

2014 Annual Report



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» MESSAGE FROM LEADERSHIP

2014 was a year of remarkable evolution for The Colorado Trust. We began work on our health equity vision in earnest, from mobilizing a field of health equity advocates and continuing a popular educational event series, to supporting rural Colorado nonprofits and planning the launch of our exciting new community partnerships work.

The Trust announced \$4.7 million in grants to organizations statewide as part of our Health Equity Advocacy efforts. This is a unique "field-building" approach to advocacy and public policy grantmaking, with the grantees collaboratively shaping the field's direction and efforts. Our second phase of this work is now underway, and includes 17 of the 34 original grantees from this cohort.

We also continued our popular Health Equity Learning Series, with three events and four dynamic speakers at the History Colorado Center in Denver, drawing more than 100 in-person attendees on each occasion. The Trust also provided grant support to 18 groups statewide, allowing them to host remote viewing parties and discussions during and after each live-streamed event.

The Trust continues to proudly support the work of Rural Philanthropy Days (RPD). This twice-yearly event connects funders with nonprofits to help address needs in communities across the state. The 10 organizations we supported at the Trinidad and Pagosa Springs RPD events last year continue to do important work in cities and towns across Colorado.

Following months of planning and research, our brand-new community partnerships work launched at the end of 2014 with the hiring of five community partners, all longtime residents of rural Colorado who will work across multi-county regions of the state. They will collaborate with community members to encourage and strengthen resident-led solutions and funding initiatives to address health equity. We will share more on this initiative as the work unfolds in 2015 and beyond.

We hope the stories on the following pages further illustrate The Trust's lasting dedication to advancing the health and well-being of the people of Colorado. We are honored to carry out this work, and look forward to sharing more progress towards advancing health equity in the years ahead.

Rev. R. J. Ross Board Chair Ned Calonge, MD, MPH
President & CEO

» MISSION

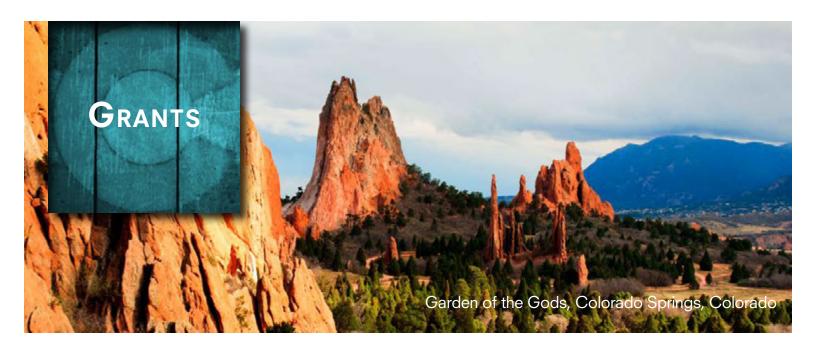
Advancing the health and well-being of the people of Colorado.

» VISION

All Coloradans have fair and equal opportunities to lead healthy, productive lives regardless of race, ethnicity, income or where we live.

ABOUT THE TRUST

When the nonprofit PSL Healthcare Corporation was sold to a for-profit organization in 1985, the proceeds of the sale were used to create The Colorado Trust, a foundation dedicated exclusively to the health of the people of Colorado. Since that time, The Trust has worked closely with communities and nonprofit organizations in every county across the state to improve the health and well-being of Coloradans.



HEALTH EQUITY AND SOCIAL DETERMINANTS OF HEALTH

The Colorado Trust defines health equity as ending inequalities that affect racial, ethnic, low-income and other vulnerable populations, so that everyone will have fair and equal opportunities to achieve good health. The social determinants of health (SDOH) are important aspects that influence the health of both individuals and communities. Health inequities arise because of the circumstances in which people grow, live, work and age, as well as the systems put in place to deal with illness. The conditions in which people live are, in turn, shaped by political, social and economic

forces. SDOH 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
- Environment, pollution, hazards



HEALTH POLICY & ADVOCACY

Advocating to improve health equity begins with learning about the most pressing policy issues. The Health Equity Learning Series helped fill this need for audiences statewide in 2014.



