### Form 990

### **Return of Organization Exempt From Income Tax**

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

Open to Public

<u>A</u>	For the	2013 calend	ar year, or tax year beginning , 2013, and ending			, 20		
В	Check if	applicable: C i	Name of organization Rose Foundation		D Employ	er identification number		
	Address	change [	Doing Business As			84-0418124		
	Name cl	hange	Number and street (or P.O. box if mail is not delivered to street address) Room/suiti	)	E Telephone number			
	Initial ref	-		200				
	Termina	_	City or town, state or province, country, and ZIP or foreign postal code	.00		303-398-7400		
	Amende	- 1	enver, CO 80246		<b>G</b> Gross re	oninto ¢ 7 000 440		
			Name and address of principal officer: Anne Garcia			7,002,112		
		1	ime as C above		•	subordinates? Yes No		
1	Tax-eve	mpt status:		H(D) Are all s	ubordinate:	s included? Yes No		
J	Website		<u> </u>	_				
K		organization:		H(c) Group	T			
	art I	Summar		on: 1995	IVI State	of legal domicile: CO		
	1		ribe the organization's mission or most significant activities: Rose Cor	nmunity Foun	dation and	its principal supporting		
φ		organization, R	Rose Foundation, operate with complementary purposes: to sustain the health and well-	neing of the co	ven count	Greater Densies		
anc	}		naking programs, and to expand private philanthropy by offering services to charitable			y Greater Deliver community		
3L	2	Check this	Dox ► ☐ if the organization discontinued its operations or disposed or	donors.				
Š	3	Number of v	and the second number of the s		1 1	its net assets.		
<u>م</u>	4	Number of i	ndependent veting members of the reversion beat (Part VIII)		3_	17		
es	5	Total number	ndependent voting members of the governing body (Part VI, line 1b)		4	17		
Ϋ́	6	Total number		• • • •	5	34		
Activities & Governance	7	Total uprolo	er of volunteers (estimate if necessary)		6	58		
•	b	Not uprolete	ted business revenue from Part VIII, column (C), line 12		7a	(372,495)		
	0	Net unleate	ed business taxable income from Form 990-T, line 34		7b	(377,062)		
	8	Contribution	ns and grants (Part VIII, line 1h)	Prior Ye		Current Year		
иe	9				204,368	85,930		
Revenue	1			<del></del>	0	0		
	11	Other reven	income (Part VIII, column (A), lines 3, 4, and 7d)	9	,137,936	7,532,827		
	12	Total revenu	ue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		74,095	73,655		
	12	Create and	e—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	9,416,39		7,692,412		
		Grants and	similar amounts paid (Part IX, column (A), lines 1–3)	8	,694,774	9,470,565		
	14		d to or for members (Part IX, column (A), line 4)		0	0		
Expenses	15	Salaries, other	er compensation, employee benefits (Part IX, column (A), lines 5-10)	1	,322,654	1,439,928		
eŭ	16a	Protessional	I fundraising fees (Part IX, column (A), line 11e)		0	0		
Ϋ́	b	Total fundra	ising expenses (Part IX, column (D), line 25) ▶0	4.7				
_	17	Other expen	ses (Part IX, column (A), lines 11a-11d, 11f-24e)	1	,061,977	1,074,642		
	18	Total expens	ses. Add lines 13–17 (must equal Part IX, column (A), line 25)	11	,079,405	11,985,135		
	19	Revenue les	s expenses. Subtract line 18 from line 12		663,006)			
Assets or Balances				eginning of Cu	rrent Year	End of Year		
Sset	20		(Part X, line 16)	266	,542,874	296,129,118		
Net A	21		es (Part X, line 26)	64	,370,105	71,807,465		
			or fund balances. Subtract line 21 from line 20	202	,172,769	224,321,653		
	art II	Signature						
true	der penal e. correct	ities of perjury, I and complete.	declare that I have examined this return, including accompanying schedules and staten Declaration of preparer (other than officer) is based on all information of which preparer	nents, and to the	ne best of	my knowledge and belief, it is		
	<u> </u>		M A CLAA	nas any knowi	eage.			
Sig	ın	Signature	e of officer		11/13/	14		
He		1!	Garcia, CFO and COO	Da	te '			
110		<b>—</b>	print name and title					
Pa		1		1 .	Check			
	epare			1 /13/14	self-em	P01375409		
Us	e Onl	y Firm's name	3,-1-3,-1-3,-1-3,-1-3,-1-3,-1-3,-1-3,-1	Firm	n's EIN ▶			
Mar	, the ID	Firm's addre	ess ► 475 Lincoln Street, Suite 200 Denver, CO 80203 is return with the preparer shown above? (see instructions)	Pho	ne no.	303-534-5953		
·via	y ւմ ՄԵՄ	เบ นเอบนธิริ เกิ	is return with the preparet SHOWN above? (see Instructions)			/ Ves No		



115179.333365.205839.8457 1 AT 0.406 373

ROSE FOUNDATION 600 S CHERRY ST STE 1200 DENVER CO 80246-1712

Notice	CP211A			
Tax period	December 31, 2013			
Notice date	September 15, 2014			
Employer ID number	84-0418124			
Tax period         December 31, 2013           Notice date         September 15, 2014           Employer ID number         84-0418124           To contact us         Phone 1-877-829-5500				
	FAX 801-620-5555			

Page 1 of 1



L15179

Important information about your December 31, 2013 Form 990

# We approved your Form 8868, Application for Extension of Time To File an Exempt Organization Return

We approved the Form 8868 for your December 31, 2013 Form 990.

Your new due date is November 15, 2014.

### What you need to do

File your December 31, 2013 Form 990 by November 15, 2014. We encourage you to use electronic filing—the fastest and easiest way to file.

Visit www.irs.gov/charities to learn about approved e-File providers, what types of returns can be filed electronically, and whether you are required to file electronically.

### **Additional information**

- Visit www.irs.gov/cp211a.
- For tax forms, instructions, and publications, visit www.irs.gov or call 1-800-TAX-FORM (1-800-829-3676).
- Keep this notice for your records.

If you need assistance, please don't hesitate to contact us.

Form 8868 (Rev. 1-2014)	····				Page 2	
If you are filing for an Additional (Not Automatic) 3-Month	Extension,	complete only Part II and check the	s box		▶ X	
Note. Only complete Part II if you have already been granted	an automatic	3-month extension on a previously	filed Form 88	168.		
If you are filing for an Automatic 3-Month Extension, com	plete only Pa	art I (on page 1).				
Part II Additional (Not Automatic) 3-Monti	h Extensio	n of Time. Only file the origin	nal (no cop	ies needed	1).	
					instructions	
Type or Name of exempt organization or other filer, see in	structions.				umber (EIN) or	
print						
File by the due date for the due date for				84-0418124		
filling your Number, street, and room or suite no. If a P.O. bo	x, see instruc	tions.	Social secu	ırity number (S	SSN)	
return, See 600 S, Cherry Street, No. 1200 instructions.						
City, town or post office, state, and ZIP code. For Denver CO 80246	a foreign add	iress, see instructions.				
penver, co 80246						
Fatantha Datum and E. N						
Enter the Return code for the return that this application is for	(file a separa	te application for each return)		****	0 1	
Application						
Is For	Return	Application			Return	
Form 990 or Form 990-EZ	Code	Is For	t more (1871) e was et su fra i more i takan	SULVINO NESSEL SILVERS (MISSEL)	Code	
Form 990-BL	01				17.3	
Form 4720 (individual)	02	Form 1041-A			80	
Form 990-PF	03	Form 4720 (other than individual)			09	
Form 990-T (sec. 401(a) or 408(a) trust)	04	Form 5227			10	
Form 990-T (trust other than above)	05	Form 6069			11	
	06	Form 8870	<del></del>	<del></del>	12	
STOP! Do not complete Part II if you were not already gran Anne Garcia	teo an auton	natic 3-month extension on a prev	liously filed	Form 8868.	<del></del>	
• The books are in the care of   600 S. Cherry Street	t Suite 1	200 - Denver CO 20346				
Telephone No. ▶ 303-398-7400	-, , ,	Fax No. ► 303-398-7430				
If the organization does not have an office or place of busing	Jose in the Ur	alted States shock this have		<del></del>	. —	
If this is for a Group Return, enter the organization's four did	nit Group Eve	emption Number (CEN)			<b>▶</b>	
box ▶ . If it is for part of the group, check this box ▶	and atta	ch a list with the names and EINs o	TUNIS IS FOR TR	ie whole grou	p, check this	
4 I request an additional 3-month extension of time until	November	15 2014	all members	tne extensio	n is for.	
5 For calendar year 2013, or other tax year beginning		, and endin	<b>a</b>			
6 If the tax year entered in line 5 is for less than 12 months	check reas	on: Initial return	Final retu		•	
Change in accounting period	, , , , , , , , , , , , , , , , , , , ,	on Landa (etoli)	Liisti iatt	1113		
7 State in detail why you need the extension						
Additional time is needed to gather inform	ation to f	ile a complete and				
accurate return.	······					
			······································			
8a If this application is for Forms 990-BL, 990-PF, 990-T, 472	20, or 6069, e	enter the tentative tax, less any				
nonrefundable credits. See instructions.			8a \$	5	0,	
b If this application is for Forms 990-PF, 990-T, 4720, or 60	69, enter any	refundable credits and estimated				
tax payments made. Include any prior year overpayment	allowed as a	credit and any amount paid				
previously with Form 8868.			8b \$	3	0.	
c Balance due. Subtract line 8b from line 8a. Include your	payment with	n this form, if required, by using				
EFTPS (Electronic Federal Tax Payment System). See ins	structions.		8c \$	3	0.	
Signature and Verific	ation mus	t be completed for Part II o	niy.			
Inder penalties of perlury, I declare that I have examined this form, incl i is true, correct, and complete, and that I am authorized to prepare this	uding accompa	anying schedules and statements, and to	the best of m	y knowledge an	d belief,	
and and an addition and to proper a this	ionni.			m 1 1		
ignature Title	CPA		Date 🕨	· X 1101	19	
<b>k</b>				Form 8868	(Rev. 1-2014)	

F 00	
Part	0 (2013) Page 2  III Statement of Program Service Accomplishments
ı ar c	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Rose Community Foundation works to enhance the quality of life of the Greater Denver community through its leadership resources.
	traditions, and values. We value our Jewish heritage and our roots in Jewish traditions including charity, philanthropy, and
	nondiscrimination. We value excellence and uphold the highest standards in the pursuit of our mission. We value the trust and
	respect of the community and continually strive to earn and sustain that trust by consistent & disciplined adherence to our mission
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
4	
•	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$10,869,045 including grants of \$9,470,565) (Revenue \$)
	Rose Foundation, a supporting organization of Rose Community Foundation, makes grants in five primary issue
	areas within the seven-county Denver community. A total of \$8,127,000 in unrestricted funds was awarded in 2013 as follows:
	AGING- \$1,467,000 to support services for older adults, including transportation, direct services, and end-of-life care; CHILD &
	FAMILY DEVELOPMENT- \$1,413,000 to support early childhood development and education, family self-sufficiency and related public
	policy efforts; EDUCATION- \$1,744,000 to improve K-12 teacher quality and support systemic changes aimed at closing
	education achievement gaps; HEALTH- \$1,455,000 to support access to care, cost-effectiveness in health care, health policy
	Initiatives and primary prevention; JEWISH LIFE- \$2,048,000 to help strengthen connections between individuals and the Jewish
	community, promote Jewish growth and learning, strengthen organizations and develop leaders.
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)
	Rose Community Foundation (EIN #84-0920862), an organization supported by the Rose Foundation, had key program achievement in
	2013 in three areas:
	DONOR DEVELOPMENT: Donors and aligned funders contributed \$7,811,000 to the Foundation, six new advised funds and one field
	of interest fund were established and eleven new planned gifts were made.
	FUND DISTRIBUTIONS: Donor's recommended grants totaled \$2,178,000 to a broad range of community interests.
	rows biothibotions, boild steconmended grants totaled \$2,178,000 to a broad range of community interests.
	ENDOWMENT SERVICES: The Foundation paid out \$2,780,000 to local nonprofit organizations who have established
	permanent endowments and designated funds at the Foundation.
	(For informational purposes only- activity is not included in the Rose Foundation Form 990).
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)

	FUND DISTRIBUTIONS:	Donor's recommen	ded grants totaled \$	2,178,000 to a broad	range of community interests.	
	ENDOWMENT SERVICE permanent endowments	S: The Foundation and designated fur	oaid out \$2,780,000 t nds at the Foundatio	o local nonprofit org n.	anizations who have establishe	ed
	(For informational purpo	ses only- activity is	not included in the	Rose Foundation Fo	rm 990).	
4c	(Code:) (Ex	penses \$	including g	rants of \$	) (Revenue \$	)
						***************************************
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~					
4.1	011	/D !! ! O !				
	Other program services (Expenses \$			\		
		including gr		) (Revenue \$	)	
	Total program service	expenses -	10,869,045			Form <b>990</b> (2013)

# Form 990 (2013) Rose 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	_X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	<u> </u>	
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		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	ა		X
	during the tax year? If "Yes," complete Schedule C, Part II	4	v	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4	<u> </u>	
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			X
	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		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		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	Х	
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	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			}
1	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
a	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		Х
f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X			
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f	X	
		40		
b	Schedule D, Parts XI and XII  Was the organization included in consolidated, independent audited financial statements for the tax year?	12a		X
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	,,	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	1,,
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,	140		X
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	x	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			<u> </u>
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
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	17	<u> </u>	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	ļ	х
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		х
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	<u> </u>	

