354844

Part VII	Section A. Officer	s, Directors, Tr	uste	es,	Key	Em	ploy	ees,	, and Highest Compensa	ted Employees (continue	<u>∍d)</u>			
	(A) Name and Title	(B) Average	Posi	tion (C) k all t	that a	ipply	(D)) Reportable	(E) Reportable		(F) Estima	ited	
		hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	cor	amoun othe mpens from t ganiza nd rela ganiza	er sation he ation ated	
(17)							٥							
(18)														
(19)														
(20)														
(21)														
(22)														
(23)														
(24)														
(25)														
(26)														
(27)				F		Λ				DV				
(28)				-	-		N		00					
	total							>	68,562				6,	790
	from continuation she (add lines 1b and 1c)	•						>	68,562				6.'	790
2 Total		including but no	t lim	ited					pove) who received more				<u>.,</u>	
	table compensation not	in the organizati	011	<u> </u>									Yes	No
	ne organization list any oyee on line 1a? If "Yes								nployee, or highest compe al	ensated		3		X
									ation and other compensa s," complete Schedule J fo					
ابرالم مرا	امداما	_							any unrelated organization			4		X
for se	ervices rendered to the	organization? If							e J for such person			5		X
_	B. Independent Contract		nen	sate	d in	dene	ende	nt co	ontractors that received m	ore than \$100 000 of				
	ensation from the organ	nization.	фен	Juic		аорс	,,,,,,	T 00					(C)	
	Name and	(A) d business address						-	Descrip	(B) otion of services		Со	(C) mpensa	ition
2 Total	number of independen	t contractors (in	cludi	ng b	out n	ot lir	nited	to t	those listed above) who					
recei	ved more than \$100,000	0 in compensati	on fr	om	the c	orga	nizat	ion	>	0		F	000	(2010
LIAA												-orm	7711	1/111

Pa	rt V	III Statement of Rev	enue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts s	12	Federated campaigns	1a			revenue		312, 313, 01 314
rar Jun	ıa L	Manaharahin duan	1b					
s, g	D	Membership dues						
jifts ar a		Fundraising events	1c					
s, c	a	Related organizations	1d	100 250				
on	е	Government grants (contributions)	1e	198,358				
her	t	All other contributions, gifts, grants, and similar amounts not included above		005 606				
trik			1f	285,636				
ong	g	Noncash contributions included in lines 1		8,348	400 004			
<u> </u>	h	Total. Add lines 1a–1f	<u> </u>		483,994			
Program Service Revenue Contributions, gifts, grants				Busn. Code				
ev.	2a							
Se F	b							
Ż	С							
Se	d							
ran	е							
rog	f	All other program service rev	enue	-				
Ь	g	Total. Add lines 2a–2f						
	3	Investment income (including						
		and other similar amounts) .			34			34
	4	Income from investment of ta		•				
	5	Royalties	<u> </u>	▶				
		(i) Real		(ii) Personal				
	6a	Gross Rents						
	b	Less: rental exps.				0	N /	
	С	Rental inc. or (loss)	-			כור זי		
	_d	Net rental income or (loss) .	<u></u>	▶				
	/a	Gross amount from sales of assets (i) Securities	3	(ii) Other	' '			
		other than inventory						
	b	Less: cost or other						
		basis & sales exps.						
	С	Gain or (loss)						
	d	Net gain or (loss)	<u></u>					
nue	8a	Gross income from fundraising ev						
enı		(not including \$						
Sev.		of contributions reported on line 1	c).					
er F		See Part IV, line 18	a					
Other Reve		Less: direct expenses						
J		Net income or (loss) from fun		events •				
	9a	Gross income from gaming activiti						
		See Part IV, line 19						
	b	Less: direct expenses	b					
		Net income or (loss) from gar		ivities ►				
	10a	Gross sales of inventory, less						
		returns and allowances	a					
	b	Less: cost of goods sold	b					
	С	Net income or (loss) from sal				000000000000000000000000000000000000000	200000000000000000000000000000000000000	333333333333333333333333333333333333333
		Miscellaneous Revenue	9	Busn. Code				
	11a	Other Income			17,870	17,870		
	b							
	С							
		All other revenue						
		Total. Add lines 11a–11d			17,870			
	12	Total revenue. See instruction	ns		501,898	17,870	0	34

