Form **990**

OMB No. 1545-0047 2014

Department of the Treasury Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Α	For t	or the 2014 calendar year, or tax year beginning , 2014, and endir								g		,			
В	Check	if applicable:	С		D Employer identification number										
	Па	ddress change	Colorado Haiti Project, Inc.									84-1330243			
	\square_{N}	me change 908 Main Street, Suite 245									E Telephone number				
		Initial return Lousville, CO 80027								202	-938-	-5021			
		Final return/terminated								_	303	930	3021		
											•			000	
		mended return	E No. and address of activity at the latest and the second at the second								G Gross receipts \$ 594,903. a group return for subordinates? Yes X No				
	ША	pplication pending													
			Same As C Above								ubordinate: ttach a list.	included (see insti	? Yes	No	
<u> </u>	Tax	-exempt status	X 501(c)(3)	501(c) ()◀	(insert no.)	4947(a)(1) or	527			·	•		
J	We	ebsite: Co	loradohait	iproje	ct.org					H(c) Group ex	kemption n	umber ►			
K	Forr	m of organization:	X Corporation	Trust	Association	Other ►		L Year	of formati	ion: 1988	М:	State of le	gal domicile: C()	
Pa	art I	Summar			_1									<u></u>	
	1	Briefly describe the organization's mission or most significant activities: The Colorado Haiti Project works in											in		
		partners	partnership with rural Haitian communities to support their rise out of extreme												
Governance		poverty.													
<u> 5</u>		± ' -	*												
ě	2	Check this bo	nx ► lifthe (organizatio	on discontir	ore than 25	% of its	net ass							
යි	3	Number of vo			3		10								
ಳ	4		dependent votin	-		•	,					4		10	
ë	5		r of individuals e									5		5	
∄	6		of volunteers (6		100	
Activities &	7a	Total unrelate	ed business reve	enue from	Part VIII, o	column (C), Iir	ne 12					7a		0.	
_		Net unrelated	d business taxab	ole income	from Form	990-T, line 3	4					7b		0.	
						· · · · · · · · · · · · · · · · · · ·					ior Year	1	Current Y		
	8	Contributions and grants (Part VIII, line 1h)									512,5	509		,993.	
Revenue	9		Program service revenue (Part VIII, line 2g)										102	<u>, , , , ,</u>	
Ę.	10		ent income (Part VIII, column (A), lines 3, 4, and 7d)												
å	11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)										103	,264.	
	12		e – add lines 8 through 11 (must equal Part VIII, column (A), line 12)											,257.	
	13		imilar amounts p										300	,201.	
	14			193,444.											
											124 016 206				
g	15									== -,			306	,589.	
38	16 a	Professional	fundraising fees												
Expenses	b	Total fundrais	888.												
ũ	17	Other expens	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)								118,115.			,639.	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)												,228.	
	19									200/0101					
0.0		1101011001000	э охроносо. Сав	traot mio	10 110111 1111					Beginning of Current Year			45,029. End of Year		
ets	20	Total assets	(Part Y line 16)							beginning					
Net Assets Fund Baland	21	Total assets (Part X, line 16)								379,863. 49,031.				,177.	
e e	21	Net assets or fund balances, Subtract line 21 from line 20												,316.	
_				Subtract	line 21 fron	1 line 20					330,8	332.	375	<u>,861.</u>	
Pa	art II	Signatur	e Block												
Und	er pena	Ities of perjury, I de	eclare that I have exa arer (other than office	mined this ref	turn, including	accompanying sch	edules and s	statemen	ts, and to	the best of my	knowledge	and belie	f, it is true, correc	t, and	
COIII	piete. L	eciaration of prepa	arer (other than officer	r) is based of	i all illiormation	Tot willcit prepare	r nas any kno	owieage.							
		.													
Sig	gn	Signatu	ire of officer							Date	9				
He															
		Type or	r print name and tit l e.												
		Print/Type p	oreparer's name		Preparer's s		09 1	Da	ate	(Check	if F	PTIN		
Paid Preparer Use Only		John (Cutler John L. Puth 8/14/15								ے self-employ	ed			
			Oddel January Orlands									1			
											Eirm's EIN	•			
		11y Firm's addre									Firm's EIN		\ 624.00		
		ID0 1: ::	DENVER, CO 80202-5402 this return with the preparer shown above? (see instructions)							F	Phone no.	(303	·		
Ma	y the	IRS discuss th	ns return with th	ie prepare	r shown ab	ove? (see ins	tructions)						X Yes	No	