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GOVERNMENT COPY

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization

	_	_		
calendar year 2019, or fiscal year beginning	DEC 1	, 2019, and ending	NOV 30	, 20 2 0

not send to the IRS. Keen for your records

OMB No. 1545-1878

2019

Internal Revenue Service Name of exempt organization				
ivanie di exembl di Udilizalion	Go to www.irs.go	ov/Form8879EO for the latest information.	Employer	identification number
1 3			Employer	identification number
Katz Amsterdam Found	ation		83-074	8664
Name and title of officer			•	
Beth Ganz				
Executive Director				
Part I Type of F	eturn and Return Information	On (Whole Dollars Only)		
whichever is applicable, bla than one line in Part I. 1a Form 990 check here 2a Form 990-EZ check her	b Total revenue, if any b Total revenue, if any	for the return being filed with this form was blan ed -0- on the return, then enter -0- on the application (Form 990, Part VIII, column (A), line 12) any (Form 990-EZ, line 9)	able line belov	w. Do not complete more
3a Form 1120-POL check		rm 1120-POL, line 22)		
4a Form 990-PF check he		vestment income (Form 990-PF, Part VI, line 5)	-	
5a Form 8868 check here	b Balance Due (Form 8	3868, line 3c)	5b	
Part II Declarati	on and Signature Authorizat	tion of Officer		
dehit) entry to the financial	institution account indicated in the ta	y and its designated Financial Agent to initiate a	nization's fod	eral taxes owed on this
return, and the financial ins 1-888-353-4537 no later that processing of the electronic payment. I have selected a prganization's consent to e	titution to debit the entry to this acco n 2 business days prior to the payme c payment of taxes to receive confide personal identification number (PIN) a ectronic funds withdrawal.	ox preparation software for payment of the organ nunt. To revoke a payment, I must contact the U ent (settlement) date. I also authorize the financi ntial information necessary to answer inquiries a as my signature for the organization's electronic	.S. Treasury F al institutions and resolve is	Financial Agent at involved in the ssues related to the
return, and the financial ins 1-888-353-4537 no later tha processing of the electronic payment. I have selected a organization's consent to e Officer's PIN: check one b	titution to debit the entry to this acco n 2 business days prior to the payme payment of taxes to receive confide personal identification number (PIN) a ectronic funds withdrawal.	x preparation software for payment of the organ unt. To revoke a payment, I must contact the U ent (settlement) date. I also authorize the financi ntial information necessary to answer inquiries a	.S. Treasury F al institutions and resolve is	Financial Agent at involved in the ssues related to the
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Form **990-PF**

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service For calendar year 2019 or tax year beginning DEC 1, 2019 , and ending NOV 30, 2020 Name of foundation A Employer identification number Katz Amsterdam Foundation 83-0748664 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite **B** Telephone number 2255 Sheridan Boulevard 303-284-4932 Unit C City or town, state or province, country, and ZIP or foreign postal code **C** If exemption application is pending, check here Edgewater, CO 80214 G Check all that apply: Initial return Initial return of a former public charity **D** 1. Foreign organizations, check here Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change Section 501(c)(3) exempt private foundation **H** Check type of organization: E If private foundation status was terminated Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: Accrual F If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here ... 10,109,833. (Part I, column (d), must be on cash basis.) ▶\$ Analysis of Revenue and Expenses Part I (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) for charitable purposes (cash basis only) expenses per books income income Contributions, gifts, grants, etc., received 3,000,000 if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 3,112 3,112 3,112 119,183 119,183 119,183 4 Dividends and interest from securities..... 5a Gross rents **b** Net rental income or (loss) 243,537 **6a** Net gain or (loss) from sale of assets not on line 10 **b** Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 243,537 9,792 8 Net short-term capital gain Income modifications Gross sales less returns and allowances **b** Less: Cost of goods sold ... c Gross profit or (loss) 11 Other income Total. Add lines 1 through 11 3,365,832 365,832 132,087 240,663 0 0. 240,663. 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 69,645 0 0 69,645. 38,549 0 0. 38,549. 15 Pension plans, employee benefits Expenses 4,778 0 0. 4,778. 16a Legal fees Stmt 1 3,806 3,806. 0. 0 **b** Accounting fees Stmt 2 c Other professional fees Stmt 3 224,383 0. 0. 224,383. 17 Interest 4,582 0 0 0. 18 Taxes Stmt 4 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 568 0 0 568. and 22 Printing and publications 23 Other expenses Stmt 5 35,445 132 132. 35,313. Operating 24 Total operating and administrative expenses. Add lines 13 through 23 132 132 617,705. 622,419 25 Contributions, gifts, grants paid 0 0. 26 Total expenses and disbursements. Add lines 24 and 25 622,419 132 132 617,705. 27 Subtract line 26 from line 12: 2,743,413 **a** Excess of revenue over expenses and disbursements **b Net investment income** (if negative, enter -0-) 365,700 131,955. C Adjusted net income (if negative, enter -0-)