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must o	. ,	<u> </u>	(): (): (<u>′</u>
	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 governments and		SAPORIOGS	30.10.31 OAPO11000	эдропооб
•	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
_	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	81,790	70,844	1,798	9,148
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	243,483	213,765	2,117	27,601
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits	10,778 23,155	10,428	-996	1,346
10	Payroll taxes	23,155	19,706	905	2,544
11	Fees for services (non-employees):				
а	Management				
	Legal			- 100	
С	• • • • • • • • • • • • • • • • • • • •	7,138		7,138	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 1		- (· ()		
f	Investment management fees	4 005	1 610	2 400	
g		4,027	1,618	2,409	701
12	Advertising and promotion		3,371	2 202	701 740
13	Office expenses	6,404 9,708	60	2,293 9,547	101
14	Information technology	9,700	80	3,347	101
15 16	Royalties	11,520		11,520	
17	Occupancy Travel	6,281	2,647	2,156	1,478
18	Payments of travel or entertainment expense		2,017	2,150	1/1/0
10	for any federal, state, or local public officials	3			
19	Conferences, conventions, and meetings	506	202		304
20	1.11	300	202		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	20,941		20,941	
23	Insurance	10,441		10,441	
24	Other expenses. Itemize expenses not covered	-		-	
	above (List miscellaneous expenses in line 24f. If				
	line 24f amount exceeds 10% of line 25, column				
	(A) amount, list line 24f expenses on Schedule O.)				
а	Refund of Grant to CSP	46,874	46,874		
b	Kiosks	21,147	21,147		
С	Field Staff Travel	9,964	9,964		
d	Development Expenses	9,190	150		9,040
е	Field Equipment Tools	7,636	7,636		
f	All other expenses	41,746	37,458	1,191	3,097 56,100
25	Total functional expenses. Add lines 1 through 2	f 573,430	445,870	71,460	56,100
26	Joint costs. Check here if following				
	SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column				
	(B) joint costs from a combined educational				
DAA	campaign and fundraising solicitation				Form 990 (2010)
					rorm 330 (2010)

Part :	X Balance Sheet		1	(4)		(D)
				(A) Beginning of year		(B) End of year
1	Cash—non-interest bearing			2,300	1	1,380
2	Savings and temporary cash investments			103,858		107,382
3	Pledges and grants receivable, net			10,825		4,687
4	Accounts receivable, net			47,735		70,422
5	Receivables from current and former officers, direct	ctors trustees	kev	- , ,	-	. , , = = -
	employees, and highest compensated employees		-			
	Cabadula I	·			5	
6	Receivables from other disqualified persons (as de	efined under se	ection		_	
	4958(f)(1)), persons described in section 4958(c)(
	employers and sponsoring organizations of section		_			
	employees' beneficiary organizations (see instruct				6	
3 7	Notes and loans receivable, net				7	
7 8					8	
9	Descript annual and defended absorbes				9	7,884
_	Land, buildings, and equipment: cost or				J	,,00.
100	other basis. Complete Part VI of Schedule D	102	187 035			
h	Less: accumulated depreciation	10a	187,035 140,566	55,942	10c	46,469
	The section of the Pall Conduction of the State of the St	[100]		33,312	11	10,102
12	Investments—other securities. See Part IV, line 1°				12	
13	Investments—program-related. See Part IV, line 1	'			13	
14	Later a Material of the				14	
15					15	
_	Total assets. Add lines 1 through 15 (must equal			220,660		238,224
	Accounts payable and accrued expenses			4,433	17	73,136
18	Cronto payable and accided expenses			1,133	18	73,130
19	Grants payable Deferred revenue				19	20,393
20	20.004.0.0			\mathcal{H}	20	20,393
	Tax-exempt bond liabilities Escrow or custodial account liability. Complete Pa	rt IV of Cobodu		/		
21	Parables to surrent and former officers diseases	trusta a lian	le D		21	
21 22		-				
	employees, highest compensated employees, and				00	
	Complete Part II of Schedule L				22	
	Secured mortgages and notes payable to unrelate	d third parties			23	
24	Unsecured notes and loans payable to unrelated t				24	
25	Other liabilities. Complete Part X of Schedule D			4 422	25	02 520
26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here		-1-4-	4,433	26	93,529
<u> </u>		and com	piete			
27 28 29 30 31 32 33 34	lines 27 through 29, and lines 33 and 34.			164 104	~ =	02 750
27	Unrestricted net assets			164,124		83,758 60,937
28	Temporarily restricted net assets			52,103		60,937
29	Permanently restricted net assets Organizations that do not follow SFAS 117, che				29	
:		ck here [a	nd			
	complete lines 30 through 34.					
30	· · · · · · · · · · · · · · · · · · ·				30	
31	Paid-in or capital surplus, or land, building, or equi	pment fund	······		31	
32	Retained earnings, endowment, accumulated inco	me, or other fu	nds	011 011	32	
33	Total net assets or fund balances			216,227		144,695
34	Total liabilities and net assets/fund balances			220,660	34	238,224