# Form 990 (2013) Rose Foundation Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	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 individuals in the United States 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	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) 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		<u>x</u> _
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		х
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? If so,	}		
	complete Schedule L, Part II	26		Х
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			1
00	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
а	instructions for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	28b		<u> </u>
Ŭ	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV			
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	_29_		X
	contributions? If "Yes," complete Schedule M			
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30		<u> </u>
	If "Yes," complete Schedule N, Part I	24		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31	<del></del>	<u> x</u>
	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		X
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33	X	-
	Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Α_	- V
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a	-	X
	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?	555		
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30	<u> </u>	X
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	<u> </u>	1	<b> </b> ^
	Note. All Form 990 filers are required to complete Schedule O	38	x	
		<del></del>		

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance	<del></del>		age :
	Check if Schedule O contains a response or note to any line in this Part V			
			T	<del></del>
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
b	Enter the number of Ferma WOO instructed in the state of Fig. 2.15	1		
c	D'I II	1		
Ū	(gambling) winnings to prize winners?			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1c	X	<del>                                     </del>
	filed for the calendar year ending with or within the year governd by this return			
b		1		
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	X	<del> </del>
За	Did the organization have unrelated husiness gross income of \$1,000 and the state of the state o		ŀ	
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3a	X	┼
4a		3b	X	<del> </del> -
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	١.		1
b	If "Yes," enter the name of the foreign country:	<u>4a</u>	<del></del>	X
-	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			1.5
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	-	16	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u>5a</u>	<del> </del>	X
c	If "Voo " to line Fe or Fb did the executivation file F	5b	<del></del>	X
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	5c	-	<del>├</del>
-		_		
b	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	<u>6a</u>	┼	X_
_				
7	were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).	6b	<del>                                     </del>	
·a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	_		
b	M IIV as II alial the assument with the state of the stat		-	X
c	Did the organization notify the donor of the value of the goods or services provided?  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7b	<del> </del>	
•	to file Form 8282?			
d	If BV/ II in directs the mount of CE COCO CD 1 1 1 1 1	7c	_	X
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	┨		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e		X
g g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f	<del></del>	X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g	<del> </del>	-
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	7h	├	+
-	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		1	
9	Sponsoring organizations maintaining donor advised funds.	_8_	<del> </del>	<del> </del>
а	Did the organization make any taxable distributions under section 4966?		1	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9a	┼─	┼
10	Section 501(c)(7) organizations. Enter:	9b	+	
а	Initiation food and capital contributions included an Dart VIII Hard 40			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	4		
11	Section 501(c)(12) organizations. Enter:	1 .		
а	Gross income from members or shareholders	ŀ	1	
b	Gross income from other sources (Do not net amounts due or paid to other sources against	┪		
-	amounts due or received from them			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	-	}	
	If "Vog " optor the amount of tay exempt interest restinations to the control of tay exempt interest restinations."	12a	<del> </del>	+
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	+		
a	Is the organization licensed to issue qualified health plans in more than one state?	-	+	+-
_	Note. See the instructions for additional information the organization must report on Schedule O.	13a	<del> </del>	+-
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 where			1
С	Enter the amount of reserves on hand 13b	1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	+	+-	+
-	2 Total Control of the Control of th	14a	<del></del>	X

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14b

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Rose Foundation

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 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. 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? 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? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 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 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 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? 8a Each committee with authority to act on behalf of the governing body? 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 Did the organization have local chapters, branches, or affiliates? 10a Х b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 13 Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent 15 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a b Other officers or key employees of the organization 15b 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? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 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 (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. \_\_\_ Another's website x Upon request x Own website Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: Anne Garcia - 303-398-7400 600 S. Cherry Street, Suite 1200 Denver CO 80246

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Rose Foundation

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<u> Page</u> **7** 

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

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

y

#### 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.

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

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

(A) Name and Title	(B) Average hours per	box	not cl , unle:	ss pe	ition more rson		one h an	(D)  Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer s		Highest compensated employee	-	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Jennifer Atler Fischer	1.00									
Chair	1.00	X		Х	<u> </u>		<u>.                                    </u>	0.	0.	0.
(2) Rob Klugman	1.00	-								
Secretary	1.00	Х		х				0.	0.	0.
(3) Milroy A. Alexander	1,00	-								
Trustee	1.00	X				_		0.	<u>0.</u>	0.
(4) Judy Altenberg	1.00	}				ŀ				
Trustee	1.00	X				ļ	-	0.	0.	0.
(5) Lisa Reckler Cohn	1.00	-								
Trustee	1.00	X				<b>-</b>	-	0.	0.	0.
(6) Stephanie Foote	1.00	-								
Trustee	2,00	X.			-	ļ		0.	0.	0.
(7) Jerrold Glick	1.00	-								
Trustee (8) Katherine Gold	1.00	X.	-		<u> </u>	$\vdash$		0.	0.	0,
•	1.00	1						_		
Trustee (9) William N. Lindsay III	1,00	X	-	<u> </u>	_	-		0.	0.	0.
Trustee	1.00	.,							_	
(10) Doug Jones	1.00	Α.		<u> </u>	_	-	_	0.	0.	0.
Trustee	1.00									
(11) Helayne Jones, Ed. D.	1.00	^	-				<del> </del>	0.	0.	0.
Trustee	1.00	x						0.		_
(12) Evan Makovsky	1.00	^			-			Ų.	0.	0.
Trustee	1.00	v						0.		
(13) Ronald E. Montoya	1.00	-23					<del> </del>	1	0.	0.
Trustee	1.00	v						0.	0.	
(14) Monte Moses	1.00	<u> </u>					$\vdash$	· ·	<u> </u>	0.
Trustee	1.00	x						0.	0.	
(15) Neil Oberfeld	1.00						T	0,		0.
Trustee	1.00	1						0.	0.	
(16) Dean Prina, M.D.	1.00									0.
Trustee	1.00	7						0.	0.	0.
(17) Irit Waldbaum	1.00	1						•		·
Trustee	1.00	t						0.	0.	0.

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Occuon A. Onicers, Directors, Trus	stees, Key Elli	proy	ees	, an	<u>а п</u>	gne	St C	ompensated Employed	es (continuea)			
(A) Name and title	(B) Average hours per	box	not c	Pos heck ss pe	more erson	than	th an	( <b>D</b> ) Reportable compensation	<b>(E)</b> Reportable compensation		(F) stimate mount	
	week (list any hours for	trustee or director	cer ar	nd a c			Ė	from the organization	from related organizations (W-2/1099-MISC)	1	other npensa from th	ation
	related organizations	ustee o	fruste		, e	pensa		(W-2/1099-MISC)		1	ganizat	
	below	Individual tr	institutional trustee	Officer	Key employee	Highest compensated employee	Former			1	nd relat janizati	
(10) (1) 13 - 3	line)	밀	Isu	₩	X.	Hig	휸			<del> </del>		
(18) Sheila Bugdanowitz President & CEO	24.00	1										
(19) Anne Garcia	16.00 24.00	<del> </del>		X		+-		169,723.	110,256	+	24	<u>.287.</u>
Treasurer CFO & COO	16.00		ļ	x				96 500	55.005			
(20) Marjorie Gart	24.00	<del>                                     </del>	<u> </u>	^		-	$\vdash$	86,520.	56,205		19	<u>,836.</u>
Dir. of Philanthropic Svcs	16.00	1		x				49,129.	21 015		_	
(21) Elsa Holguin	40.00		<b></b>	^	<u> </u>	1	<del> </del>	49,129,	31,915	+	6	<u>.293.</u>
Senior Program Officer	0.00	1				x		123,568.	o		1 -	001
(22) Lisa Farber-Miller	40.00					T-		123,300.	0	+	13	.821.
Senior Program Officer	0.00					x		120,710.	0		15	544.
										•		, 5 - 1
											·	
						ļ <u>.</u>				-		
1b Sub-total		<u> </u>		<u> </u>			<u> </u>	549,650.	198,376		 81	,781.
c Total from continuation sheets to Part V	II, Section A						ightharpoons	0.	0			0.
d Total (add lines 1b and 1c)							<b></b>	549,650.	198,376		81	781.
<ul> <li>Total number of individuals (including but r compensation from the organization</li> </ul>	ot limited to th	ose	liste	ed a	bov	e) w	ho r	eceived more than \$100	0,000 of reportable			3
3 Did the organization list any former officer,	director, or tru	uste	e, ke	ev ei	ngla	ovee	or	highest compensated e	mplovee on	7	Yes	
line 1a? If "Yes," complete Schedule J for s	uch individual									3		x
4 For any individual listed on line 1a, is the st and related organizations greater than \$15	ım of reportab	le co	omp	ens	atio	n an	d ot	her compensation from	the organization	4	x	1
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes," corr	accrue compe	nsat	ion i	from	an	y un	rela	ted organization or indiv	idual for services			
Section B. Independent Contractors	piete Ochedul	<u>e u i</u>	01 5	<u>ucn</u>	per	5011				5	Ь	X
Complete this table for your five highest co the organization. Report compensation for	mpensated inc	depe	ende	ent o	cont	ract	ors	that received more than	\$100,000 of comper	sation	from	
(A)  Name and business		ear	enai	ing v	WILLI	<u>or v</u>	VITNI	(B)			(C)	
								Description of	services	Comp	ensatio	on
Watershed Investment Consultants, 640												
Fiddler's Green Cir, Denver, CO 8011:								<u>Investment Managem</u>	ment		180	<u>,469.</u>
Marathon Asset Management, Orion Hous <u>Upper St. Martin's Lane, London W</u>												
Capital Guardian Trust Companys, 630								Investment Manager	nent		158	,211.
Avenue, 34th floor, New York, NY 101:								Investment Manager	ment		121	.141.
											-	
2 Total number of independent contractors (i \$100.000 of compensation from the organi		ot li	mite	d to	the	ose I	iste	d above) who received r	nore than			

Check if Schedule O contains a response or note to any line in this Part VIII (A) (B) (C) (D) Revenue excluded from tax under Related or Unrelated Total revenue exempt function business revenue revenue Contributions, Giffs, Grants and Other Similar Amounts 1 a Federated campaigns ..... 1a Membership dues ..... 1b Fundraising events 1c d Related organizations ..... 1d 85,930 e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above ..... 1f g Noncash contributions included in lines 1a-1f: \$\_ h Total. Add lines 1a-1f. Business Code Program Service 2 a f All other program service revenue ..... g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 2,238,939 <397,171. 2,636,110. 4 Income from investment of tax-exempt bond proceeds Royalties ..... 5 2,255 2,255. (i) Real (ii) Personal 6 a Gross rents 71,400 b Less: rental expenses ...... 0 c Rental income or (loss) ..... 71.400. d Net rental income or (loss) 71,400 71,400. 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory 5 293 888 b Less: cost or other basis and sales expenses 0 5,293,888. c Gain or (loss) d Net gain or (loss) 5,293,888 24,676. 5,269,212, 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 \_\_\_\_\_a b Less: direct expenses \_\_\_\_\_ b c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 \_\_\_\_\_a b Less: direct expenses \_\_\_\_\_ b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances \_\_\_\_\_a b Less: cost of goods sold ..... b c Net income or (loss) from sales of inventory ..... Miscellaneous Revenue **Business Code** 11 a b C d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions. 7,692,412 <372.495 7,978,977,

### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (A) Total expenses (D) Do not include amounts reported on lines 6b. Program service Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and 1 organizations in the United States. See Part IV, line 21 9,470,565 9,470,565 Grants and other assistance to individuals in the United States. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 Benefits paid to or for members ..... 4 Compensation of current officers, directors, trustees, and key employees ..... 335,935 242,444 93,491 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages ..... 7 878,916 634,314 244,602 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 45,318 32,706 12,612 9 Other employee benefits 100,851 72,784 28,067 Payroll taxes 10 78,908 56.948. 21,960 11 Fees for services (non-employees): a Management ..... b Legal Accounting С Lobbying ..... Professional fundraising services. See Part IV, line 17 Investment management fees ..... 522,616 522,616 Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) 91,396 50,426 40,970 Advertising and promotion 12 Office expenses 13 71,900 51,486 20,414 Information technology ..... 14 15 Royalties 16 Occupancy \_\_\_\_\_ 176,419 127,322 49,097 Travel ..... 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials Conferences, conventions, and meetings ..... 19 64.279 46.390 17.889 Interest 20 Payments to affiliates ..... 21 Depreciation, depletion, and amortization ..... 22 23 Insurance ..... 24,344 17,569 6.775 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 O.) Communication expense 91,577 66,091 25,486 b Income tax expense 32,111 32,111. С d All other expenses Total functional expenses. Add lines 1 through 24e 11,985,135 10,869,045. 1,116,090 0. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

# Form 990 (2013) Part X Balance Sheet

		Check if Schedule O contains a response or not	e to a	ny line in this Part X			
	<b></b>				<b>(A)</b> Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			848,566.	1	1,537,130.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			857,457.	4	810,011.
	5	Loans and other receivables from current and fo					
		trustees, key employees, and highest compensa	ated e	mployees. Complete			
	1	Part II of Schedule L				5	
	6	Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sect					
Assets		employees' beneficiary organizations (see instr).	Comp	olete Part II of Sch L		6	
\ss	7	Notes and loans receivable, net				7	
•	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges	······	······	46,162.	9	6.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	757,702.			
	i	Less: accumulated depreciation			248,261.	10c	248,261.
	11	Investments - publicly traded securities	. <b></b>		161,077,459.	11	174,504,139.
	12	Investments - other securities. See Part IV, line 1	1		102,964,969.	12	118,529,571.
	13	Investments - program-related. See Part IV, line			500,000.	13	500,000.
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equa	al line	34)	266 542 874.	16	296,129,118,
	17	Accounts payable and accrued expenses			1,887,692.	17	2,183,983.
	18	Grants payable			4,777,396.	18	4,305,912.
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities		20			
	21	Escrow or custodial account liability. Complete F				21	
Liabilities	22	Loans and other payables to current and former					
ij		key employees, highest compensated employee					
Lia		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrela	ited th	ird parties		23	
	24	Unsecured notes and loans payable to unrelated	d third	parties		24	
	25	Other liabilities (including federal income tax, par	yables	to related third			
		parties, and other liabilities not included on lines					
		Schedule D			57,705,017.	25	65,317,570.
	26				64,370,105.	26	71,807,465,
"		Organizations that follow SFAS 117 (ASC 958		ck here ▶ Lx_ and			·
ĕ	07	complete lines 27 through 29, and lines 33 an				ļ	
ılan.	27	Unrestricted net assets			202,172,769.		224,321,653.
B	28	Temporarily restricted net assets				28	
oun	29	Permanently restricted net assets Organizations that do not follow SFAS 117 (A		0		29	<u> </u>
Ē.			SC 95	8), check here			
ts o	30	and complete lines 30 through 34.				_	
sse.	31	Capital stock or trust principal, or current funds				30	
Net Assets or Fund Balances	31 32	Paid-in or capital surplus, or land, building, or eq	uipme	or other for the		31	
Ne	32 33	Retained earnings, endowment, accumulated inc	Joine,	or other tunas		32	
	34	Total net assets or fund balances  Total liabilities and net assets/fund balances			202,172,769.	33	224,321,653.
	<u> </u>	assumed and not assets/fully balances			266,542,874.	34	296 129 118.

