

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-1978

For calendar year 2013, or fiscal year beginning JUL 1, 2013, and ending JUN 30, 2014

2013

Department of the Treasury
Internal Revenue Service

▶ Do not send to the IRS. Keep for your records.

▶ Information about Form 8879-EO and its instructions is at www.irs.gov/form8879en

Name of exempt organization

Employer identification number

COLORADO SEMINARY

84-0404231

Name and title of officer

CRAIG WOODY

VICE CHANCELLOR

Part I: Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I.

| | | | | |
|-----------------------------|-------------------------------------|--|----|---------------------|
| 1a Form 990 check here | <input checked="" type="checkbox"/> | b Total revenue, if any (Form 990, Part VIII, column (A), line 12) | 1b | 574,032,667. |
| 2a Form 990-EZ check here | <input type="checkbox"/> | b Total revenue, if any (Form 990-EZ, line 9) | 2b | |
| 3a Form 1120-POL check here | <input type="checkbox"/> | b Total tax (Form 1120-POL, line 22) | 3b | |
| 4a Form 990-PF check here | <input type="checkbox"/> | b Tax based on investment income (Form 990-PF, Part VI, line 5) | 4b | |
| 5a Form 8868 check here | <input type="checkbox"/> | b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c) | 5b | |

Part II: Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2013 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize _____ to enter my PIN _____
ERO firm name

as my signature on the organization's tax year 2013 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2013 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ Craig Woody Date ▶ May 13, 2015

Part III: Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

84780212345
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2013 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4183, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ [Signature] Date ▶ 5/12/2015

ERO Must Retain This Form - See Instructions
Do Not Submit This Form To the IRS Unless Requested To Do So

LHA For Paperwork Reduction Act Notice, see instructions.
328051
10-01-13

Form **8879-EO** (2013)

Form **990**

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. 1545-0047

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2013 calendar year, or tax year beginning JUL 1, 2013 and ending JUN 30, 2014

B Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization: **COLORADO SEMINARY**
 Doing Business As: **UNIVERSITY OF DENVER**
 Number and street (or P.O. box if mail is not delivered to street address): **2199 S UNIVERSITY BLVD**
 Room/suite:
 City or town, state or province, country, and ZIP or foreign postal code: **DENVER, CO 80208**

D Employer identification number: **84-0404231**

E Telephone number: **303-871-2404**

G Gross receipts \$: **1,546,317,028.**

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)

H(c) Group exemption number

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: **HTTP://DU.EDU**

K Form of organization: Corporation Trust Association Other

L Year of formation: **1864** **M** State of legal domicile: **CO**

Part I Summary

| | | | |
|---|--|----------------------------------|-----------------------|
| Activities & Governance | 1 Briefly describe the organization's mission or most significant activities: A HIGHER EDUCATIONAL INSTITUTION, PROVIDING BOTH UNDERGRADUATE AND GRADUATE DEGREES. | | |
| | 2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. | | |
| | 3 Number of voting members of the governing body (Part VI, line 1a) | 3 | 26 |
| | 4 Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 25 |
| | 5 Total number of individuals employed in calendar year 2013 (Part V, line 2a) | 5 | 8171 |
| | 6 Total number of volunteers (estimate if necessary) | 6 | 3400 |
| | 7a Total unrelated business revenue from Part VIII, column (C), line 12 | 7a | 6,342,344. |
| b Net unrelated business taxable income from Form 990-T, line 34 | 7b | 0. | |
| Revenue | 8 Contributions and grants (Part VIII, line 1h) | Prior Year | Current Year |
| | 9 Program service revenue (Part VIII, line 2g) | 55,349,703. | 60,864,647. |
| | 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 469,502,871. | 492,322,758. |
| | 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 14,872,294. | 17,887,944. |
| | 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 3,681,091. | 2,957,318. |
| | 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) | 543,405,959. | 574,032,667. |
| | 14 Benefits paid to or for members (Part IX, column (A), line 4) | 121,251,508. | 129,205,827. |
| Expenses | 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | 0. | 0. |
| | 16a Professional fundraising fees (Part IX, column (A), line 11e) | 232,286,737. | 239,009,023. |
| | b Total fundraising expenses (Part IX, column (D), line 25) | 392,407. | 406,104. |
| | 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | 14,013,743. | |
| | 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | 131,268,753. | 122,086,867. |
| | 19 Revenue less expenses. Subtract line 18 from line 12 | 485,199,405. | 490,707,821. |
| | 20 Total assets (Part X, line 16) | 58,206,554. | 83,324,846. |
| Net Assets or Fund Balances | 21 Total liabilities (Part X, line 26) | Beginning of Current Year | End of Year |
| | 22 Net assets or fund balances. Subtract line 21 from line 20 | 1,336,405,375. | 1,463,002,918. |
| | | 243,195,596. | 247,098,304. |
| | | 1,093,209,779. | 1,215,904,614. |

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here
 Signature of officer: **CRAIG WOODY, VICE CHANCELLOR**
 Date: _____

Paid Preparer Use Only
 Print/type preparer's name: **KAREN GRIES**
 Preparer's signature: *Karen Gries*
 Date: **5/10/2015**
 Check if self-employed:
 PTIN: **P00078514**
 Firm's name: **CLIFTONLARSONALLEN LLP**
 Firm's address: **370 INTERLOCKEN BLVD., SUITE 500 BROOMFIELD, CO 80021**
 Firm's EIN: **41-0746749**
 Phone no.: **303-466-8822**

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: TO PROMOTE LEARNING BY ENGAGING WITH STUDENTS IN ADVANCING SCHOLARLY INQUIRY, CULTIVATING CRITICAL AND CREATIVE THOUGHT AND GENERATING KNOWLEDGE. OUR ACTIVE PARTNERSHIPS WITH LOCAL AND GLOBAL COMMUNITIES CONTRIBUTE TO A SUSTAINABLE COMMON GOOD.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 153,718,384. including grants of \$ 0.) (Revenue \$ 410,326,608.) INSTRUCTION 2013-2014 ACADEMIC YEAR: ENROLLMENT: UNDERGRADUATE 5,517, GRADUATE AND PROFESSIONAL 6,261, TOTAL FALL ENROLLMENT 11,778. DEGREES CONFERRED (2013-2014): BACCALAUREATE 1,257, MASTER'S 2,086, FIRST PROFESSIONAL 280, DOCTORAL 159. TOTAL DEGREES CONFERRED 3,782. UNDERGRADUATE STUDENTS CAN SELECT FROM MORE THAN 100 UNDERGRADUATE PROGRAMS, INCLUDING TRADITIONAL MAJORS AND DUAL DEGREE PROGRAMS THAT SPAN A VARIETY OF DISCIPLINES INCLUDING BUSINESS, EDUCATION, SOCIAL WORK, ART HISTORY, GEOGRAPHIC INFORMATION SCIENCE, INTERNATIONAL STUDIES, PUBLIC POLICY AND ENGINEERING. GRADUATE STUDENTS CAN SELECT FROM MORE THAN 120 GRADUATE DEGREE PROGRAMS THAT WILL CHALLENGE, INSPIRE, AND PREPARE THEM TO ACHIEVE THEIR HIGHEST ACADEMIC AND PROFESSIONAL GOALS. EACH UNIVERSITY OF DENVER GRADUATE PROGRAM COMBINES

