Form 8879-TF

IRS e-file Signature Authorization for a Tax Exempt Entity

, 2022, and ending	1	${\sf JUL}$	31	, 20 2 3

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of filer

For calendar year 2022, or fiscal year beginning AUG 1 Do not send to the IRS. Keep for your records.

Go to www.irs.gov/Form8879TE for the latest information.

COLORADO FOUNDATION FOR AGRICULTURE INC COLORADO AGRICULTURE IN THE CLASSROOM

EIN or SSN 84-1177351

ASHLEY WILCOX Name and title of officer or person subject to tax

PRESIDENT

Part I	Type of Return and Return Information
Check the	box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and
Form 5330	of filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a
or 10a heli	ow, and the amount on that line for the return being filed with this form was blank, then leave line, 1h, 2h, 3h, 4h, 5h, 6h, 7h, 8h, 9h, or 10h

whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a	Form 990 check here	X	b	Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b _	215,903
2a	Form 990-EZ check here		b	Total revenue, if any (Form 990-EZ, line 9)	2b _	
3a	Form 1120-POL check here		b	Total tax (Form 1120-POL, line 22)	3b _	
4a	Form 990-PF check here		b	Tax based on investment income (Form 990-PF, Part V, line 5)	. 4b _	
5a	Form 8868 check here		b	Balance due (Form 8868, line 3c)	5b _	
6a	Form 990-T check here		b	Total tax (Form 990-T, Part III, line 4)	6b _	
7a	Form 4720 check here			Total tax (Form 4720, Part III, line 1)		
8a	Form 5227 check here		b	FMV of assets at end of tax year (Form 5227, Item D)	8b _	
9a	Form 5330 check here		b	Tax due (Form 5330, Part II, line 19)	9b _	
10a	Form 8038-CP check here			Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b	
Part	II Declaration and S	Signatu	ıre	Authorization of Officer or Person Subject to Tax		
Inder p	penalties of perjury, I declare th	at X	I an	n an officer of the above entity or 🔲 I am a person subject to tax with re	spect to	(name
f entity	y)			, (EIN) and that I ha	ve examir	ned a copy of the
022 el	ectronic return and accompany	ing sche	edul	es and statements, and, to the best of my knowledge and belief, they are t	rue, corre	ect, and

complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN	1:	check	one	box	only
-----	----	-------	-----	-----	------

X I authorize	MUELLER	PYE	&	ASSOCIATES	CPA	LLC	to enter my PIN		123	345
								_		

ERO firm name

Enter five numbers, but do not enter all zeros

as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Certification and Authentication Part III

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

84555882077

I certify that the above numeric entry is my PIN, which is my signature on the 2022 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

PAUL MUELLER 03/01/24 ERO's signature Date

> **ERO Must Retain This Form - See Instructions** Do Not Submit This Form to the IRS Unless Requested To Do So

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8879-TE** (2022)

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection

Α	For the	2022 calendar year, or tax year beginning AU	G 1, 2022 and	ending J	UL 31, 2023	
В	Check if applicable	C Name of organization			D Employer identifie	cation number
	— Addres	COLORADO FOUNDATION FOR		C		
L	change	S COLORADO AGRICULTURE IN	THE CLASSROOM			
L	change	Doing business as			84-11773	
L	return	Number and street (or P.O. box if mail is not delive		Room/suite	E Telephone number	
	Final return/	10343 FEDERAL BLVD UNIT			970-818-	
	termin- ated		or foreign postal code		G Gross receipts \$	215,903.
F	return	WESIMINSIER, CO 60200	201122		H(a) Is this a group re	
L	Applica tion pendin	α	POWERS		for subordinates	—
_		SAME AS C ABOVE			H(b) Are all subordinates in	
		empt status: X 501(c)(3) 501(c) ()	(insert no.) 4947(a)(1)	or 527	1	list. See instructions
	Websit			T	H(c) Group exemptio	
	Form of art I	organization: X Corporation Trust Asso	ciation Other	L Year	of formation: 1991 N	M State of legal domicile; CO
	_	-		ם סמגם		
ė	1 1	Briefly describe the organization's mission or most signal and a non-profit				
Governance	:					
ērn	2	_	nued its operations or dispos		I	sets. I 7
30	3	Number of voting members of the governing body (Pa	. , , , , , , , , , , , , , , , , , , ,		3	7
۵	4	Number of independent voting members of the gover				2
es	5	Total number of individuals employed in calendar yea				0
Activities &	6	Total number of volunteers (estimate if necessary)				0.
Ä	/ a	Total unrelated business revenue from Part VIII, colur				0.
_	D	Net unrelated business taxable income from Form 99	U-1, Part I, line 11	·····	Prior Year	Current Year
		Contributions and grants (Dort VIII line 1b)			90,176.	103,415.
e	8				144,455.	112,488.
Revenue	9				164.	0.
Be	10	Investment income (Part VIII, column (A), lines 3, 4, ar Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9d			0.	0.
					234,795.	215,903.
_		Total revenue - add lines 8 through 11 (must equal Pa Grants and similar amounts paid (Part IX, column (A),			0.	0.
		Benefits paid to or for members (Part IX, column (A), I			0.	0.
	45	Salaries, other compensation, employee benefits (Par			77,403.	92,460.
Expenses	162	Professional fundraising fees (Part IX, column (A), line			0.	0.
Sen	h	Total fundraising expenses (Part IX, column (D), line 2	4 -	62.		
ă	17	Other expenses (Part IX, column (A), lines 11a-11d, 1			135,107.	140,310.
		Total expenses. Add lines 13-17 (must equal Part IX,			212,510.	232,770.
		Revenue less expenses. Subtract line 18 from line 12			22,285.	-16,867.
	ß	Tovorido 1000 experiodo. Gabardos into 10 from lino 12		Be	ginning of Current Year	End of Year
ets (20	Total assets (Part X, line 16)			178,791.	159,122.
ASS	21	T			13,573.	5,478.
Net Assets or	22	Net assets or fund balances. Subtract line 21 from lin			165,218.	153,644.
P	art II	Signature Block		•	•	•
Und	ler pena	ties of perjury, I declare that I have examined this return, inc	cluding accompanying schedules	s and stateme	ents, and to the best of my	knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer)	is based on all information of wh	nich preparer	has any knowledge.	
Sig	n	Signature of officer			Date	
He	re	KERI POWERS, PRESIDENT				
		Type or print name and title				
			reparer's signature	l l	Date Check	PTIN
Pai	d	•	ELLI ESTRADA	[0	3/01/24 self-employ	
	parer	Firm's name MUELLER PYE & ASSOC			Firm's EIN 2	<u>6-3325369</u>
Use	Only	Firm's address 2802 MADISON SQUARE	E DRIVE #120			
_		LOVELAND, CO 80538			Phone no. 9 7	0-667-1070
Ma	v the IF	S discuss this return with the preparer shown above	? See instructions			X Yes No