	1 990 (2013) Rose Foundation	84-0418124		Pa	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets	01 0110124		1 4	90
	Check if Schedule O contains a response or note to any line in this Part XI				
					<del></del>
1	Total revenue (must equal Part VIII, column (A), line 12)	1	7	692	412.
2	Total expenses (must equal Part IX, column (A), line 25)	2			135.
3	Revenue less expenses. Subtract line 2 from line 1	3			723
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			769.
5	Net unrealized gains (losses) on investments	5			607.
6	Donated services and use of facilities	6		, 111	,007.
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,				<u> </u>
	column (B))	10	224	3 2 1	.653.
Pa	rt XII Financial Statements and Reporting	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	224	, , , , ,	.033.
	Check if Schedule O contains a response or note to any line in this Part XII				x
				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			2a		x
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a	2.0		
	separate basis, consolidated basis, or both:				100
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	х	!
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e hasis	20		
	consolidated basis, or both:	0 2000,			
	Separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit			
	review, or compilation of its financial statements and selection of an independent accountant?	o addit,	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O	_ ZC	X	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	nale Audit			
	Act and OMB Circular A-133?	igie Addit	2-		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit	3a		<u> </u>
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	noa addit	O.		

Form **990** (2013)

#### **SCHEDULE A**

Department of the Treasury

Internal Revenue Service

(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.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public Inspection

Name of	the organiza	tion						Er	nployer ic	dentification	n nur	nber	
D-41	D	Rose Foun	dation						84-	0418124			
Part I			<b>rrity Status</b> (All organi					ructions.					
The orga			n because it is: (For lines										
1 ⊣			es, or association of chu		ribed in <b>se</b> e	ction 170	(b)(1)(A)(i).						
2			1 <b>70(b)(1)(A)(ii).</b> (Attach So										
₃	A hospital o	r a cooperative hos	pital service organization	described	in section	170(b)(1)(	A)(iii).						
4 📖			n operated in conjunction	with a hos	pital descri	ibed in <b>se</b>	ction 170	(b)(1)(A)(ii	i). Enter th	ie hospital's	nam	e,	
	city, and sta		·										
5 📖		tion operated for the D(b)(1)(A)(iv). (Comp	e benefit of a college or u blete Part II.)	niversity ov	wned or op	erated by	a governr	nental unit	t describe	d in			
6 🔲			ment or governmental un	it described	d in section	n 170(h)(1	WANGA						
7			eceives a substantial part					r from the	general n	ublic deceril	d i.	_	
		(b)(1)(A)(vi). (Comp		o. no oupp	on monna	governino	ina um o		general p	abiic descrit	sea ii	71	
8 🔲			section 170(b)(1)(A)(vi).	(Complete	Part II \								
9 🔲			eceives: (1) more than 33			om contri	hutione m	omborchi	n foos and	d aroon roos		£	
	activities rela	ated to its exempt fo	unctions - subject to cert	ain excepti	ons, and (2	) no more	than 33 1	/3% of its	eunnort f	rom groce ir	ihre i	mont	
	income and	unrelated business	taxable income (less sec	tion 511 ta	x) from bus	sinesses a	cauired b	v the orga	nization a	fter lune 30	107	/F	
		509(a)(2). (Comple			.,			, and orga	, neation a	itel durie 30,	, 131	J.	
10 🔲	An organizat	tion organized and o	operated exclusively to te	est for publi	ic safety. S	ee sectio	n 509(a)(4	I).					
11 🗓	An organizat	ion organized and o	operated exclusively for t	he benefit o	of, to perfo	rm the fur	nctions of.	or to carr	v out the r	ournoses of	one (	or	
	more publicl	y supported organiz	zations described in sect	ion 509(a)( <sup>-</sup>	1) or sectio	n 509(a)(2	). See sec	tion 509(	a)(3). Che	ck the box ti	hat	٠.	
	describes th	e type of supporting	g organization and comp	lete lines 1	e through	11h.	•		/(-/-				
	a Type	b x -	Type II c 🔲 T	ype III - Fu	nctionally i	ntegrated	d	qyT 🔲 I	e III - Non-	-functionally	inted	rated	
e x	By checking	this box, I certify th	nat the organization is no					more disc	qualified p	ersons othe	r tha	n	
	foundation n	nanagers and other	than one or more public	ly supporte	d organiza	tions des	cribed in s	ection 509	9(a)(1) or s	ection 509(a	1)(2).		
f	foundation managers and other  f If the organization received a wi		eived a written determination from the IRS that it is a Type I, Type II, or Type III										
	supporting o	organization, check	this box	************									
g	Since Augus	t 17, 2006, has the	organization accepted a	ny gift or co	ontribution	from any	of the follo	owing pers	sons?	***************************************			
			directly controls, either a							Ţ.	Yes	No	
	the gov	erning body of the	supported organization?		• • • • • • • • • • • • • • • • • • • •					11q(i)		х	
	(ii) A family	member of a perso	on described in (i) above?	?	• • • • • • • • • • • • • • • • • • • •					11a(ii)		х	
	(iii) A 35%	controlled entity of	a person described in (i)	or (ii) above	e?		• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •		11g(iii)		х	
h	Provide the f	following information	n about the supported or	rganization	(s).								
(i) Name	of supported	(ii) EIN	(iii) Type of organization	(iv) is the o	organization	(v) Did vo	notify the	(vi) ls	the				
	anization	(11) C/14	(iii) Type of organization (described on lines 1-9	in col. (i) lis	sted in your	organizat	ion in col.	organizati	on in col.   \	(vii) Amount o		netary	
- 3			above or IRC section	governing	document?	(i) of you	r support?	(i) organiz U.S	i.?	suppo	UIL		
			(see instructions))	Yes	No	Yes	No	Yes	No				
Rose Co	mmunity												
Foundat	ion	84-0920862	LINE 7	x		x		x		1	557	,813 <u>.</u>	
											<u> </u>	,010.	
							-	-					
Total	1						-	·		4		012	

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.)

sec	ction A. Public Support						
ale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and			1-2		(0, 2010	(1) TOTAL
	membership fees received. (Do not						
	include any "unusual grants.")						
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						
	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						
	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(4) 2012	(-) 2012	(O.T.)
	Amounts from line 4	(4) 2000	(6) 2010	(6) 2011	(d) 2012	(e) 2013	(f) Total
	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						
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						
	Gross receipts from related activities,	etc (see instructi	one)		L	10	<del></del>
	First five years. If the Form 990 is for			d fourth or fifth to		12	
	organization, check this box and stop						
ec	tion C. Computation of Publi	c Support Pe	rcentage				·····
	Public support percentage for 2013 (lin			column (f))		14	
15	Public support percentage from 2012	Schedule A. Part	II. line 14	, o a a a a a a a a a a a a a a a a a a	••••••••••		
l6a	33 1/3% support test - 2013. If the or	rganization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or r	more check this ho	%
	stop here. The organization qualifies a	as a publicly supr	orted organization	ı	14 13 00 17070 01 1	nore, check tris pc	x anu
b	33 1/3% support test - 2012. If the or	rganization did no	ot check a box on l	ine 13 or 16a, and	l line 15 ie 33 1/30	6 or more, chock th	
-	and stop here. The organization qualif	ies as a publicly	supported organiz	ation	11116 10 18 00 1707	o or more, check if	iis dox
7а	10% -facts-and-circumstances test	- 2013. If the orc	nanization did not a	check a boy on line		and line 14 is 10%	
-	and if the organization meets the "fact	s-and-circumstar	nces" test check to	nie hov and atan h	ero, roa, or rob,	and mie 14 is 10%	or more,
	meets the "facts-and-circumstances" t	est. The organiza	ation qualifies as a	nublicly supports	ieie. Explain in Pa d organization	ii iv now the organ	ization
h	10% -facts-and-circumstances test	- 2012 If the ore	anization did not	publicly supported	u organization	47 18 45'	
J	10% -facts-and-circumstances test	- zu iz, ii lile olg e "facte-and circ	janization did NOT ( imetanoon" **** ="	DOOK & DOX ON IING	e 13, 10a, 16b, or	1/a, and line 15 is	10% or
	more, and if the organization meets the	= iauto-aliu-cifcu	The grassination	HECK THIS DOX and	sτop nere. Explai	n in Part IV how the	,
Ω	organization meets the "facts-and-circu	amotances" test.	hav an inc 10 10	auaimes as a publi	cly supported org	anization	<b>&gt;</b>
<u> </u>	Private foundation. If the organization	uid Hot check a	box on line 13, 16	a, 160, 1/a, or 17	b, check this box	and see instruction	s

### 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.)

1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b 8 Public support (Subtract line 7c from line 6.)	a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
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exceed the greater of \$5,000 or 1% of the amount on line 13 for the year  c Add lines 7a and 7b  B Public support (Subtract line 7c from line 6.)  ection B. Total Support  Ilendar year (or fiscal year beginning in) (a)  9 Amounts from line 6  Da Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(A Total
amount on line 13 for the year  c Add lines 7a and 7b  B Public support (Subtract line 7c from line 6.)  ection B. Total Support  Ilendar year (or fiscal year beginning in) (a)  9 Amounts from line 6  Da Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	/6 Total
c Add lines 7a and 7b  3 Public support (Subtract line 7c from line 6.)  ection B. Total Support  lendar year (or fiscal year beginning in) (a)  9 Amounts from line 6  10 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	/6 Total
B Public support (Subtract line 7c from line 6.)  ection B. Total Support  lendar year (or fiscal year beginning in) ▶ (a)  D Amounts from line 6 Da Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(5) Total
lendar year (or fiscal year beginning in) (a) Amounts from line 6 Da Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(5) Total
lendar year (or fiscal year beginning in) (a) Amounts from line 6 Da Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
O Amounts from line 6 Oa Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(4) Total
Da Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources				(-/	<del></del>	(I) Total
dividends, payments received on securities loans, rents, royalties and income from similar sources						
securities loans, rents, royalties and income from similar sources						
and income from similar sources				1		
b om diated basilious taxable mounts				<u> </u>		<del> </del>
(less section 511 taxes) from businesses						1
anguired offer June 20, 1075						
acquired after June 30, 1975						
c Add lines 10a and 10b						
Net income from unrelated business						
activities not included in line 10b,						
whether or not the business is regularly carried on	ĺ					
2 Other income. Do not include gain			<del> </del>			
or loss from the sale of capital	ľ					
assets (Explain in Part IV.)						
Total support. (Add lines 9, 10c, 11, and 12.)						
First five years. If the Form 990 is for the or	ganization's	first, second, thi	rd, fourth. or fifth to	ax vear as a secti	on 501(c)(3) organi-	zation
						· _
ction C. Computation of Public Su	pport Per	rcentage		***************************************	***************************************	
Public support percentage for 2013 (line 8, c			column (fl)		T	
Dublic support percentage from 2010 Sabas	dula A Dad I					
Public support percentage from 2012 Sched					16	
ection D. Computation of Investmen						
Investment income percentage for 2013 (line	e 10c, colum	nn (f) divided by li	ine 13, column (f))		17	
Investment income percentage from 2012 Se	Schedule A, F	Part III, line 17			18	
a 33 1/3% support tests - 2013. If the organiz	ization did no	ot check the box	on line 14, and line	e 15 is more than	33 1/3% and line	17 is not
more than 33 1/3%, check this box and stop	n here. The	organization gua	diffee as a nublish.	elipported even-	zation	. 1. 19 110r
h 32 1/2% support tosts 2010 If the average	ization did -	ot shock = 1	mines as a publicly	supported organi	Zauon	▶∟
b 33 1/3% support tests - 2012. If the organiz	ization did N	or cueck a box of	n line 14 or line 19	a, and line 16 is m	nore than 33 1/3%,	and
line 18 is not more than 33 1/3%, check this  Private foundation. If the organization did n	nox and eta				ported organization	n <b>&gt;</b>

Scriedule A	(Form 990 or 990-EZ) 2013 Rose Foundation	84-0418124	Page 4
Part IV	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or	17b; and Part III, line 1	2
	Also complete this part for any additional information. (See instructions).	and my miles	
	the internation (coo mondonolo).		
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·····			
		······································	

#### **SCHEDULE C**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

➤ See separate instructions. Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

