Advancing the health and well-being of the people of Colorado
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MESSAGE FROM LEADERSHIP

The Colorado Trust has embarked on a unique grantmaking approach that is beginning to transform communities across our great state.

The Community Partnerships strategy, launched in early 2015, is based upon a core belief that, when it comes to improving the health and well-being of Coloradans, the people whose lives stand to be affected are the true experts in how to accomplish this. It’s about empowering people in cities, towns and neighborhoods across Colorado to come up with their own ideas for improving the health of themselves, their families and their communities. It means community members deciding their own futures—not a foundation making decisions for them.

As the second year of this work began, we added three more community partners to our staff, bringing our statewide total to seven. With the help of Trust staff, teams of residents in communities statewide are working on long-term plans to advance health equity in the places they live. They are performing root-cause analyses; prioritizing target issues to address; identifying possible solutions and costs; learning how to leverage funding for long-term sustainability; and much more.

The commitment and perseverance of these community members has been extraordinary. We anticipate having detailed health equity implementation plans for some of the initial communities involved with this work by the end of 2017, and additional communities are now beginning the Community Partnerships process.

In the fall, we extended support for our Health Equity Advocacy strategy for another three years. This collaborative approach to policy advocacy comprises 18 organizations with a shared goal to build a strong and diverse field of health equity advocates in the state. Rather than individual advocacy organizations operating in isolation, this unified cohort can achieve greater sustainability and success in a rapidly changing political climate.

The grantees collaborate all the time—not just on which policy topics to address, and which capacities to build, but even on how strategy funds should be used. The Trust has given them the responsibility and leeway to make this strategy their own, and they have fully embraced it. We’re excited to see this work continue and grow.

The fourth iteration of our Health Equity Learning Series also got underway this year. This educational program increases knowledge and awareness of health equity through presentations from experts discussing factors that increase disparities, as well as solutions that advance health equity. Importantly, we also funded organizations across the state to host viewing parties of the talks in their communities, followed by professionally facilitated group discussions. It has resulted in much deeper and more meaningful dialogue among attendees.

You can learn more about these strategies and others in the pages that follow, and also anytime on our website—which, in 2016, became one of the first foundation websites in the country that is completely available in Spanish as well as English.

We want to conclude by acknowledging that this year also marked the end of two remarkable tenures on our Board of Trustees. Gail Schottler and Rev. R.J. Ross spent a decade on our board—a third of The Trust’s existence—and both served as chair along the way. They played vital roles in making the foundation what it is today, helping The Trust shift to its health equity vision in 2012, and supporting our transformation into an innovative, progressive organization working for the most vulnerable Coloradans. We remain forever grateful to them for their time, effort and dedication.
Members of Fort Morgan’s Community Partnerships resident team greet one another at a meeting.
We believe everyone should have fair and equal opportunities to achieve good health.

The Colorado Trust defines health equity as ending inequalities that affect certain racial, ethnic, low-income and other vulnerable populations, so that everyone will have fair and equal opportunities to achieve good health.

Health inequities arise because of the circumstances in which people grow, live, work and age. The conditions in which people live are, in turn, shaped by political, social and economic forces.

The social determinants of health influence the health of both individuals and communities. They include:

- Early childhood development, schools, education, literacy
- Economy, jobs, employment, occupation, working conditions, income, wealth
- Housing, transportation, public safety, parks and recreation, healthy food access
- Social status, culture, social network, political clout, justice
- Environmental hazards, pollution.
COMMUNITY PARTNERSHIPS

Hyperlocal and In Charge

If there’s one thing that most Coloradans agree on, it’s that they know what’s best for themselves, their families and their communities.

That independent streak makes our state a natural launching pad for The Trust’s Community Partnerships grantmaking initiative, which asks people in communities across Colorado what makes the places they live healthy, inclusive and just, how to build on these strengths and address challenges. The answers they’ve given have been as unique as the landscapes they live in, which range from a farming town on the Western Slope to a historically Hispanic community near the border of New Mexico to an industrial and agricultural city on the Eastern Plains.

Resident teams in nine Colorado communities received grants in 2016 to begin crafting their own plans for improving health equity at the local level: Antonito, Avondale, Dove Creek, Fort Morgan, Lago Vista Mobile Home Park, Manzanola, Olathe, Saguache and San Luis. In partnership with the Colorado Nonprofit Development Center, each community has taken charge of its own funds, and hired local leaders to facilitate the planning.

