(Rev. January 2020) Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

Open to Public Inspection

OMB No. 1545-0047

AF	or the	2019 calendar year, or tax year beginning 00011 , 2019 and 6	enaing U	UN 30, 4040	
В с	heck if oplicable:	C Name of organization		D Employer identif	ication number
	Address change	COMMUNITY BUILDERS			
	Name change	Doing business as		61-17657	96
	Initial return	· · · · · · · · · · · · · · · · · · ·	Room/suite	E Telephone number	
	Final return/	PO BOX 3128		970-384-	
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	499,117.
	Amende return	GLENWOOD SPRINGS, CO 81002		H(a) Is this a group r	
	Applica- tion pending	F Name and address of principal officer: CLARK ANDERSON		for subordinates	s? Yes X No
		SAME AS C ABOVE		H(b) Are all subordinates i	ncluded? Yes No
		npt status: $X = 501(c)(3) = 501(c)(1)$ (insert no.) 4947(a)(1) or	r 527	If "No," attach a	a list. (see instructions)
		:▶ COMMUNITYBUILDERS.ORG		H(c) Group exemption	
		rganization: X Corporation Trust Association Other	L Year	of formation: 2015 i	M State of legal domicile: CO
Ра		Summary			
ø	1 B	riefly describe the organization's mission or most significant activities: ${f SEE} {f S}$	CHEDU.	LE O	
Activities & Governance	_				
ern		heck this box if the organization discontinued its operations or dispose			1 _
ŏ				3	
જ		umber of independent voting members of the governing body (Part VI, line 1b)			
es		otal number of individuals employed in calendar year 2019 (Part V, line 2a)			12
ξ		otal number of volunteers (estimate if necessary)			6
Act		otal unrelated business revenue from Part VIII, column (C), line 12			
	b N	et unrelated business taxable income from Form 990-T, line 39			
	•		-	Prior Year	Current Year
ne		ontributions and grants (Part VIII, line 1h)		160,131.	
Revenue		rogram service revenue (Part VIII, line 2g)		269,447.	
Re		vestment income (Part VIII, column (A), lines 3, 4, and 7d)		1,955. 0.	
		ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		431,533.	
		otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		431,333.	-
		rants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
		enefits paid to or for members (Part IX, column (A), line 4)		546,520.	
es	15 S	alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
Expenses	16a P	rofessional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Ϋ́	b	otal fundraising expenses (Part IX, column (D), line 25) 8,73		353,986.	319,512.
_	17	ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		900,506.	
		otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		-468,973.	
_ v	19 R	evenue less expenses. Subtract line 18 from line 12		•	
ts o	οο т	etal casata (Part V. line 16)	DE	ginning of Current Year 1,288,077.	End of Year 1,062,303.
Net Assets or Fund Balances	20 T	otal assets (Part X, line 16) otal liabilities (Part X, line 26)		12,809.	170,541.
let/	21 T	et assets or fund balances. Subtract line 21 from line 20		1,275,268.	891,762.
Pa	rt II	Signature Block		1,213,200	051,702.
		es of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	nts, and to the hest of m	v knowledge and helief it is
		and complete. Declaration of preparer (other than officer) is based on all information of which			y kilowiougo alia bollol, it io
,	0011001,	and completed books and or property (constraint officer) to below on an information of white	on properor	nao any kilowioago:	
Sigr	,	Signature of officer		Date	
Here		CLARK ANDERSON, EXECUTIVE DIRECTOR			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Paid		ENISE JURGENS, CPA		if self-emplo	P00087338
Prep		Firm's name REESE HENRY & COMPANY, INC.			84-0803727
Use	-	Firm's address 400 EAST MAIN ST., SUITE 2			
		ASPEN, CO 81611		Phone no. 97	0-925-3771
May	the IRS	6 discuss this return with the preparer shown above? (see instructions)			X Yes No