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

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

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

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

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

		1(c)(4), (3), or (6) organizar	nons. Complete Part III.			
Nar	ne of organ	ization			Emp	loyer identification number
	Later By Ary	Rose Founda	tion			84-0418124
Pa	art I-A	Complete if the org	janization is exempt und	der section 501(c)	or is a section 527 of	organization.
2	Political e	xpenditures	ation's direct and indirect politic		<b>&gt;</b> §	S
Pa	art I-B	Complete if the org	anization is exempt und	der section 501(c)	(3)	
1	Enter the		incurred by the organization un			8
2	Enter the	amount of any excise tax	incurred by organization manag	ers under section 4955	5	<u> </u>
3	If the orga	anization incurred a section	n 4955 tax, did it file Form 4720	) for this vear?		Yes No
48	a Was a co	rection made?		, , , , , , , , , , , , , , , , , , , ,		Yes No
k	olf "Yes." c	lescribe in Part IV.				
Pa	art I-C	Complete if the org	anization is exempt und	der section 501(c)	, except section 501	(c)(3).
1	Enter the	amount directly expended	by the filing organization for se	ection 527 exempt func	tion activities	B
2	Enter the	amount of the filing organi	ization's funds contributed to o	ther organizations for s	ection 527	
	exempt fu	nction activities			<b>&gt;</b> :	\$
3	Total exer	npt function expenditures	. Add lines 1 and 2. Enter here :	and on Form 1120-POL	-,	
	line 17b				<b>&gt;</b> :	\$
4	Did the fili	ng organization file Form	1120-POL for this year?	••••		Yes No.
5	Enter the made pay contribution	names, addresses and emments. For each organizations received that were proction committee (PAC). If a	nployer identification number (E tion listed, enter the amount pa comptly and directly delivered to additional space is needed, pro	IN) of all section 527 poid id from the filing organi a separate political org	olitical organizations to whi zation's funds. Also enter t panization, such as a separ	ch the filing organization he amount of political
		(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0
	_					
-						

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

Schedule C (Form 990 or 990-EZ) 2013

Schedule C (Form 990 or 990-EZ) 2013  Part II-A Complete if the org	Rose Found	dation	nnt under section	501(c)(3) and fil	84-041 ad Form 5769	8124 Page <b>2</b>
(election under sec			iipt ander Section	i oo i (o)(o) and in	eu i oiiii 5706	
	<u>-</u> -		liated group (and list in l	Part IV each affiliated	group member's name	e address FIN
expenses, and sha					9 p	o, addi 000, Ei14,
B Check 🕨 🔲 if the filing organiza	tion checked	d box A ar	nd "limited control" prov	isions apply.		
Limi	its on Lobby	ing Exper			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	uongo public	oninian (	avenue vente lable in a			
b Total lobbying expenditures to influ	uence public	opinion ((	grass roots lobbying) .	••••••	5,932.	
b Total lobbying expenditures to influe	uence a legis	sative boo	iy (direct lobbying)		200,000.	
c Total lobbying expenditures (add li					205,932.	
d Other exempt purpose expenditure					11,779,203.	
e Total exempt purpose expenditure	es (add lines	1c and 1d	)		11,985,135.	
f Lobbying nontaxable amount. Ent		nt from the	following table in both	columns.	749,257.	
If the amount on line 1e, column (a) o	or (b) is:	The lob	<u>bying nontaxable amo</u>	unt is:		
Not over \$500,000		20% of	the amount on line 1e.		14	
Over \$500,000 but not over \$1,000	0,000	\$100,00	0 plus 15% of the exce	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	500,000	\$175,00	0 plus 10% of the exce	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17,	,000,000	\$225,00	0 plus 5% of the exces	s over \$1,500,000.		
Over \$17,000,000		\$1,000,0	000.	·-		
g Grassroots nontaxable amount (en	nter 25% of li	ne 1f)			187.314.	
h Subtract line 1g from line 1a. If zer					107,314.	
i Subtract line 1f from line 1c. If zero		•••			0.	
j If there is an amount other than ze			line 1i did the organiza	tion file Form 4720	U.	L
reporting section 4911 tax for this					Г	¬, , , , , , , , , , , , , , , , , , ,
representation for the control time			raging Period Under S		L	Yes No
(Some organiz co	ations that	made a s	ection 501(h) election instructions for lines	do not have to comp	olete all of the five age 4.)	
	Lobbyi	ng Exper	nditures During 4-Year	r Averaging Period		
Calendar year (or fiscal year beginning in)	<b>(a)</b> 20	10	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount	7	45,418.	735.976.	703.970.	749,257,	2,934,621.
b Lobbying ceiling amount						2,704,021.
(150% of line 2a, column(e))						4 401 020
						4,401,932.
c Total lobbying expenditures	· · · · · · · · · · · · · · · · · · ·				205,932.	205,932.
d Grassroots nontaxable amount	1	86,355.	183,994.	175.993.	107 244	
e Grassroots ceiling amount		,,	103,334.	1/5,993.	187,314,	733,656.
(150% of line 2d, column (e))						
( 25, 65, (5))	· · · · · · · · · · · · · · · · · · ·					1,100,484.
f Grassroots lobbying expenditures					5 932	F 020
7					7 417	ו א עיי

Schedule (	C (Form	1990 oi	r 990-EZ)	2013	Rose	Foundation

Page 3

Schedule C (Form 990 or 990-EZ) 2013 Rose Foundation

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

1 During the year, did the filing organization attempt to influence foreign, national, state or local legislativon, including any attempt to influence public opinion on a legislative matter or referendrum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? d Mailings to members, legislators, or the public? d Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, spesches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred by organization managers under section 4912 d if the filing organization incurred a section 4912 tax, did if file Form 4720 for this year?  Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, i answered "Yes,"  1 Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible lobbying and political expenditures (do not include amounts of political expenditure expenditure next year? Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible lobbying and political expenditure next year? Aggregate amount of lobbying and political expenditures (see instructions)  8 Data III-B Supplemental III-D III		ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(8	3)		(b)
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 11 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred under section 4912 d if the filling organization incurred a section 4912 tax, did it fills Form 4720 for this year?  Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).  1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbving and political expenditures from the prior year?  Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6), and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, i answered "Yes."  Dues, assessments and similar amounts from members 2 Section 152(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  2 Current year 2 De Carryover from last year 2 De Carryover from last year 3 Aggregate amount reported in section 603(e)(1)(A) notices of nondeductible section 162(e) dues 3 Aggregate amount reported in section 603(e)(1	of the	o lobbying activity.	Yes	No	Ar	nount
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 11 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred under section 4912 d if the filling organization incurred a section 4912 tax, did it fills Form 4720 for this year?  Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).  1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbving and political expenditures from the prior year?  Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6), and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, i answered "Yes."  Dues, assessments and similar amounts from members 2 Section 152(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  2 Current year 2 De Carryover from last year 2 De Carryover from last year 3 Aggregate amount reported in section 603(e)(1)(A) notices of nondeductible section 162(e) dues 3 Aggregate amount reported in section 603(e)(1	1	During the year, did the filing organization attempt to influence foreign, national, state or				
a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(5)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).  1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political expenditures from the prior year?  1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year 2 De Carryover form last year 2 De Carryover form last year 4 If notices were sent and the amount on line 2e exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures (see instructions) 5 Total 5 Taxable amount reported in section 6033(e)(1)(A) notices of nondeductible lobbying and political expenditures (see instructions)		local legislation, including any attempt to influence public opinion on a legislative matter				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1 c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred under section 4912 c if "Yes," enter the amount of any tax incurred by organization managers under section 4912 d if the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization incurred a section 4912 tax, did it file Form the prior year?  Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, i answered "Yes."  1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 603(e)(1)(A) notices of nondeductible section 162(e) dues d if notices were sent and the amount on line 2 exceeds the amount on line 3, what portion of the excess does the organization agree to carry over to the reasonable estimate of nondeductible lobbying and political expenditure next year?  5 Taxable amount of lobbying and political expenditures (see instructions)		or referendum, through the use of:	1 1 11 11 11 11 11 11 11 11 11 11 11 11			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1 c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred under section 4912 c if "Yes," enter the amount of any tax incurred by organization managers under section 4912 d if the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization incurred a section 4912 tax, did it file Form the prior year?  Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, i answered "Yes."  1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 603(e)(1)(A) notices of nondeductible section 162(e) dues d if notices were sent and the amount on line 2 exceeds the amount on line 3, what portion of the excess does the organization agree to carry over to the reasonable estimate of nondeductible lobbying and political expenditure next year?  5 Taxable amount of lobbying and political expenditures (see instructions)	а	Volunteers?				
d Mailings to members, legislators, or the public?  Publications, or published or broadcast statements?  f Grants to other organizations for lobbying purposes?  g Direct contact with legislators, their staffs, government officials, or a legislative body?  h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  i Other activities?  j Total. Add lines 1c through 1i  2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  b if "Yes," enter the amount of any tax incurred under section 4912  d if the filling organization incurred a section 4912 tax, did it file Form 4720 for this year?  Part III-A  Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).  1 Were substantially all (90% or more) dues received nondeductible by members?  2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?  3 Did the organization agree to carry over lobbying and political expenditures from the prior year?  1 Dues, assessments and similar amounts from members  1 Dues, assessments and similar amounts from members  2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  A Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible lobbying and political expenditures (see instructions)  5 Taxable amount of lobbying and political expenditures (see instructions)  5 Taxable amount of lobbying and political expenditures (see instructions)	b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			\ \ \ \ .	
d Mailings to members, legislators, or the public?  Publications, or published or broadcast statements?  f Grants to other organizations for lobbying purposes?  g Direct contact with legislators, their staffs, government officials, or a legislative body?  h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  i Other activities?  j Total. Add lines 1c through 1i  2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  b if "Yes," enter the amount of any tax incurred under section 4912  d if the filling organization incurred a section 4912 tax, did it file Form 4720 for this year?  Part III-A  Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).  1 Were substantially all (90% or more) dues received nondeductible by members?  2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?  3 Did the organization agree to carry over lobbying and political expenditures from the prior year?  1 Dues, assessments and similar amounts from members  1 Dues, assessments and similar amounts from members  2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  A Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible lobbying and political expenditures (see instructions)  5 Taxable amount of lobbying and political expenditures (see instructions)  5 Taxable amount of lobbying and political expenditures (see instructions)	C	Media advertisements?	-			
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does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  5	2 3 Part 1 2 a b c	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total	on 501(c "No," O	2 3 )(5), or se R (b) Par 1 2a 2b 2c	ection t III-A,	line 3, is
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Also, complete this part for any additional information.	Pari	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the except the organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  Supplemental Information  de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	on 501(c) "No," O	2 3 )(5), or se R (b) Par 1 2a 2b 2c 3	t III-A,	
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#### **SCHEDULE D**

(Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization Inspection

Nam	ne of the organization			Employer id	dentificatio	n number
Pa	Rose Foundation	d Francis ou Oth ou Civillan F		84-	0418124	
га			ds or A	ccounts.co	omplete if t	he
	organization answered "Yes" to Form 990, Part IV, line		- <sub>1</sub>	· <u> </u>		
	<b>-</b>	(a) Donor advised funds	(1	) Funds and	other accor	unts
1	Total number at end of year		<del> </del>	·····		<del></del>
2	Aggregate contributions to (during year)		<u> </u>			
3	Aggregate grants from (during year)		<del> </del>			
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in v					
_	are the organization's property, subject to the organization's	exclusive legal control?		L	Yes	L No
6	Did the organization inform all grantees, donors, and donor a					
	for charitable purposes and not for the benefit of the donor o					
Pa	impermissible private benefit?			<u>.</u>	Yes	No_
			), Part IV,	line 7.		
1	Purpose(s) of conservation easements held by the organization					
	Preservation of land for public use (e.g., recreation or e Protection of natural habitat	,				
	Preservation of open space	Preservation of a c	ertified hi	storic structur	e	
2						
_	Complete lines 2a through 2d if the organization held a qualif day of the tax year.	led conservation contribution in the to	rm of a co	nservation ea	sement on	the last
	day of the tax year.					
а	Total number of conservation easements			l	the End of t	he Tax Year
b	Total acreage restricted by conservation easements	••••••	•••••	2a		
c	Number of conservation easements on a certified historic stri	ucture included in (a)		2b		
d	Number of conservation easements included in (c) acquired a	after 8/17/06 and not on a historic etri		2c		
-	listed in the National Register			2d		
3	Number of conservation easements modified, transferred, rel	eased extinguished or terminated by	the organ		tho toy	
	year ▶	y	ino organ	nzation damig	ine tax	
4	Number of states where property subject to conservation eas	sement is located >				
5	Does the organization have a written policy regarding the per		of			
	violations, and enforcement of the conservation easements it			[	Yes	□ No
6	Staff and volunteer hours devoted to monitoring, inspecting,					
7	Amount of expenses incurred in monitoring, inspecting, and e					
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section	170(h)(4)(E	3)(i)		<del>_</del>
	and section 170(h)(4)(B)(ii)?				Yes	☐ No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expe	nse state	ment, and bal	ance sheet,	and
	include, if applicable, the text of the footnote to the organizat	tion's financial statements that describ	es the or	ganization's a	ccounting f	or
-	conservation easements.					
Pa	t III Organizations Maintaining Collections of	f Art, Historical Treasures, o	r Other	Similar As	sets.	
	Complete if the organization answered "Yes" to Form	<del></del>				
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue sta	atement a	nd balance sh	eet works	of art,
	historical treasures, or other similar assets held for public exh		erance of	public service	e, provide, i	n Part XIII,
	the text of the footnote to its financial statements that descri					
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue staten	nent and b	alance sheet	works of ar	t, historical
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of	public se	rvice, provide	the followir	ng 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 tree		ncial gain,	provide		
_	the following amounts required to be reported under SFAS 1					
a	Revenues included in Form 990, Part VIII, line 1					
b	Assets included in Form 990, Part X	***************************************		▶ \$		