4b (Code:) (Expenses \$ 129,205,827. including grants of \$ 129,205,827.) (Revenue \$ 0.) STUDENT SCHOLARSHIP 2013-2014 ACADEMIC YEAR: THE UNIVERSITY OF DENVER STUDENT CAN APPLY FOR FINANCIAL AID TO ASSIST THEM AND THEIR FAMILY IN COVERING THE COST OF THEIR EDUCATION. SCHOLARSHIPS AND GRANTS ARE AVAILABLE TO STUDENTS FROM FEDERAL, STATE AND INSTITUTIONAL PROGRAMS. INSTITUTIONAL SCHOLARSHIP, WAIVERS AND CASH ASSISTANCE PROGRAMS FOR THE 2013-2014 ACADEMIC YEAR EQUALED \$118,172,241 ENDOWED AND GIFT SUPPORT SCHOLARSHIP PROGRAMS FUNDED \$9,770,893 AND THE FEDERAL AND STATE PROGRAMS FUNDED \$1,262,692. UP TO 80% OF THE STUDENTS AT THE UNIVERSITY RECEIVE SOME FINANCIAL AID.

4c (Code:) (Expenses \$ 104,207,877. including grants of \$ 0.) (Revenue \$ 12,883,172.) ACADEMIC SUPPORT AND STUDENT SERVICES 2013-2014 ACADEMIC YEAR: ACADEMIC SUPPORT INCLUDES THE ADMINISTRATIVE SUPPORT FOR 12 GRADUATE SCHOOLS AND PROFESSIONAL PROGRAMS AND EIGHT UNDERGRADUATE SCHOOLS AND COLLEGES. ACADEMIC SUPPORT ALSO INCLUDES THE UNIVERSITY'S LIBRARIES, MEDIA AND INFORMATION TECHNOLOGY SUPPORT AND OTHER SUPPORT FUNCTIONS FOR THE UNIVERSITY'S PRIMARY MISSIONS. STUDENT SERVICES CONSISTS OF THE ACTIVITIES OF THE ADMISSIONS, REGISTRAR AND FINANCIAL RESOURCES OFFICES AS WELL AS ACTIVITIES THAT CONTRIBUTE TO THE STUDENTS' DEVELOPMENT OUTSIDE THE FORMAL INSTRUCTION PROGRAM THAT INCLUDE INTERCOLLEGIATE ATHLETIC PROGRAMS AND SPORTS AND WELLNESS RECREATION PROGRAMS. INCLUDED IN THESE ACTIVITIES ARE CAMPUS LIFE, CAREER AND COUNSELING CENTERS, LEADERSHIP PROGRAMS AND OTHER CAMPUS ACTIVITIES THAT CONTRIBUTE TO THE

4d Other program services (Describe in Schedule O.) (Expenses \$ 52,834,750. including grants of \$ 0.) (Revenue \$ 69,112,978.)

4e Total program service expenses 439,966,838.

Part IV Checklist of Required Schedules

| | Yes | No |
|--|-----|----|
| 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> | X | |
| 2 Is the organization required to complete Schedule B, Schedule of Contributors? | X | |
| 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> | | X |
| 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> | X | |
| 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i> | | X |
| 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> | | X |
| 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> | | X |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> | X | |
| 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> | X | |
| 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> | X | |
| 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. | | |
| a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> | X | |
| b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> | X | |
| c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> | X | |
| d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i> | X | |
| e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> | X | |
| f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i> | X | |
| 12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> | X | |
| b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> | | X |
| 13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> | X | |
| 14a Did the organization maintain an office, employees, or agents outside of the United States? | | X |
| b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> | X | |
| 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i> | | X |
| 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i> | X | |
| 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> | X | |
| 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 9a? <i>If "Yes," complete Schedule G, Part II</i> | X | |
| 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> | | X |
| 20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> | | X |
| b <i>If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?</i> | | X |

Form 990 (2013)

Part IV Checklist of Required Schedules (continued)

| | Yes | No |
|---|-----|----|
| 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | | X |
| 22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | X | |
| 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J | X | |
| 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a | X | |
| b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | | X |
| c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | | X |
| d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | | X |
| 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | | X |
| b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I | | X |
| 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II | | X |
| 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III | | X |
| 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): | | |
| a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | X | |
| b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | | X |
| c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | | X |
| 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | X | |
| 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M | X | |
| 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | | X |
| 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II | | X |
| 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | X | |
| 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 | X | |
| 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? | | X |
| b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | | |
| 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 | | X |
| 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | | X |
| 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? | | |
| Note. All Form 990 filers are required to complete Schedule O | X | |

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

X

Table with columns for question number, description, sub-questions (1a-14b), and Yes/No columns. Contains various tax-related questions and numerical inputs.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 4 columns: Question, 1a, 1b, Yes, No. Rows include questions about voting members, family relationships, management delegation, and documentation.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 4 columns: Question, Yes, No. Rows include questions about local chapters, conflict of interest policies, whistleblower policies, and document retention.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CO
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection.
19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: MARGARET HENRY - 303-871-3740 2199 S UNIVERSITY BLVD, DENVER, CO 80208