	ort	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	f year
Р	<u>art</u>	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	53,627.	131,303.	131,303.
		Savings and temporary cash investments	3,194,168.	2,706,997.	2,706,997.
		Accounts receivable			
		Less: allowance for doubtful accounts			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
		Receivables due from officers, directors, trustees, and other			·
	ľ	disqualified persons			
	7	Other notes and loans receivable			
	'	Less: allowance for doubtful accounts			
'n	l g	Inventories for sale or use			
Assets	۱	Prepaid expenses and deferred charges			
Ass		Investments IIC and state government obligations			
			2,958,300.	6,311,208.	7,271,533.
		Investments - corporate stock Stmt 6	2,330,300.	0,311,200.	7,271,555.
		Investments - corporate bonds			
	''	Investments - land, buildings, and equipment: basis			
	4.0	Less: accumulated depreciation			
		Investments - mortgage loans	200 000	0	
	13	Investments - other	200,000.	0.	0.
	14	Land, buildings, and equipment: basis			
	l	Less: accumulated depreciation			
		Other assets (describe			
	16	Total assets (to be completed by all filers - see the	5 405 005	0 440 500	10.100.000
_	4-	instructions. Also, see page 1, item I)	6,406,095.	9,149,508.	10,109,833.
		Accounts payable and accrued expenses			
		Grants payable			
Liabilities		Deferred revenue			
≣		Loans from officers, directors, trustees, and other disqualified persons			
Ë	21	Mortgages and other notes payable			
	22	Other liabilities (describe)			
		Tabel liabilities (add lines 17 through 00)	0	0	
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow FASB ASC 958, check here			
ces		and complete lines 24, 25, 29, and 30.			
<u>a</u>	24	Net assets without donor restrictions			
Fund Balanc	25	Net assets with donor restrictions			
pur		Foundations that do not follow FASB ASC 958, check here			
Ę		and complete lines 26 through 30.	0	0	
S		Capital stock, trust principal, or current funds	0.	0.	
set	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	28	Retained earnings, accumulated income, endowment, or other funds	6,406,095.	9,149,508.	
Net Assets or	29	Total net assets or fund balances	6,406,095.	9,149,508.	
	30	Total liabilities and net assets/fund balances	6,406,095.	9,149,508.	
=				7,147,500.	
P	<u>art</u>	Analysis of Changes in Net Assets or Fund B	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	29		
•		st agree with end-of-year figure reported on prior year's return)		1	6,406,095.
2		r amount from Part I, line 27a			2,743,413.
		r increases not included in line 2 (itemize)		2	0.
		lines 1, 2, and 3			9,149,508.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II. co	olumn (h) line 29	6	9,149,508.