	rt III   Organizations Maintaining (					8	4-04181	24	Page 2
	1 - 9	Collections of A	rt, Historical T	reasures, o	r Othe	<u>r Simila</u>	ır Asse	<b>S</b> (continu	ıed)
3	Using the organization's acquisition, access	ion, and other record	ls, check any of th	e following that	are a sig	jnificant ι	ise of its	collection	items
	(check all that apply):								
а	Public exhibition	d	I Loan or ex	change program	ns				
b	Scholarly research	е	e Other						
С	Preservation for future generations								
4	Provide a description of the organization's c	ollections and explai	n how they further	the organizatio	n's exem	npt purpo	se in Part	XIII.	
5	During the year, did the organization solicit of	or receive donations	of art, historical tre	asures, or othe	r similar :	assets			
	to be sold to raise funds rather than to be m	aintained as part of t	the organization's	collection?				Yes	☐ No
Pa	rt IV Escrow and Custodial Arran reported an amount on Form 990, Pa	<b>igements.</b> Comple	ete if the organizat	ion answered "	Yes" to F	orm 990,	Part IV, I	ine 9, or	
1a	Is the organization an agent, trustee, custod	lian or other intermed	diary for contribution	ons or other ass	ets not i	ncluded			
	on Form 990, Part X?		,					Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table:	***************************************	•••••			J 169	LINO
		,						Amount	
С	Beginning balance					1c		Amount	
d	Additions during the year		***************************************	***************************************	• • • • • • • • • • • • • • • • • • • •	10			
е	Distributions during the year	•••••		***************************************		. 1d		<del></del>	
f	Ending balance	•••••	••••••			. 1e			
	Did the organization include an amount on F	orm 990 Part Y line	. 010		•••••	. 1f		7	
h	If "Yes," explain the arrangement in Part XIII.	Check here if the o	valoration has bee	n provided in D				<b>」Yes</b>	⊢ No
Pai	rt V Endowment Funds. Complete	if the organization ar	rewered "Vos" to E	form 000 Dort I	V line 10	<u></u>			
	Complete								
1a	Reginning of year balance	(a) Current year	(b) Prior year	(c) Two years	B Dack (	d) Three y	ears back	(e) Four	years back
_	Beginning of year balance								
b	Contributions								
C	Net investment earnings, gains, and losses								
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the cur	rent year end baland	e (line 1g, column	(a)) held as:					
а	Board designated or quasi-endowment		_%						
b	Permanent endowment >	%							
С	Temporarily restricted endowment ▶	%							
	The percentages in lines 2a, 2b, and 2c should	uld equal 100%.							
За	Are there endowment funds not in the posse	ession of the organiz	ation that are held	and administer	ed for th	ne organiz	ation		
	by:							Γ	Yes No
	(i) unrelated organizations							3a(i)	103 140
	(ii) related organizations				• • • • • • • • • • • • • • • • • • • •		• • • • • • • • • • • • • • • • • • • •	3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	on Schedule R?	•••••			• • • • • • • • • • • • • • • • • • • •	. <u>3a(II)</u>	
4	Describe in Part XIII the intended uses of the	organization's ende	wment funds	•••••	• • • • • • • • • • • • • • • • • • • •			.   3b	
Par	t VI Land, Buildings, and Equipm	nent.	SWITTONE TURIOU.						
	Complete if the organization answere		) Part IV line 11a	See Form 990	Dart Y I	ino 10			
	Description of property	(a) Cost or o							
	bescription or property	basis (investr	<b>I</b>	st or other		cumulate	ea	(d) Book	value
	Land	<del></del>	nong basi	is (other)	uep	reciation			
	Land			248,261.					248,261.
b	Buildings			509,441.		509,	441.		0.
	Leasehold improvements								
	Equipment								
	Other								
<u>Total</u>	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, column (B), line	10(c).)					248 261

Part VII Investments - Other Securities.			04 0410124 Fage	<u> </u>
Complete if the organization answered "Yes"	to Form 990, Part IV, line 1	1b. See Form 990, P	art X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value		luation: Cost or end-of-year market value	_
(1) Financial derivatives				_
(2) Closely-held equity interests				
(3) Other				
(A) Abbott Capital Private Equity Fund				
(B) VI, L.P.	2,268,131.	End-of-Year M	Market Value	
(C) Irving Place Capital Partners II,		¥		
(D) L.P.	407,202.	End-of-Year M	farket Value	
(E) Canyon Value Realization Fund, Ltd.	16,221,519.	End-of-Year M	Market Value	
(F) Commonfund Capital International				
(G) Partners V, L.P.	3,215,870.	End-of-Year M	Market Value	
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	118,529,571.			
Part VIII Investments - Program Related.	. =			
Complete if the organization answered "Yes"  (a) Description of investment	to Form 990, Part IV, line 1 (b) Book value	1c. See Form 990, P	art X, line 13.	
	(b) Book value	(c) Method of Va	aluation: Cost or end-of-year market value	
(1) (2)		<del></del> ,,		
(3)				
(4)				_
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets.			The state of the s	
Complete if the organization answered "Yes"	to Form 990, Part IV, line 1	11d. See Form 990, F	Part X, line 15.	
	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 Part X Other Liabilities.	<u>9 15.)</u>		<b>&gt;</b>	
<u></u>	t- F			
Complete if the organization answered "Yes"  1. (a) Description of liability		(b) Book value	990, Part X, line 25.	
(1) Federal income taxes		(b) book value		
(2) Investments held for Rose Community Fo (3)	undation	65,317,570.		
(4)				
(4)				
(6)				
(7)				
(8)				
(9)				
Total (Column (b) must equal Form 990, Part X, col. (B) line	25)	65 217 570		

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 x

Part XI   Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.	Complete if the organization answered "Yes" to Form 990, Part IV, line 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: a Net unrealized gains on investments b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)  Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses  Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments 2 Cother losses d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1		
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The state of the s	Foundation for the previous three years 2010 through 2012 are subject to		
examination by the IRS generally for three years after initial filing	examination by the IRS, generally for three years after initial filing.		

Schedule D (Form 990) 2013 Rose Foundation	84-0418124	Page 5
Part XIII   Supplemental Information (continued)		
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Schedule D (Form 990) Rose Foundation

Part XIII. Supplemental Information (continued)

Part VII Investments - Other Securities. See Form 990, Part X, line 12	2.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Commonfund Capital Private Equity Partners VI, L.P.	4,434,663.	FMV
Commonfund Capital Venture Partners VII, L.P.	987,906.	FMV
Commonfund Capital Natural Resources Partners VII, L.P.	4,348,289.	FMV
Commonfund Capital Natural Resources Partners VIII, L.P.	7,081,751.	FMV
Commonfund Capital International Partners VI, L.P.	1,656,254.	FMV
Commonfund Capital Private Equity Partners VII, L.P.	2,324,389.	FMV
Commonfund Capital Venture Partners VIII, L.P.	4,028,343.	FMV
DLJ Real Estate Capital Partners II, L.P.	465,297.	FMV
DLJ Diversified Partners, L.P.	15,453.	FMV
DLJ Investment Partners II, L.P.	38,656.	FMV
DLJ Merchant Banking Partners III, L.P.	916,176.	FMV
FCOI II Holdings, L.P.	12,646,447.	FMV
FLAG International Partners, L.P.	2,767,551,	FMV
FLAG Venture Partners VI, L.P.	8,659,147.	FMV
FLAG Private Equity III, L.P.	3,682,254.	FMV
Greenlight Capital Offshore, Ltd.	21,977,771.	FMV
GSC European Mezzanine Offshore Cap, L.P.	163,601.	FMV
J.P. Morgan Partners Global Investors, L.P.	259,010.	FMV
Trilantic Capital Partners Fund III, L.P.	774,407.	FMV
Markstone Capital Partners, L.P.	817,953.	FMV
Pantheon USA Fund VI, L.P.	3,409,129.	FMV
Peabody International Real Estate Private Partners LLC	50,340.	FMV
FirstMark II, L.P.	52,388.	FMV
Platte River Ventures II, L.P.	695,278,	FMV
Shamrock Israel Tax-Exempt Fund, L.P.	1,837,391,	FMV
Spinnaker Global Emerging Markets Fund, Ltd.	124,093	

Schedule D (Form 990) Rose Foundation Page 5 84-0418124 Part XIII Supplemental Information (continued) Part VII Investments - Other Securities. See Form 990, Part X, line 12. (a) Description of security or category (c) Method of valuation: (b) Book value (including name of security) Cost or end-of-year market value Special Value Opportunities Fund, LLC 994,010. FMV Tennenbaum Opportunities Fund V, LLC 1,454,705 FMV TL Ventures V Special Partners LLC 514,203 FMV Trimarin Fund II, LLC 1,477,310. FMV Pauls Real Estate Opportunities (2009), L.P. 535,310, FMV Tennenbaum Opportunities Fund VI, LLC 1,541,249 FMV Northgate Venture Partners VI, L.P. 318,787 FMV Visium Global Offshore Fund, Ltd. 5,367,338. FMV

### **SCHEDULE F** (Form 990)

Department of the Treasury

Internal Revenue Service

**Statement of Activities Outside the United States** 

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

➤ Attach to Form 990. ➤ See separate instructions.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

Rose Foundation				84-0418124	
Part I General Info	rmation on A	ctivities Ou	tside the United States. Comple	te if the organization answered "\	es" on
Form 990, Part I					
1 For grantmakers. Does	s the organizatior	n maintain recor	ds to substantiate the amount of its gra	ints and other assistance,	<u></u>
the grantees' eligibility t	for the grants or a	assistance, and	the selection criteria used to award the	grants or assistance?	Yes No
2 For grantmakers. Described States.	cribe in Part V the	organization's	procedures for monitoring the use of its	s grants and other assistance out	side the
3 Activities per Region. (T	he following Part	I, line 3 table ca	an be duplicated if additional space is r	needed.)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
Central America &	_				
the Caribbean	0	0	Investments		59,235,481.
Europe	0	0	Investments		40
201000	<u> </u>	<u> </u>	THVESCHELLES		19,779,275.
Middle East and					
North Africa	0	0	Investments		817,953.
3 a Sub-total	0	0			79,832,709.
<b>b</b> Total from continuation sheets to Part I	o	0			79,832,709.
c Totals (add lines 3a					
and 3b)	o	0			79 832 709.

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Part II	Grants and Other Assistance to Organizations or Entities Outside the United States.	Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any	
	recipient who received more than \$5,000. Part II can be duplicated if additional space is no	eeded.	

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2 Enter total number of r the IRS, or for which the	ecipient organization ne grantee or counse	ns listed above that are re I has provided a section	ecognized as charities by th 501(c)(3) equivalency letter		recognized as tax-ex			

3 Enter total number of other organizations or entities

Part III	Grants and Other Assistar Part III can be duplicated if	nce to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.  additional space is needed.								
(a)	Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)		

	ule F (Form 990) 2013 Rose Foundation	84-0418124	Page 4
Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	x_Yes	☐ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	x No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	X Yes	☐ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	x Yes	☐ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	x Yes	☐ No

Did the organization have any operations in or related to any boycotting countries during the tax year? If

"Yes," the organization may be required to file Form 5713, International Boycott Report. (see Instructions

for Form 5713)

Schedule F (Form 990) 2013

Yes x No

6

#### SCHEDULE I (Form 990)

Department of the Treasury

Internal Revenue Service

# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013
Open to Public Inspection

Name of the organization							Employer identification number
Part I General Information on Grants a							84-0418124
Does the organization maintain records							
criteria used to award the grants or assi	stance?						X Yes No
2 Describe in Part IV the organization's pr							
Part II Grants and Other Assistance to					ganization answered '	'Yes" to Form 990, Part	t IV, line 21, for any
recipient that received more than				ded.	(0.14.11)		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Adams County Youth Initiative							ACYI Continuous
1500 E 128th Ave							Improvement Capacity
Thornton CO 80241	45-3139024	501(C)(3)	15,000.	0.	N/A	N/A	Building
America SCORES Denver							
4900 W 29th Ave							Out of school time
Denver CO 80212	84-1524095	501(C)(3)	5,000.	0.	N/A	N/A	programming
American Diabetes Association,							
Colorado Area - 2480 W. 26th Ave.,							
Suite 500C - Denver, CO 80211-5304	13-1623888	501(C)(3)	40,000.	0.	N/A	N/A	Por Tu Familia program
					İ		
American Red Cross, Mile High							
Chapter - 444 Sherman Street -							Transportation Services
Denver, CO 80203	53-0196605	501(C)(3)	40,755.	0.	N/A	N/A	Program over two years
Augenblick, Palaich and Associates							Colorado Performance
1120 Lincoln St, Ste.1101						1	Based Compensation
Denver, CO 80203	84-0922858		5,000.	0.	N/A	N/A	Consortium
			]				
Aurora Community Connection							
9801 East Colfax Avenue							
Aurora, CO 80010	26-2222571		10,000.		N/A		General operating support
2 Enter total number of section 501(c)(3) at	-	-					
3 Enter total number of other organizations					***************************************		
LHA For Paperwork Reduction Act Notice,	see the instruct	ions for Form 990.					Schedule I (Form 990) (2013)