Form **990** (2010)

orn	n 990 (2010) Colorado Fourteeners Initiative 84-1354844			Pag	је 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
	· · · · · · · · · · · · · · · · · · ·				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			898
2	Total expenses (must equal Part IX, column (A), line 25)	2	57	73,4	<u>430</u>
3	Revenue less expenses. Subtract line 2 from line 1	3	- 7	71,	532
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	21	L6,2	227
5	Other changes in net assets or fund balances (explain in Schedule O)	5			,
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,				,
	column (B))	6	14	44,	695
Pa	rt XII Financial Statements and Reporting				,
	Check if Schedule O contains a response to any question in this Part XII				
	· · · · · · · · · · · · · · · · · · ·			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.				
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were				
	issued on a separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2010)

SCHEDULE A

(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. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Colorado Fourteeners Initiative

Employer identification number

		***************		urteemers initi							4044			
P	art I	Reas	on for Public Charity	y Status (All organization	ons mus	st comp	olete ti	nis pai	rt.) Se	e ins	truction	<u>s. </u>		
The	orga	anization is no	t a private foundation beca	use it is: (For lines 1 through 1	11, check	only one	box.)							
1		A church, co	nvention of churches, or as	ssociation of churches describ	ed in sec	tion 170((b)(1)(A))(i).						
2		A school des	scribed in section 170(b)(1)(A)(ii). (Attach Schedule E.)										
3		A hospital or	a cooperative hospital ser	vice organization described in	section	170(b)(1)	(A)(iii).							
4		A medical re	search organization operat	ted in conjunction with a hospi	tal descril	bed in se	ction 1	70(b)(1)	(A)(iii).	Enter	the hospita	al's n	ame,	
		city, and stat	te:											
5		-	•	t of a college or university owr	ned or ope	erated by	a gove	rnmenta	al unit d	escribe	ed in			
			(b)(1)(A)(iv). (Complete Pa											
6		A federal, st	ate, or local government or	governmental unit described i	n section	າ 170(b)(1)(A)(v)							
7		-		a substantial part of its suppor	t from a g	jovernme	ental uni	t or from	n the ge	eneral p	oublic			
			section 170(b)(1)(A)(vi). (
8				170(b)(1)(A)(vi). (Complete P										
9	\mathbf{X}	-		(1) more than 33 1/3% of its s							-			
		-		empt functions—subject to cert										
			=	and unrelated business taxabl				1 tax) fro	om bus	inesses	S			
		acquired by	the organization after June	30, 1975. See section 509(a)	(2). (Con	iplete Pa	rt III.)							
10	Ш	An organizat	tion organized and operate	d exclusively to test for public	safety. Se	ee sectio	on 509(a)(4).						
11		_	-	d exclusively for the benefit of,	-				-					
				orted organizations described i							ection			
				the type of supporting organize		-	te lines	_	-					
		a Type		c Type III–Function			d	<u> </u>	e III–O					
е		-		rganization is not controlled di										
				her than one or more publicly	supported	d organiza	ations d	escribed	d in sec	tion 50)9(a)(1)			
		or section 50												
f		_		termination from the IRS that	it is a Typ	e I, Type	e II, or T	ype III s	upporti	ng				
		•	, check this box											
g		=	=	zation accepted any gift or con	tribution f	rom any	of the							
		following pe		controls, sither alone or togeth	or with n	oroono da	ooriboo	lin (ii) o	nd			Г	Yes	No
			-	controls, either alone or togeth	iei wiiii pi	ersons de	escribed	ı III (II) a	Πū		11		res	NO
			w, the governing body of the	• • • • • • • • • • • • • • • • • • • •								g(i)		
			member of a person description									g(ii)		
L				described in (i) or (ii) above?							🖽	g(iii)		
n (:)	Name	e of supported		t the supported organization(s		organization	(v) Did v	ou notify	(vi) 1	o tho	(viii)	Amou	nt of	
(1)		anization	(ii) EIN	(iii) Type of organization (described on lines 1–9	in col. (i) li	9			organizati	s the ion in col.		suppo		
	_			above or IRC section	governing	document?	col. (i)		(i) organiz U.S					
				(see instructions))	Yes	No	Yes	oort?	Yes	No				
(A)					163	140	163	140	163	110				
(~)														
(B)														
(-,														
(C)														
(D)														
(E)														