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

| (A) Name and Title | (B) Average hours per week (list any hours for related organizations below line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|--|---|---|-----------------------|---------|--------------|------------------------------|----------|--|---|---|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (1) EDWARD T. ANDERSON TRUSTEE | 1.00 | X | | | | | | 0. | 0. | 0. |
| (2) JOY S. BURNS TRUSTEE | 1.00 | X | | | | | | 0. | 0. | 0. |
| (3) NAVIN DIMOND TRUSTEE | 1.00 | X | | | | | | 0. | 0. | 0. |
| (4) MARGOT GILBERT FRANK TRUSTEE | 1.00 | X | | | | | | 0. | 0. | 0. |
| (5) KEVIN C. GALLAGHER TRUSTEE | 1.00 | X | | | | | | 0. | 0. | 0. |
| (6) FRANCISCO GARCIA TRUSTEE | 1.00 | X | | | | | | 0. | 0. | 0. |
| (7) PETER A. GILBERTSON TRUSTEE | 1.00 | X | | | | | | 0. | 0. | 0. |
| (8) JAMES GRIESEMER TRUSTEE-PROFESSOR | 41.00 | X | | | | | 211,638. | 0. | 33,007. | |
| (9) PATRICK H. HAMILL TRUSTEE | 1.00 | X | | | | | | 0. | 0. | 0. |
| (10) JANE M. HAMILTON TRUSTEE-SECRETARY | 1.00 | X | X | | | | | 0. | 0. | 0. |
| (11) RICHARD R. KELLEY TRUSTEE | 1.00 | X | | | | | | 0. | 0. | 0. |
| (12) PATRICIA A. LIVINGSTON TRUSTEE | 1.00 | X | | | | | | 0. | 0. | 0. |
| (13) JOHN W. LOW TRUSTEE-VICE CHAIRMAN | 1.00 | X | X | | | | | 0. | 0. | 0. |
| (14) JOHN A. MILLER TRUSTEE | 1.00 | X | | | | | | 0. | 0. | 0. |
| (15) CARRIE MORGRIDGE TRUSTEE | 1.00 | X | | | | | | 0. | 0. | 0. |
| (16) TRYGVE E. MYHREN TRUSTEE-CHAIRMAN | 1.00 | X | X | | | | | 0. | 0. | 0. |
| (17) RALPH J. NAGEL TRUSTEE | 1.00 | X | | | | | | 0. | 0. | 0. |

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

| (A) Name and title | (B) Average hours per week (list any hours for related organizations below line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|--|---|---|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (18) ROBERT C. NEWMAN TRUSTEE | 1.00 | X | | | | | | 0. | 0. | 0. |
| (19) DENISE M. OLEARY TRUSTEE | 1.00 | X | | | | | | 0. | 0. | 0. |
| (20) SCOTT J. REIMAN TRUSTEE | 1.00 | X | | | | | | 0. | 0. | 0. |
| (21) DOUGLAS G. SCRIVNER TRUSTEE-CHAIRMAN ELECT | 1.00 | X | X | | | | | 0. | 0. | 0. |
| (22) CATHERINE C. SHOPNECK TRUSTEE-VICE CHAIRMAN | 1.00 | X | X | | | | | 0. | 0. | 0. |
| (23) DONALD L. STURM TRUSTEE-VICE CHAIRMAN | 1.00 | X | X | | | | | 0. | 0. | 0. |
| (24) OTTO TSCHUDI TRUSTEE | 1.00 | X | | | | | | 0. | 0. | 0. |
| (25) CLARA VILLAROSA TRUSTEE | 1.00 | X | | | | | | 0. | 0. | 0. |
| (26) FREDERICK T. WALDECK TRUSTEE | 1.00 | X | | | | | | 0. | 0. | 0. |
| 1b Sub-total | | | | | | | | 211,638. | 0. | 33,007. |
| c Total from continuation sheets to Part VII, Section A | | | | | | | | 5,802,843. | 0. | 789,448. |
| d Total (add lines 1b and 1c) | | | | | | | | 6,014,481. | 0. | 822,455. |

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **345**

| | Yes | No |
|--|-----|----|
| 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual | | X |
| 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual | X | |
| 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person | | X |

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

| (A) Name and business address | (B) Description of services | (C) Compensation |
|---|--------------------------------|---------------------|
| HD COMMUNICATIONS 2140 S PLATTE RIVER DRIVE, DENVER, CO 80223 | AUDIO VISUAL SERVICES | 601,529. |
| ALSTON AND BIRD LLC PO BOX 933124, ATLANTA, GA 31193 | LEGAL | 525,044. |
| ALAN AND BROOKS BUILDERS, 920 WEST MISSISSIPPI AVENUE, DENVER, CO 80223 | CONSTRUCTION SERVICES | 434,864. |
| CUSTOM DIRECTOR LLC 16163 W 45TH DRIVE, GOLDEN, CO 80403 | CUSTOM PRINTING | 416,160. |
| BRUCE MASTAY 1154 W 124TH COURT, WESTMINSTER, CO 80234 | PAINTING SERVICES | 393,941. |

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **21**

SEE PART VII, SECTION A CONTINUATION SHEETS

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

| (A) Name and title | (B) Average hours per week (list any hours for related organizations below line) | (C) Position (check all that apply) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|--|---|--|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (27) ROBERT COOMBE CHANCELLOR | 40.00 | | | X | | | | 456,332. | 0. | 54,059. |
| (28) CRAIG WOODY TREASURER/VICE CHANCELLOR | 40.00 | | | X | | | | 293,350. | 0. | 64,087. |
| (29) MARGARET HENRY ASST TREASURER/CONTROLLER | 40.00 | | | X | | | | 158,222. | 0. | 30,132. |
| (30) ROSALYNN FEAGINS ASST SECRETARY | 40.00 | | | X | | | | 63,194. | 0. | 16,585. |
| (31) CLAIRE BROWNELL ASST SECRETARY | 40.00 | | | X | | | | 61,816. | 0. | 23,044. |
| (32) ANGELA DUGGAN ASST SECRETARY | 40.00 | | | X | | | | 47,198. | 0. | 24,836. |
| (33) GREGG KVISTAD PROVOST | 40.00 | | | | X | | | 291,022. | 0. | 59,155. |
| (34) SCOTT LUMPKIN VICE CHANCELLOR | 40.00 | | | | X | | | 241,051. | 0. | 39,928. |
| (35) MARGARET BRADLEY DOPPE VICE CHANCELLOR | 40.00 | | | | X | | | 298,915. | 0. | 64,159. |
| (36) THOMAS WILLOUGHBY VICE CHANCELLOR | 40.00 | | | | X | | | 230,389. | 0. | 23,855. |
| (37) PAUL CHAN UNIVERSITY COUNSEL | 40.00 | | | | X | | | 195,038. | 0. | 32,805. |
| (38) CHRISTINE RIORDAN DEAN | 40.00 | | | | X | | | 228,509. | 0. | 18,284. |
| (39) CHARLES PATTI INTERIM DEAN | 40.00 | | | | X | | | 297,585. | 0. | 38,165. |
| (40) MARTIN KATZ DEAN | 40.00 | | | | X | | | 301,642. | 0. | 33,385. |
| (41) JOZEF BEMELEN DIRECTOR OF FACILITIES | 40.00 | | | | X | | | 176,927. | 0. | 26,096. |
| (42) KEVIN CARROLL VICE CHANCELLOR | 40.00 | | | | X | | | 288,364. | 0. | 25,506. |
| (43) TIMMY BROOKS VICE CHANCELLOR | 40.00 | | | | X | | | 254,346. | 0. | 34,206. |
| (44) DAVID GREENBERG VICE CHANCELLOR | 40.00 | | | | X | | | 200,550. | 0. | 28,760. |
| (45) GEORGE GWOZDECKY HEAD COACH | 40.00 | | | | | X | | 427,669. | 0. | 25,821. |
| (46) JOSEPH SCOTT HEAD COACH | 40.00 | | | | | X | | 416,263. | 0. | 39,350. |
| Total to Part VII, Section A, line 1c | | | | | | | | | | |