Form	COLORADO FOUNDATION FOR AGRICULTURE INC 1990 (2022)
	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: NONE
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
3	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$19,860. including grants of \$) (Revenue \$
	UPPER ELEMENTARY STUDENTS, AND ALSO USED BY MIDDLE AND HIGH SCHOOL
	TEACHERS. EACH ISSUE COVERS A DIFFERENT AGRICULTURE OR NATURAL RESOURCE TOPIC AND IS PROVIDED FREE OF CHARGE. A TOTAL OF 60,000 COPIES OF EACH
	ISSUE WERE PRINTED AND DIRECTLY MAILED TO 1,675 CLASSROOMS IN BOTH
	URBAN AND RURAL COMMUNITIES ACROSS COLORADO, REPRESENTING 730 SCHOOLS,
	ORGANIZATIONS, AND CSU EXTENSION OFFICES. FOUR ISSUES WERE PUBLISHED
	DURING THE 2022-2023 SCHOOL YEAR: 1) SPUD-TACULAR COLORADO POTATOES; 2)
	UDDER-LY AMAZING (COLORADO DAIRY); 3) THE STORY OF COLORADO BEEF; AND
	4) CAREERS IN AGRICULTURE. ALL ISSUES OF THE COLORADO READER ARE ALSO
	PUBLISHED IN A DIGITAL FLIP-BOOK FORMAT, AVAILABLE IN THE CFA DIGITAL
	LIBRARY.
4b	(Code:) (Expenses \$ 12,481. including grants of \$) (Revenue \$) (Revenue \$)
	COLORADO LITERACY PROJECT: IN THE SPRING, FARMERS AND RANCHERS VISIT
	CLASSROOMS - EITHER IN-PERSON OR VIRTUALLY - AND READ A BOOK ABOUT
	AGRICULTURE. THEY ANSWER QUESTIONS, TALK ABOUT THEIR CONNECTION TO
	AGRICULTURE, AND DO AN ACTIVITY WITH THE STUDENTS. AT THE END OF THE
	VISIT, THE BOOK IS DONATED TO THE SCHOOL. THIS IS A FREE PROJECT
	TARGETED TOWARDS PREK-5TH GRADE STUDENTS. FOR THE 2023 COLORADO
	LITERACY PROJECT, CFA ONCE AGAIN PARTNERED WITH COLORADO AGRICULTURE
	JOURNALIST AND CHILDREN'S BOOK AUTHOR RACHEL GABEL TO PUBLISH A NEW
	CHILDREN'S BOOK TITLED "THE WOOLLY WAY: PAPOU AND THE STORY OF LANTERN
	RIDGE." THE BOOK TELLS THE ROLE SHEEP AND SHEPHERDS HAVE PLAYED IN
	COLORADO, HISTORICALLY TO PRESENT-DAY, INCLUDING CULTURAL AND LAND
	MANAGEMENT CONTRIBUTIONS. THE ILLUSTRATIONS ARE BASED ON HISTORIC AND
4c	(Code:) (Expenses \$10,531. including grants of \$) (Revenue \$) (Revenue \$
	MULTI-DAY PROFESSIONAL DEVELOPMENT COURSES DESIGNED FOR TEACHERS.
	ATTENDEES LEARN ABOUT COLORADO AGRICULTURE, TOUR FARMS, RANCHES, AND
	FOOD PRODUCTION FACILITIES, AND LEARN INNOVATIVE, STANDARDS-BASED WAYS
	TO INCORPORATE FOOD, FIBER, FUEL, AND NATURAL RESOURCE TOPICS INTO
	ACADEMIC CURRICULUM. TWO COURSES ARE OFFERED EACH YEAR IN DIFFERENT
	LOCATIONS ACROSS COLORADO. THE COURSES FOR 2023 WERE: SAI DURANGO:
	CROSSROADS OF AGRICULTURE AND EDUCATION A 5-DAY COURSE HIGHLIGHTING
	AGRICULTURE AND NATURAL RESOURCES IN THE SOUTHWEST; AND SAI DENVER: THE
	SCIENCE OF ANIMAL AGRICULTURE A NEW 3-DAY COURSE OPTION FOCUSED ON
	IMMERSIVE LEARNING EXPERIENCES IN SCIENCE EDUCATION RELATED TO ANIMAL
	PRODUCTION AND CLIMATE. A TOTAL OF 30 TEACHERS RECEIVED TRAINING

22,395. including grants of \$ 32,248.)) (Revenue \$

65,267. Total program service expenses

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			37
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			v
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		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			v
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	4.0		Х
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		Х
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		21
19	,	10		Х
20a	complete Schedule G, Part III	19 20a		X
zua b		20a		
21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	21		х

Form 990 (2022) COLORADO AGRICULTU
Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	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		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
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 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			,,,
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			\ _{3,7}
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			.
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	25.		
26	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?	36		x
27	If "Yes," complete Schedule R, Part V, line 2	30		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	31		
30		38	Х	
Par		_ 55		
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
-	(gambling) winnings to prize winners?	1c	Х	
232004	+ 12-13-22			(2022)

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Part V

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return	_		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	37
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	١.		 ₩
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
D	If "Yes," enter the name of the foreign country Continue to the foreign country Continue to the first service and first service to the first service to th			
E	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	Ea		Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c		-
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	30		
oa		6a		x
h	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	- Oa		
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	0.0		
	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?	7a		х
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
_	to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12	_		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
11	Section 501(c)(12) organizations. Enter:			
_	Gross income from members or shareholders	-		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
40-	amounts due or received from them.)	10-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
u	Note: See the instructions for additional information the organization must report on Schedule O.	104		
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
-	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion 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			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b				
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	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	Х	
b	Describe on 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	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3))	only)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	JENNIFER SCHARPE - 720-788-3224			
	6861 XAVIER CIRCLE, WESTMINSTER, CO 80030			