How do you build a social movement?

It takes a vision, an authentic base, a scaffold of solid research, a commitment to the long haul and a willingness to collaborate, said Manuel Pastor, PhD, a professor of sociology, American studies and ethnicity at the University of Southern California.

Pastor was a powerful contributor to the second year of The Trust's Health Equity Learning Series, which invites national leaders to discuss health disparities and how to fix them. The free educational events are open to the public and average 150 attendees.

His work as an organizer, researcher and teacher has focused primarily on large urban areas, especially in California. He spoke specifically about the success of the Dreamers—undocumented immigrants who came to the U.S. as young children—in forging a political identity as Americans, using California communities as a base.

Pastor's message resonated with his Denver audience. An organizer from Padres y Jovenes Unidos—which has fought against the school-toprison pipeline in Colorado—asked

HEALTH EQUITY LEARNING SERIES:

Messages That Resonate

how to apply his lessons to ensure accountability in the implementation of new policies. Pastor drew on his experiences in Los Angeles to illustrate examples of how to work with existing organizations like community colleges, unions and police to make sure practices live up to the policymakers' intents.

Perhaps more surprisingly, his words sparked animated conversations in rural communities like Gunnison, Steamboat Springs and Telluride, where local, live-streamed viewings were made possible through grants from The Trust to local organizations.

These towns have little in common with a place like Los Angeles. Still, Pastor's lessons of engaging a disenfranchised population and tapping its power had far-reaching appeal.

Of all the learning series speakers in 2014, "Pastor had the most relevant presentation for our communities,"

said Erich Lange, a program analyst for the Tri-County Health Network in Telluride, one of the grant recipients. "As we are trying to unveil our own health equity movement in our region, his lessons and insight were invaluable in helping us develop a plan for social change."

Audiences of the learning series also heard from documentarian Llewelyn Smith and news executive Laura Frank on how to understand and tell stories about inequality, and from Mildred Thompson, director of the PolicyLink Center for Health Equity and Place, who spoke about how a lack of access to public transportation, good schools and parks have become barriers to health for many people of color.

Through The Trust's grants, the series was seen in 18 communities around the state, from cities like Aurora, Boulder and Grand Junction to small towns like Craig, La Junta and Trinidad.



(Click on the image to view entire video on YouTube.)

HEALTH DATA & INFORMATION

The Trust reinforced its long-term support for the Colorado Health Institute and its important role in gathering and analyzing health-related data and information.



In 2002, AltaVista was still hoping to topple Google. Kids were obsessed with a new gadget called the iPod. And the Colorado Health Institute (CHI) was founded as a warehouse for health data that wasn't available anywhere else.

CHI has come a long way since then. The organization was established with funding from The Trust and two other foundations, Caring for Colorado and Rose Community Foundation, as a way to fill gaps in public data. It still fulfills that role, but goes far beyond it—one of several reasons The Trust extended its support of CHI in November 2014 with a new five-year general operating support grant.

"A lot of what's needed now," says CHI President and Chief Executive Michele Lueck, "is not only data but analysis."

The nonprofit now works to identify trends and patterns in the reams of publicly available data, and to provide context that helps lawmakers, policy experts, academics, local public health officials and journalists make

> COLORADO HEALTH INSTITUTE:

Adding Analysis

sense of splintered information. To that end, CHI answered a record 371 information requests in 2014—free of charge when less than four hours of staff work was required.

And in December, the organization's annual two-day "Hot Issues in Health Care" conference—long a place for legislators to discuss policy priorities—was opened for one day to health policy experts, advocates and journalists.