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

| | | (A) | (B) | (C) | (D) | |
|---|---|--|------------------------------------|----------------------------|--|--|
| | | Total revenue | Related or exempt function revenue | Unrelated business revenue | Revenue excluded from tax under sections 512-514 | |
| Contributions, Gifts, Grants and Other Similar Amounts | 1 a Federated campaigns | 1a | | | | |
| | b Membership dues | 1b | | | | |
| | c Fundraising events | 1c | 1,498,703. | | | |
| | d Related organizations | 1d | | | | |
| | e Government grants (contributions) | 1e | | | | |
| | f All other contributions, gifts, grants, and similar amounts not included above | 1f | 59,365,944. | | | |
| | g Noncash contributions included in lines 1a-1f: \$ | | 4,277,344. | | | |
| | h Total. Add lines 1a-1f | | 60,864,647. | | | |
| Program Service Revenue | 2 a TUITION AND FEES | Business Code 611310 | 410,326,608. | 410,326,608. | | |
| | b AUXILIARY ENTERPRISES | 611310 | 43,796,132. | 37,296,253. | 6,499,879. | |
| | c RESEARCH GRANTS | 611310 | 25,358,373. | 25,358,373. | | |
| | d EDUCATIONAL ACTIVITIES | 611310 | 12,883,172. | 12,883,172. | | |
| | e STUDENT LOANS | 611310 | -41,527. | -41,527. | | |
| | f All other program service revenue | | | | | |
| | g Total. Add lines 2a-2f | | 492,322,758. | | | |
| Other Revenue | 3 Investment income (including dividends, interest, and other similar amounts) | | 4,104,336. | -157,535. | 4,261,871. | |
| | 4 Income from investment of tax-exempt bond proceeds | | 25,312. | | 25,312. | |
| | 5 Royalties | | 379,954. | | 379,954. | |
| | 6 a Gross rents | (i) Real | 2,181,807. | | | |
| | | (ii) Personal | | | | |
| | | b Less: rental expenses | 728,647. | | | |
| | | c Rental income or (loss) | 1,453,160. | | | |
| | d Net rental income or (loss) | | 1,453,160. | | 1,453,160. | |
| | 7 a Gross amount from sales of assets other than inventory | (i) Securities | 955,761,246. | | | |
| | | (ii) Other | 28,622,689. | | | |
| | | b Less: cost or other basis and sales expenses | 942,697,055. | 27,928,584. | | |
| | | c Gain or (loss) | 13,064,191. | 694,105. | | |
| | d Net gain or (loss) | | 13,758,296. | | 13,758,296. | |
| | 8 a Gross income from fundraising events (not including \$ 1,498,703. of contributions reported on line 1c). See Part IV, line 18 | a | 519,757. | | | |
| | | b Less: direct expenses | 930,075. | | | |
| c Net income or (loss) from fundraising events | | | -410,318. | | -410,318. | |
| 9 a Gross income from gaming activities. See Part IV, line 19 | a | | | | | |
| | b Less: direct expenses | b | | | | |
| | c Net income or (loss) from gaming activities | | | | | |
| 10 a Gross sales of inventory, less returns and allowances | a | | | | | |
| | b Less: cost of goods sold | b | | | | |
| | c Net income or (loss) from sales of inventory | | | | | |
| Miscellaneous Revenue | | Business Code | | | | |
| 11 a MISC SERVICE REV | 611710 | 1,636,758. | 1,636,758. | | | |
| b ACTUARIAL ADJUSTMENTS | 900099 | -102,236. | | -102,236. | | |
| c | | | | | | |
| d All other revenue | | | | | | |
| e Total. Add lines 11a-11d | | 1,534,522. | | | | |
| 12 Total revenue. See instructions. | | 574,032,667. | 487,459,637. | 6,342,344. | 19,366,039. | |

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|---|-----------------------|---------------------------------|--|-----------------------------|
| 1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 | | | | |
| 2 Grants and other assistance to individuals in the United States. See Part IV, line 22 | 117,828,604. | 117,828,604. | | |
| 3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 | 11,377,223. | 11,377,223. | | |
| 4 Benefits paid to or for members | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | 4,966,142. | 1,162,214. | 3,522,949. | 280,979. |
| 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | | | | |
| 7 Other salaries and wages | 189,852,703. | 164,728,233. | 17,624,224. | 7,500,246. |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | 10,299,501. | 9,057,735. | 834,368. | 407,398. |
| 9 Other employee benefits | 21,400,052. | 18,782,158. | 1,449,396. | 1,168,498. |
| 10 Payroll taxes | 12,490,625. | 10,664,712. | 1,327,874. | 498,039. |
| 11 Fees for services (non-employees): | | | | |
| a Management | | | | |
| b Legal | 1,007,254. | 137,202. | 583,237. | 286,815. |
| c Accounting | 276,203. | 25,000. | 251,203. | |
| d Lobbying | 61,016. | | 61,016. | |
| e Professional fundraising services. See Part IV, line 17 | 406,104. | | | 406,104. |
| f Investment management fees | 604,409. | | 604,409. | |
| g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) | 28,761,494. | 26,360,651. | 1,900,139. | 500,704. |
| 12 Advertising and promotion | 1,944,686. | 1,708,290. | 178,526. | 57,870. |
| 13 Office expenses | 16,812,656. | 13,784,926. | 1,493,380. | 1,534,350. |
| 14 Information technology | 5,201,516. | 3,192,954. | 1,968,271. | 40,291. |
| 15 Royalties | | | | |
| 16 Occupancy | 19,090,488. | 18,216,175. | 869,696. | 4,617. |
| 17 Travel | 11,756,901. | 11,024,970. | 290,247. | 441,684. |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 Conferences, conventions, and meetings | 5,734,029. | 4,415,214. | 476,233. | 842,582. |
| 20 Interest | 5,674,173. | 5,397,274. | 276,899. | |
| 21 Payments to affiliates | | | | |
| 22 Depreciation, depletion, and amortization | 13,940,409. | 13,260,117. | 680,292. | |
| 23 Insurance | 2,264,960. | 953,234. | 1,311,726. | |
| 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | | | | |
| a BOOKS AND SUBSCRIPTIONS | 6,749,824. | 6,749,824. | | |
| b FINANCIAL FEES | 2,206,849. | 1,140,128. | 1,023,155. | 43,566. |
| c | | | | |
| d | | | | |
| e All other expenses | | | | |
| 25 Total functional expenses. Add lines 1 through 24e | 490,707,821. | 439,966,838. | 36,727,240. | 14,013,743. |
| 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. | | | | |