The Trust also added three community partners to our staff to kick-start similar work in other regions: Jess Hankins in northwest Colorado; Candace Johnson in the Denver metro area; and Mia Ramirez in the Colorado Springs region. They join Krista Martinez in northeast Colorado; Theresa Trujillo in southeast Colorado; Arden Trewartha in the San Luis Valley; and Tera Wick in southwest Colorado.

Top left: Fort Morgan community meeting; right: New Colorado Trust community partners (l. to r.) Candace Johnson, Mia Ramirez and Jess Hankins; bottom left: Tera Wick (l.), a Colorado Trust community partner, works with two Olathe residents.
Health care policy is notoriously complex. Even more complex is crafting policies that address the social, economic and cultural factors that contribute to deep inequalities in the health of Americans.

The Trust this year extended its funding of 18 direct-service, community organizing and advocacy organizations that are working together to better the health of Coloradans. They are doing this by improving health care, but just as importantly by advancing access to safe and affordable housing, education, participation in the political system and much more. The funding strategy is known as Health Equity Advocacy.

This is long-term work, and it requires a field of advocates with a deep set of skills and expertise, collaborative thinking and a shared vision for the future. The grantees in this cohort reached important indicators of progress this year toward building a health equity advocacy field. These included a sharpened vision for health equity advocacy; concrete changes in their organizational structures and policies; and an investment in the development of diverse community leaders.

The cohort has embraced a focus on racial equity, and the way that the historical oppression of people of color has left a toxic legacy in our schools, our neighborhoods, our health care system and our political system. A commitment to fighting racism at all levels brought the organizations into closer alignment.

The advocates’ anti-racism work has helped, for instance, to solidify a commitment to involving those people most affected by policies in the work of building and amending them, says Julie Reiskin, who heads the Colorado Cross-Disability Coalition (CCDC), a member of the cohort. CCDC is run by people with disabilities and advocates for the rights of these same people—a model that is very much in line with the values of those who organize against racism and other forms of oppression.

“The status quo isn’t working for anyone,” says Reiskin. “That’s why we have to involve affected populations.”

Top left: Julie Reiskin, executive director, Colorado Cross-Disability Coalition; right: Cesar Hernandez-Gutierrez, health equity coordinator, Lake County Build a Generation; bottom left: Quintavious Williams, policy analyst, FRESH: Good Jobs Strong Communities.
For many, the term “health equity” is an unfamiliar one.

It’s customary to talk about health in terms of medical care, or of personal habits like good nutrition and exercise. But those who study health outcomes say social and economic factors—where people live and learn, how much money they make, whether their culture is accepted and celebrated—have a much greater impact on health than either access to care or individual behaviors. And there are deep injustices embedded in each of these factors.

“Most people, when they think of health inequities, they think of health disparities, without connecting it to systems of oppression,” says Dara Burwell, who leads Transformative Alliances, a Denver-based group that conducts anti-oppression and inclusiveness trainings and workshops. Along with her colleague Nicole Hurt, Burwell facilitated a series of conversations around Colorado this year as part of The Trust’s Health Equity Learning Series.

The learning series invites national experts to give presentations in Denver to help deepen and broaden the understanding of what is driving health inequities in the U.S. For several years, these presentations have been recorded and made available for viewing parties in communities across the state. Since 2015, the talks have been available in Spanish. This year was the first time these viewings were accompanied by professionally facilitated discussions.

In September, Deliana Garcia, MA, who leads research and development for the Austin-based Migrant Clinicians Network, presented on the unique health challenges faced by migrant workers. And in November, Rachel Hardeman, PhD, MPH, of the University of Minnesota School of Public Health, gave a talk on the role of structural racism in creating health inequities.

The conversations that followed were as diverse as the communities that engaged in them.

In Colorado Springs, El Paso County Public Health offered the discussions as training opportunities for its partner organizations in the community, including school administrators, clinicians and public health workers.

Having the help of Burwell and Hurt allowed the audience to engage with each other about what they could do to lower barriers and improve equity in their own work, says Mina Liebert, the county’s public health planner.

“It makes it localized,” says Liebert. “Even though it’s hosted in Denver with national speakers, you know this is an issue in this community.”