Fo	orm 990-PF (2019) Katz A	Amsterdam Foundation						83-074866	4	Page 3
I	Part IV Capital Gains a	nd Losses for Tax on Inve	estment	Income						
(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)						ow acquired Purchase Donation		ate acquired o., day, yr.)	(d) Date (mo., day	sold , yr.)
1	1a Crestone Alternative fund						05/0	2/19	03/03/20)
	b Publicly traded securi	ties								
_	C									
	d									
_	<u>e</u>				<u> </u>					
_	(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale				n) Gain or (loss) plus (f) minus (
_	a									9,792.
	b								23	3,745.
_	C									
_	d									
_	Complete only for appets showing	gain in column (h) and award by the	foundation	on 19/21/60			<i>(</i>), 0, :	(0.1.(1.)		
_	(i) FMV as of 12/31/69	gain in column (h) and owned by the (j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (i)		C	còl. (k), b	s (Col. (h) gain out not less thar ses (from col. (1 -0-) or	
_				()/,/	-					9,792.
_	a b									3,745.
_	C				\dashv					5,745.
_	d									
_	e				-					
_	Capital gain net income or (net cap	If gain, also enter in If (loss), enter -0- in	Part I, line	7 7	}	2			24	3,537.
3	Net short-term capital gain or (loss	as defined in sections 1222(5) and (``					
Ü	If gain, also enter in Part I, line 8, c	,	0).)					
	If (loss), enter -0- in Part I, line 8				<u>] </u>	3				9,792.
ı	Part V Qualification Un	nder Section 4940(e) for R	educed	Tax on Net	Inve	estment Ir	ncom	Э		
(F	or optional use by domestic private f	foundations subject to the section 494	0(a) tax on	net investment in	ncome.)				
lf	section 4940(d)(2) applies, leave this	s nart hlank								
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•								_
		on 4942 tax on the distributable amoun			riod?				Yes L	X No
_		under section 4940(e). Do not comple	-							
		ach column for each year; see the instr	ructions bet	ore making any e					(d)	
	(a) Base period years	(b) a in) Adjusted qualifying distrib	utione	Net value of no	(C) nochari	ahla-usa assa	ıte	Distrib	utión ratio	- \ \
	Calendar year (or tax year beginning	9,		- Not value of no	monan			(col. (b) div	ided by col. (d	
_	2018		58,750.			6,397,3				118604
	2017		47,565.			17,8	143.		۷.	665751
_	2016						_			
_	2015 2014						-+			
_	2014									
2	Total of line 1, column (d)						,	2	2	784355
	, , , , , , , , , , , , , , , , , , , ,	year base period - divide the total on I					····		۷,	704333
Ü	•	ce if less than 5 years			-			3	1.	392178
	and roundation had book in oxidione	50 ii 1000 iiian 0 yoaro					····			
4	Enter the net value of noncharitable	e-use assets for 2019 from Part X, line	5					4	9,14	6,241.
5	Multiply line 4 by line 3						:	5	12,73	3,196.
6	Enter 1% of net investment income	e (1% of Part I, line 27b)					[6		3,657.
7	Add lines 5 and 6							7	12,73	6,853.
8		Part XII, line 4					[{	8	61	7,705.
	If line 8 is equal to or greater than I See the Part VI instructions.	ine 7, check the box in Part VI, line 1b	, and comp	lete that part usin	ng a 1%	tax rate.				

Par	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 -	see inst	ructio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%	1		7	,314.
	of Part I, line 27b				
C	: All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2			0.
3	Add lines 1 and 2	3		7	7,314.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		7	7,314.
6	Credits/Payments:				
a	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 2,248.				
b	Exempt foreign organizations - tax withheld at source 6b 0.				
	: Tax paid with application for extension of time to file (Form 8868) 6c 0.				
d	Backup withholding erroneously withheld 0.				
7	Total credits and payments. Add lines 6a through 6d	7		2	2,248.
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	8			0.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		5	,066.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ Refunded ▶	11			
Par	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	in		Yes	No
	any political campaign?		1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the defin	ition	1t		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or				
	distributed by the foundation in connection with the activities.				
C	Did the foundation file Form 1120-POL for this year?		10		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. \blacktriangleright \$ 0. (2) On foundation managers. \blacktriangleright \$ 0.				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers. ► \$0.				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		Х
	If "Yes," attach a detailed description of the activities.				
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				Х
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				Х
	olf "Yes," has it filed a tax return on Form 990-T for this year?				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		Х
	If "Yes," attach the statement required by General Instruction T.				
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state				
1	remain in the governing instrument?		6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		7	Х	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.				
	CO				
	olf the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
	of each state as required by General Instruction G? If "No," attach explanation		8t	X	
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale				
	year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV			Х	↓
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	<u></u>	10		Х