Hundreds of attendees gathered for the event in Colorado Springs. They listened to keynote speaker Susan Urahn of The Pew Charitable Trusts describe state-level health care trends in a national context. Breakout panels discussed efforts to integrate physical and mental health care, and how public health efforts are looking beyond the doctor's office to the way neighborhoods are built and how people live their daily lives.

Events like this conference, says Lueck, put evidence-based analysis at the table when policymakers are making decisions that affect all of us.

What's next for the organization?

"There's a greater hunger for local data," says Lueck. State- and county-level information may not go far enough to illustrate the particular ills of a small town or a neighborhood. "We have an opportunity to get to the granular level."

Look for CHI not only to make that information available, but to explain why it matters, and to inform debates on how to advance solutions.



HEALTH & WELL-BEING

From supporting nonprofits in rural Colorado communities to continuing to recognize current grantees for exemplary leadership, The Trust utilized varied approaches to advancing the health and well-being of Coloradans.



Together Colorado was the 2014 recipient of the John R. Moran, Jr. Grantee Leadership Award, a \$25,000 one-time award that recognizes outstanding work.

By training leaders in schools and congregations along the Front Range, Together Colorado helps communities forge their own ways around the obstacles that stand in the way of good health.

In 2014, the organization made inroads with some of the most vulnerable residents of Aurora, home to the state's largest concentration of people living below the federal poverty line, according to Census data.

Volunteers with Together Colorado teamed with safety-net provider Metro Community Providers Network (MCPN) to reach out to frequent emergency-room visitors. While MCPN tended to the health care needs of these Aurora residents through a federally funded program called Bridges to Care, Together Colorado engaged with the residents as partners in the community.

Visiting each patient individually, volunteers learned that the barriers

DOWN R. MORAN, JR. GRANTEE LEADERSHIP AWARD:

Together Colorado

to getting good primary care outside of the E.R. sometimes had little to do with the health care system.

"The actual root of the problem is out in the community," says Eliana Mastrangelo, an organizer with Together Colorado. "One really great example is transportation."

More than half of the Bridges to Care enrollees said a lack of reliable transportation was a barrier to accessing care.

Missing one appointment could mean waiting months to schedule another one; more than 66 percent of the enrollees said long waits for appointments were another barrier.

And more than a third of the patients said they couldn't get needed specialty care because of their insurance status.

With information from these visits, organizers at Together Colorado

began to focus on two priorities: medical transportation, and access to specialty care. The organization found that it had important help; a handful of graduates from the Bridges to Care program became dedicated members of the Together Colorado health care committee tasked with planning the next steps.

Though Bridges to Care will lose its federal funding in 2015, a version of the program will remain in place through the safety-net clinic, while Together Colorado plans to keep up the community-organizing side of the effort.

"The work of building leaders and organizing people who are the most vulnerable people in our health care system is going to continue," says Mastrangelo. "We're committed to that."



HEALTH & WELL-BEING

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When National Guard soldier James Thode was killed by an explosive in Afghanistan in December 2010, his neighbors in Farmington, N.M. showed up in droves for the funeral, his mother remembers.

But after Eve Taylor buried her son and went home to Pagosa Springs, Colo., her grief outlived her friends' patience for hearing about it.

Taylor needed a therapist.

She couldn't get one in rural Archuleta County; the nearest appointment she could find was in Pueblo, a four-hour drive away. It was a problem she had in common with local veterans and their families who needed help with post-traumatic stress disorder.

It took the initiative of a county veterans' affairs advocate to see a local need for mental health services, and raise the issue at Rural Philanthropy Days, a series of events that connect funders like The Trust with nonprofits and government agencies in often-isolated rural communities.

RURAL PHILANTHROPY DAYS:

Archuleta County Veterans Services

The Archuleta County Veterans Services Office received one of 10 \$5,000 grants The Trust gave out through these events in 2014. The funding allowed the county to pay for veterans and their families to get free local counselling.