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

Schedule A (Form 990 or 990-EZ) 2010

Schedule A (Form 990 or 990-EZ) 2010 Colorado Fourteeners Initiative 8

84-1354844

Page 2

Part II	Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
	(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under
	Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4 5	Total. Add lines 1 through 3 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)						
6	Public support. Subtract line 5 from line 4						
	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on	_IE	VT	CC	PY		
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc					12	
13	First five years. If the Form 990 is for the	•	first, second, third	, fourth, or fifth tax	x year as a sectior	n 501(c)(3)	
<u> </u>	organization, check this box and stop he						▶
	tion C. Computation of Public S					1	
14	Public support percentage for 2010 (line						%
15 10-	Public support percentage from 2009 Sc 33 1/3% support test—2010. If the organ	nedule A, Part II,	line 14		4:- 00 4/00/	15	%
Iba	box and stop here. The organization qua	ilzalion did nol c	heck the box on i	nie 13, and line 12	+ 15 33 1/3% 01 1110	ore, crieck triis	▶ □
b	33 1/3% support test—2009. If the organization qua	•				or more	
D	check this box and stop here. The organ				n		▶ □
17a	10%-facts-and-circumstances test—20	•		-		l line 14 is	🗀
	10% or more, and if the organization me	•					
	Part IV how the organization meets the "				-	•	
	organization			-			▶ □
b	10%-facts-and-circumstances test—20						
	15 is 10% or more, and if the organization	•					
	Explain in Part IV how the organization n						
	supported organization			=			▶ □
18	Private foundation. If the organization d						·····
	instructions						▶ □
							·····

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

(Complete only if you checked the box on line 9 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.)

_	ii tilo organization iano t	y quality arras	or the teete ne	tou bolow, plo	acc complete	r are iii.)	
	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	738,794	989,917	425,854	511,131	483,994	3,149,690
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	738,794	989,917	425,854	511,131	483,994	3,149,690
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						3,149,690
	ction B. Total Support			00			
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6	738,794	989,917	425,854	511,131	483,994	3,149,690
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			232	33	34	299
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b			232	33	34	299
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)				1,075	17,870	18,945
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	738,794	989,917	426,086	512,239	501,898	3,168,934
14	First five years. If the Form 990 is for the	organization's fi	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3)	
	organization, check this box and stop her						
Sec	tion C. Computation of Public S						
15	Public support percentage for 2010 (line 8	3, column (f) divid	ded by line 13, col	umn (f))		15	99.39%
16	Public support percentage from 2009 Sch						99.96%
	ction D. Computation of Investme					, , , , , , , , , , , , , , , , , , , 	
17	Investment income percentage for 2010 (13, column (f))			%
18	Investment income percentage from 2009						%
19a	33 1/3% support tests—2010. If the orga						. =
	17 is not more than 33 1/3%, check this b						> X
b	33 1/3% support tests—2009. If the orga						a
20	line 18 is not more than 33 1/3%, check the Private foundation. If the organization did		_	•			🟲 📙

Part IV S	m 990 or 990-E2 Supplemental Part II, line 17 nstructions).	Information	n. Comple	te this part t	o provide	the explana	tions requir	ed by Part I onal informa	I, line 10; ation. (See
Part II	I, Line 1	L2 - Oth	er Inc	ome Deta	il				
Miscell	aneous				\$	18,945			
				N I T) \ /		
		CL		17.1.		OF	<i>JV</i>		