Form 990-PF (2019) Katz Amsterdam Foundation 83-0748664 Page 5 Part VII-A | Statements Regarding Activities (continued) No Yes 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions 11 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disgualified person had advisory privileges? 12 If "Yes," attach statement. See instructions 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ katzamsterdam.org The books are in care of ▶ The Foundation Located at ▶ 2255 Sheridan Boulevard, No. Unit C, Edgewater, CO Telephone no. ▶ 303-284-4932 **14** The books are in care of ▶ The Foundation ZIP+4 ▶80214 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year N/A 16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank. Yes No 16 securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. Yes No **1a** During the year, did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions Х 1b Organizations relying on a current notice regarding disaster assistance, check here c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected Х before the first day of the tax year beginning in 2019? 1c 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)); a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019? If "Yes," list the years b Are there any years listed in 2a for which the foundation is **not** applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) N/A 2b c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? b If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose

of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,

had not been removed from jeopardy before the first day of the tax year beginning in 2019?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Schedule C, to determine if the foundation had excess business holdings in 2019.) 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form **990-PF** (2019)

Х

3b

Form 990-PF (2019) Katz Amsterdam Foundation Part VII-B Statements Regarding Activities for Which	Form 4720 May Re I		83-0748664		Page 6
5a During the year, did the foundation pay or incur any amount to:	FOITH 4720 Way be r	nequired (contin	uea)	Y	es No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	in 4945(e)\ ?	□ v	es X No	-	00 110
(2) Influence the outcome of any specific public election (see section 4955);					
any voter registration drive?	• •		es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes					
(4) Provide a grant to an organization other than a charitable, etc., organization					
4945(d)(4)(A)? See instructions			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary					
the prevention of cruelty to children or animals?			es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un					
section 53.4945 or in a current notice regarding disaster assistance? See inst	·	•	N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption			🗀 📗		
expenditure responsibility for the grant?			e No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).		/ 10	-5 NO		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	nav premiume on				
			oo 🔻 No		
a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a				6b	х
	personal benefit contract?			OD	_ ^ ^
If "Yes" to 6b, file Form 8870.	aboltar transaction?		oo V No		
7a At any time during the tax year, was the foundation a party to a prohibited tax				7b	
b If "Yes," did the foundation receive any proceeds or have any net income attrib			N/.A	70	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than			aa 🔻 Na		
excess parachute payment(s) during the year? Part VIII Information About Officers, Directors, Trust	too Foundation Ma	Light	ES A NO		
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	tees, Foundation Ma	inagers, n igni	y		
List all officers, directors, trustees, and foundation managers and	their compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e)	Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred	acco	unt, other wances
Robert Katz	President and Treas	_	compensation	unc	711003
2255 Sheridan Blvd., Unit C	Trebraciie and freab	T			
Edgewater, CO 80214	3.00	0.	0.		0.
Elana Amsterdam	Secretary		,		•
2255 Sheridan Blvd., Unit C	- Beerecary				
Edgewater, CO 80214	1.00	0.	0.		0.
Beth Ganz	Executive Director	0.	0.		0.
2255 Sheridan Blvd., Unit C	Executive Director				
Edgewater, CO 80214	40.00	240 663	10 721		0
Edgewater, CO 80214	40.00	240,663.	10,721.		0.
	_				
	_				
2 Compensation of five highest-paid employees (other than those in	l	enter "NONF "			
Z Gompensation of the highest paid employees (other than those in	(b) Title and average	INCITED INCITED	(d) Contributions to employee benefit plans	(e)	Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deterred	acco	unt, other wances
Elizabeth Casey - 2255 Sheridan	Network Director		compensation	and	Jwances
Blvd., Unit C, Edgewater, CO 80214	40.00	00 510	4 270		0
Bivd., Offic C, Edgewater, CO 80214	40.00	89,519.	4,370.		0.
	_				
	4				
	4				
	4				
			L		
Total number of other employees paid over \$50,000					C

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none	, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
FSG, Inc.	consulting on mental health	
179 Lincoln St., 3rd Fl., Boston, MA 02111	environment	140,000.
Cactus, Inc.	consulting to create an	
2128 15th St., Denver, CO 80202	anti-stigma marketing campaig	yn 79,752.
Total number of others receiving over \$50,000 for professional services)	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant number of organizations and other beneficiaries served, conferences convened, research pape	t statistical information such as the rrs produced, etc.	Expenses
1		
See Statement 7		613,074.
2		
See Statement 8		0.
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax y	rear on lines 1 and 2	Amount
1 N/A	our on miles i une E.	711104111
1		
•		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	>	0.