COLORADO AGRICULTURE IN THE CLASSROOM

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

84-1177351

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Employees, and Independent Contractors	
Chack if Schadula O contains a response or note to any line in this Part VII	Г

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

Form 990 (2022)

- 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Check this box if neither the organization n	or any related	orga	niza	tion	con	nper	sate	ed any current officer, d	rector, or trustee.	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average Position (do not check more) than i	one	Reportable	Reportable	Estimated			
	hours per	box	, unles	ss per	rson i	is both	n an	compensation	compensation	amount of
	week	_	cer ar	ia a a	irecto	or/trus	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or di	e e			ated		organization	(W-2/1099-MISC/	from the
	related	stee	truste		go.	bens		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	ual tri	ional		ploye	t com		1099-NEC)		and related
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) ASHLEY WILCOX	6.00									
PRESIDENT		Х		Х				0.	0.	0.
(2) MARIA MILLER	2.00									
DIRECTOR		Х						0.	0.	0.
(3) SALLIE MILLER	4.00									
TREASURER		Х		Х				0.	0.	0.
(4) JENNIFER LUITJENS BAHR	2.00									
DIRECTOR		Х						0.	0.	0.
(5) JIM EHRLICH	2.00									
DIRECTOR		Х						0.	0.	0.
(6) SONDRA PIERCE	2.00	1							_	_
DIRECTOR		Х				_		0.	0.	0.
(7) KERI POWERS	6.00	1							_	_
VICE PRESIDENT		Х		Х				0.	0.	0.
		1								
						<u> </u>				
		1								
		4								
						-				
-										
		-								
-										

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Form 990 (2022)

Part VII Section A. Officers, D	irectors, Trustees, K	ey Employ	yees,	and	l Hig	ghest	C	ompensated Employee	s (continued)			
(A) Name and title	(E Aver hours	rage	lo not cl		ition	than or		(D) Reportable compensation	(E) Reportable compensation			ated ont of
	we (list hour rela organiz bel lin	eek of any s for atted attinistee ow ow ow	fficer an		recto	r/trusted compensated		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MIS 1099-NEC)	s	oth comper from organi and re organiz	ner nsation I the zation elated
1b Subtotal c Total from continuation she	eets to Part VII, Section	on A						0.		0.		0.
d Total (add lines 1b and 1c) Total number of individuals (i								0 • ceived more than \$100,	000 of reportable	0.		0.
compensation from the organ	nization										Ye	0 es No
3 Did the organization list any the line 1a? If "Yes," complete So	•		•	•	•	•	•	hest compensated emp			3	Х
4 For any individual listed on lir and related organizations gre		•						•	•		4	Х
5 Did any person listed on line rendered to the organization?	? If "Yes," complete Se				,			· ·			5	Х
Section B. Independent Contract 1 Complete this table for your f		ited indep	ender	nt co	ntra	actors	s th	nat received more than \$	100,000 of comp	ensati	on from	
the organization. Report com	pensation for the cale (A) and business address		endin		ith o	r witl	nin 	the organization's tax y (B) Description of s		Co	(C)	ntion
	, u. 1. 2. 2. 2. 1. 1. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.	<u> </u>	ONI				†	2 333., p.1.3 3	3.1.000			
							1					
							1					
							+					
2 Total number of independent	t contractors (including	but not li	imited	to t	thos	e list	ed	above) who received mo	ore than			

\$100,000 of compensation from the organization

Form 990 (2022) COLORAD
Part VIII Statement of Revenue

		Check if Schedule O contains a response or note to any lin	e in this Part VIII			
		Check if Correcting Contains a response of flote to any inf	(A)	(B)	(C)	(D)
			Total revenue	Related or exempt	Unrelated	Revenue excluded
				function revenue	business revenue	from tax under sections 512 - 514
						Sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts		Federated campaigns 1a				
ira ou		Membership dues				
s, C	С	Fundraising events 1c				
i i	d	Related organizations1d				
s, c	е	Government grants (contributions) 1e				
Sign	f	All other contributions, gifts, grants, and				
her		similar amounts not included above 11 103,415.				
햦	g					
νg	_	Total. Add lines 1a-1f	103,415.			
Ora		Business Code	103,413.			
	_	COLORADO READERS	46,000.	46 000		
ice				46,000.		
er v		SUMMER AGRICULTURE INS	21,165.	21,165.		
S		ADOPT-A-CLASSROOM	14,590.	14,590.		
an'		LITERACY PROJECT	13,075.	13,075.		
Program Service Revenue	е	MISCELANEOUS	10,719.			
Ā	f	All other program service revenue	6,939.	6,939.		
		Total. Add lines 2a-2f	112,488.			
	3	Investment income (including dividends, interest, and				
		other similar amounts)				
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
	•	(i) Real (ii) Personal				
	٠.					
		Gross rents 6a				
	b	Less: rental expenses 6b				
	С	Rental income or (loss) 6c				
	d	Net rental income or (loss)				
	7 a	Gross amount from sales of (i) Securities (ii) Other				
		assets other than inventory 7a				
	b	Less: cost or other basis				
ne		and sales expenses 7b				
Revenue	С	Gain or (loss) 7c				
Зе,	d	Net gain or (loss)				
ē	8 a	Gross income from fundraising events (not				
당	-	including \$ of				
		contributions reported on line 1c). See				
		, , ,				
	.					
		Net income or (loss) from fundraising events				
	9 a	Gross income from gaming activities. See				
		Part IV, line 19 9a				
	b	Less: direct expenses 9b				
	С	Net income or (loss) from gaming activities				
	10 a	Gross sales of inventory, less returns				
		and allowances10a				
	b	Less: cost of goods sold 10b				
		Net income or (loss) from sales of inventory				
		Business Code				
Miscellaneous Revenue	11 a					
ne Tue	b					
ella Ver	c					
Sce		All other revenue				
Σ		Total. Add lines 11a-11d				
		Total rayanua See instructions	215 903	112.488.	0.	n

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 (**D**) Fundraising expenses (C) Management and general expenses Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 70,252. 70,252. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 9,835. 9,835. Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 6,213. 6,213. Other employee benefits 9 6,160. 6,160. 10 Payroll taxes Fees for services (nonemployees): Management Legal 1,502. 1,502. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 12,273. 12,273. column (A), amount, list line 11g expenses on Sch O.) Advertising and promotion 12 Office expenses 13 Information technology 14 15 Royalties 16 Occupancy 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials ... 6,213. 6,213. Conferences, conventions, and meetings 19 20 Payments to affiliates 21 Depreciation, depletion, and amortization 22 5,294. 5,294. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 32,205. 380. 32,585. PRINTING COLORADO READERS 19,860. 19,860. 13,533. 13,533. SPECIAL PROJECTS 12,481.12,481. LITERACY PROJECT 36,569. 19,393. 15,994. SEE SCH O 1,182. e All other expenses 232,770. 65,267. 165,941. 1,562. Total functional expenses. Add lines 1 through 24e 25 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 (2022)