The grants also supported, among other things:

- Two Peaks Fitness, the only gym in Huerfano County. The grant provided inexpensive monthly passes for low-income residents of La Veta and neighboring towns.
- Trinidad Community Farmers
 Market, which sells affordable,
 healthy food to people living in
 and near Trinidad.
- The Hospice of Montezuma, which used the grant to organize

- support groups for caregivers and people dealing with the death of a loved one.
- The T.A.R.A. Historical Society in Arboles, near southwestern Colorado's Navajo Lake. The grant was used to install a chairlift, signs and handicapped parking to improve access to the historical society events for disabled visitors.

For Taylor, the counseling sessions offered by Archuleta County have given her a place where she can work through her sadness and remember her son, a 45-year-old police sergeant who was quick with a joke and took a fatherly interest in the home lives of the young men in his unit.

"It has been a lifeline for me," she says.



2014 GRANTEES

BOULDER COUNTY HOUSING AND HUMAN SERVICES

Worked to identify and enroll eligible but uninsured children in Medicaid and Child Health Plan *Plus*.

TIMEFRAME: 2009-14 **AMOUNT**: \$225,000

BUILD INITIATIVE

Provided funding for data collection and a needs assessment to help inform the creation of policies and practices that improve health equity for children.

TIMEFRAME: 2014 AMOUNT: \$15,000

CAVITY FREE AT THREE – PHASE TWO

Worked to recruit private dentists in Colorado who do not accept Medicaid clients to serve this population, and train dental providers to care for young children and pregnant women.

TIMEFRAME: 2011-14 AMOUNT: \$300,000

■ CENTER FOR AFRICAN AMERICAN HEALTH

Supported the implementation of the Executive Director Succession Plan, organizational capacity improvements and sustainability strategies.

TIMEFRAME: 2013-14 AMOUNT: \$25,000

CENTER FOR IMPROVING VALUE IN HEALTH CARE (CIVHC) – COLORADO ALL PAYER CLAIMS DATABASE IMPLEMENTATION GRANT

In partnership with the Colorado Health Foundation, supported CIVHC in developing a Colorado All Payer Claims Database to better understand the cost and utilization of health care services, and develop payment solutions to lower health care costs.

TIMEFRAME: 2012-15 AMOUNT: \$2,000,000

■ CIVIC CANOPY

Supported Arapahoe Square Neighborhood Convenings to develop a shared sense of community in the Arapahoe Square neighborhood.

TIMEFRAME: 2014 **AMOUNT**: \$24,750

■ COLORADO CENTER ON LAW & POLICY

Along with the Chambers Family Foundation, Colorado Health Foundation and Rose Community Foundation, provided general operating support to create a sustainability plan.

TIMEFRAME: 2014-15 **AMOUNT**: \$50,000

COLORADO FRESH FOOD FINANCING FUND

In partnership with the Colorado Health Foundation and the Colorado Housing and Finance Authority, provided grocery stores and other markets funding to offer access to healthy foods in underserved areas of Colorado.

TIMEFRAME: 2013-16 **AMOUNT**: \$300,000

COLORADO FUTURES CENTER AT COLORADO STATE UNIVERSITY

Supported the dissemination of the results of the Colorado Futures Center's fiscal sustainability study to inform policy decisions related to access to health.

TIMEFRAME: 2013-14 **AMOUNT**: \$19,000

COLORADO HEALTH ACCESS SURVEY

Provided support for the extensive 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**: \$4,523,159

■ 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: 2007-15 AMOUNT: \$4,228,977

DENVER HEALTH FOUNDATION

Supported expanding and improving adolescent substance treatment services at Denver Health.

TIMEFRAME: 2013-14 **AMOUNT**: \$25,000

■ EARLY CHILDHOOD HEALTH INTEGRATION

Provided support to Colorado's network of Early Childhood Councils to better integrate health services into their local early childhood system development efforts.