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P	art X Minimum Investment Return (All domestic foundations must	complete this part. Foreign four	ndations, see	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc	c., purposes:		
а	Average monthly fair market value of securities		1a	6,211,524.
	Average of monthly cash balances	1b	3,074,000.	
C	Fair market value of all other assets		1c	
d	Total (add lines 1a, b, and c)		1d	9,285,524.
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation) 1e	0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	9,285,524.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see	instructions)	4	139,283.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part	t V, line 4	5	9,146,241.
6	Minimum investment return. Enter 5% of line 5		6	457,312.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j) foreign organizations, check here ▶ x and do not complete this part.)	(5) private operating foundations ar	nd certain	
1	Minimum investment return from Part X, line 6		1	
2a	Tax on investment income for 2019 from Part VI, line 5			
b	Income tax for 2019. (This does not include the tax from Part VI.)2b			
C	Add lines 2a and 2b		2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	
4	Recoveries of amounts treated as qualifying distributions		4	
5	Add lines 3 and 4		5	
6	Deduction from distributable amount (see instructions)		6	
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		7	
P	art XII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	S:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	617,705.
b	Program-related investments - total from Part IX-B		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, et		2	
3	Amounts set aside for specific charitable projects that satisfy the:			
а	Suitability test (prior IRS approval required)		3a	
b	Cash distribution test (attach the required schedule)		3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Pa	rt XIII, line 4	4	617,705.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investme			
	income. Enter 1% of Part I, line 27b		5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	617,705.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when		qualifies for the	section

Form **990-PF** (2019)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions) N/A (b) (d) (c) Corpus Years prior to 2018 2018 2019 1 Distributable amount for 2019 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2019: a Enter amount for 2018 only **b** Total for prior years: 3 Excess distributions carryover, if any, to 2019: a From 2014 **b** From 2015 **c** From 2016 dFrom 2017 e From 2018 f Total of lines 3a through e 4 Qualifying distributions for 2019 from Part XII, line 4: ►\$ a Applied to 2018, but not more than line 2a **b** Applied to undistributed income of prior years (Election required - see instructions) ... c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2019 distributable amount e Remaining amount distributed out of corpus Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).) 6 Enter the net total of each column as indicated below: **a** Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 **b** Prior years' undistributed income. Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b. Taxable amount - see instructions e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) Excess distributions carryover from 2014 not applied on line 5 or line 7 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess from 2015 **b** Excess from 2016 ... c Excess from 2017 ... d Excess from 2018 e Excess from 2019

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Form 990-PF (2019) Katz Amsterdam Foundation 83-0748664 Page 10 Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling 11/06/18X 4942(j)(3) or **b** Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(5)

2 a Enter the lesser of the adjusted net	Tax year	ouridation docorridation	Prior 3 years	12(1)(0) 01	_(j)(0)
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
investment return from Part X for					
each year listed	131,955.	112,410.	0.	0.	244,365.
b 85% of line 2a	112,162.	95,549.	0.	0.	207,710.
c Qualifying distributions from Part XII,					
line 4, for each year listed	617,705.	758,750.	47,565.	0.	1,424,020.
d Amounts included in line 2c not			·		
used directly for active conduct of					
exempt activities	0.	0.	0.	0.	0.
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c	617,705.	758,750.	47,565.	0.	1,424,020.
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:					
(1) Value of all assets					0.
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					0.
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6, for each year					
listed	304,875.	213,245.	595.	0.	518,715.
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					0.
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					0.
(3) Largest amount of support from					
an exempt organization					0.
(4) Gross investment income					0.

Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets Part XV at any time during the year-see instructions.)

Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here \triangleright X if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

- a The name, address, and telephone number or email address of the person to whom applications should be addressed:
- **b** The form in which applications should be submitted and information and materials they should include:
- c Any submission deadlines:
- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

923601 12-17-19 Form **990-PF** (2019) Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation status of recipient Purpose of grant or contribution Amount Name and address (home or business) a Paid during the year None **▶** 3a 0. Total **b** Approved for future payment None

Total

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelated	business income		ded by section 512, 513, or 514	(e)	
	Business Amount si		(C) Exclu- sion	(d)	Related or exempt function income	
1 Program service revenue:	code	Amount	code	Amount	Turicuon income	
a						
b						
c						
d						
e						
f						
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash						
investments			14	3,112.		
4 Dividends and interest from securities			14	119,183.		
5 Net rental income or (loss) from real estate:						
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property						
7 Other investment income						
8 Gain or (loss) from sales of assets other						
than inventory			18	243,537.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue:						
a						
b						
c						
d						
е						
12 Subtotal. Add columns (b), (d), and (e)		0.		365,832.	0.	
13 Total. Add line 12, columns (b), (d), and (e)				13	365,832.	
(See worksheet in line 13 instructions to verify calculations.)				_		

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

Form **990-PF** (2019) 923621 12-17-19

Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

1	Did the or	the organization directly or indirectly engage in any of the following with any other organization described in section 501(c)									
		ın section 501(c)(3) organ						. ,			
а	Transfers	rs from the reporting foundation to a noncharitable exempt organization of:									
	(1) Cash	sh									Х
		r assets									Х
b	Other tran										
	(1) Sales of assets to a noncharitable exempt organization										Х
	(2) Purc	hases of assets from a nor	ncharitable exempt o	rganization					1b(2)		Х
	(3) Renta	al of facilities, equipment, o	or other assets						1b(3)		Х
	(4) Reim	bursement arrangements							1b(4)		Х
	(5) Loan	s or loan guarantees							1b(5)		Х
		ormance of services or me									Х
		f facilities, equipment, ma									Х
d		wer to any of the above is		_		•	-	-		ets,	
		es given by the reporting fo			ed less than fair	market value	e in any transaction	n or sharing arrange	ment, show in		
/ - \	<u>_`</u>	d) the value of the goods,					(4)				
(a)∟	ine no.	(b) Amount involved	(c) Name of		e exempt organiz	ation	(0) Descriptio	n of transfers, transaction	ons, and sharing ar	rangeme	ents
				N/A							
							+				
							+				
							+				
2a	Is the fou	ndation directly or indirect	tlv affiliated with, or r	elated to, one	or more tax-exe	mpt organiza	ations described				
		501(c) (other than section							Yes	X	No
b		omplete the following sch									
		(a) Name of org	anization		(b) Type of or	ganization		(c) Description of re	elationship		
		N/A									
٠.	andh	r penalties of perjury, I declare the elief, it is true, correct, and con							May the IRS or return with the	discuss	this
Sig	gn ere	, , ,			1			,	shown below	? See in	er str.
пе								e Director	_		J No
	Sigi	nature of officer or trustee		Drongueule -	Date	-	Title	Chook ;f	DTIN		
		Print/Type preparer's na	ıme	Preparer's s	ignature		Date	Check if	PTIN		
D۰	id			<u>.</u>			12.402.465	self- employed	-048505		
Pa Dr		Maria Montoya		Maria Mon		0	03/23/21		P01363907		
	eparer se Only	Firm's name ► Kundi	inger, Corder	& Engle P	.c.			Firm's EIN ►			
US	e Offig	Firm's address	T-11 C'	-	200						
		Firm's address > 475		et, Suite	200			Dhora na /20	2 \ E24 F0F		
	Denver, CO 80203							Phone no. (30)	3; 334-395.	<u>, DE</u>	

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

2019

Katz Amsterdam Foundation 83-0748664 Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ______ 🕨 \$ _ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Name of organization	Employer identification number
Katz Amsterdam Foundation	83-0748664

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) and ZIP + 4 Total contributions				
1	Robert Katz 2255 Sheridan Boulevard, Unit C Edgewater, CO 80214	\$\$	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			
		\$	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			
140.	Name, address, and ZIF + +	\$	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

Employer identification number

Katz Amsterdam Foundation

83-0748664

Part II	Noncash Property (see instructions). Use duplicate copies of Part II	ir 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
		-	
		- -	
		Ι¢	

Name of o	rganization			Employer identification number
Katz Ams	sterdam Foundation			83-0748664
Part III) through (e) and the following line e charitable, etc., contributions of \$1,000 c	entry For organizations) that total more than \$1,000 for the year
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
		(e) Transfer of g	ift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of tr	ansferor to transferee
(a) No.				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
	Transferee's name, address, a	(e) Transfer of g		ansferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
•		(e) Transfer of g		
	Transferee's name, address, a	nd ZIP + 4	Relationship of tr	ansferor to transferee
(a) No.	(h) Down and with	(2) 11-2-25-25	(1) D	
Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
		(e) Transfer of g	ift	
	Transferee's name, address, a			ansferor to transferee

Form **2220**

Department of the Treasury

Underpayment of Estimated Tax by Corporations

Attach to the corporation's tax return.