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

2010

Colorado Fourteeners Initiative

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

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

84-1354844

Organization type (check one):					
Filers of:	Section:				
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	527 political organization				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See				
	ling Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or se contributor. Complete Parts I and II.				
Special Rules					
sections 509(a)(1) and	3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under d 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts				
the year, aggregate co	7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during ontributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or , or the prevention of cruelty to children or animals. Complete Parts I, II, and III.				
the year, contributions aggregate to more that year for an exclusively applies to this organize	7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during sofor use exclusively for religious, charitable, etc., purposes, but these contributions did not an \$1,000. If this box is checked, enter here the total contributions that were received during the y religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule reation because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more				
990-EZ, or 990-PF), but it mu	t is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, ust 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 certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).				

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization **Employer identification number**

C	olorado Fourteeners Initiative		84-1354844
	organizations Maintaining Donor Advised Forganization answered "Yes" to Form 990, Page 1	Funds or Other Similar Funds art IV, line 6.	
	.	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
_	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing		
	funds are the organization's property, subject to the organization's e		Yes No
6	Did the organization inform all grantees, donors, and donor advisors		d
	only for charitable purposes and not for the benefit of the donor or d		
	conferring impermissible private benefit?		Yes No
Pa	conferring impermissible private benefit? rt II Conservation Easements. Complete if the or	rganization answered "Yes" to	Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (che	eck all that apply).	
	Preservation of land for public use (e.g., recreation or education) Preservation of an historically	important land area
	Protection of natural habitat	Preservation of a certified histo	oric structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified cor	nservation contribution in the form of a	conservation
	easement on the last day of the tax year.		
	•		Held at the End of the Tax Yea
а	Total number of conservation easements		0-
2	Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure i	polydod in (a)	2c
			20
a	Number of conservation easements included in (c) acquired after 8/	17/06, and not on a	
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, released,	extinguished, or terminated by the org	janization during the
	tax year ▶		
4	Number of states where property subject to conservation easement		
5	Does the organization have a written policy regarding the periodic m		
	violations, and enforcement of the conservation easements it holds?		
6	Staff and volunteer hours devoted to monitoring, inspecting, and ent	forcing conservation easements during	the year
	•		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing	ng conservation easements during the	year
	> \$		
8	Does each conservation easement reported on line 2(d) above satisfied	fy the requirements of section 170(h)(4	4)(B)
	(i) and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservation eas		
	balance sheet, and include, if applicable, the text of the footnote to t	he organization's financial statements	that describes the
	organization's accounting for conservation easements.		
Pa	rt III Organizations Maintaining Collections of Air Complete if the organization answered "Yes"		her Similar Assets.
4-	· •		t and balance about
ıd	If the organization elected, as permitted under SFAS 116 (ASC 958) works of art, historical treasures, or other similar assets held for pub.	•	
	works of art, historical treasures, or other similar assets held for public service, provide in Part XIV, the text of the featnets to its fine		
L	public service, provide, in Part XIV, the text of the footnote to its final		
D	If the organization elected, as permitted under SFAS 116 (ASC 958)	•	
	works of art, historical treasures, or other similar assets held for pub		i turtnerance of
	public service, provide the following amounts relating to these items		
	(i) Revenues included in Form 990, Part VIII, line 1		\$
	(ii) Assets included in Form 990, Part X		\$
2	If the organization received or held works of art, historical treasures,	or other similar assets for financial ga	in, provide the
	following amounts required to be reported under SFAS 116 (ASC 95)		
а	Revenues included in Form 990, Part VIII, line 1		> \$
h	Assets included in Form 990 Part X		S

Schedule D (Form 990) 2010 Colorado Fourteeners Initiative 84-1354844 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply): Public exhibition Loan or exchange programs а b Scholarly research Other Preservation for future generations С Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part 4 XIV. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV Part IV line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **b** If "Yes," explain the arrangement in Part XIV and complete the following table: Amount c Beginning balance 1c d Additions during the year 1d Distributions during the year 1e **b** If "Yes," explain the arrangement in Part XIV. Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10 Part V (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance **b** Contributions c Net investment earnings, gains, and **d** Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶ % **b** Permanent endowment ▶% c Term endowment ► 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: Yes No (i) unrelated organizations 3a(i) (ii) related organizations 3a(ii) **b** If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIV the intended uses of the organization's endowment funds. Land, Buildings, and Equipment. See Form 990, Part X, line 10. Part VI