Schedule I (Form 990) Rose Foundat.			,				4-0418124 Page 1
Part II Continuation of Grants and Othe	r Assistance to G	overnments and Orga	anizations in the U	nited States (Sch	nedule I (Form 990), Pa	art II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Aurora Public School District							
Educational Services Center 1							
Aurora, CO 80011	84-6000870	501(C)(3)	97,760.	0.	N/A	N/A	STEM Pathway Program
Bal Swan Children's Center							
1145 E. 13th Ave.							Program support, quality
Broomfield, CO 80020	84-0535171	501(C)(3)	10,000.	0,	N/A	N/A	initiatives
Bennie E. Goodwin After School							
Academic Program - 12400 E.							Support for out of school
Hoffman Blvd Aurora, CO 80011	84-1329507	501(C)(3)	5,000.	0	N/A	N/A	time programming
norman biva. Adrora, co over	04-1325307	501(0)(3)	3,000.		N/A	N/A	erme programming
Beth Jacob High School							
5100 West 14th Avenue							Campus Redevelopment
Denver, CO 80204-1004	84-0585743	501(C)(3)	63,840.	0.	N/A	N/A	Project
Boulder County CareConnect							Fix-it, Carry Out Caravan
2540 Frontier Ave., #109							and Medical Mobility
Boulder, CO 80307-3675	84-0769724	501(C)(3)	20,000.	0.	N/A	N/A	Programs
Boulder County Public Health							
Department - 3450 Broadway -							
Boulder, CO 80304	84-0563338	501(C)(3)	85,000.	0.	N/A	N/A	GENESISTER program
Boulder Jewish Community Center							
3800 Kalmia Ave.							
Boulder CO 80301	84-1322996	501(C)(3)	151 804.	0.	N/A	N/A	Capacity building
Boulder, Co 00301	01 102255						
Bright Beginnings							
730 Colorado Blvd. #202				_		hr (n	Dragger onbargerents
Denver, CO 80206	84-1382420	501(C)(3)	52,500.	0.	N/A	N/A	Program enhancements
Brothers Redevelopment, Inc.							_
2250 Eaton Street							Home Maintenance and
Denver, CO 80214	84-0615347	501(C)(3)	80,000.	0.)	N/A	N/A	Repair Program

Part II Continuation of Grants and Other	Assistance to Go	overnments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa		4-0418124 Page
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Catholic Charities							
4045 Pecos Street							
Denver, CO 80211	84-0686679	501(C)(3)	20,000.	0.	N/A	N/A	Older Adult Services
Center for Teaching Quality							
605 West Main Street							Advance teacher
Carrboro, NC 27510	04-3606319	501(C)(3)	153,000.	0.	N/A	N/A	leadership
Center for Work Education and							
Employment - 1175 Osage St., Ste							
300 - Denver, CO 80204	74-2202303	501(C)(3)	20,000.	0.	N/A	N/A	Career Readiness Program
CHARG Resource Center							
709 East 12th Avenue							
Denver CO 80203-2610	84-1116982	501(C)(3)	20.820.	0.	N/A	N/A	Smart Mouths Program
Benver, do dozen zero	01.112.000						
Children First of the Rockies							
P.O. Box 2174							
Longmont, CO 80502	84-1497910	501(C)(3)	10,000.	0.	N/A	N/A	Parent Education Program
							Project Climb over three
Children's Hospital Colorado							years. Fussy Baby Network
Foundation - 13123 E. 16th Avenue	0.4.004.0460	F01 ( 0 ) ( 2 )	226,625.	0	N/A	N/A	years, russy baby wetwork Colorado
- Aurora, CO 80045	84-0813462	501(C)(3)	226,625.	0.	N/A	N/A	COTOTAGO
Children's Outreach Project							
8000 Pecos Street							Quality improvements and
Denver, CO 80221-3979	84-0824956	501(C)(3)	25,000.	0.	N/A	N/A	professional development
Clinton Global Initiative							Collaborative sponsorship
1200 Pres Clinton Ave.							for June 2014 event in
Little Rock, AR 72201	27-1551550	501(C)(3)	25,000.	0.	N/A	N/A	Denver
College Summit Colorado							
1201 E. Colfax Ave. Ste. 301							
Denver, CO 80218	52-2007028	501(C)(3)	20,100.	0.	N/A	N/A	Program support

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of	(a) Amazzat af	(A) \$4-11-5	(a) December 1	(1) D
(a) Name and address of organization or government	(D) EIIN	if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Colorado "I Have A Dream"							
Foundation - 1836 Grant Street -							Out of school time
Denver, CO 80203	74-2497109	501(C)(3)	10,300.	0.	N/A	N/A	programming
Colorado Association of Black							programming .
Professional Engineers and							
Scientists - P.O. Box 200508 -							Out of school time
Denver, CO 80220	74-2208861	501(C)(3)	5,000.	0.	N/A	N/A	programming
•				_			
Colorado Center for the Blind	1						
2233 West Shepperd Avenue							
Littleton, CO 80120-2038	74-2465141	501(C)(3)	15,000.	0.	N/A	N/A	Senior Services Program
Colorado Center on Law and Policy							
789 Sherman Street							
Denver, CO 80203-2119	84-1264154	501(C)(3)	200,000.	0.	N/A	N/A	Health Program
Colorado Children's Campaign							
1580 Lincoln Street			041 105	0		N/A	General operating support and strategic framework
Denver, CO 80203	74-2374672	501(C)(3)	241,185.	<u> </u>	N/A	N/A	and strategic framework
Colorado Children's Immunization							
Coalition - 13123 East 16th Avenue							Public awareness and
- Aurora CO 80045	84-1479975	501(C)(3)	22,270.	0.	N/A	N/A	outreach campaign
- AULUIA, CO 00043	<u> </u>				<u> </u>		
Colorado Coalition for the							
Medically Underserved - P.O. Box							
18877 - Denver, CO 80218	43-2007393	501(C)(3)	100,000.	0.	N/A	N/A	General operating support
	-						
Colorado Commits to Kids Campaign							
3890 Kipling Street, Unit A							Colorado Commits to Kids
Wheat Ridge, CO 80033	26-3952995	501(C)(3)	200,000.	0.	N/A	<u> </u>	Issues Campaign
							A Chair At the Table
Colorado Cross-Disability						i I	Program-inc. part. for
Coalition - 655 Broadway, Ste 775						l	people w/disabilities in
- Denver, CO 80203	74-2564419	501(C)(3)	15,000.	0.1	1/A	N/A	Health Care Policy Schedule (Form 990)

Scriedule I (Form 990) Rose Foundati					111/5 200 5		4-0418124 Page
Part II Continuation of Grants and Other	Assistance to G	overnments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa	art II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Colorado Department of Higher				:	·		Implementation of
Education - 1560 Broadway, Suite							strategic initiatives
1600 - Denver, CO 80202	84-0644739	Gov't	191,668.	0,	N/A	N/A	over two years
Colorado Department of Human							
Services - 1575 Sherman St., 10th							İ
floor - Denver, CO 80203	84-0644739	Corr't	225,000.	0	N/A	N/A	Garian Garrage Oak
11001 - Denver, CO 00203	04-0044733	90V C	223,000.	<b>U.</b>	N/A	N/A	Senior Source-9th year
Colorado Gerontological Society							Enrollment strategies for
3006 E. Colfax Avenue							Medicare savings program
Denver CO 80206	74-2139782	501(C)(3)	15,000.	0.	N/A	N/A	for Hispanic elders
, , , , , , , , , , , , , , , , , , , ,							
Colorado Nonprofit Association							
789 Sherman Street							
Denver, CO 80203	84-0942908	501(C)(3)	47,265.	0.	N/A	N/A	General operating support
Colorado Nonprofit Development							General operating support
Center - 789 Sherman Street, Suite							and Colorado
250 - Denver, CO 80203	84-1493585	501(C)(3)	49,660.	0.	N/A	N/A	Participation Project
Colorado Parent & Child Foundation							
800 Grant Street, Suite 200							
Denver, CO 80203	84-1169805	501(C)(3)	20,000.	0.	N/A	N/A	General operating support
Colorado Regional Health							
Information Organization - 4500							
Cherry Creek S. Dr Denver, CO							Support for HIE efforts
80246	30-0558038	501(C)(3)	194,517.	0.	N/A	N/A	over two years
Colorado UpLift							Out of school time
3914 King St.	04 0000000	E01/G)/3\	7.500.	ا م	N/A	N/A	programming
Denver, CO 80211-1932	84-0889330	DUI(C)(3)	7,500.		11/23	5/A	C 2 - continues 2
Colorado Youth for a Change							
2931 West 25th Avenue, 201			[				
Denver, CO 80211	20-2501002	501(C)(3)	35,100.	0.1	N/A	N/A	General operating support

Part II Continuation of Grants and Other		overnments and Orac	onizations in the 11	nited Ctates (Cob	adula I (Farm 000). Di		4-0418124 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Community Health Services							
4675 E. 69th Avenue							
Commerce City, CO 80022	84-0799374	501(C)(3)	30,000.	0.	N/A	N/A	General operating support
Community Resource Center							
789 Sherman Street, Suite 210							
Denver, CO 80203	84-0838406	501(C)(3)	25,000.	0.	N/A	N/A	General operating support
Community Shares of Colorado							
789 Sherman St. Suite 230							  Nonprofit Sustainability
Denver, CO 80203	74-2401941	501(C)(3)	18,825.	0.	N/A	N/A	Program
2011.02, 00 00200							
Continuing Legal Education in							
Colorado - 1900 Grant Street, Ste.							
300 - Denver, CO 80203	84-0616041	501(C)(3)	8,000.	0.	N/A	N/A	Senior Law Handbook 2013
Denver, do vogos	0.2 00.200.22		,				
CP of Colorado							   Early Education's new
801 Yosemite St							Language and Literacy
Denver, CO 80230-6087	84-0420225	501(C)(3)	20,000.	0.	N/A	N/A	Project
benver, co souss stor.							
Dental Aid							
877 S. Boulder Rd.							Adult Assured Access
Louisville, CO 80027	84-0717588	501(C)(3)	30,000.	0.	N/A	N/A	Program
Denver Asset Building Coalition							
360 Acoma Street				_			
Denver, CO 80223	77-0646873	501(C)(3)	20,000.	0.	N/A	N/A	General operating support
Denver Children's Advocacy Center							
2149 Federal Blvd.							
Denver, CO 80211-4639	84-1155873	501(C)(3)	10,000.	0.	N/A	N/A	General operating support
2011, 02, 00 00222 1000							
Denver Health Foundation							
655 Broadway, Suite 750							In-School Immunization
Denver, CO 80203	84-1085196	501(C)(3)	51,750.	0.1	A/N	N/A	Program (ISIP)

Schedule (Form 990) Rose Foundati							4-0418124 Page 1
Part II Continuation of Grants and Other	Assistance to G	overnments and Orga	anizations in the U	<b>nited States</b> (Sch	edule I (Form 990), Pa	art II.)	
(a) Name and address of organization or government	(b) EiN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Denver Jewish Day School							Cumpont for completion of
2450 S. Wabash St.							Support for completion of the Sustainability
Denver CO 80231	84-1476467	501(C)(3)	194,999.	0	N/A	N/A	Campaign
			,		.,,,,,	37.22	compargn
Denver Kids, Inc.							
1330 Fox St., 2nd Floor South							Out of school time
Denver, CO 80204	84-1244211	501(C)(3)	12,000.	0.	N/A	N/A	programming
Denver Public Schools Foundation							Implementation of Student
1860 Lincoln Street, 9th Floor							Teacher Residency Program
Denver, CO 80203-2907	84-1224325	501(C)(3)	326,910.	0.	N/A	N/A	and capacity building
Doctors Care							
609 West Littleton Blvd, #100	84-1150815	E01/G)/3)	5,000.	0	N/A	N/A	Handbook and web resource
Littleton, CO 80120	84-1150815	501(C)(3)	5,000.	· · · · · · · · · · · · · · · · · · ·	N/A	N/A	handbook and web resource
Early Childhood Council of Boulder							
County - 1285 Cimarron Drive,							
Suite 201 - Lafayette, CO 80026	84-1359734	501(C)(3)	20,000.	0.	N/A	N/A	General operating support
Early Excellence Program of Denver							
3580 Franklin Street							Professional development
Denver, CO 80205	84-1468640	501(C)(3)	15,000.	0.	N/A	N/A	and classroom expenses
El Centro Humanitario							
2260 California St.	03 0440035	501(0)(3)	25,000.		N/A	N/A	Employment Program
Denver, CO 80205	03-0412235	501(C)(3)	25,000.	0.1	N/A	N/A	Employment lingiam
Emily Griffith Foundation				ļ			
1250 Welton Street, Room 200							English Language Learning
Denver CO 80204-2197	84-1169001	501(C)(3)	30,000.	0.1	N/A	N/A	Center
Escuela Tlatelolco							
2949 North Federal Boulevard							Circulo Montessori
Denver, CO 80211	84-0746649	501(C)(3)	10,170.	0.0	I/A	N/A	Program Sabadula I (Farm 000)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Family Resource Center Association							
1888 Sherman Street, Suite 100			]				Family Resource Center
Denver, CO 80203	31-1599581	501(C)(3)	255,000.	0.	N/A	N/A	Collaborative Project
Family Star							Professional development
2246 Federal Blvd.							of early childhood
Denver, CO 80211	84-1114455	501(C)(3)	10,000.	0.	N/A	N/A	educators
Florence Crittenton Services of							Improvements for Early
Colorado - 55 South Zuni Street -			ļ				Learning Center, Program
Denver, CO 80223-1208	84-0429686	501(C)(3)	60,425.	0.	N/A	N/A	Support at High School
Friends of the Haven							
P.O. Box 102375							Staff development,
Denver, CO 80250	20-5634004	501(C)(3)	8,500.	0,	N/A	N/A	education and training
Grantmakers in Aging	п						Addressing Constrained
2001 Jefferson Davis Highway							Public Perceptions of
Arlington, VA 22202	13-4014982	501(C)(3)	8 500.	0.	N/A	N/A	Aging -
III IIII GOOM, VII NAACI							
Growing Home							
3489 West 72nd Avenue, Suite 110						1	Strengthening Families
Westminster, CO 80030	84-1461503	501(C)(3)	20,000.	0.	N/A	N/A	Initiative Program
Hazon							
125 Maiden Lane, Suite 8B							
New York, NY 10038	13-4087102	501(C)(3)	10,000.	0.	N/A	N/A	Research and evaluation
							Tunkikukianal Mamban-kin
Hispanics in Philanthropy				İ			Institutional Membership in Hispanics in
414 13th St., Suite 200			10.000	0	AT / 3		Philanthropy 2013
Oakland, CA 94612	94-3040607	501(C)(3)	10,000.	0.	N/A	N/A	EULTAUCHT ODA SATA
Hope Center						4	Professional development
3400 Elizabeth Street						1	marketing materials,
Denver, CO 80205-4244	84-0564484	501(C)(3)	25,000.	0.	N/A	N/A	quality improvements