(L. to r.) Deliana Garcia, MA, director, international projects, research and development, Migrant Clinicians Network; Rachel Hardeman, PhD, MPH, assistant professor, Division of Health Policy & Management, University of Minnesota School of Public Health.
For the past 10 years, The Trust has honored organizations that stand out for their commitment to advancing the health and well-being of their communities. The first annual recipient of the John R. Moran, Jr. Grantee Leadership Award was Safe2Tell, a nonprofit that gives students an anonymous way to report any concerns about potential threats to their own safety or that of their peers. Awards have also been given to health clinics, an early childhood council, and organizations that advocate for more cohesive and healthy communities across Colorado.

In this final year, the Moran Award was given to the Hispanic Affairs Project (HAP), a Montrose, Colo.-based nonprofit that advances the rights and full civic participation of Latino immigrants in six western Colorado communities. (HAP also belongs to a cohort of health equity advocacy organizations funded by The Trust, and has helped the Community Partnerships effort in western Colorado.)

HAP’s work includes its advocacy on behalf of Colorado’s sheep herders, who work under a special visa that allows ranchers to pay well under minimum wage for work that is physically taxing, isolating and often dangerous.

“That’s human trafficking, by the traditional concept in the dictionary,” says HAP Executive Director Ricardo Perez. Ranchers strongly dispute this, saying sheep herders make their own decisions.

Working with former sheep herders like Ignacio Avarado, HAP has collected the testimony of sheep herders across Colorado to help build legal cases against ranchers and advocate for better working conditions and pay.

Its advocacy was key to the U.S. Labor Department’s decision in 2015 to raise the base pay and boost protections for foreign sheep herders across the country. The changes, says Perez, don’t go far enough, and the work of HAP continues.

(L. to r) Ned Calonge, MD, MPH, president & CEO, The Colorado Trust; Ricardo Perez, executive director, HAP; Marketa Zubkova, accredited immigrant legal representative, HAP; Nicole Bernal, program director, HAP.
2016 GRANTEES

The Colorado Trust’s grantmaking supports local, regional and statewide efforts to advance opportunities for every Coloradan to be healthy.

Bicycle Colorado
Supported the Colorado Pedals Project, a four-year initiative to make Colorado the best place in the nation to ride a bicycle. Programming includes supporting bicycle lanes and access in underserved neighborhoods and communities statewide.
TIMEFRAME: 2016-17
AMOUNT: $10,000

Calvert Foundation
This subordinate loan to the Calvert Foundation helped underwrite a $10 million credit facility for the Urban Land Conservancy (ULC) in Denver. The ULC is using the facility to acquire and develop urban properties in underserved Denver communities.
TIMEFRAME: 2015-22
AMOUNT: $800,000

Center for Improving Value in Health Care (CIVHC)
Supported CIVHC with enhancements to the Colorado All Payer Claims Database (APCD). CIVHC is using the funding to expand the number of covered lives represented in the APCD and build tools to support organizations seeking to make a positive impact on health care quality and costs.
TIMEFRAME: 2015-18
AMOUNT: $900,000

Chinook Fund
Provided a grant to the Chinook Fund to help support the 2017 speaker series for the Colorado Funders for Inclusiveness and Equity.
TIMEFRAME: 2016-17
AMOUNT: $2,000

ClinicNET
In partnership with the Colorado Health Foundation, Kaiser Permanente and other funders, assisted with long-term organizational transition planning.
TIMEFRAME: 2016
AMOUNT: $25,000

Colorado Center on Law & Policy (CCLP)
Supported CCLP’s work in conjunction with the Colorado Consumer Health Initiative to represent public interest in the conversion of Innovage’s Program of All-inclusive Care for the Elderly (PACE) program to a for-profit entity.
TIMEFRAME: 2015-16
AMOUNT: $15,000

Colorado Health Access Survey
Funded an extensive, biannual survey in Colorado of health care coverage, access and utilization, with data collection and analysis managed by the Colorado Health Institute.
TIMEFRAME: 2011-18
AMOUNT: $4,639,184

Colorado Health Institute
Provided support for the institute to serve as a reliable and impartial clearinghouse for data and information resources related to Colorado health care issues and systems.
TIMEFRAME: 2015-19
AMOUNT: $3,997,779

Colorado Nonprofit Development Center
In collaboration with other Colorado funders, provided support to study potential future needs and opportunities related to the Colorado Family Planning Initiative and its long-acting reversible contraception program.
TIMEFRAME: 2016
AMOUNT: $20,000