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Pai	t 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:
	WE HELP PEOPLE CREATE SUCCESSFUL, PROSPEROUS COMMUNITIES THROUGH
	TRAINING, INFORMATION AND ASSISTANCE.
	INAINING, INFORMATION AND ADDIDIANCE.
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.
3	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 \$373,856 • including grants of \$) (Revenue \$) (Revenue \$)
	TECHNICAL ASSISTANCE:
	THE GOALS OF THE TECHNICAL ASSISTANCE PROGRAM ARE TO: 1) HELP
	COMMUNITIES MAKE TANGIBLE PROGRESS ON SPECIFIC LIVABILITY OBJECTIVES;
	2) BUILD LOCAL CAPACITY TO HELP COMMUNITIES ADVANCE LIVABILITY
	SOLUTIONS ON THEIR OWN; AND 3) CREATE MODELS AND SUCCESS STORIES THAT
	INSPIRE AND INFORM PROGRESS IN OTHER COMMUNITIES WITHIN THE AMERICAN
	WEST REGION. IN FY20, WE SUCCESSFULLY ASSISTED THE COUNTIES OF GUNNISON
	AND EAGLE IN COLORADO, AND THE CITIES OF LARAMIE, LANDER AND LOVELL IN
	WYOMING IN ADDRESSING LIVABILITY GOALS AND MITIGATING THE ECONOMIC AND
	SOCIAL IMPACTS OF THE COVID-19 PANDEMIC.
4b	(Code:) (Expenses \$
	TRAINING:
	THE GOALS OF THE TRAINING PROGRAM ARE TO: 1) INCREASE KNOWLEDGE,
	COMPETENCE, AND LEADERSHIP ABILITIES OF PEOPLE WHO MAKE/INFLUENCE
	DECISIONS ABOUT HOW THE COMMUNITY GROWS AND CHANGES OVER TIME; AND 2)
	HELP LOCAL LEADERS DEVELOP THE PARTNERSHIPS, TOOLS, INSPIRATION, AND
	DIRECTION THEY NEED TO ADVANCE LIVABILITY. IN FY20, WE HOSTED THE
	BUILDING BETTER PLACES TRAINING IN GRAND JUNCTION, COLORADO FOR LOCAL
	LEADERS WHO WANT TO BUILD LEADERSHIP AND UNDERSTANDING OF PLANNING,
	POLICIES AND ENGAGEMENT TO SHAPE MORE LIVABLE COMMUNITIES FOR EVERYONE.
	WE ALSO DEVELOPED AND DELIVERED VIRTUAL TRAINING ON PANDEMIC ECONOMIC
	RECOVERY THROUGH PARTNERSHIPS WITH THE MONTANA DOWNTOWN COALITION AND
	COLORADO MAIN STREET PROGRAM.
4c	(Code:) (Expenses \$ 280,425 • including grants of \$) (Revenue \$)
	TOOLS & INSIGHTS:
	OUR TOOLS AND INSIGHTS PROGRAM PROVIDES STORIES, INFORMATION, AND TOOLS
	TO GIVE COMMUNITIES RESOURCES AND INSPIRATION TO BUILD MORE LIVABLE
	PLACES. THIS YEAR WE DELIVERED A WIDE RANGE OF BLOG POSTS AND OTHER
	ONLINE INSIGHTS COVERING HOUSING, LAND USE, ECONOMIC RECOVERY AND OTHER
	RELEVANT TOPICS. WE ALSO BUILT A ROADMAP TO RECOVERY TOOL THAT IS BEING
	USED TO INFORM AND SUPPORT LOCAL COVID RECOVERY EFFORTS. WE ALSO WORKED
	WITH THE WYOMING BUSINESS COUNCIL TO CREATE AN ONLINE DO-IT-YOURSELF
	TOOL FOR REFORMING LOCAL ZONING CODES WITH A FOCUS ON ENABLING MORE
	AFFORDABLE TYPES OF HOUSING.
	WELOWDURE IILED OF HOODING.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$
4e	Total program service expenses ► 744,038.
	Form 990 (2019)

