

Form **990-EZ**

Department of the Treasury  
Internal Revenue Service

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

OMB No. 1545-1150

**2015**

**Open to Public Inspection**

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-EZ and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

**A For the 2015 calendar year, or tax year beginning** January 1, 2015, and ending December 31, 2015

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return/terminated  
 Amended return  
 Application pending

**C Name of organization**  
**Police Foundation of Colorado Springs**  
 Number and street (or P.O. box, if mail is not delivered to street address) Room/suite  
**10 Lake Circle**  
 City or town, state or province, country, and ZIP or foreign postal code  
**Colorado Springs, Colorado 80906**

**D Employer identification number**  
**27-0926740**

**E Telephone number**  
**(719) 577-5867**

**F Group Exemption Number** ▶

**G Accounting Method:**  Cash  Accrual Other (specify) ▶

**H Check**  if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

**I Website:** ▶ [www.pfcos.org](http://www.pfcos.org)

**J Tax-exempt status** (check only one) -  501(c)(3)  501(c) ( ) ◀ (insert no.)  4947(a)(1) or  527

**K Form of organization:**  Corporation  Trust  Association  Other **Nonprofit**

**L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts.** If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ . . . . . ▶ **\$ 161,792**

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I)  
 Check if the organization used Schedule O to respond to any question in this Part I . . . . .

		1	2	3	4	5a	5b	5c	6a	6b	6c	6d	7a	7b	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21		
Revenue	1	Contributions, gifts, grants, and similar amounts received . . . . .						98932																							
	2	Program service revenue including government fees and contracts . . . . .						0																							
	3	Membership dues and assessments . . . . .						0																							
	4	Investment income . . . . .						190																							
	5a	Gross amount from sale of assets other than inventory . . . . .					0																								
	b	Less: cost or other basis and sales expenses . . . . .					0																								
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . . .							0																						
	6	Gaming and fundraising events																													
	a	Gross income from gaming (attach Schedule G if greater than \$15,000) . . . . .																													
	b	Gross income from fundraising events (not including \$ 24387 of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) . . . . .									62599																				
c	Less: direct expenses from gaming and fundraising events . . . . .									62599																					
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) . . . . .																														
7a	Gross sales of inventory, less returns and allowances . . . . .																														
b	Less: cost of goods sold . . . . .																														
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . . . . .																														
8	Other revenue (describe in Schedule O) . . . . .																														
9	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 . . . . . ▶																														
Expenses	10	Grants and similar amounts paid (list in Schedule O) . . . . .																													
	11	Benefits paid to or for members . . . . .																													
	12	Salaries, other compensation, and employee benefits . . . . .																													
	13	Professional fees and other payments to independent contractors . . . . .																													
	14	Occupancy, rent, utilities, and maintenance . . . . .																													
	15	Printing, publications, postage, and shipping . . . . .																													
	16	Other expenses (describe in Schedule O) . . . . .																													
17	<b>Total expenses.</b> Add lines 10 through 16 . . . . . ▶																														
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9) . . . . .																													
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) . . . . .																													
	20	Other changes in net assets or fund balances (explain in Schedule O) . . . . .																													
	21	Net assets or fund balances at end of year. Combine lines 18 through 20 . . . . . ▶																													