Form 990-PH

► Go to www.irs.gov/Form2220 for instructions and the latest information.

OMB No. 1545-0123

Internal Revenue Service

Katz Amsterdam Foundation

Employer identification number 83-0748664

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

F	Part I Required Annual Payment							
1	Total tax (see instructions)						1	7,314.
	a Personal holding company tax (Schedule PH (Form 1120), line							
	b Look-back interest included on line 1 under section 460(b)(2)							
	contracts or section 167(g) for depreciation under the income	fore	cast method	2b				
	c Credit for federal tax paid on fuels (see instructions)							
	d Total. Add lines 2a through 2c						2d	
3	Subtract line 2d from line 1. If the result is less than \$500, do		·	·				E 214
	does not owe the penalty						3	7,314.
4	Enter the tax shown on the corporation's 2018 income tax retuor the tax year was for less than 12 months, skip this line and						4	2,248.
	of the tax year was for less than 12 months, skip this line and	CIILCI	the annount hom line 3 t	JII IIII 6 5			-	2,240.
5	Required annual payment. Enter the smaller of line 3 or line	4 If t	the cornoration is require	d to skin line 4				
Ŭ	enter the amount from line 3						5	2,248.
F	Part II Reasons for Filing - Check the boxes below							,
	even if it does not owe a penalty. See instructions.							
6	The corporation is using the adjusted seasonal installn	nent	method.					
7	The corporation is using the annualized income install	ment	method.					
8	The corporation is a "large corporation" figuring its firs	st req	uired installment based o	n the prior year's ta	Χ.			
F	Part III Figuring the Underpayment							
			(a)	(b)		(c)		(d)
9	Installment due dates. Enter in columns (a) through							
	(d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the							
	corporation's tax year	9	04/15/20	05/15/20		08/15/20		11/15/20
10	Required installments. If the box on line 6 and/or line 7							
	above is checked, enter the amounts from Sch A, line 38. If							
	the box on line 8 (but not 6 or 7) is checked, see instructions							
	for the amounts to enter. If none of these boxes are checked,			_				
	enter 25% (0.25) of line 5 above in each column	10	562.	5	62.		562.	562.
11	Estimated tax paid or credited for each period. For							
	column (a) only, enter the amount from line 11 on line 15.	l l	5.60	_				5.60
	See instructions	11	562.	5	62.		562.	562.
	Complete lines 12 through 18 of one column							
40	before going to the next column.	ا ۱						
	Enter amount, if any, from line 18 of the preceding column	12			6.2		F.6.2	562
	Add lines 11 and 12	13			62.		562.	562.
	Add amounts on lines 16 and 17 of the preceding column	14	F.C.2		6.2		F.6.2	562
	Subtract line 14 from line 13. If zero or less, enter -0-	15	562.		62.		562.	562.
10	If the amount on line 15 is zero, subtract line 13 from line	4.			٥		۸	
17	14. Otherwise, enter -0-	16			0.		0.	
17	Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next							
	-	17						
10	column. Otherwise, go to line 18	1/						
10	from line 15. Then go to line 12 of the poyt column	₁₀						