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
"I Have a Dream" Foundation of							
Boulder County - 2515 East							
Sterling Circle - Boulder, CO							Out of school time
80301	84-1150542	501(C)(3)	10,000.	0.	N/A	N/A	programming
InnovAge Home Care							
8950 E. Lowry Blvd.							
Denver, CO 80230	23-7090107	501(C)(3)	41,500.	0.	N/A	N/A	Home Care Program
·			-				
Invest in Kids							
1775 Sherman Street							
Denver, CO 80203	84-1455282	501(C)(3)	60,500.	0.	N/A	N/A	The Incredible Years
							Parent Focus Groups for
Jeffco Public Schools							the Jeffco Outreach
1829 Denver West Drive				i			Project and Home
Golden, CO 80401-0001	84-6002817	501(C)(3)	55,000.	0.	N/A	A\N	Instruction
Jefferson Center for Mental Health					!		
70 Executive Center							Early Intervention
Wheat Ridge, CO 80033	84-0474717	501(C)(3)	30,000.	0.	N/A		Services Program
Wieac Kruge, co ovoss	01 01,1,1,1						
Jewish Family Service of Colorado							Senior Solutions
3201 S. Tamarac Dr., Ste 200							Department, Matching
Denver CO 80231	84-0402701	501(C)(3)	184,680.	0.	N/A	N/A	gifts
JEWISHcolorado							
300 S. Dahlia St., Suite 300				ļ			
Denver, CO 80246	84-0402662	501(C)(3)	5,378.	0.0	N/A	N/A	Matching Gift Program
Kohelet							
1232 Detroit Street							Kohelet Fellowships
Denver CO 80206	74-2138775	501(C)(3)	52,000.	0.	N/A	N/A	program
ongmont Meals on Wheels							
910 Longs Peak Ave.					- 4-	1	General operating suppor
ongmont, CO 80501-4457	84-0590979	501(C)(3)	25,500.	0.)	V/A	N/A	and a matching grant

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Lutheran Family Services Rocky							
Mountains - 363 South Harlan							Older Adults and
Street - Denver CO 80226-3552	84-0775550	501(C)(3)	15,000.	0.	N/A	N/A	Caregiver Services
MACC - Mizel Arts & Culture Center							
350 South Dahlia Street							Jewish arts and culture
Denver, CO 80246	31-1494423	501(C)(3)	121,000.	0.	N/A	N/A	programs
Maria Droste Counseling Center							
1355 S. Colorado Blvd.							
Denver, CO 80222-3310	84-1182130	501(C)(3)	10,100.	0.	N/A	N/A	Development support
Mary Wickersham Consulting, Inc.							
1266 3rd Avenue							Social Impact Bond/Pay
Longmont, CO 80501	46-3982530		5.000.	0.	N/A	N/A	for Success Work
Holigmorre, Co 00301	10 0702000		,,,,,,,				
Meals on Wheels of Boulder							
909 Arapahoe Avenue #121							
Boulder, CO 80302	84-0594180	501(C)(3)	24,000.	0,	N/A	N/A	General operating suppor
Metro Volunteers							
789 Sherman Street, Suite 385							
Denver, CO 80203	84-0782124	501(C)(3)	12,900.	0.	N/A	N/A	General operating suppor
Metropolitan State University of							
Denver Foundation - Office/ Inst.							
Advancement - Denver, CO							
80217-3362	84-0576459	501(C)(3)	15,000.	0.	N/A	N/A	Family Literacy Program
Mi Casa Resource Center							
360 Acoma Street						l i	Career and Business
Denver, CO 80223	84-0867773	501(C)(3)	52,000.	0.	N/A		Development Programs
	1					1	Staff development and
Mile High Montessori Early							planning for the
Learning Centers - 1780 Marion						i I	Professional Development
Street - Denver, CO 80218	84-0617972	501(C)(3)	38,100.	1.0	N/A	N/A	Schedule I (Form 99)

Schedule I (Form 990) Rose Foundati						8	4-0418124 Page 1
Part II Continuation of Grants and Other	Assistance to G	overnments and Orga	anizations in the U	nited States (Sch	nedule I (Form 990), Pa	art II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Moishe House							
441 Saxony Road, Barn 2							Denver Moishe House over
Encinitas, CA 92024	26-2599786	501(C)(3)	50,000.	0.	N/A	N/A	two years
Mount Saint Vincent							
4159 Lowell Blvd.							Quality expansion and
Denver, CO 80211	84-0405620	501(C)(3)	7,500.	0.	N/A	N/A	parent support
Mountain States Employers Council							
1799 Pennsylvania Street							Executive Leadership
Denver, CO 80203	84-0172643	501(C)(3)	25,000.	0.	N/A	N/A	Program
Moving Traditions							Training Costs for Jewish
The Pavilion							Teen Educators, outreach
Jenkintown, PA 19046	34-2015014	501(C)(3)	25,000.	0.	N/A	N/A	and coaching
OpenWorld Learning							
2543 California Street							Out of school time
Denver, CO 80205	84-1538872	501(C)(3)	15,000.	0.	N/A	N/A	programming
OUR Center							
303 Atwood Street							
Longmont, CO 80501	74-2448346	501(C)(3)	5,000.	0.	N/A	N/A	Professional development
Policy Matters		:					
P.O. Box 1326			]				State level legislative
Wheat Ridge, CO 80034	45-3517437	501(C)(3)	24,999.	0.	N/A	N/A	monitoring services
Project Angel Heart							
4950 Washington Street							Home delivered meals
Denver, CO 80216	84-1199481	501(C)(3)	25,186.	0.	N/A	N/A	program
Project WISE							
8725 West 14th Avenue, Suite 200B							
Lakewood, CO 80215-4849	84-1325938	501(C)(3)	23,030.	0.1	N/A	N/A	General operating support

Part II Continuation of Grants and Other	Assistance to G	overnments and Orga	anizations in the U	nited States (Sch	nedule I (Form 990), P	art II.)	4-0418124 Page
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Public Education & Business							
Coalition - 600 Grant Street,							Professional development
Suite 525 - Denver, CO 80203	74-2357262	501(C)(3)	50,200.	0.	N/A	N/A	for educators
RAFT Colorado							
2875 Blake Street			İ			į	Professional development
Denver, CO 80205	26-2455607	501(C)(3)	25,000.	0.	N/A	N/A	partnership
Reach Out and Read Colorado 4380 S. Syracuse St. Ste. 520							
Denver_ CO 80237	86-1172160	501(C)(3)	15,750.	0.	N/A	N/A	General operating support
Rebuilding Together Metro Denver 12567 W. Cedar Drive Lakewood CO 80228	84-1514642	501/01/31	25,000.	0	N/A	N/A	RTMD Safe & Healthy Home Repairs
Lakewood, CO 80228	84-1514042	501(0)(3)	23,000.		N/A	N/ A	REPULLS
Regis University 3333 Regis Boulevard Denver, CO 80221-1099	84-0402707	501(C)(3)	5,000.	0.	N/A	N/A	Support for out of school
Rights for All People 1400 Dayton Street							RISE Colorado-matching grant to support launch at six target sites in
Aurora, CO 80010	84~1599036	501(C)(3)	33,000.	0.	N/A	N/A	Aurora Public Schools
Rocky Mountain MicroFinance Institute - P.O. Box 48138 -							
Denver, CO 80204	26-3218152	501(C)(3)	10,000.	0.	N/A	N/A	General operating support
Rocky Mountain Parents as Teachers							
3800 S. Pierce St. Denver CO 80235	84-1118576	501(C)(3)	15,000.	0.	N/A	N/A	General operating support
Denvel, CO 00233	02 1110070						
Rose Community Foundation							
600 S. Cherry Street, Suite 1200		504/53/23	4 557 043	_ [	AT / 3	1	Support to various
Denver, CO 80246	84-0920862	DUT(C)(3)	1,557,813,	U.,	N/A	N/A	programs and initiatives Schedule I (Form 990)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Save Our Youth							
3443 W. 23rd Avenue							Out of school time
Denver, CO 80211	84-1295393	501(C)(3)	5,000.	0.	N/A	N/A	programming
Senior Support Services							
846 East 18th Avenue							
Denver, CO 80218	84-0801612	501(C)(3)	21,500.	0.	N/A	N/A	General operating support
Seniors' Resource Center							
3227 Chase Street							
Denver, CO 80212	84-0877538	501(C)(3)	100,000.	0.	N/A	N/A	Direct services
Sewall Child Development Center							
1360 Vine St.						1	Staff training and
Denver, CO 80206	84-0413241	501(C)(3)	20,000.	0.	N/A	N/A	education
Spring Institute for Intercultural							
Learning - 1610 Emerson Street -							
Denver, CO 80218-1412	84-0788093	501(C)(3)	90,000.	0.	N/A	N/A	Project SHINE
St. Luke's Ministry							
915 East 9th Avenue				:			Disadvantaged Students
Denver, CO 80218	41-1568278	501(C)(3)	5,000.	0.	N/A	N/A	Support Program
Stride							
5400 W. Cedar Avenue							
Lakewood CO 80226	84-1158946	501(C)(3)	15,000.	0.	N/A	N/A	General operating support
Summer Scholars							
3401 Quebec Street				_		1	Out of school time
Denver, CO 80207-2322	84-1314292	501(C)(3)	8,250.	0.	N/A	N/A	programming
Teach for America							
1391 Speer Blvd., Suite 710				į			
Denver, CO 80204	13-3541913	501(C)(3)	25,000.	0.1	N/A	N/A	Teacher training

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Bell Policy Center							Support for research and analysis, public
1905 Sherman Street							education, collaboration,
Denver, CO 80203	84-1550841	501(C)(3)	120,000.	0.	N/A	N/A	outreach, and advocacy
The Bridge Project, University of							
Denver - 2148 South High Street -							Out of school time
Denver, CO 80208	84-0404231	501(C)(3)	15,250.	0.	N/A	N/A	programming
The Center							Assessment and planning
1301 E. Colfax							phase for SAGE of the
Denver, CO 80218	84-0738879	501(C)(3)	6,525.	0.	N/A	N/A	Rockies programming
•							
The Children's Museum of Denver							
2121 Children's Museum Drive							Sponsored Admissions
Denver, CO 80211	84-0658142	501(C)(3)	30,000.	0.	N/A	N/A	Program
The Colorado Education Initiative							Four statewide
1660 Lincoln Street							programmatic initiatives
Denver, CO 80264	26-1597530	501(C)(3)	300,300.	0.	N/A	N/A	over two years
The Denver Center for Crime							
Victims - P.O. Box 18975 - Denver,						İ	
CO 80218	74-2458153	501(C)(3)	10,000.	0.	N/A	N/A	Elder/Disability Program
The Denver Foundation							
55 Madison Street, 8th Floor							
Denver, CO 80206	84-6048381	501(C)(3)	25,250.	0.	N/A	N/A	Mile High Connects 2013
The Family Learning Center							Early Childhood, Youth
3164 34th St.							and Family Development
Boulder CO 80301-2166	74-2240341	501(C)(3)	20,000.	0.	N/A	N/A	Programs
The Legal Center for People with							
Disabilities and Older People -							
455 Sherman St., Ste 130 - Denver,							State study and policy
CO 80203-4403	84-0705890	501(C)(3)	10,000.	0.6	N/A	N/A	report

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Partnership for Families &							
Children - 3532 Franklin Street,							Colorado Education Policy
Suite B - Denver, CO 80205	84-1173226	501(C)(3)	20,000.	0.	N/A	N/A	Fellowship Program (EPFP)
The Senior Hub							
2360 W. 90th Ave.					İ		
Federal Heights, CO 80260-6700	74-2412032	501(C)(3)	160,000.	0.	N/A	N/A	Program support
The Wexner Foundation							
8000 Walton Parkway, Suite 110							
New Albany, OH 43054	23-7320631	501(C)(3)	45,000.	0.	N/A	N/A	Wexner Heritage Program
TLC Learning Center							
611 Korte Parkway							
Longmont, CO 80501-6088	84-0523717	501(C)(3)	15,000.	0,	N/A	N/A	Staff development
Together Colorado							More and Better Learning
1980 Dahlia Street							Time, Plan for HEAA and
Denver, CO 80220	84-0753677	501(C)(3)	20,025.	0.	N/A	N/A	Colorado ASSET
University of Colorado Foundation							
4740 Walnut St.							
Boulder, CO 80301	84-6049811	501(C)(3)	17,250.	0.	N/A	N/A	Outreach program
University of Colorado Foundation							
1800 Grant Street, Suite 725							Colorado School of Public
Denver CO 80203	84-6049811	501(C)(3)	75,000.	0.	N/A	N/A	Health
Via Mobility Services							
2855 N. 63rd Street							Paratransit services and
Boulder CO 80301	84-0777296	501(C)(3)	110,000.	0.	N/A	N/A	mobility programs
Volunteers of America Colorado							
Branch - 2660 Larimer Street -							
Denver, CO 80205-2219	13-1692595	501(C)(3)	233,049.	0.1	N/A	N/A	Program support