COMMUNITY BUILDERS 61-1765796 Page 3 Part IV Checklist of Required Schedules Yes No 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? Х If "Yes," complete Schedule A 2 Х Is the organization required to complete Schedule B, Schedule of Contributors? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for X public office? If "Yes," complete Schedule C, Part I 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect Х during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or X similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to Х 6 provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes." complete Schedule D. Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Х Schedule D, Part III 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? Х If "Yes," complete Schedule D, Part IV 9 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments 10 Х or in quasi endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes." complete Schedule D. X 11a Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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 Х Part X, line 16? If "Yes," complete Schedule D, Part IX 11e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses Х the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D. Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete Schedule D, Parts XI and XII Х 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? Х If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Х Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 Х 14a Did the organization maintain an office, employees, or agents outside of the United States? 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 X or more? If "Yes," complete Schedule F, Parts I and IV 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any Х foreign organization? If "Yes," complete Schedule F, Parts II and IV

16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to		
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		
	complete Schedule G, Part III	19	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	X

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or

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20b

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Part IV Checklist of Required Schedules (continued)

	· (continued)		Yes	Na
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		162	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			77
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			v
00	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	26		Х
27	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	20		- 22
21	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? <i>If</i> "Yes," <i>complete Schedule L, Part III</i>	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
-	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			v
05	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	2FL		
36	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		
30		36		Х
37	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	- 50		
0,	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		

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| Part V | Statements Regarding Other IRS Filings and Tax Compliance (continued)

	Continued)						
٥-	Establishment and a second of the Establishment of the Charles of		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 2a 12						
		OI:		Х			
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		Λ			
٥-	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	0-		Х			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Λ			
	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	4-		Х			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Λ			
b	If "Yes," enter the name of the foreign country See instructions for filling requirements for FinCFN Form 114. Beneat of Foreign Bank and Financial Associate (FBAR)						
E	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	E-		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		21			
	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	and the first three the form and the state of the first the first three of	6a		х			
h	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	0a		21			
b	was and down all all was the land	6b					
7	Organizations that may receive deductible contributions under section 170(c).	OD					
	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			
		7b					
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7.5					
Ü	to file Form 8282?	7с		х			
Ч	If "Yes," indicate the number of Forms 8282 filed during the year 7d						
	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?						
g							
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 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:						
а	Gross income from members or shareholders						
	Gross income from other sources (Do not net amounts due or paid to other sources against						
	amounts due or received from them.)						
I2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a					
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.						
а	Is the organization licensed to issue qualified health plans in more than one state?	13a					
	Note: See the instructions for additional information the organization must report on Schedule O.						
b Enter the amount of reserves the organization is required to maintain by the states in which the							
	organization is licensed to issue qualified health plans						
	c Enter the amount of reserves on hand						
14a Did the organization receive any payments for indoor tanning services during the tax year?							
	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			7.7			
	excess parachute payment(s) during the year?	15		X			
	If "Yes," see instructions and file Form 4720, Schedule N.			37			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X			
If "Yes," complete Form 4720, Schedule O.							

Form 990 (2019) COMMUNITY BUILDERS 61-1765796 Page 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.

	to mile sa, sa, or real second the smearheatheath, processes, or changes on contentions.			
0	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	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	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.)			I
			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	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
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 ▶CO			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)	s only)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.			
	X 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, an	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			
	CHELSAE WHITE - 970-208-5302			
	817 COLORADO AVE #200, GLENWOOD SPRINGS, CO 81601			

Form 990 (2019) COMMUNITY BUILDERS 61-1765796 Page 7

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

(A)	(B)	or any related organization compensate (B) (C)						(D)	(E)	(F)
Name and title	Average		not c	Position not check more than one				Reportable	Reportable	Estimated
	hours per	box	, unle: cer ar	ss pe nd a d	rson i irecto	s both or/trust	an tee)	compensation	compensation	amount of
	week (list any						Ė	from the	from related organizations	other compensation
	hours for	direc				p		organization	(W-2/1099-MISC)	from the
	related	tee or	ıstee			ensate		(W-2/1099-MISC)	,	organization
	organizations	Itrus	nal trı		oyee	ombe				and related
	below	Individual trustee or director	In stit utio nal tru stee	Officer	Key employee	Highest compensated employee	Former			organizations
(4) PRWW WORDS	line)	밀	lus	#0	- Š	Hig	For			
(1) BRYAN MORGAN VICE CHAIR	2.00	X		х				0.	0.	0
(2) AMY CARA	1.00	Λ		Λ				0.	0.	U
TREASURER	1.00	X		Х				0.	0.	0
(3) RUSS FOREST	1.00	Α		Λ				0.	0.	0
DIRECTOR	1.00	X						0.	0.	0
(4) TOM BOYD	2.00	25								
CHAIR		x		х				0.	0.	0
(5) BRENDAN MATTHIAS	1.00									
DIRECTOR		X						0.	0.	0
(6) CLARK ANDERSON	50.00									
EXECUTIVE DIRECTOR		Х						80,000.	0.	0
(7) MARIANNE	0.00									
VIRGILI		X						0.	0.	0
		-								
		-								
		1								
		1								
		1								
		1								
		L			L					