Part X | Balance Sheet

Pai	rt X	Balance Sheet				
		Check if Schedule O contains a response or note	to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		82,274.	1	57,312.
	2	Savings and temporary cash investments		1,517.	2	1,517.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from any current or f				
		trustee, key employee, creator or founder, substa	ntial contributor, or 35%			
		controlled entity or family member of any of these	persons		5	
	6	Loans and other receivables from other disqualified				
		under section 4958(f)(1)), and persons described i	n section 4958(c)(3)(B)		6	
υ	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
Ÿ	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D	10a			
	b	Less: accumulated depreciation	10b		10c	
	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, line 11	95,000.	12	100,293.	
	13	Investments - program-related. See Part IV, line 1		13		
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal		178,791.	16	159,122.
	17	Accounts payable and accrued expenses		13,573.	17	5,478.
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Pa	art IV of Schedule D		21	
S	22	Loans and other payables to any current or forme				
Liabilities		trustee, key employee, creator or founder, substa				
jab		controlled entity or family member of any of these	persons		22	
	23	Secured mortgages and notes payable to unrelate	· · · · · · · · · · · · · · · · · · ·		23	
	24	Unsecured notes and loans payable to unrelated			24	
	25	Other liabilities (including federal income tax, paya				
		parties, and other liabilities not included on lines	17-24). Complete Part X			
		of Schedule D		12 572	25	F 470
	26	Total liabilities. Add lines 17 through 25		13,573.	26	5,478.
S		Organizations that follow FASB ASC 958, chec	k here X			
)Ce		and complete lines 27, 28, 32, and 33.		165 010		152 611
alaı	27	Net assets without donor restrictions		165,218.	27	153,644.
Ä	28	Net assets with donor restrictions			28	
Ĕ		Organizations that do not follow FASB ASC 95	s, check here			
P		and complete lines 29 through 33.				
ţ	29	Capital stock or trust principal, or current funds			29	
SSE	30	Paid-in or capital surplus, or land, building, or equ			30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated inco		165 210	31	152 611
ž	32	Total net assets or fund balances		165,218.	32	153,644.
	33	Total liabilities and net assets/fund balances		178,791.	33	159,122.

Form 990 (2022) COLORADO

Part XI Reconciliation of Net Assets

COLORADO AGRICULTURE IN THE CLASSROOM

rai	Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1				03.
2	Total expenses (must equal Part IX, column (A), line 25)	2		23	2,7	70.
3	Revenue less expenses. Subtract line 2 from line 1	3		-1	6,8	67.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4				18.
5	Net unrealized gains (losses) on investments	5			5,2	93.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10		15	3,6	44.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
			_		Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other		[
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate					
	consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,	[
	review, or compilation of its financial statements and selection of an independent accountant?			2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the		[
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed aud	dit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		<u></u>	3b		

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SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public

OMB No. 1545-0047

pen to Public Inspection

Name of the organization COLORADO FOUNDATION FOR AGRICULTURE INC
COLORADO AGRICULTURE IN THE CLASSROOM

 $Employer\ identification\ number \\ 84-1177351$

Pa	rt I	Reason for Public 0	Charity Status.	(All organizations must o	omplete th	nis part.) S	ee instructions.	
The	orgar	nization is not a private found	ation because it is: (F	For lines 1 through 12, c	heck only	one box.)		
1		•	,	,	,	,	IVAVi).	
2	H	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)						
_	H	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).						
3	\mathbb{H}						•	Alaa laaanikalia mama
4		A medical research organiza	ation operated in cor	njunction with a nospital	aescribea	in sectio	n 1/0(b)(1)(A)(III). Enter	the nospital's name,
		city, and state:						
5		An organization operated for	or the benefit of a col	lege or university owned	l or operat	ed by a go	vernmental unit describe	ed in
		section 170(b)(1)(A)(iv). (C	Complete Part II.)					
6		A federal, state, or local gov	ernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).	
7		An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in						
		section 170(b)(1)(A)(vi). (C	omplete Part II.)					
8		A community trust describe		1)(A)(vi). (Complete Par	t II.)			
9	H	An agricultural research org				ed in coniu	inction with a land-grant	college
3	ш	or university or a non-land-g				-	-	-
		· · · · · ·	rant conege or agrici	ulture (see iristructions).	Litter the	name, city	, and state of the college	; OI
40	▽	university:	U	H 00 4 /00/ - f :1				d annual and a state for an
10	X	An organization that norma						
		activities related to its exem	•	· ·				-
		income and unrelated busir		(less section 511 tax) fro	m busines	sses acquii	red by the organization a	after June 30, 1975.
	_	See section 509(a)(2). (Cor	mplete Part III.)					
11	Ш	An organization organized a	and operated exclusi	vely to test for public sa	fety. See	section 50)9(a)(4).	
12		An organization organized a	and operated exclusi	vely for the benefit of, to	perform t	he functior	ns of, or to carry out the	purposes of one or
		more publicly supported or	ganizations describe	d in section 509(a)(1) d	r section	509(a)(2).	See section 509(a)(3). (Check the box on
	lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.							
а		Type I. A supporting orga	nization operated, s	upervised, or controlled	by its supp	oorted orga	anization(s), typically by	giving
		the supported organization	on(s) the power to red	gularly appoint or elect a	majority o	of the direc	tors or trustees of the su	upporting
		organization. You must o			, ,			0
b		Type II. A supporting org			ion with it	s sunnorte	d organization(s) by hav	vina
		control or management o						
		organization(s). You mus			arric perso	iis triat coi	inor or manage the supp	Jorted
_		¬ · · · · · · · · · · · · · · · · · · ·			in connect	tion with a	and functionally integrate	ad with
С							• •	ed with,
_		its supported organization		-				
d							· · · · · · · · · · · · · · · · · · ·	* *
		that is not functionally int	egrated. The organiz	ation generally must sat	isfy a distr	ibution rec	uirement and an attentiv	/eness
	_	requirement (see instructi	ons). You must con	nplete Part IV, Sections	A and D,	and Part	V.	
е		Check this box if the orga	anization received a v	vritten determination fro	m the IRS	that it is a	Type I, Type II, Type III	
		functionally integrated, or	Type III non-function	nally integrated supporti	ng organiz	ation.		
f	Ent	er the number of supported o	organizations					
g		vide the following information	about the supporte	d organization(s).				
		(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orgain your govern	anization listed ing document?	(v) Amount of monetary	(vi) Amount of other
		organization		above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
				,				
						-		