TIMEFRAME: 2008-14 **AMOUNT**: \$5,750,000

■ GIRLS ON THE RUN OF DENVER

Supported Girls on the Run scholarship sites that serve disadvantaged students.

TIMEFRAME: 2014 **AMOUNT**: \$2,500

2014 GRANTEES (continued)

HEALTH EQUITY ADVOCACY

Advanced health equity policy solutions through a field-building approach to provide a strong foundation for the health equity field.

TIMEFRAME: 2013-16 AMOUNT: \$7,200,000

■ 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: 2013-15 AMOUNT: \$554,352

■ INNER CITY HEALTH CENTER

Supported development of a new website.

TIMEFRAME: 2013-14 **AMOUNT**: \$5,000

■ JOHN R. MORAN, JR. GRANTEE LEADERSHIP AWARD

Awarded \$25,000 to Together Colorado to recognize the organization's outstanding leadership to advance the health and well-being of Coloradans.

TIMEFRAME: 2007-16 **AMOUNT**: \$250,000

NBCC FOUNDATION

Provided scholarships to counselors-in-training to serve rural and/or minority communities in Colorado.

TIMEFRAME: 2013-14 **AMOUNT**: \$31,000

■ RESTORE HEALTH AND COUNSELING

Supported relocation of an outpatient substance abuse facility that provides alcohol and drug abuse education and treatment to adolescents and adults.

TIMEFRAME: 2014-15 **AMOUNT**: \$30,000

RURAL PHILANTHROPY DAYS (RPD)

Funded nonprofits in rural communities across Colorado; and the Community Resource Center to support RPD operations.

TIMEFRAME: 2014 **AMOUNT**: \$70,000

SERVICIOS DE LA RAZA

Supported an alliance of minority-led, minority-serving organizations that help raise awareness for health equity issues.

TIMEFRAME: 2014-15 **AMOUNT**: \$15,000

SUN VALLEY YOUTH CENTER

Supported the center's afterschool and summer programming that focuses on tutoring, mentoring activities and life skills for urban youth.

TIMEFRAME: 2014 **AMOUNT**: \$2,500

■ UNIVERSITY OF COLORADO DENVER

Supported the creation of a data warehouse for tracking University of Colorado School of Medicine students through their undergraduate and graduate medical education training and into practice.

TIMEFRAME: 2014-15 AMOUNT: \$140,000

■ UNIVERSITY OF COLORADO SCHOOL OF PUBLIC HEALTH

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

UNIVERSITY OF COLORADO LAW SCHOOL

Supported the school's Colorado Health Equity Project to improve socioeconomic, racial, and ethnic health disparities by removing legal barriers to health care for low-income Colorado families.

TIMEFRAME: 2014-15 AMOUNT: \$50,000

■ UNIVERSITY OF DENVER, LATINO LEADERSHIP INSTITUTE

Supported the institute in training and developing Latino professionals to become leaders in the business, government, philanthropy and nonprofit sectors of Colorado, through coursework, mentoring, social impact projects and community-wide policy summits.

TIMEFRAME: 2014-15 **AMOUNT**: \$50,000

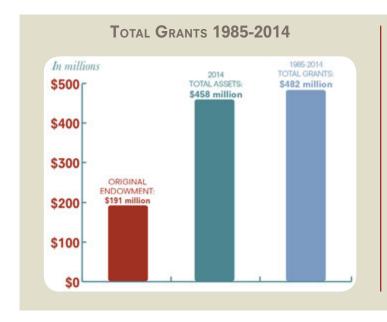


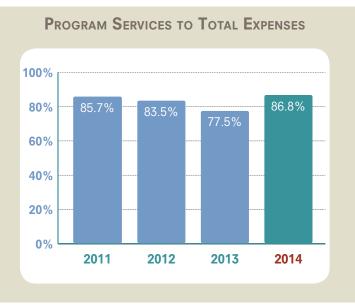
A COMMITTEE OF THE BOARD OF

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 assets grew to more than \$458 million as of Dec. 31, 2014. Net income was \$18.5 million from investments and other

transactions in 2014. The Trust provided over \$13.1 million for charitable expenditures in 2014. Program service expenditures accounted for 86.8 percent of total expenses in 2014, up from 77.5 percent the year prior. Since its inception in 1985, through 2014, The Colorado Trust has provided over \$482 million in charitable support to grantees across Colorado.