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COMMUNITY BUILDERS 61-1765796 Page 8 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (E) (F) Position Average Name and title Reportable Reportable Estimated (do not check more than one hours per compensation compensation amount of box, unless person is both an officer and a director/trustee) week from from related other (list any organizations compensation ndividual trustee or director the hours for organization (W-2/1099-MISC) from the Highest compensated employee related nstitutional trustee (W-2/1099-MISC) organization organizations and related below organizations line) 80,000. 0. 0. c Total from continuation sheets to Part VII, Section A 80,000. Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable 0 compensation from the organization Yes No Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on Х 3 line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Х 4 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services Х rendered to the organization? If "Yes." complete Schedule J for such person **Section B. Independent Contractors** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Compensation Name and business address Description of services NONE Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

Form 990 (2019) COMMUNITY BUILDERS 61-1765796 Page 9
Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (D) Related or exempt Unrelated Revenue excluded Total revenue from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 1b **b** Membership dues c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 264,461. similar amounts not included above ... 1f g Noncash contributions included in lines 1a-1f 264,461. h Total. Add lines 1a-1f **Business Code** 118,099. 118,099. 541900 2 a CONSULTING Program Service Revenue ь COST SHARING REVENUE 541900 115,074. 115,074. f All other program service revenue 233,173. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 1,483. 1,483. other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 (i) Real 6 a Gross rents **b** Less: rental expenses ... c Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory 7a b Less: cost or other basis Other Revenue and sales expenses 7b d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances 10a **b** Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** d All other revenue e Total. Add lines 11a-11d 499,117. 233,173. 1,483. **12 Total revenue.** See instructions

Form **990** (2019)

Form 990 (2019) COMMUNITY BUILDERS
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 (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. expenses 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, 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) 484,693. 411,785. 64,704. 8,204. Other salaries and wages Pension plan accruals and contributions (include 36,483. 5,001. 41,484. section 401(k) and 403(b) employer contributions) Other employee benefits 9 36,934. 32,502. 3,905. 527. 10 Payroll taxes Fees for services (nonemployees): Management Legal 29,933. 29,933. Accounting Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 202,973. 196,134. 6,839. column (A) amount, list line 11g expenses on Sch O.) 45. 45. Advertising and promotion 12 8,453. 845. 7,608. Office expenses 13 4,634. 4,634. Information technology 15 Royalties 19,997. 22,233. 2,236. 16 Occupancy 33,608. 33,569. 39. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials ... 884. 884. Conferences, conventions, and meetings 19 20 Payments to affiliates 21 Depreciation, depletion, and amortization 22 4,026. 4,026. 23 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 12,723. 12,723. PROGRAM DIRECT EXPENSES All other expenses 882,623. 744,038. 129,854. 8,731. 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. if following SOP 98-2 (ASC 958-720)

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Form 990 (2019)
Part X Balance Sheet