Schedule A (Form 990) 2022

COLORADO AGRICULTURE IN THE CLASSROOM

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	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	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						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax y	year as a section 5	01(c)(3)	
	organization, check this box and stop						
	ction C. Computation of Publi						
14	Public support percentage for 2022 (I					14	%
15	Public support percentage from 2021					15	%
16a	33 1/3% support test - 2022. If the	-			14 is 33 1/3% or m	ore, check this box	and
	stop here. The organization qualifies		-				
b	33 1/3% support test - 2021. If the						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test	-					
	and if the organization meets the fact			=	•	VI how the organiz	ation
	meets the facts-and-circumstances te	-			-		
b	10% -facts-and-circumstances test	ū				•	10% or
	more, and if the organization meets the				-		
	organization meets the facts-and-circu						
<u>18</u>	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a	nd see instructions	

Schedule A (Form 990) 2022

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Schedule A (Form 990) 2022

COLORADO AGRICULTURE IN THE CLASSROOM

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

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

Se	ction A. Public Support	elow, please comp	icic i ait ii.j				
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not	,	,	,	,	,	
	include any "unusual grants.")	166,980.	128,416.	101,878.	234,631.	215,903.	847,808.
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 organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	166,980.	128,416.	101,878.	234,631.	215,903.	847,808.
78	Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
k	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						0.
	Add lines 7a and 7b						0.
8	Public support. (Subtract line 7c from line 6.)						847,808.
Se	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6	166,980.	128,416.	101,878.	234,631.	215,903.	847,808.
10a	dross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	962.	567.	192.	164.		1,885.
k	Unrelated business taxable income (less section 511 taxes) from businesses	5525					
	acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on	962.	567.	192.	164.		1,885.
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	167,942.	128,983.	102,070.	234,795.	215,903.	849,693.
14	First 5 years. If the Form 990 is for the	•					
<u> </u>	check this box and stop here	- O D					
	ction C. Computation of Publi			. (6)		[00 70 %
	Public support percentage for 2022 (li		•			15	99.78 % 99.66 %
	Public support percentage from 2021 ction D. Computation of Inves					16	99.66 %
	Investment income percentage for 20			ne 13 column (f)		17	.22 %
	Investment income percentage from 2					18	.34 %
	33 1/3% support tests - 2022. If the					•	
	more than 33 1/3%, check this box ar						T
k	33 1/3% support tests - 2021. If the		-	•	•		
	line 18 is not more than 33 1/3%, che	ck this box and st	op here. The orga	nization qualifies a	s a publicly suppo	rted organization	
20	Private foundation. If the organizatio	n did not check a l	oox on line 14, 19a	a, or 19b, check th	is box and see inst	tructions	

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Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
	1		
	2		
	3a		
	٥L		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	- 1.		
	5b 5c		
	30		
	6		
	7		
	7		
	8		
	9a		
	0.		
	9b		
	9c		
	10a		
	10b	000	
ule	A (Forn	n 990)	2022

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Par	rt IV Supporting Organizations (continued)			
	· · · · · · · · · · · · · · · · · · ·		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one			l
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's office directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)	rs,		
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one support	ed		l
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			l
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			l
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
Sec	supervised, or controlled the supporting organization. Stion C. Type II Supporting Organizations	2		
	Alon of Typo ii oupporting organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		162	NO
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			l
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			l
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			l
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
800	supported organizations played in this regard.	3		
	ction E. Type III Functionally Integrated Supporting Organizations	•		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruc	tions).		
a	Somplete Selem			
b		(:tt	-1	
2	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity Activities Test. Answer lines 2a and 2b below.	see instruction	Yes	No
a			163	140
-	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			l
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			l
	that these activities constituted substantially all of its activities.	2a		
b				
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b				
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		ı

Schedule A (Form 990) 2022

COLORADO AGRICULTURE IN THE CLASSROOM

84-1177351 Page 6 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) 1 Net short-term capital gain 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3. 5 5 Depreciation and depletion Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or 6 maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities 1a **b** Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt-use assets 2 3 3 Subtract line 2 from line 1d. Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, 4 see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 6 6 Multiply line 5 by 0.035. 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) Section C - Distributable Amount **Current Year** Adjusted net income for prior year (from Section A, line 8, column A) 1 1 Enter 0.85 of line 1. 2 3 Minimum asset amount for prior year (from Section B, line 8, column A) 3 Enter greater of line 2 or line 3. 4 5 5 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to

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

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Schedule A (Form 990) 2022

emergency temporary reduction (see instructions)

COLORADO AGRICULTURE IN THE CLASSROOM

84-1177351 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** 1 1 Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported 2 organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 3 4 Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 6 6 Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6. 7 7 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 8 Distributable amount for 2022 from Section C, line 6 9 10 Line 8 amount divided by line 9 amount 10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reason-			
able cause required - explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2022			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e From 2021			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D,			
line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, if			
any. Subtract lines 3g and 4a from line 2. For result greater			
than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2022. Subtract lines 3h			
and 4b from line 1. For result greater than zero, explain in			
Part VI. See instructions.			
7 Excess distributions carryover to 2023. Add lines 3j			
and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

Schedule A (Form 990) 2022

COLORADO AGRICULTURE INC

84-117<u>7351 Page 8</u> COLORADO AGRICULTURE IN THE CLASSROOM Schedule A (Form 990) 2022 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. Part VI (See instructions.)

232028 12-09-22 Schedule A (Form 990) 2022

Schedule B

(Form 990)

Attach to Form 990 or Form 990-PF. Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

Name of the organization

Organization type (check one):

Employer identification number

COLORADO FOUNDATION FOR AGRICULTURE INC COLORADO AGRICULTURE IN THE CLASSROOM

84-1177351

Filers of:	Section:						
Form 990 or 990-EZ	$\boxed{\textbf{X}}$ 501(c)(3) (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
	zation is covered by the General Rule or a Special Rule. n 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.						
General Rule							
	anization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or rom any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.						
Special Rules							
sections 50 contributor	anization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 09(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one r, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; 990-EZ, line 1. Complete Parts I and II.						
contributor literary, or	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.						
year, contr is checked purpose. D	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year\$						
answer "No" on Par	eation that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must t IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify the filing requirements of Schedule B (Form 990).						