2014 CONDENSED FINANCIAL STATEMENTS

ASSETS:	<u>2014</u>	<u>2013</u>
Cash and investments	\$458,028,152	\$454,048,561
Receivables	\$237,084	-
Property and equipment, net	229,441	209,590
Other Assets	381,674	351,760
TOTAL ASSETS	\$458,876,351	\$454,609,911
LIABILITIES & NET ASSETS:		
LIABILITIES:		
Accounts payable and other liabilities	\$1,702,995	\$1,911,390
Deferred gain on sale-leaseback	3,265,619	3,515,219
Grants payable	7,784,320	2,592,534
TOTAL LIABILITIES	12,752,934	8,019,143
NET ASSETS:		
Unrestricted	446,123,417	446,590,768
TOTAL NET ASSETS	446,123,417	446,590,768
TOTAL LIABILITIES & NET ASSETS	\$458,876,351	\$454,609,911
ACTIVITIES AND CHANGES IN NET ASSETS		
UNRESTRICTED REVENUES:	<u>2014</u>	<u>2013</u>
Income (loss) from investments (net of fees)	\$18,500,197	\$55,355,657
Other income	<u>13,794</u>	1,737
TOTAL UNRESTRICTED REVENUES	\$18,513,991	\$55,357,394
EXPENSES:		
Program services	\$16,472,690	\$9,043,527
Management and general	1,962,358	1,737,901
Excise tax expense	546,294	885,745
TOTAL EXPENSES	\$18,981,342	\$11,667,173
Increase (decrease) in unrestricted net assets	(467,351)	43,690,221
Net assets at beginning of year	446,590,768	402,900,547
NET ASSETS AT END OF YEAR	\$446,123,417	\$446,590,768

ADDITIONAL FINANCIAL INFORMATION:

- 2014 Audited Financial Statements (PDF)
- 2014 form 990-PF (PDF)

Please visit www.coloradotrust.org to view The Colorado Trust's complete financial information through 2014.



Back row *l. to r.*:

DONALD MARES, ESQ.

Executive Director
Office of Behavioral Health Strategies, City of Denver

COLLEEN SCHWARZ

Vice President - Sales Community Reinvestment Fund, USA Treasurer

WILLIAM WRIGHT, MD

Executive Medical Director & President Colorado Permanente Medical Group Secretary

JOHN HOPKINS

President & CEO (retired) Rocky Mountain Health Plans

ALAN SYNN, MD

President Vascular Institute of the Rockies

NED CALONGE, MD, MPH

President & CEO The Colorado Trust

WARREN JOHNSON, MD

Owl Creek Medical

JENNIFER PAQUETTE

Chief Investment Officer Public Employees' Retirement Association of Colorado

Sitting l. to r.:

REV. R.J. ROSS

President & CEO (retired) Samaritan Institute Chair

GAIL SCHOETTLER, PHD

Businesswoman *Chair-elect*

Not pictured:

CARA LAWRENCE, ESQ.

General Counsel



Back row l. to r.:

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Executive Admin

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Community Partner

TERA WICK

Community Partner

TARA SPAHR

IT Manager

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Director of Research, Evaluation & Strategic Learning

MICHELE CHADER

Grants Operations Officer

With gratitude to staff members who formerly served The Colorado Trust:

Chris Armijo, Alisa Bourne, Phillip Chung, Gay Cook, Scott Downes, Maggie Frasure, Deidre Johnson and Laurel Petralia



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