Check here if following SOP 98-2 (ASC 858-720)

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

| | | (A) Beginning of year | | (B) End of year | |
|-----------------------------|---|---|------------------|--------------------|--------------|
| Assets | 1 | Cash - non-interest-bearing | 37,558,801. | 1 | 58,315,812. |
| | 2 | Savings and temporary cash investments | 13,522,606. | 2 | 16,803,849. |
| | 3 | Pledges and grants receivable, net | 30,745,153. | 3 | 55,286,188. |
| | 4 | Accounts receivable, net | 22,544,048. | 4 | 18,355,370. |
| | 5 | Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L | | 5 | |
| | 6 | Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L | | 6 | |
| | 7 | Notes and loans receivable, net | | 7 | |
| | 8 | Inventories for sale or use | 3,004,976. | 8 | 3,315,488. |
| | 9 | Prepaid expenses and deferred charges | 1,558,875. | 9 | 1,573,913. |
| | 10a | Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a 727,430,975. | | |
| | b | Less: accumulated depreciation | 10b 162,430,342. | | |
| | | | 617,017,979. | 10c | 565,000,633. |
| | 11 | Investments - publicly traded securities | 408,233,346. | 11 | 527,252,772. |
| | 12 | Investments - other securities. See Part IV, line 11 | 170,084,630. | 12 | 186,579,270. |
| | 13 | Investments - program-related. See Part IV, line 11 | 18,341,113. | 13 | 17,337,566. |
| | 14 | Intangible assets | | 14 | |
| 15 | Other assets. See Part IV, line 11 | 13,793,848. | 15 | 13,182,057. | |
| 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 1,336,405,375. | 16 | 1,463,002,918. | |
| Liabilities | 17 | Accounts payable and accrued expenses | 56,936,571. | 17 | 66,359,816. |
| | 18 | Grants payable | | 18 | |
| | 19 | Deferred revenue | 26,025,805. | 19 | 27,972,384. |
| | 20 | Tax-exempt bond liabilities | 130,934,313. | 20 | 124,614,947. |
| | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D | 1,466,168. | 21 | 1,133,643. |
| | 22 | Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L | | 22 | |
| | 23 | Secured mortgages and notes payable to unrelated third parties | 1,000,000. | 23 | 0. |
| | 24 | Unsecured notes and loans payable to unrelated third parties | | 24 | |
| | 25 | Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D | 26,832,739. | 25 | 27,017,514. |
| | 26 | Total liabilities. Add lines 17 through 25 | 243,195,596. | 26 | 247,098,304. |
| Net Assets or Fund Balances | Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. | | | | |
| | 27 | Unrestricted net assets | 655,817,731. | 27 | 687,202,490. |
| | 28 | Temporarily restricted net assets | 179,049,711. | 28 | 238,254,369. |
| | 29 | Permanently restricted net assets | 258,342,337. | 29 | 290,447,755. |
| | Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34. | | | | |
| | 30 | Capital stock or trust principal, or current funds | | 30 | |
| | 31 | Paid-in or capital surplus, or land, building, or equipment fund | | 31 | |
| | 32 | Retained earnings, endowment, accumulated income, or other funds | | 32 | |
| 33 | Total net assets or fund balances | 1,093,209,779. | 33 | 1,215,904,614. | |
| 34 | Total liabilities and net assets/fund balances | 1,336,405,375. | 34 | 1,463,002,918. | |

Form 990 (2013)

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

| | | | |
|----|--|----|----------------|
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 574,032,667. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 490,707,821. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | 83,324,846. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 1,093,209,779. |
| 5 | Net unrealized gains (losses) on investments | 5 | 37,203,109. |
| 6 | Donated services and use of facilities | 6 | |
| 7 | Investment expenses | 7 | |
| 8 | Prior period adjustments | 8 | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | 2,166,880. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | 1,215,904,614. |

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

| | | Yes | No |
|----|---|-----|----|
| 1 | Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | | X |
| 2b | Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | X | |
| 2c | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. | X | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? | X | |
| 3b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits | X | |

Form 990 (2013)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization

COLORADO SEMINARY

Employer identification number

84-0404231

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).**
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

| | | |
|--|-----|----|
| | Yes | No |
| (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? | | |
| (ii) A family member of a person described in (i) above? | | |
| (iii) A 35% controlled entity of a person described in (i) or (ii) above? | | |
- h Provide the following information about the supported organization(s).

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) | (iv) Is the organization in col. (i) listed in your governing document? | | (v) Did you notify the organization in col. (i) of your support? | | (vi) Is the organization in col. (i) organized in the U.S.? | | (vii) Amount of monetary support |
|------------------------------------|----------|---|---|----|--|----|---|----|----------------------------------|
| | | | Yes | No | Yes | No | Yes | No | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Total | | | | | | | | | |

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

Schedule A (Form 990 or 990-EZ) 2013

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization falls to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) 2013 | (f) Total |
|---|-------------|-------------|-------------|-------------|-------------|--------------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 32,741,492. | 35,035,326. | 45,625,508. | 55,349,703. | 60,864,647. | 229,616,676. |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 Total. Add lines 1 through 3 | 32,741,492. | 35,035,326. | 45,625,508. | 55,349,703. | 60,864,647. | 229,616,676. |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | 31,803,660. |
| 6 Public support. Subtract line 5 from line 4. | | | | | | 197,813,016. |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) 2013 | (f) Total |
|--|-------------|-------------|-------------|-------------|-------------|----------------|
| 7 Amounts from line 4 | 32,741,492. | 35,035,326. | 45,625,508. | 55,349,703. | 60,864,647. | 229,616,676. |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 5,845,931. | 9,084,940. | 11,602,395. | 10,726,195. | 6,848,944. | 44,108,405. |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | 4,694,436. | 4,476,732. | 2,231,668. | 2,642,114. | 2,054,279. | 16,099,229. |
| 11 Total support. Add lines 7 through 10 | | | | | | 289,824,310. |
| 12 Gross receipts from related activities, etc. (see instructions) | | | | | 12 | 2,266,608,396. |
| 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/> | | | | | | |