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

Schedule B (Form 990) (2022)

Name of organization
COLORADO FOUNDATION FOR AGRICULTURE INC
COLORADO AGRICULTURE IN THE CLASSROOM

Employer identification number

84-1177351

Parti	(see instructions). Use duplicate copies of Part I if addition	ial space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NATINAL AGRICULTURE IN THE CLASSROOM ORG 19 RIVER OAKS WAY PALM COAST, FL 32137	\$\$11,432.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	AGRIUM US INC 13131 LAKE FRASER DRIVE SE CALGARY, CANADA AB T2J 7E8	\$\$8	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	INTREPID 707 17TH ST, SUITE 4200 DENVER, CO 80202	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		. \$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization
COLORADO FOUNDATION FOR AGRICULTURE INC
COLORADO AGRICULTURE IN THE CLASSROOM

84-1177351

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
		- - - - s		
1		I D		

Page 4 Schedule B (Form 990) (2022) Name of organization **Employer identification number** COLORADO FOUNDATION FOR AGRICULTURE INC COLORADO AGRICULTURE IN THE CLASSROOM 84-1177351 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I

(e) Transfer of gift

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

COLORADO FOUNDATION FOR AGRICULTURE INC COLORADO AGRICULTURE IN THE CLASSROOM

Employer identification number 84-1177351

Pai	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the				
	organization answered "Yes" on Form 990, Part IV, lir	ne 6.	·		
		(a) Donor advised funds	(b) Funds and other accounts		
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	ed funds		
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No		
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be	used only		
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	conferring		
Pai	t II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990,	Part IV, line 7.		
1	Purpose(s) of conservation easements held by the organizati	on (check all that appl <u>y).</u>			
	Preservation of land for public use (for example, recrea	ation or education) Preservation o	f a historically important land area		
	Protection of natural habitat	Preservation of	f a certified historic structure		
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form			
	day of the tax year.		Held at the End of the Tax Year		
а	Total number of conservation easements		2a		
b					
С	Number of conservation easements on a certified historic str	ucture included in (a)	2c		
d	* , , ,				
	historic structure listed in the National Register		2d		
3	Number of conservation easements modified, transferred, re-	leased, extinguished, or terminated by the	organization during the tax		
	year				
4	Number of states where property subject to conservation ea				
5	Does the organization have a written policy regarding the per				
	violations, and enforcement of the conservation easements in				
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cons	servation easements during the year		
_					
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserva	tion easements during the year		
	Does each conservation easement reported on line 2(d) above	re estisfy the requirements of eastion 170	'h)/4\/D\/i\		
8		· ·			
9	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservati	on accompate in its revenue and expense			
9	balance sheet, and include, if applicable, the text of the footr	•			
	organization's accounting for conservation easements.	lote to the organization's illiancial statem	ents that describes the		
Pai	t III Organizations Maintaining Collections of	f Art, Historical Treasures, or Ot	her Similar Assets.		
	Complete if the organization answered "Yes" on Form				
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement a	and balance sheet works		
	of art, historical treasures, or other similar assets held for pul				
	service, provide in Part XIII the text of the footnote to its final				
b	If the organization elected, as permitted under FASB ASC 95				
	art, historical treasures, or other similar assets held for public	· •			
	provide the following amounts relating to these items:	,	,		
	(i) Revenue included on Form 990, Part VIII, line 1		\$ <u> </u>		
2	If the organization received or held works of art, historical tre				
	the following amounts required to be reported under FASB ASC 958 relating to these items:				
а	Revenue included on Form 990, Part VIII, line 1	· ·	\$		
b	Assets included in Form 990, Part X				

Schedule D (Form 990) 2022 COLORADO AGRICULTURE IN THE CLASSROOM

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

Par	t III	Organizations Maintaining C	ollections of Ar	t, Hist	orical Tre	easures, or	Other	Simila	ar Assets	(conti	nued)	
3	Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its											
	collec	collection items (check all that apply):										
а	Public exhibition d Loan or exchange program											
b		Scholarly research	•	е 🔲	Other							
С		Preservation for future generations										
4	Provid	de a description of the organization's co	llections and explai	n how th	ey further th	ne organization	ı's exem	npt purp	ose in Part	XIII.		
5	Durin	g the year, did the organization solicit o	receive donations	of art, his	storical trea	sures, or other	similar	assets				
	to be	sold to raise funds rather than to be ma	intained as part of t	the organ	ization's co	llection?				Yes		No
Par	t IV	Escrow and Custodial Arrang	gements. Compl	lete if the	organizatio	on answered "Y	es" on	Form 99	0, Part IV,	line 9, or		
		reported an amount on Form 990, Par	t X, line 21.									
1a	Is the	organization an agent, trustee, custodia	an or other intermed	diary for d	contribution	s or other asse	ets not ir	ncluded		_		_
	on Fo	rm 990, Part X?								Yes		No
b		s," explain the arrangement in Part XIII a						_	_			
										Amoun	t	
С	Begin	ning balance						1c				
d	Addit	ions during the year						1d				
		butions during the year										
f	Endin	g balance						1f				
2a	Did th	ne organization include an amount on Fo	orm 990, Part X, line	21, for e	escrow or co	ustodial accoui	nt liabilit	ty?	\square	Yes		No
		s," explain the arrangement in Part XIII.										
Pai	t V	Endowment Funds. Complete in	the organization ar	nswered	"Yes" on Fo	orm 990, Part I						
			(a) Current year	(b) F	rior year	(c) Two years	back	(d) Three	years back	(e) Fou	r years	back
		ining of year balance										
b	Contr	ibutions										
С	Net in	vestment earnings, gains, and losses										
d	Grant	s or scholarships										
е	Other	expenditures for facilities										
	and p	rograms										
f	Admii	nistrative expenses										
g	End o	of year balance										
2	Provid	de the estimated percentage of the curr	ent year end balanc	e (line 1ç	j, column (a	i)) held as:						
а	Board	d designated or quasi-endowment		%								
b	Perm	anent endowment	%									
С	Term	endowment	%									
	The p	ercentages on lines 2a, 2b, and 2c shou	ıld equal 100%.									
За	Are th	nere endowment funds not in the posses	ssion of the organiz	ation tha	t are held aı	nd administere	d for the	€				
	organ	ization by:									Yes	No
		nrelated organizations								3a(i)		
	(ii) R	elated organizations								3a(ii)		
b	If "Ye	s" on line 3a(ii), are the related organiza	tions listed as requi	red on S	chedule R?					3b		
4		ibe in Part XIII the intended uses of the		wment f	unds.							
Pai	t VI	Land, Buildings, and Equipm										
		Complete if the organization answered										
		Description of property	(a) Cost or o		. ,	t or other		cumula		(d) Boo	k valu	е
			basis (investi	ment)	basis	(other)	dep	reciatio	n			
			I									
		ngs										
	: Leasehold improvements											
		ment	I									
е	Other											