COMMUNITY BUILDERS

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Pai	rt X	Balance Sneet			
		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	500.	1	500.
	2	Savings and temporary cash investments	1,095,127.	2	839,019.
	3	Pledges and grants receivable, net	49,850.	3	121,095.
	4	Accounts receivable, net	140,252.	4	100,889.
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
⋖	9	Prepaid expenses and deferred charges	1,548.	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		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets	0.00	14	000
	15	Other assets. See Part IV, line 11	800. 1,288,077.	15	800.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	12,809.	16	1,062,303.
	17	Accounts payable and accrued expenses	12,009.	17	33,041.
	18	Grants payable		18	
	19	Deferred revenue		19 20	
	20	Tax-exempt bond liabilities Fearous or custodial account liability. Complete Part IV of Schodula D.		21	
	22	Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to any current or former officer, director,		21	
ies	22	trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons		22	
E.	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	114,900.
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	12,809.	26	170,541.
		Organizations that follow FASB ASC 958, check here X			·
Ses		and complete lines 27, 28, 32, and 33.			
anc	27	Net assets without donor restrictions	1,275,268.	27	770,667.
Bal	28	Net assets with donor restrictions		28	121,095.
nd		Organizations that do not follow FASB ASC 958, check here			
, Fu		and complete lines 29 through 33.			
S O	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net	32	Total net assets or fund balances	1,275,268.	32	891,762.
	33	Total liabilities and net assets/fund balances	1,288,077.	33	1,062,303.

COMMUNITY BUILDERS 61-1765796 Page 12 Form 990 (2019) Part XI Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI 499,117. Total revenue (must equal Part VIII, column (A), line 12) 882,623. Total expenses (must equal Part IX, column (A), line 25) 2 2 -383,506. Revenue less expenses. Subtract line 2 from line 1 1,275,268. Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 5 Net unrealized gains (losses) on investments Donated services and use of facilities 6 6 7 7 Investment expenses 8 8 Prior period adjustments 0. 9 Other changes in net assets or fund balances (explain on Schedule O) 9 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, 10 891,762. Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII No Yes X Accrual Accounting method used to prepare the Form 990: Cash If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Х 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a 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: Both consolidated and separate basis Separate basis Consolidated basis Х Were the organization's financial statements audited by an independent accountant? 2b If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, Х 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 Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? Х If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why on Schedule O and describe any steps taken to undergo such audits

Form **990** (2019)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Employer identification number Name of the organization COMMUNITY BUILDERS 61-1765796 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 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 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or X An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions))

Total

Schedule A (Form 990 or 990-EZ) 2019 COMMUNITY BUILDERS

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Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 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.) **Total support.** Add lines 7 through 10 **12** Gross receipts from related activities, etc. (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage

15 Public support percentage from 2018 Schedule A, Part II, line 14	15		9		
16a 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and					
stop here. The organization qualifies as a publicly supported organization		>	•		
b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3%	or m	ore, check this box			
and stop here. The organization qualifies as a publicly supported organization		>	•		
17a 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, a	and lir	ne 14 is 10% or more,			
and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Pa	rt VI ł	now the organization			
meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		>	•		
b 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or	17a, a	nd line 15 is 10% or			
more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain	ı in P	art VI how the			

Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2019

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Schedule A (Form 990 or 990-EZ) 2019 COMMUNITY BUILDERS

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

Se	ction A. Public Support	now, please comp	lete Part II.)				
	endar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Gifts, grants, contributions, and	(0)	(2)	(2) = 2 : :	(3,7 = 2 + 2	(2) = 2 · 2	(0)
	membership fees received. (Do not						
	include any "unusual grants.")	10,824.	21,007.	70,432.	115,348.	103,266.	320,877.
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	3,690.	169,237.	325,190.	269,447.	233,173.	1000737.
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						
	Total. Add lines 1 through 5	14,514.	190,244.	395,622.	384,795.	336,439.	1321614.
7	a Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
ŀ	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.
	Public support. (Subtract line 7c from line 6.)						1321614.
Se	ction B. Total Support						
	endar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6 a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	293.	1,160.	395,622. 470.	384,795. 1,955.	336,439. 1,283.	5,161.
I	unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	2330	1/1000	2,00	2,7555	1,200	3,1010
	Add lines 10a and 10b	293.	1,160.	470.	1,955.	1,283.	5,161.
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		,		·	·	,
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	14,807.	191,404.	396,092.	386,750.	337,722.	1326775.
14	First five years. If the Form 990 is for	the organization's	first, second, third	d, fourth, or fifth ta	x year as a section	501(c)(3) organiza	ation,
							>
Se	ction C. Computation of Publi	c Support Per	centage				
15	Public support percentage for 2019 (li			olumn (f))		15	99.61 %
16						16	99.61 %
	ction D. Computation of Inves						20
	Investment income percentage for 20					17	.39 % .39 %
	Investment income percentage from 2					18	
198	a 33 1/3% support tests - 2019. If the						/ is not ► X
	more than 33 1/3%, check this box an 33 1/3% support tests - 2018. If the	-	-	•	•		
١	line 18 is not more than 33 1/3%, chec						
20	Private foundation. If the organization						