Section C. Computation of Public Support Percentage

| | | | |
|---|----|-------|---|
| 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) | 14 | 68.25 | % |
| 15 Public support percentage from 2012 Schedule A, Part II, line 14 | 15 | | % |
| 16a 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/> | | | |
| b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/> | | | |
| 17a 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/> | | | |
| b 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/> | | | |
| 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/> | | | |

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) 2013 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | | | | | | |
| 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 Total. Add lines 1 through 5 | | | | | | |
| 7a Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | |
| c Add lines 7a and 7b | | | | | | |
| 8 Public support. (Subtract line 7c from line 6.) | | | | | | |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) 2013 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| 9 Amounts from line 8 | | | | | | |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| c Add lines 10a and 10b | | | | | | |
| 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | | | | | | |
| 13 Total support. (Add lines 9, 10c, 11, and 12.) | | | | | | |

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

| | | |
|--|-----------|---|
| 15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f)) | 15 | % |
| 16 Public support percentage from 2012 Schedule A, Part III, line 15 | 16 | % |

Section D. Computation of Investment Income Percentage

| | | |
|---|-----------|---|
| 17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f)) | 17 | % |
| 18 Investment income percentage from 2012 Schedule A, Part III, line 17 | 18 | % |

19a 33 1/3% support tests - 2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12.
Also complete this part for any additional information. (See instructions).

SCHEDULE A, PART II, SECTION B, LINE 10

MISCELLANEOUS REVENUE CONSISTS OF GROSS INCOME FROM
FUNDRAISING EVENTS NOT INCLUDING CONTRIBUTIONS, MISCELLANEOUS SERVICE
REVENUE AND ACTUARIAL ADJUSTMENTS.

Multiple horizontal lines for supplemental information.

Schedule B

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Name of the organization

COLORADO SEMINARY

Employer identification number

84-0404231

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust not treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization 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) and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to 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. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not 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 does not 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. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

| | |
|--|---|
| Name of organization COLORADO SEMINARY | Employer identification number 84-0404231 |
|--|---|

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) Total contributions | (d) Type of contribution |
|------------|-----------------------------------|----------------------------|---|
| 1 | <hr/> <hr/> <hr/> | \$ <u>3,747,691.</u> | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 2 | <hr/> <hr/> <hr/> | \$ <u>3,700,000.</u> | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 3 | <hr/> <hr/> <hr/> | \$ <u>2,659,323.</u> | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 4 | <hr/> <hr/> <hr/> | \$ <u>1,250,000.</u> | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 5 | <hr/> <hr/> <hr/> | \$ <u>1,833,560.</u> | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.) |
| | <hr/> <hr/> <hr/> | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |

| | |
|--|---|
| Name of organization COLORADO SEMINARY | Employer identification number 84-0404231 |
|--|---|

Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---------------------|---------------------|-----------------|-------------------------------------|
| | | | |

| (e) Transfer of gift | |
|---|--|
| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
| | |

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---------------------|---------------------|-----------------|-------------------------------------|
| | | | |

| (e) Transfer of gift | |
|---|--|
| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
| | |

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---------------------|---------------------|-----------------|-------------------------------------|
| | | | |

| (e) Transfer of gift | |
|---|--|
| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
| | |

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---------------------|---------------------|-----------------|-------------------------------------|
| | | | |

| (e) Transfer of gift | |
|---|--|
| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
| | |

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2013

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527
 ▶ **Complete if the organization is described below.** ▶ Attach to Form 990 or Form 990-EZ.
 ▶ **See separate instructions.** ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization **COLORADO SEMINARY** Employer identification number **84-0404231**

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political expenditures ▶ \$ 0.
 3 Volunteer hours 0.

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$
 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$
 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
 4a Was a correction made? Yes No
 b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ 0.
 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ 0.
 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$
 4 Did the filing organization file Form 1120-POL for this year? Yes No
 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

| (a) Name | (b) Address | (c) EIN | (d) Amount paid from filing organization's funds. If none, enter -0-. | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-. |
|----------|-------------|---------|---|--|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
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| | | | | |

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2013

LHA

332041
11-08-13

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

| Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) | | (a) Filing organization's totals | (b) Affiliated group totals |
|--|--|----------------------------------|-----------------------------|
| 1a Total lobbying expenditures to influence public opinion (grass roots lobbying) | | | |
| b Total lobbying expenditures to influence a legislative body (direct lobbying) | | | |
| c Total lobbying expenditures (add lines 1a and 1b) | | | |
| d Other exempt purpose expenditures | | | |
| e Total exempt purpose expenditures (add lines 1c and 1d) | | | |
| f Lobbying nontaxable amount. Enter the amount from the following table in both columns. | | | |
| If the amount on line 1e, column (a) or (b) is: | The lobbying nontaxable amount is: | | |
| Not over \$500,000 | 20% of the amount on line 1e. | | |
| Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000. | | |
| Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000. | | |
| Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000. | | |
| Over \$17,000,000 | \$1,000,000. | | |
| g Grassroots nontaxable amount (enter 25% of line 1f) | | | |
| h Subtract line 1g from line 1a. If zero or less, enter -0- | | | |
| i Subtract line 1f from line 1c. If zero or less, enter -0- | | | |
| j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? | | | |

Yes No

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

| Lobbying Expenditures During 4-Year Averaging Period | | | | | |
|---|----------|----------|----------|----------|-----------|
| Calendar year (or fiscal year beginning in) | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) Total |
| 2a Lobbying nontaxable amount | | | | | |
| b Lobbying ceiling amount (150% of line 2a, column(e)) | | | | | |
| c Total lobbying expenditures | | | | | |
| d Grassroots nontaxable amount | | | | | |
| e Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | |
| f Grassroots lobbying expenditures | | | | | |

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

| | (a) | | (b) |
|--|-----|----|---------|
| | Yes | No | Amount |
| 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: | | | |
| a Volunteers? | | X | |
| b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | X | |
| c Media advertisements? | | X | |
| d Mailings to members, legislators, or the public? | | X | |
| e Publications, or published or broadcast statements? | | X | |
| f Grants to other organizations for lobbying purposes? | | X | |
| g Direct contact with legislators, their staffs, government officials, or a legislative body? | | X | |
| h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | X | |
| i Other activities? | X | | 61,016. |
| j Total. Add lines 1c through 1i | | | 61,016. |
| 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | X | |
| b If "Yes," enter the amount of any tax incurred under section 4912 | | | |
| c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 | | | |
| d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | | |

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

| | Yes | No |
|--|-----|----|
| 1 Were substantially all (90% or more) dues received nondeductible by members? | 1 | |
| 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? | 2 | |
| 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? | 3 | |

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

| | | |
|---|----|--|
| 1 Dues, assessments and similar amounts from members | 1 | |
| 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). | | |
| a Current year | 2a | |
| b Carryover from last year | 2b | |
| c Total | 2c | |
| 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | 3 | |
| 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? | 4 | |
| 5 Taxable amount of lobbying and political expenditures (see instructions) | 5 | |

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.