Conejos County Clean Water, Inc.
Supported the engagement of Antonito and San Luis students in an oral history project, in which they conduct interviews with local language and culture. The goal is to help students develop qualitative research skills and connect them and their communities to their Hispanic cultural roots.
TIMEFRAME: 2016
AMOUNT: $8,500

Community Partnerships
Partnered with Coloradans in cities, towns and neighborhoods to encourage and strengthen resident- and community-led solutions and funding initiatives that advance health equity.
TIMEFRAME: 2015-18
AMOUNT: $8,596,000

Enterprise Community Loan Fund, Inc.
In partnership with several funders, supported the Denver Regional Transit-Oriented Development Fund, an investment program that finances properties within a half mile of fixed-rail stations; and/or a quarter mile of high-frequency bus stops. The purpose of the fund is to preserve existing affordable housing, as well as develop new affordable housing and supportive commercial uses, in close proximity to public transportation.
TIMEFRAME: 2016
AMOUNT: $875,000

Freedom Service Dogs of America
Supported the organization’s work to enhance the lives of people with disabilities by rescuing dogs and custom-training them for individual client needs.
TIMEFRAME: 2016
AMOUNT: $2,500

FREC: Good Jobs Strong Communities
Supported efforts to explore building a new membership organization, particularly one focused on health equity advocacy in the Denver metro area.
TIMEFRAME: 2016-17
AMOUNT: $39,000

Groundwork Denver
Provided funding for a team-building outdoor leadership program for approximately 40 community members of Sheridan, Colo. as part of their Community Partnerships work.
TIMEFRAME: 2016
AMOUNT: $3,425

Hands of the Carpenter
Provided general operating support to a Denver-area, faith-based nonprofit providing single mothers and widows with automobile repair and maintenance services, to assure transportation needs are met.
TIMEFRAME: 2016
AMOUNT: $2,500

Health Equity Advocacy
Supported a cohort of 18 organizations that are advancing health equity solutions through a collaborative approach to advocacy and public policy.
TIMEFRAME: 2013-19
AMOUNT: $15,200,500

The Colorado Trust’s grantmaking supports local, regional and statewide efforts to advance opportunities for every Coloradan to be healthy.
Health Equity Learning Series
Increased knowledge and awareness of health equity through presentations from experts discussing factors that affect disparities, and solutions that advance health equity.
TIMEFRAME: 2013-17
AMOUNT: $1,302,352

OneMorgan County
Supported bridge-building and community education efforts in Morgan County, as well as the development of a more sustainable organization through technical assistance, training and other capacity-building measures.
TIMEFRAME: 2015-17
AMOUNT: $92,000

State of Colorado - Governor’s Executive Internship Program
Supported expanding opportunities within the program to students wishing to focus on health equity, in hopes of developing non-traditional leaders from rural or other marginalized communities.
TIMEFRAME: 2016
AMOUNT: $7,500

Hispanic Affairs Project
Provided general operating support to an organization serving the Hispanic immigrant population in six communities in western Colorado.
TIMEFRAME: 2015-16
AMOUNT: $40,000

Oregon Health & Science University
Provided assistance coordinating multi-payer activities under the Colorado State Innovation Model initiative, including meeting strategy, facilitation and coordination, and implementation assistance and ongoing consultation.
TIMEFRAME: 2015-16
AMOUNT: $25,000

Street Fraternity
As part of the Community Partnerships process, supported the Hoop Institute (through Street Fraternity) to enable five teenagers to research community and health equity issues in northeast Denver, and present a subsequent plan to address needs.
TIMEFRAME: 2016
AMOUNT: $11,500

John R. Moran, Jr. Grantee Leadership Award
Awarded $25,000 annually over a 10-year period to a current Trust grantee displaying exemplary leadership in the communities it serves. The 2016 recipient of the award was the Hispanic Affairs Project, in recognition of the organization’s outstanding leadership to advance the health and well-being of immigrants on Colorado’s Western Slope.
TIMEFRAME: 2007-16
AMOUNT: $250,000

The Center for African American Health
Supported the creation of a multi-year business and financial plan to inform the work of the Center, as well as the hiring of a development consultant to help broaden and diversify fundraising efforts, assess data needs, and increase data collection and reporting capacity.
TIMEFRAME: 2016-17
AMOUNT: $65,000