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

Katz Amsterdam Foundation

83-0748664

Part IV Figuring the Penalty

			(a)	(b)	(c)		(d)
19	Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	19					
20	Number of days from due date of installment on line 9 to the						
	date shown on line 19	20					
21	Number of days on line 20 after 4/15/2019 and before 7/1/2019	21					
22	Underpayment on line 17 x Number of days on line 21 x 6% (0.06) \dots	22	\$	\$	\$		\$
23	Number of days on line 20 after 06/30/2019 and before 10/1/2019	23					
24	Underpayment on line 17 x Number of days on line 23 x 5% (0.05)	24	\$	\$	\$		\$
25	Number of days on line 20 after 9/30/2019 and before 1/1/2020	25					
26	Underpayment on line 17 x Number of days on line 25 x 5% (0.05)	26	\$	\$	\$		\$
27	Number of days on line 20 after 12/31/2019 and before 4/1/2020	27					
28	Underpayment on line 17 x Number of days on line 27 x 5% (0.05) \dots 366	28	\$	\$	\$		\$
29	Number of days on line 20 after 3/31/2020 and before 7/1/2020	29					
30	Underpayment on line 17 x Number of days on line 29 x *% 366	30	\$	\$	\$		\$
31	Number of days on line 20 after 6/30/2020 and before 10/1/2020	31					
32	Underpayment on line 17 x Number of days on line 31 x *% 366	32	\$	\$	\$		\$
33	Number of days on line 20 after 9/30/2020 and before 1/1/2021	33					
34	Underpayment on line 17 x Number of days on line 33 x *% 366	34	\$	\$	\$		\$
35	Number of days on line 20 after 12/31/2020 and before 3/16/2021	35					
36	Underpayment on line 17 x Number of days on line 35 x *% 365	36	\$	\$	\$		\$
37	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$		\$
38	Penalty. Add columns (a) through (d) of line 37. Enter the to line for other income tax returns	tal h	ere and on Form 1120, lir	ne 34; or the comparable		38	\$ 0.

Form **2220** (2019)

^{*} Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

Form 990-PF	Legal	Fees	St	atement 1
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Bryan Cave	4,778.	0.	0.	4,778.
To Fm 990-PF, Pg 1, ln 16a	4,778.	0.	0.	4,778.
Form 990-PF	Accounti	ng Fees	St	atement 2
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Kundinger, Corder & Engle, P.C.	3,806.	0.	0.	3,806.
To Form 990-PF, Pg 1, ln 16b	3,806.	0.	0.	3,806.
Form 990-PF (Other Profes	sional Fees	St	atement 3
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
FSG, Inc. Cactus OneSeven Advisors	140,000. 79,752. 4,631.	0.	0. 0. 0.	140,000. 79,752. 4,631.
To Form 990-PF, Pg 1, ln 16c	224,383.		0.	224,383.

Form 990-PF	Tax	es		Statement 4
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
2019 Form 990-PF taxes Estimated tax payments for	2,334.	0.		0.
2020 990-PF To Form 990-PF, Pg 1, ln 18	2,248.			0.
Form 990-PF	Other E	xpenses		Statement 5
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Website design Software license Dues and subscriptions Miscellaneous	19,920. 3,664. 7,011. 4,850.	0.	0	. 19,920. . 3,664. . 7,011. . 4,718.
To Form 990-PF, Pg 1, ln 23	35,445.	132.	132	35,313.
Form 990-PF	Corporat	e Stock		Statement 6
Description		Вос	ok Value	Fair Market Value
Vanguard Star Fund			6,311,208.	7,271,533.
Total to Form 990-PF, Part I	Total to Form 990-PF, Part II, line 10b			

Form 990-PF

Summary of Direct Charitable Activities

Statement

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Activity One

During 2020, the Foundation focused on bringing mountain resort communities together to discuss continued shared challenges around mental and behavioral health, and the pandemic. We worked with mountain communities to collect data about behavioral health services and attitudes from different sources for the shared measurement framework, and then hosted virtual sessions to examine and analyze the data across communities. The Foundation hired an additional staff person, which greatly increased our impact as a convenor across mountain communities. We hosted over 25 shared learning sessions, launched a bi-monthly communication, and a shared drive for more in-depth exchange of information. When the focus of our non-profit partners became COVID and how to manage through the initial crisis, we quickly pivoted, and hosted weekly sessions to share strategies.

Expenses

To Form 990-PF, Part IX-A, line 1

613,074.

Form 990-PF

Summary of Direct Charitable Activities

Statement

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Activity Two

Continuation for Activity One,
The Foundation helped the Katz Amsterdam Charitable Trust
facilitate 4 rounds of grant funding this year, identifying
critical projects in each community. Continuing to support
community collaborations, the Foundation worked in
partnership with several community non-profits to create a
marketing/outreach campaign to reduce stigma around mental
health, and to design and launch a volunteer peer support
program.

Expenses

To Form 990-PF, Part IX-A, line 2

0.