PART II-B, LINE 1, LOBBYING ACTIVITIES:

THE UNIVERSITY PAYS DUES TO INDEPENDENT HIGHER EDUCATION OF COLORADO ALONG WITH TWO PRIVATE HIGHER EDUCATION INSTITUTIONS IN COLORADO. THIS ORGANIZATION PROVIDES MOSTLY LEGISLATIVE INFORMATION TO THE COLORADO INSTITUTIONS AND AT TIMES INFLUENCES LEGISLATORS FOR THE BENEFIT OF PRIVATE HIGHER EDUCATION.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization

COLORADO SEMINARY

Employer identification number

84-0404231

Part I: Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

| | (a) Donor advised funds | (b) Funds and other accounts |
|---|--|------------------------------|
| 1 Total number at end of year | | |
| 2 Aggregate contributions to (during year) | | |
| 3 Aggregate grants from (during year) | | |
| 4 Aggregate value at end of year | | |
| 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |

Part II: Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

| | Held at the End of the Tax Year |
|--|---------------------------------|
| a Total number of conservation easements | 2a |
| b Total acreage restricted by conservation easements | 2b |
| c Number of conservation easements on a certified historic structure included in (a) | 2c |
| d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register | 2d |

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III: Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ 0.

(ii) Assets included in Form 990, Part X ▶ \$ 0.

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ▶ \$

b Assets included in Form 990, Part X ▶ \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

| | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

| | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|--|------------------|----------------|--------------------|----------------------|---------------------|
| 1a Beginning of year balance | 419,349,528. | 386,749,857. | 354,210,152. | 295,937,813. | 269,909,327. |
| b Contributions | 34,562,402. | 19,402,198. | 36,370,920. | 29,649,376. | 12,012,928. |
| c Net investment earnings, gains, and losses | 54,953,139. | 29,424,565. | 9,967,274. | 41,791,469. | 25,596,104. |
| d Grants or scholarships | 9,569,029. | 6,479,636. | 5,482,627. | 5,241,692. | 4,545,584. |
| e Other expenditures for facilities and programs | 8,832,950. | 9,246,202. | 7,897,628. | 7,510,531. | 6,681,080. |
| f Administrative expenses | 604,409. | 501,254. | 418,234. | 416,283. | 353,882. |
| g End of year balance | 489,858,681. | 419,349,528. | 386,749,857. | 354,210,152. | 295,937,813. |

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment 17.04 %
- b Permanent endowment 25.97 %
- c Temporarily restricted endowment 56.99 %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

| | Yes | No |
|---|-------------------------------------|-------------------------------------|
| (i) unrelated organizations | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (ii) related organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? | <input type="checkbox"/> | <input type="checkbox"/> |

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

| Description of property | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|--|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1a Land | | 37,000,137. | | 37,000,137. |
| b Buildings | | 617,256,854. | 124,406,720. | 492,850,134. |
| c Leasehold improvements | | | | |
| d Equipment | | 61,576,598. | 38,023,622. | 23,552,976. |
| e Other | | 11,597,386. | | 11,597,386. |
| Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) | | | | 565,000,633. |

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|---------------------|---|
| (1) Financial derivatives | | |
| (2) Closely-held equity interests | | |
| (3) Other | | |
| (A) ALTERNATIVE INVESTMENTS | 186,333,416. | END-OF-YEAR MARKET VALUE |
| (B) INTERNATIONAL BOND | | |
| (C) HOLDING | 230,000. | END-OF-YEAR MARKET VALUE |
| (D) OTHER/VENTURE CAPITAL | 15,854. | END-OF-YEAR MARKET VALUE |
| (E) | | |
| (F) | | |
| (G) | | |
| (H) | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) | 186,579,270. | |

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

| (a) Description of investment | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|--------------------|---|
| (1) STUDENT LOANS | 17,337,566. | END-OF-YEAR MARKET VALUE |
| (2) | | |
| (3) | | |
| (4) | | |
| (5) | | |
| (6) | | |
| (7) | | |
| (8) | | |
| (9) | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) | 17,337,566. | |

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

| (a) Description | (b) Book value |
|---|--------------------|
| (1) BENEFICIAL TRUST INTEREST | 12,938,761. |
| (2) CASH SURRENDER VALUE INSURANCE POLICIES | 243,296. |
| (3) | |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) | 13,182,057. |

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

| 1. (a) Description of liability | (b) Book value |
|---|--------------------|
| (1) Federal income taxes | |
| (2) ANNUITY AND LIFE INTEREST | |
| (3) OBLIGATIONS | 10,579,856. |
| (4) FEDERAL PERKINS LOAN PROGRAM - | |
| (5) REFUNDABLE | 16,437,658. |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) | 27,017,514. |

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

| | | | |
|---|---|----|--------------|
| 1 | Total revenue, gains, and other support per audited financial statements | 1 | 614,456,969. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | |
| a | Net unrealized gains on investments | 2a | 37,203,109. |
| b | Donated services and use of facilities | 2b | |
| c | Recoveries of prior year grants | 2c | |
| d | Other (Describe in Part XIII.) | 2d | 3,825,602. |
| e | Add lines 2a through 2d | 2e | 41,028,711. |
| 3 | Subtract line 2e from line 1 | 3 | 573,428,258. |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | 604,409. |
| b | Other (Describe in Part XIII.) | 4b | |
| c | Add lines 4a and 4b | 4c | 604,409. |
| 5 | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | 5 | 574,032,667. |

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

| | | | |
|---|--|----|--------------|
| 1 | Total expenses and losses per audited financial statements | 1 | 491,762,134. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | |
| a | Donated services and use of facilities | 2a | |
| b | Prior year adjustments | 2b | |
| c | Other losses | 2c | |
| d | Other (Describe in Part XIII.) | 2d | 1,658,722. |
| e | Add lines 2a through 2d | 2e | 1,658,722. |
| 3 | Subtract line 2e from line 1 | 3 | 490,103,412. |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | 604,409. |
| b | Other (Describe in Part XIII.) | 4b | |
| c | Add lines 4a and 4b | 4c | 604,409. |
| 5 | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | 5 | 490,707,821. |

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART III, LINE 1A:

DONATED WORKS OF ART ARE CONSIDERED COLLECTIONS UNDER THE UNIVERSITY'S POLICY. COLLECTIONS HELD FOR PUBLIC EXHIBITION AND EDUCATION IN FURTHERANCE OF PUBLIC SERVICE RATHER THAN FINANCIAL GAIN ARE NOT RECORDED IN THE STATEMENTS OF FINANCIAL POSITION.