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022

84-1177351 Page 3 COLORADO AGRICULTURE IN THE CLASSROOM

Part VII Investments - Other Securities.			<u> </u>
Complete if the organization answered "Yes" of			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other (A) EDWARD JONES	100,293.	COST	
` '	100,293.	COSI	
(B) (C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	100,293.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	l-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets.			
Complete if the organization answered "Yes" of	on Form 990 Part IV line 1	11d See Form 990 Part X line 15	
	Description	11d. 666 1 6111 666, 1 dr. X, iii.e 16.	(b) Book value
(1)			(a) son raide
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)		
Part X Other Liabilities.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1	11e or 11f. See Form 990, Part X, line 25	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	•		
2. Liability for uncertain tax positions. In Part XIII, provide		· · · · · ·	
organization's liability for uncertain tax positions under	FASD ASC 740. CRECK NE	re ir trie text or trie lootriote has been pro	NIUCU III PAIL AIII L

Schedule D (Form 990) 2022

84-1177351 Page 4

Par	t XI Reconciliation of Revenue per Audited Financial St	atements With Revenue	e per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV,	line 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities			
С	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 1	[2.]	5	
Pa	t XII Reconciliation of Expenses per Audited Financial S	Statements With Expens	es per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV,	line 12a.		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1		
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Bort VIII.)	1 44 1		
b	Other (Describe in Part XIII.)	4b		
	Add lines 4a and 4b			
c 5	Add lines 4a and 4b Total expenses. Add lines 3 and 4c . (This must equal Form 990. Part I. line			
5 Pa ı	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line t XIII Supplemental Information.	: 18.)	5	
5 Pai	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 't XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2b; Pa	5	
5 Pai	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line t XIII Supplemental Information.	d 4; Part IV, lines 1b and 2b; Pa	5	
5 Pai	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 't XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2b; Pa	5	
5 Pai	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 't XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2b; Pa	5	
5 Pai	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 't XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2b; Pa	5	
5 Pai	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 't XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2b; Pa	5	
5 Pai	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 't XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2b; Pa	5	
5 Pai	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 't XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2b; Pa	5	
5 Pai	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 't XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2b; Pa	5	
5 Pai	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 't XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2b; Pa	5	
5 Pai	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 't XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2b; Pa	5	
5 Pai	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 't XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2b; Pa	5	
5 Pai	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 't XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2b; Pa	5	
5 Pai	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 't XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2b; Pa	5	
5 Pai	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 't XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2b; Pa	5	
5 Pai	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 't XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2b; Pa	5	
5 Pai	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 't XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2b; Pa	5	
5 Pai	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 't XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2b; Pa	5	
5 Pai	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 't XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2b; Pa	5	
5 Pai	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 't XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2b; Pa	5	
5 Pai	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 't XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2b; Pa	5	
5 Pai	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 't XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2b; Pa	5	
5 Pai	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 't XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2b; Pa	5	
5 Pai	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 't XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2b; Pa	5	

SCHEDULE 0 (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

COLORADO FOUNDATION FOR AGRICULTURE INC COLORADO AGRICULTURE IN THE CLASSROOM

Employer identification number 84-1177351

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: ADVANCE AGRICULTURAL LITERACY IN THE NEXT GENERATION OF CONSUMERS, CITIZENS AND PROFESSIONALS. THE MISSION IS CONNECTING COLORADO EDUCATORS AND STUDENTS TO THEIR FOOD, FIBER, FUEL, AND NATURAL RESOURCES.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: MODERN PHOTOS OF SHEEP RANCHING IN WESTERN COLORADO. THIS PROJECT WAS A JOINT PROJECT OF CFA, THE COLORADO SHEEP & WOOL AUTHORITY, THE BESSIE MINOR SWIFT FOUNDATION, THE COLORADO STATE FOREST SERVICE, AND VARIOUS INDIVIDUAL SPONSORS AND DONORS INCLUDING THE COLORADO WOOL GROWERS ASSOCIATION. EACH PARTICIPATING CLASS RECEIVED A FREE COPY OF THE BOOK, ONE WOOL SAMPLES KIT, TREE COOKIES (SMALL CROSS-SECTIONS OF TREES), COPY OF THE PROGRAM GUIDE, COPIES OF FIVE STUDENT ACTIVITIES, ONE COPY OF THE CFA WOOL & SHEEP ACTIVITY BOOK, AND A POSTCARD ABOUT PROJECT LEARNING TREE. MORE THAN 10,000 STUDENTS IN 500+ CLASSES WERE REACHED THROUGH THIS PROGRAM IN 2023.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: THROUGH THESE TWO PROFESSIONAL DEVELOPMENT EVENTS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: ACTIVITY BOOKS: DESIGNED TO INCREASE THE LEVEL OF UNDERSTANDING OF A PARTICULAR TOPIC, EACH BOOK VARIES IN LENGTH RANGING FROM 24 TO 72 PAGES AND CAN BE TAUGHT OVER MULTIPLE CLASS PERIODS. THEY INCLUDE A VARIETY OF READING AND ACTIVITY PAGES TO MAKE LEARNING FUN! THE

<u>Schedule O (Form 990) 2022</u> Page **2**

Name of the organization COLORADO FOUNDATION FOR AGRICULTURE INC
COLORADO AGRICULTURE IN THE CLASSROOM

Employer identification number 84-1177351

ACTIVITY BOOKS ARE AVAILABLE IN PRINT AND VIA DIGITAL FLIP-BOOK IN THE

CFA DIGITAL LIBRARY. A TOTAL OF 11,145 COPIES OF THE ACTIVITIES BOOKS

WERE DISTRIBUTED IN 2022-2023, AND THE DIGITAL FLIP-BOOK VERSIONS

RECEIVED 479 TOTAL ANNUAL VIEWS, A 38% INCREASE FROM THE PREVIOUS YEAR.