Schedule A (Form 990 or 990-EZ) 2019 COMMUNITY BUILDERS

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Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
1		
•		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
3.5		
9с		
10a		
10b n 990 or 99	0 EZ	2040
11 990 or 95	,∪-⊏Z)	2019

Schedule A (Form 990 or 990-F7) 2019 COMMUNITY BUILDERS

Sched	dule A (Form 990 or 990-EZ) 2019 COMMUNITY BUILDERS	61-176579	6 Pa	age 5
Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sect	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sect	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in	structions).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government en	tity (see instructions	1	
	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
	Parent of Supported Organizations. Answer (a) and (b) below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Vos." describe in Part VI the role played by the exception in this regard	3h	1	İ

Sche	dule A (Form 990 or 990-EZ) 2019 COMMUNITY BUILDERS			61-1765796 Page 6
	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Organi		.
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust on N	ov. 20, 1970 (explain in	Part VI). See instructions. Al
	other Type III non-functionally integrated supporting organizations must co	mplete Sec	tions A through E.	·
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount			(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4 unless subject to			

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

Schedule A (Form 990 or 990-EZ) 2019

emergency temporary reduction (see instructions).

instructions).

61-1765796 Page 7 Schedule A (Form 990 or 990-EZ) 2019 COMMUNITY BUILDERS Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) **Current Year** Section D - Distributions 1 Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets **5** Qualified set-aside amounts (prior IRS approval required) 6 Other distributions (describe in Part VI). See instructions. 7 Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. Distributable amount for 2019 from Section C, line 6 Line 8 amount divided by line 9 amount (i) (ii) Underdistributions Distributable Section E - Distribution Allocations (see instructions) **Excess Distributions** Amount for 2019 Pre-2019 1 Distributable amount for 2019 from Section C, line 6 Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in Part VI). See instructions. Excess distributions carryover, if any, to 2019 **a** From 2014 **b** From 2015 **c** From 2016 d From 2017 e From 2018 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2019 distributable amount i Carryover from 2014 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2019 from Section D,

Schedule A	Form 990 or	990-EZ	2019

a Applied to underdistributions of prior years **b** Applied to 2019 distributable amount c Remainder. Subtract lines 4a and 4b from 4.

5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater

Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in

Excess distributions carryover to 2020. Add lines 3j

than zero, explain in Part VI. See instructions

Part VI. See instructions.

and 4c. 8 Breakdown of line 7: a Excess from 2015 **b** Excess from 2016 c Excess from 2017 d Excess from 2018 e Excess from 2019

Schedule A	(Form 990 or 990-EZ) 2019 COMMUNITY BUILDERS	61-1765796 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a 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; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional section D, lines 2, 6, and 8; and Part V, Section E, lines 2, 5, and 6.	or 17b; Part III, line 12; s 1 and 2; Part IV, Section C, t V, Section B, line 1e; Part V,
	(See instructions.)	