Keystone Policy Center
Supported the Colorado Commission on Affordable Health Care (for which the Keystone Policy Center provides programmatic and administrative support) in engaging statewide input and feedback on its work.
TIMEFRAME: 2015-16
AMOUNT: $25,000

The Colorado Independent
Made at the request of Gail Schoettler, PhD, in honor of her service to The Colorado Trust Board of Trustees. The Colorado Independent is an online, statewide media outlet.
TIMEFRAME: 2016
AMOUNT: $2,500

Mental Health America of Colorado
Supported the development of a statewide listening tour focused on mental health issues faced by Coloradans.
TIMEFRAME: 2016
AMOUNT: $25,000

Rural Philanthropy Days (RPD)
Provided support since 2009 to help strengthen nonprofit-funder relations and address critical needs in rural communities across Colorado. In 2016, funded 10 nonprofit organizations in rural communities across Colorado ($5,000 per organization); and the Community Resource Center to support RPD operations ($15,000).
TIMEFRAME: 2009-17
AMOUNT: $436,500

The Denver Foundation
Supported Mile High Connects (through The Denver Foundation), whose mission is to “ensure that the Metro Denver regional transit system fosters communities that offer all residents the opportunity for a high quality of life.”
TIMEFRAME: 2016-18
AMOUNT: $100,000

Mi Casa BackOffice Solutions
Provided a loan supporting Mi Casa BackOffice Solutions, a social enterprise subsidiary of Mi Casa Resource Center. The mission of Mi Casa is to advance the economic success of Latino families.
TIMEFRAME: 2016-22
AMOUNT: $75,000

Transit Alliance
Supported the Colorado Rural Mobility Statewide Pilot Initiative, a process to solicit community input for two transportation planning regions.
TIMEFRAME: 2016-17
AMOUNT: $25,000

Samaritan Institute Foundation
Made at the request of Rev. R.J. Ross, in honor of his service to The Colorado Trust Board of Trustees. The Samaritan Institute Foundation supports the ministry of the Samaritan Institute and its network of centers to “promote counseling, education, and consultation emphasizing the interrelatedness of mind, body, spirit, and community.”
TIMEFRAME: 2016
AMOUNT: $2,500

University of Colorado School of Public Health
Provided bridge funding for the University of Colorado School of Public Health to improve its financial sustainability while meeting Colorado’s critical population health needs.
TIMEFRAME: 2014-16
AMOUNT: $300,000
A committee of the Board of Trustees oversees The Colorado Trust’s investments with the goal of maintaining or increasing the real value to serve the needs of the people of Colorado in perpetuity.

The Trust’s net assets and liabilities were more than $455 million as of Dec. 31, 2016. Net income on investments and other transactions in 2016 was $33.3 million. The Trust provided over $18.8 million for charitable expenditures in 2016. Program services expenditures accounted for 89.5 percent of total expenses in 2016, up from 89 percent the year prior.

Since its inception in 1985, through 2016, The Colorado Trust has provided over $516 million in charitable support to grantees across Colorado.

Additional financial information:
- 2016 Audited Financial Statements (.pdf)
- The Colorado Trust’s 2016 form 990-PF, Return of Private Foundation, will be available fall 2017.

See the 2016 condensed financial statements on page 13. Please visit www.coloradotrust.org to view The Colorado Trust’s complete financial information.
### FINANCIAL POSITION

#### ASSETS:

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<th>2016</th>
<th>2015</th>
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<tr>
<td>Cash and investments</td>
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<td>$438,415,036</td>
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<td>Excise tax receivable</td>
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<td>Program-related investments</td>
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<td>Property and equipment, net</td>
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<td>Other assets</td>
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#### LIABILITIES & NET ASSETS:

#### LIABILITIES:

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<td>Accounts payable and other liabilities</td>
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<td>Deferred gain on sale-leaseback</td>
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<td>Grants payable</td>
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#### NET ASSETS:

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<td><strong>TOTAL NET ASSETS</strong></td>
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<td><strong>TOTAL LIABILITIES &amp; NET ASSETS</strong></td>
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### ACTIVITIES AND CHANGES IN NET ASSETS

#### UNRESTRICTED REVENUES:

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<td>Income (loss) from investments (net of fees)</td>
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<td>Other income (loss)</td>
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<td><strong>TOTAL UNRESTRICTED REVENUES (losses)</strong></td>
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<td><strong>($1,664,949)</strong></td>
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#### EXPENSES:

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<td>Program services</td>
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<td>Management and general</td>
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<td>Excise tax expense</td>
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<td><strong>TOTAL EXPENSES</strong></td>
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<td>Increase (decrease) in unrestricted net assets</td>
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<td>($19,668,825)</td>
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<td>Net assets at beginning of year</td>
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<td><strong>NET ASSETS AT END OF YEAR</strong></td>
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TRUSTEES & STAFF

Standing (l. to r.):
DONALD J. MARES, ESQ.
Executive Director
Denver Human Services City of Denver

COLLEEN SCHWARZ, MBA
Vice President of Affordable Housing
Community Reinvestment Fund, USA

WILLIAM WRIGHT, MD
Executive Medical Director and President (retired)
Colorado Permanente Medical Group
Chair-elect

WARREN T. JOHNSON, MD
Owl Creek Medical

ALAN SYNN, MD, FACS
Vascular Institute of the Rockies
Secretary

NED CALONGE, MD, MPH
President & CEO

JOHN P. HOPKINS
President & CEO (retired)
Rocky Mountain Health Plans
Treasurer

JENNIFER PAQUETTE, CFA
Chief Investment Officer (retired)
Public Employees' Retirement Association of Colorado
Chair

Sitting (l. to r.):
REV. R.J. ROSS
President & CEO (retired)
Samaritan Institute

GAIL SCHOETTLER, PhD
Businesswoman
Front row (l. to r.):
RACHEL MONDRAGON
Website Manager & Graphic Designer
GWYN BARLEY, PhD
Vice President of Community Partnerships & Grants
PATRICIA MAYNES
Senior Administrative Assistant & Human Resources Professional
NANCY CSUTI, DrPH
Vice President of Research, Evaluation & Strategic Learning

Middle row (l. to r.):
MICHELE CHADER
Grants Management Specialist
ARDEN TREWARTHA
Community Partner San Luis Valley

RONDABROOKS
Grantmaking Teams Administrative Partner
NATALIE ROOKS
Grants Management Specialist
COURTNEY RICCI, PhD
Head of Evaluation & Learning for Community Change
CANDACE JOHNSON
Community Partner Denver Metro Area
KRISTIN JONES
Assistant Director of Communications
DEB DeMUTH
Executive Vice President & CFO
LORENA MALDONADO
Executive Administrative Assistant to the CEO

Back row (l. to r.):
ZENOBIA GARCIA
Staff Accountant
THERESA TRUJILLO
Community Partner Southeast Colorado
KRISTA MARTINEZ
Community Partner Northeast Colorado
NED CALONGE, MD, MPH
President & CEO
NOELLE DORWARD
Advocacy & Policy Partner
MIA RAMIREZ
Community Partner Colorado Springs Area
TERA WICK
Community Partner Southwest Colorado

Insets (l. to r.):
ELEANOR DEWEY
Administrative Assistant
FELISA GONZALES, PhD, MPH
Research, Evaluation & Strategic Learning Manager
PAM HUGHES
Accounts Payable Clerk
DEBBIE McCUISTON, CPA
Controller

The Colorado Trust
Photo credits and additional captions:
Front cover, top left: Olathe residents Rosa Maria Contreras and her daughter, Lizeth Ramirez, photo by Joe Mahoney; top right: Jamie Morgan, consultant for the Community Partnerships and Health Equity Advocacy funding strategies, photo by Joe Mahoney; bottom right: Ricardo Perez, photo by David Cornwell; bottom left: Rachel Hardeman, PhD, MPH, photo by Rachel Mondragon. Page 2, top to bottom: Saguache residents at a community meeting, photo by Joe Mahoney; Carol Hedges, executive director, Colorado Fiscal Institute (a Health Equity Advocacy grantee), photo by Joe Mahoney; Deliana Garcia, MA, photo by Rachel Mondragon: Hispanic Affairs Project staff, community members and Colorado Trust President & CEO Ned Calonge, MD, MPH (r.), photo by David Cornwell. Page 3: Photo by Ellen Jaskol. Page 4: Photo by Joe Mahoney. Page 6, clockwise from top right: Photos by Joe Mahoney, Ellen Jaskol and Joe Mahoney. Page 7: Photos by Joe Mahoney. Page 8: Photos by Rachel Mondragón. Page 9: Photo by David Cornwell. Pages 14 and 15: Photos by Ellen Jaskol.