(a) Cost or other basis

(investment)

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

(b) Cost or other basis

(other)

187,035

(c) Accumulated

depreciation

140,566

... ▶ 46,469 Schedule D (Form 990) 2010

(d) Book value

46,469

1a Land

Description of investment

b Buildingsc Leasehold improvements

d Equipment

Part VII	Investments—Other Securities. See Form 99	90, Part X, line 12.		
	(a) Description of security or category	(b) Book value	(c) Method o	
	(including name of security)		Cost or end-of-ye	ar market value
(1) Financial				
	eld equity interests			
/ A \				
(⊏) (F)				
(0)				
(1.1)				
(I)				
	nn (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments—Program Related. See Form 9	90, Part X, line 13.		
	(a) Description of investment type	(b) Book value	(c) Method o	f valuation:
			Cost or end-of-ye	ar market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)	nn (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. See Form 990, Part X, line 15.			
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)	on (b) moved a succl. Forms 000, Dart V, and (D) line 45.			
Part X	on (b) must equal Form 990, Part X, col. (B) line 15.)	 25	······	
1.	(a) Description of liability	(b) Amount		
	income taxes	(1)		
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
Total. (Colum	nn (b) must equal Form 990, Part X, col. (B) line 25.)			

2. FIN 48 (ASC 740) Footnote. In Part XIV, 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).

Sche	edule D (Form 990) 2010 Colorado Fourteeners Initiative 84-135484	4	Page 4
Pa	art XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Sta	atements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	501,898
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	573,430
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-71,532
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-71,532
Pa	art XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	
1	Total revenue, gains, and other support per audited financial statements	1	527,525
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments 2a		
b	Donated services and use of facilities 2b 25,627		
С	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIV.)		
е	Add lines 2a through 2d	2e	25,627 501,898
3	Subtract line 2e from line 1	3	501,898
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 XIV.)		
С	Add lines 4a and 4b	4c	
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	501,898
Pa	art XIII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Return	
1	Total expenses and losses per audited financial statements	1	599,057
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 25,627		
b	Prior year adjustments 2b		
С	Other losses 2c		
d	Other (Describe in Part XIV.)		
е	Add lines 2a through 2d	2e	25,627
3	Subtract line 2e from line 1	3	573,430
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIV.)		
	Add lines 4a and 4b	4c	
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	573,430
	art XIV Supplemental Information		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1		
	V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part	rt to provide	
	additional information.		
P	art X - Liability Under FIN 48 Footnote		

CFI follows Accounting for Uncertainty in Income Taxes, which requires CFI to determine whether a tax position (and the related tax benefit) is more likely than not to be sustained upon examination by the applicable taxing authority, based solely on the technical merits of the position. The tax benefit to be recognized is measured as the largest amount of benefit that is greater than fifty percent likely of being realized upon settlement,

Page 5 Part XIV Supplemental Information (continued) presuming that the tax position is examined by the appropriate taxing authority that has full knowledge of all relevant information. During the year ended December 31, 2010, CFI's management evaluated its tax positions to determine the existence of uncertainties, and did not note any matters that would require recognition or which may have an affect on its tax-exempt status.

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 2010 Open to Public Inspection

Name of the organization Colorado Fourteeners Initiative **Employer identification number** 84-1354844

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 The Form 990 will first be reviewed by the audit committee, then with the Board of Directors.
Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy Conflicts are monitored annually.
Form 990, Part VI, Line 15a - Compensation Process for Top Official The Executive Director's salary was negotiated based on past earnings, what the organization paid the ED in the past and using comparables from the Colorado Nonprofit Association's salary surveys for organizations of similar size and budget.
Form 990, Part VI, Line 15b - Compensation Process for Officers Employee salary reviews are based on CNP salary surveys, info obtained from other related nonprofits (when possible) and the employee's salary history and work performance.
Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Available upon request.