JOURNEY 2050 AND FARMERS 2050: EXPERIENCE AGRICULTURE LIKE IT'S NEVER
BEEN TAUGHT BEFORE THROUGH THIS EDUCATIONAL GAMING PLATFORM. STUDENTS

EXPLORE WORLD FOOD SUSTAINABILITY AS THEY MAKE INQUIRY-BASED DECISIONS

TO SEE THE RIPPLE EFFECT ON SOCIAL, ECONOMIC, AND ENVIRONMENTAL FACTORS

LOCALLY AND GLOBALLY. JOURNEY 2050 IS IDEAL FOR GRADES 6-12 AND COMES

WITH STEM-BASED LESSON PLANS. FARMERS 2050 IS A FUN FARMING GAME FOR

KIDS OF ALL AGES. JOURNEY 2050 AND FARMERS 2050 ARE PROVIDED IN

PARTNERSHIP WITH NUTRIEN AND THE NATIONAL AGRICULTURE IN THE CLASSROOM

ORGANIZATION. COLORADO HAS MORE THAN 85 ACTIVE EDUCATORS UTILIZING THE

JOURNEY 2050 PROGRAM. ADDITIONALLY, APPROXIMATELY 3,700 USERS FROM

COLORADO VISITED THE JOURNEY 2050 WEBSITE AND 500 USERS FROM COLORADO

VISITED THE FARMERS 2050 WEBSITE IN 2022-2023.

STUDENT, EDUCATOR, AND PUBLIC EVENTS

THROUGHOUT THE YEAR, CFA STAFF AND VOLUNTEERS ATTEND VARIOUS STUDENT

AGRICULTURE AND WATER FESTIVALS, PROFESSIONAL EDUCATOR CONFERENCES, AND

PUBLIC EVENTS. THESE EVENTS ARE KEY FOR EDUCATING STUDENTS, TEACHERS,

AND THE GENERAL PUBLIC, AS WELL AS PROMOTING THE MANY PROGRAMS AND

RESOURCES PROVIDED BY COLORADO AGRICULTURE IN THE CLASSROOM. IN

2022-2023, CFA HAD DIRECT CONTACT WITH 35,000 STUDENTS, TEACHERS,

FAMILIES, AND INDIVIDUALS AT 32 SUCH EVENTS HELD THROUGHOUT THE STATE.

EXPENSES \$ 22,395. INCLUDING GRANTS OF \$ 0. REVENUE \$ 32,248.

Name of the organization COLORADO FOUNDATION FOR AGRICULTURE INC	Formation of the street of the
COLORADO AGRICULTURE IN THE CLASSROOM	Employer identification number 84-1177351
FORM 990, PART VI, SECTION B, LINE 11B:	
THE BOARD IS PROVIDED A COPY OF THE 990 FOR REVIEW PRIOR T	O FILING.
FORM 990, PART VI, SECTION B, LINE 12C:	
CONFLICTS OF INTEREST ARE DISCLOSED AT THE REGULAR BOARD M	EETINGS AS THEY
ARISE.	
FORM 990, PART VI, SECTION C, LINE 19:	
INFORMATION IS MADE AVAILABLE UPON REQUEST.	
FORM 990, PART IX, LINE 24E, ALL OTHER FUNCTIONAL EXPENSES	·:
SUMMER AGRICULTURE INSTITUTE:	
PROGRAM SERVICE EXPENSES	10,531.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	10,531.
SOFTWARE:	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	6,112.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	6,112.
ACTIVITY BOOKS:	
PROGRAM SERVICE EXPENSES	4,916.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	4,916.

Schedule O (Form 990) 2022 Name of the organization COLORADO FOUNDATION FOR AGRICULTURE INC	Page 2 Employer identification number
COLORADO AGRICULTURE IN THE CLASSROOM	84-1177351
POSTAGE:	
PROGRAM SERVICE EXPENSES	3,246.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	546.
TOTAL EXPENSES	3,792.
STORAGE AND MOVING:	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	3,648.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	3,648.
WEBSITE/SOCIAL MEDIA:	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	2,274.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	2,274.
TELEPHONE & COMMUNICATION:	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	1,465.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	1,465.
SUPPLIES:	
PROGRAM SERVICE EXPENSES	0.
	728.
MANAGEMENT AND GENERAL EXPENSES 232212 10-28-22	7 2 8 • Schedule O (Form 990) 2022

Schedule O (Form 990) 202	2		Page
Name of the organization	COLORADO FOUNDATION COLORADO AGRICULTUR	FOR AGRICULTURE INC	Employer identification number $84-1177351$
FUNDRAISING EX	PENSES		0.
TOTAL EXPENSES			728.
AWARDS & GRAN	S:		
PROGRAM SERVI	E EXPENSES		700.
MANAGEMENT ANI	GENERAL EXPENSES		0.
FUNDRAISING E	PENSES		0.
TOTAL EXPENSE:			700.
ANNUAL REPORT			
PROGRAM SERVIO	E EXPENSES		0.
MANAGEMENT ANI	GENERAL EXPENSES		0.
FUNDRAISING EX	PENSES		636.
TOTAL EXPENSES			636.
MEMBERSHIP DU	S:		
PROGRAM SERVI	E EXPENSES		0.
MANAGEMENT ANI	GENERAL EXPENSES		595.
FUNDRAISING EX	PENSES		0.
TOTAL EXPENSE:			595.
PATRIOT SOFTW	RE:		
PROGRAM SERVI	E EXPENSES		0.
MANAGEMENT ANI	GENERAL EXPENSES		447.
FUNDRAISING EX	PENSES		0.
TOTAL EXPENSE:			447.
BOD/ADVISOR EX	PENSES:		
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Name of the organization COLORADO FOUNDATION FOR AGRICULTURE INC COLORADO AGRICULTURE IN THE CLASSROOM	Employer identification number 84-1177351
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	425.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	425.
BANK FEES:	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	280.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	280.
ORGANIZATIONAL FEES:	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	20.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	20.
TOTAL OTHER EXPENSES ON FORM 990, PART IX, LINE 24E, COL A	36,569.