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Warren Village							
1323 Gilpin Street					İ		
Denver, CO 80218-2552	84-0644270	501(C)(3)	50,050.	0.	N/A	N/A	Operating support
Wish of a Lifetime							Development and
1821 Blake Street							implementation of
Denver, CO 80202	26-2123649	501(C)(3)	10,000.	0.	N/A	N/A	programming
Women's Bean Project							
3201 Curtis St.							
Denver, CO 80205	84-1144973	501(C)(3)	16,000.	0.	N/A	N/A	Matching grant
1							
Women's Health							
2855 Valmont Road	04.0645506	501/01/21	F0 000	0	7.43	17 / 3	ACA Implementation
Boulder, CO 80301-1374	84-0645786	501(C)(3)	50,000.	0.	N/A	N/A	Project
Work Options for Women							
1200 Federal Blvd.							
Denver, CO 80204	84-1364292	501(C)(3)	25,350.	0.	N/A	N/A	General operating suppor
Yeshiva Toras Chaim							
P.O. Box 40067							Predevelopment planning
Denver, CO 80204	84-0576800	501(C)(3)	37,250.	0.	N/A	N/A	and fundraising planning
YESS Institute							
1029 Santa Fe Drive							Out of school time
Denver, CO 80204	84-1579820	501(C)(3)	5,000.	0.	N/A	N/A	programming
YouthBiz							Out of school time
3280 Downing Street, Suite C							
Denver, CO 80205	84-1212586	501(C)(3)	5,000.	0.	N/A	N/A	programming
YWCA of Boulder County							Children's Alley and
2222 14th Street							Families in Transition
Boulder, CO 80302-4874	84-0500276	501(C)(3)	25,000.	0.	N/A	N/A	Programs

	Ne I (Form 990) (2013) Rose Foundation	·········				84-0418124	Page 2
Part I	Grants and Other Assistance to Individuals in the Part III can be duplicated if additional space is neede	<b>United States.</b> Com d.	plete if the organi	zation answered "Yes	to Form 990, Part IV, line 22.		
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash	assistance
***							
					·		
Part I\	Supplemental Information. Provide the information r	equired in Part I, line	e 2, Part III, columi	n (b), and any other ac	dditional information.		
	74 2						
art 1	, Line 2:						
n ord	er to monitor the use of grant funds, the F	oundation may					
equir	e interim and/or final reports to be submit	ted by the gran	tee, has				
remie	nt communication with the grantee organizat	ions and in so	me				
nstan	ces will do site visits if deemed necessary	•					

### **SCHEDULE J** (Form 990)

Department of the Treasury

# **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions. ► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Employer identification number Rose Foundation 84-0418124

Pa	rt I Questions Regarding Compensation	4		
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel  Housing allowance or residence for personal use			ĺ
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			ĺ
	Discretionary spending account  Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or	. 5 - 5 -		
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		1
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,	ID		<del> </del>
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s			
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			ľ
	establish compensation of the CEO/Executive Director, but explain in Part III.		ļ	
	Compensation committee Written employment contract			ľ
	Independent compensation consultant  x Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee	-		
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4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing	·		
	organization or a related organization:			
	Receive a severance payment or change-of-control payment?	4a		Х
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	<u> </u>	X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
	The organization?	5a		
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.	0.5	<u> </u>	
	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			ľ
а	The organization?	6a		x
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III.			1
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments		1	
	not described in lines 5 and 6? If "Yes," describe in Part III	7		x
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	Ė		1
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		x
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			<u> </u>
	Regulations section 53.4958-6(c)?	۵	1	1

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

Schedule J (Form 990) 2013

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

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

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

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benefits	(B)(i)-(D)	reported as deferred in prior Form 990	
(1) Sheila Bugdanowitz	(i)	169,723.	0.	0.	10,048.	4,675.	184,446.	0	
President & CEO	(ii)	110,256.	0.	0.	6,527.	3,037.	119,820.	0	
(2) Anne Garcia	(i)	86,520.	0.	0.	5,932,	6,093.	98,545.	0	
Treasurer, CFO & COO	(ii)	56,205.	0.	0.	3,853.	3,958.	64,016.	0	
	(i)								
	(ii)								
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Schedule J (Form 990) 2013	Rose Foundation	84-0418124	Page 3
Part III Supplemental Informatio	1		
Provide the information, explanation	or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8	, and for Part II. Also complete this part for any additional informa	tion.
		·	

#### SCHEDULE O

(Form 990 or 990-EZ) Department of the Treasury

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. Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. OMB No. 1545-0047 Open to Public

Inspection

Employer identification number

Rose Foundation 84-0418124 Form 990, Part VI, Section A, line 2: Sheila Bugdanowitz, President & CEO; Anne Garcia, Treasurer, CFO & COO; and Margie Gart, Director of Philanthropic Services, are all officers and employees of Rose Community Foundation, the supported organization of Rose Foundation. Form 990, Part VI, Section A, line 6: The sole member of Rose Foundation is Rose Community Foundation. Rose Community Foundation has the power to elect all members of the governing board of Rose Foundation. Furthermore, Rose Community Foundation must approve many of the significant decisions of Rose Foundation and, upon dissolution of Rose Foundation, all remaining assets are transferred to Rose Community Foundation. Form 990, Part VI, Section A, line 7a: Rose Community Foundation elects, or re-elects, all trustees of Rose Foundation at an annual meeting. Form 990, Part VI, Section A, line 7b: Any of the following actions taken by the board of trustees of Rose Foundation require prior approval of Rose Community Foundation: election or removal of trustees; election or removal of the corporation's president and CEO; amendment of the articles of incorporation; amendment of the bylaws; approval of capital and operating budgets; borrowing money or making any material financial commitment not contemplated by the annual capital or operating budget; disposition of all, or substantially all of

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization  Rose Foundation	Employer identification number
	84-0418124
the assets of the corporation or any merger of the corporation into or with	
another corporation; organization or creation of a subsidiary profit or	
nonprofit corporation and any amendments to its articles of incorporation	
or bylaws; and policies or commitments designed to coordinate the	
activities of the corporation with other entities.	
Form 990, Part VI, Section B, line 11:	
The Form 990, including all required schedules, is provided to	
the Board of Trustees (all of which are voting members) prior to being	
filed with the IRS. The Foundation asks the members to submit any	
questions or comments regarding the Form 990 by the date that we plan on	
filing the return.	
The Foundation's Form 990 is prepared by an independent CPA firm and the	
Foundation conducts a thorough review of the return prior to being filed	
with the IRS. The CFO and staff perform a detail review of all amounts and	
disclosures in the return and then present an overview of the return to the	
President & CEO and the Audit Committee. The return will be amended if any	
changes are deemed necessary as a result of this process.	
Form 990, Part VI, Section B, Line 12c:	
A detailed, written description of each conflict of interest	
and the procedures followed to clear the conflict are provided	
semi-annually to the Audit Committee for review. On an annual basis, the	
Audit Committee makes a report to the Board of Trustees with respect to all	
then current and material actual or potential conflicts of interest known	
to them and of any actions that have been taken or that they recommend be	
taken to ensure compliance with this policy	

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization	Employer identification number
Rose Foundation	84-0418124
Form 990, Part VI, Section B, Line 15a:	
On an annual basis, the Chief Financial & Operating Officer	
and Audit Committee meet to discuss the compensation and performance of the	
Foundation's President & CEO. During this meeting, the Chair of the Board	
of Trustees presents his/her assessment of the President & CEO's	
performance as compared to the goals and objectives that were established	
at the beginning of the year. Based on the conclusions of this assessment,	
along with comparative salary info on both a local and national level from	
both formal and informal surveys, the Audit Committee recommends a salary	
level to be taken to the Board of Trustees for approval.	
approvat.	
Form 990, Part VI, Section C, Line 19:	
The Foundation's Conflict of Interest Policy, Form 990, and	
financial statements are available upon request as well as posted on the	
Foundation's website at www.rcfdenver.org.	
Form 990, Part VII, Section A:	
Sheila Bugdanowtiz, Anne Garcia and Margie Gart spend an	
average of 16 hours per week working with the related organization.	
Form 990, Part XII, Line 2c:	
Rose Foundation's accounts are included in the	
consolidated financial statements of Rose Community Foundation. As	
such, the Foundation's Audit Committee assumes the responsibility for	
the oversight of the audit of its financial statements and the	
selection of an independent accountant. This process has not changed 332212	

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization  Rose Foundation	Employer identification number
	84-0418124
from prior years.	
Form 990, Part I, Line 5:	
The organization is a supporting charitable organization	
of Rose Community Foundation. The organization did not have any paid	
officers, management, or staff in 2013, as all services were provided	
by Rose Community Foundation. Salaries listed throughout the return	
represent the portion of salaries allocated to the organization for	
services performed for Rose Foundation. The board and/or compensation	
committee of Rose Community Foundation establish the compensation of	
Rose Community Foundation's CEO.	
ACCO COMMITTER TOURISHED CITY.	
Form 990, Part I, Line 6:	
The Foundation's activities are guided by a large number	
of volunteer community leaders who serve as trustees and committee	
members. The trustees provide stewardship for the Foundation's	
resources and set policy to ensure consistency with the Foundation's	
mission. Every trustee also serves on one or more committees, where	
they are joined by other issue experts and community leaders whose	
responsibilities include decisions on funding requests, fiscal	
oversight and donor outreach.	

#### SCHEDULE R (Form 990)

### **Related Organizations and Unrelated Partnerships**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

➤ See separate instructions.

2013

Open to Public Inspection

Employer identification number

84-0418124

Department of the Treasury
Internal Revenue Service

Name of the organization

▶Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33, (a) (b) (c) (d) (e) (f) Name, address, and EIN (if applicable) Primary activity Legal domicile (state or Total income End-of-year assets Direct controlling of disregarded entity foreign country) entity Rose Foundation Holdings, LLC - 84-1376698 600 S. Cherry Street, Suite 1200 Denver, CO 80246 Real Estate Colorado 71,400 2,063,869 Rose Foundation Rose Foundation TOD, LLC - 27-1358730 Lending funds to facilitate the acquisition of transit 600 S. Cherry Street, Suite 1200 Denver CO 80246 briented properties Colorado 5.462 519 475 Rose Foundation Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt Part II organizations during the tax year. (d) (f) (g) Section 512(b)(13) (b) (c) (a) Direct controlling Legal domicile (state or **Exempt Code** Public charity Name, address, and EIN Primary activity controlled status (if section entity section entity? of related organization foreign country) 501(c)(3)) Yes No Rose Biomedical Research - 84-0851957 Rose Community Line 11a Supports medical research 600 S. Cherry Street, Suite 1200 Foundation & development Colorado 501(c)(3) Type I Denver, CO 80246 Rose Community Foundation - 84-0920862 600 S. Cherry Street, Suite 1200 501(c)(3) Line 7 N/A Colorado Denver CO 80246 Grantmaking

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

Schedule R (Form 990) 2013

Rose Foundation

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

	(state or foreign	entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	unocadons:		(i) Code V-UBI amount in box 20 of Schedule	(j) General or managing partner?	(k) Percentage ownership
	country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes No	
									<b> </b>	
					•					
Ì										}
					•					i

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	ent	(i) ction (b)(13) trolled tity?
Rose Biomedical Development Corporation - 84-1341936, 600 S. Cherry Street, Suite	Medical technology research &	,	Rose Biomedical					Yes	No
1200, Denver, CO 80246	development	CO	Research	C CORP	0.	0	00%		Х
<u> </u>									

### Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No		
1 During the tax year, did the organization engage in any of the following transaction	ns with one or more	related organizations listed in Pa	arts II-IV?	,				
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		-		1a		х		
b Gift, grant, or capital contribution to related organization(s)	***************************************			1b	х			
c Gift, grant, or capital contribution from related organization(s)	*******************************			1c	х			
d Loans or loan guarantees to or for related organization(s)	***************************************			1d		х		
e Loans or loan guarantees by related organization(s)				1e		х		
f Dividends from related organization(s)	•••••			1f		x		
g Sale of assets to related organization(s)				1g		x		
h Purchase of assets from related organization(s)				1h		х		
i Exchange of assets with related organization(s)								
j Lease of facilities, equipment, or other assets to related organization(s)								
				<u>1j</u>		X		
k Lease of facilities, equipment, or other assets from related organization(s)				1k		x		
I Performance of services or membership or fundraising solicitations for related organization(s)								
m Performance of services or membership or fundraising solicitations by related organization(s)								
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)								
o Sharing of paid employees with related organization(s)								
						1111		
p Reimbursement paid to related organization(s) for expenses								
q Reimbursement paid by related organization(s) for expenses						X		
•								
r Other transfer of cash or property to related organization(s)				1r	Х			
s Other transfer of cash or property from related organization(s)				[ _		Х		
2 If the answer to any of the above is "Yes," see the instructions for information on v	who must complete t	his line, including covered relation	onships and transaction thresholds.					
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount in	volved				
	_	1 === 010						
(1) Rose Community Foundation	В	1,557,813.						
		05 020						
(2) Rose Community Foundation	<u> </u>	85,930.						
(3)								
(4)								
(4)				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		-		
(5)								
(5)								
(6)								
222162 00 10 12			Schedule I	R (Form	aanı	2013		

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(e)	(f) c. Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes No	(k) Percentage ownership

Schedule R (Form 990) 2013 Rose Foundation	84-0418124	Page 5
Part VII Supplemental Information		
Provide additional information for responses to questions on Schedule R (see instructions).		· · · · · · · · · · · · · · · · · · ·
Part I, Identification of Disregarded Entities:		
rait 1, identification of Disregarded Entities:		
Name of Disregarded Entity:		
Rose Foundation Holdings, LLC		
Discret Controlling Dally Day 201		
Direct Controlling Entity: Rose Foundation		
Name of Disregarded Entity:		
Rose Foundation TOD, LLC		
Direct Controlling Entity: Rose Foundation		
birect controlling antity; Rose Foundation		·
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