SCHEDULE 0

Internal Revenue Service

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

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

COMMUNITY BUILDERS

Employer identification number 61-1765796

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:			
WE HELP PEOPLE CREATE SUCCESSFUL, PROSPEROUS COMMUNITIES THROUGH			
TRAINING, INFORMATION AND ASSISTANCE.			
FORM 990, PART VI, SECTION B, LINE 11B:			
THE BOARD REVIEWS THE 990 PRIOR TO FILING.			
FORM 990, PART VI, SECTION B, LINE 12C:			
EACH MEMBER HAS DUTY TO DISCLOSE. IF ANY MEMBER HAS REASONABLE CAUSE TO			
BELEIVE ANOTHER MEMBER HAS FILED TO DISCLOSE ACTUAL OR POSSIBLE CONFLICTS			
OF INTEREST, THE MEMBER IS INFORMED AND GIVEN AN OPPORTUNITY TO EXPLAIN.			
IF, AFTER FURTHER INVESTIGATION, IT IS DETERMINED THAT A VIOLATION OF THE			
CONFLICT OF INTEREST POLICY HAS OCCURRED, APPROPRIATE CORRECTIVE AND			
DISCLIPINARY ACTION IS TAKEN. EACH MEMBER IS REQUIRED TO SIGN AN			
AFFIRMATION STATING THEY UNDERSTAND THE POLICY.			
FORM 990, PART VI, SECTION B, LINE 15A:			
INFORMAL SURVEY OF SIMILAR NONPROFIT ORGANIZATIONS AND SIMILAR POSITIONS IN			
THE PRIVATE SECTOR.			
FORM 990, PART VI, SECTION C, LINE 19:			
THE 1023 APPLICATION IS AVAILABLE UPON REQUEST. OTHER ORGANIZING			
DOCUMENTS, 990, AND FINANCIAL STATEMENTS ARE AVAILABLE ON THE WEBSITE.			
FORM 990, PART IX, LINE 11G, OTHER FEES:			

CONSULTANTS:

Schedule O (Form 990 or 990-EZ) (2019) Name of the organization COMMUNITY BUILDERS	Page 2 Employer identification number 61-1765796
PROGRAM SERVICE EXPENSES	196,134.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	196,134.
TECHNOLOGY CONSULTANT:	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	6,839.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	6,839.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	202,973.

Form **8868**

(Rev. January 2020)

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ▶ File a separate application for each return.▶ Go to www.irs.gov/Form8868 for the latest information.

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

nling or	this form, visit www.irs.gov/e-file-providers/e-file-for-chari	ties-and-n	on-profits.			
Auton	natic 6-Month Extension of Time. Only subm	nit origina	al (no copies needed).			
All corp	orations required to file an income tax return other than Fo	orm 990-T	(including 1120-C filers), partnership	s, REMICs	s, and trusts	
must us	e Form 7004 to request an extension of time to file income	e tax retur	ns.			
Туре ог	e or Name of exempt organization or other filer, see instructions.			Taxpayer identification number (TIN)		
print				raxpayor identification ridificer (Tity)		
	COMMUNITY BUILDERS			61-1765796		
File by the due date foul filing your return. See	Number, street, and room or suite no. If a P.O. box, see instructions.					
instruction	See					
Enter th	e Return Code for the return that this application is for (file	e a separat	te application for each return)			0 1
Applica	tion	Return				
ls For		Code				Code
Form 99	90 or Form 990-EZ	01	Form 990-T (corporation)			07
Form 99	90-BL	02	Form 1041-A			08
	720 (individual)	03	Form 4720 (other than individual)			09
Form 99		04	Form 5227			10
	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 99	90-T (trust other than above) CHELSAE WHITE	06	Form 8870 12			12
Telep	books are in the care of ► 817 COLORADO AND shone No. ► 970-208-5302 be organization does not have an office or place of business is for a Group Return, enter the organization's four digit (in the Uni Group Exe	Fax No. ▶ited States, check this box	f this is fo	r the whole gro	Dup, check this
th	the organization named above. The extension is for the organization's return for: calendar year or X tax year beginning JUL 1, 2019 , and ending JUN 30, 2020 .					
	this application is for Forms 990-BL, 990-PF, 990-T, 4720, ny nonrefundable credits. See instructions.	or 6069, 6	enter the tentative tax, less	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and					^	
_	stimated tax payments made. Include any prior year overp			3b	\$	0.
	alance due. Subtract line 3b from line 3a. Include your pa	•				•
	sing EFTPS (Electronic Federal Tax Payment System). See			3c	\$	0.
Cautior instruct	n: If you are going to make an electronic funds withdrawal	(direct deb	oit) with this Form 8868, see Form 84	153-EO an	d Form 8879-E	O for payment
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LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2020)