PART III, LINE 4:

THE UNIVERSITY ACQUIRES AND MANAGES A WIDE VARIETY OF WORKS OF ART. THESE ARE INTENDED TO ENHANCE THE ACADEMIC AND LIFELONG LEARNING EXPERIENCES OF STUDENTS, FACULTY, STAFF, AND THE GENERAL PUBLIC. THESE OBJECTS BRING THE UNIVERSITY AND COMMUNITY AUDIENCES TOGETHER THROUGH SHARED EXPERIENCES WITH ART AND POSSESS THE POTENTIAL TO EDUCATE,

Part XIII Supplemental Information (continued)

ENLIGHTEN AND INSPIRE. THE UNIVERSITY'S ART AND COLLECTION HOLDINGS WILL GENERALLY BE CONSIDERED AS BELONGING TO ONE OF TWO CATEGORIES: 1) ARTWORK OF GENERAL INTEREST VALUED PRIMARILY AS ORNAMENTS FOR THE UNIVERSITY'S BUILDINGS AND GROUNDS; OR 2) THOSE ARTWORKS DEEMED TO BE OF SUFFICIENT ARTISTIC, SCHOLARLY OR FINANCIAL VALUE TO JUSTIFY INCLUSION IN THE FORMAL UNIVERSITY ART COLLECTIONS.

PART IV, LINE 2B:

THE DISTRIBUTION OF CERTAIN STUDENT FEES IS GOVERNED BY STUDENT ORGANIZATIONS. THESE FUNDS ARE TEMPORARILY HELD IN THE UNIVERSITY'S OPERATING BANK ACCOUNT AND RECORDED AS A LIABILITY ON THE UNIVERSITY'S BALANCE SHEET.

PART V, LINE 4:

SPENDING DISTRIBUTIONS FROM THE UNIVERSITY'S ENDOWMENT FUNDS PROVIDE SUPPORT TO UNIVERSITY SCHOLARSHIPS (46%), ACADEMIC PROGRAMS (26%), FACULTY CHAIRS & PROFESSORSHIPS (22%) AND OTHER UNIVERSITY OPERATIONS AND FUNCTIONS (6%).

PART X, LINE 2:

THE UNIVERSITY IS RECOGNIZED AS AN ORGANIZATION GENERALLY EXEMPT FROM INCOME TAXES UNDER SECTION 501(A) OF THE INTERNAL REVENUE CODE (THE CODE) AS AN ORGANIZATION DESCRIBED IN SECTION 501(C)(3) AND A PUBLIC CHARITY, AND NOT AS A PRIVATE FOUNDATION, UNDER SECTION 509(A)(1). HOWEVER, INCOME GENERATED FROM ACTIVITIES UNRELATED TO THE UNIVERSITY'S EXEMPT PURPOSE IS SUBJECT TO TAX UNDER SECTION 511 OF THE CODE. THE UNIVERSITY HAD NO MATERIAL AMOUNTS OF UNRELATED BUSINESS INCOME FOR THE YEARS ENDED JUNE 30, 2014 AND 2013.

Part XIII Supplemental Information (continued)

THE UNIVERSITY EVALUATES ITS TAX POSITION IN ACCORDANCE WITH THE PROVISIONS OF FASB ASC TOPIC 740-10, INCOME TAXES (FORMERLY, FASB INTERPRETATION NO. 48). FASB ASC TOPIC 740-10 CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAX RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS. FASB ASC TOPIC 740-10 REQUIRES ENTITIES TO DETERMINE WHETHER IT IS MORE LIKELY THAN NOT THAT A TAX POSITION WILL BE SUSTAINED UPON EXAMINATION BY THE APPROPRIATE TAXING AUTHORITIES BEFORE ANY PART OF THE BENEFIT CAN BE RECORDED IN THE FINANCIAL STATEMENTS. IT ALSO PROVIDES GUIDANCE ON THE RECOGNITION, MEASUREMENT, AND CLASSIFICATION OF INCOME TAX UNCERTAINTIES, ALONG WITH ANY RELATED INTEREST OR PENALTIES. A TAX POSITION IS MEASURED AT THE LARGEST AMOUNT OF BENEFIT THAT IS GREATER THAN 50% LIKELY BEING REALIZED UPON SETTLEMENT. THE UNIVERSITY HAS NO UNCERTAIN INCOME TAX POSITIONS AS OF JUNE 30, 2014. THE UNIVERSITY IS NO LONGER SUBJECT TO U.S. FEDERAL OR STATE INCOME TAX EXAMINATIONS BY TAX AUTHORITIES FOR THE YEARS ENDED JUNE 30, 2010.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

| | |
|---------------------------------------|------------|
| SPECIAL EVENT EXPENSES | 930,075. |
| RENTAL EXPENSES | 728,647. |
| ACTUARIAL ADJUSTMENT | 2,166,880. |
| TOTAL TO SCHEDULE D, PART XI, LINE 2D | 3,825,602. |

PART XII, LINE 2D - OTHER ADJUSTMENTS:

| | |
|--|------------|
| SPECIAL EVENT EXPENSES | 930,075. |
| RENTAL EXPENSES | 728,647. |
| TOTAL TO SCHEDULE D, PART XII, LINE 2D | 1,658,722. |

SCHEDULE E
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

▶ Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

2013

Open to Public Inspection

▶ Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

Name of the organization

COLORADO SEMINARY

Employer identification number

84-0404231

Part I

| | YES | NO |
|---|-------------------------------------|-------------------------------------|
| 1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| SEE PART II | | |
| 4 Does the organization maintain the following? | | |
| a Records indicating the racial composition of the student body, faculty, and administrative staff? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| d Copies of all material used by the organization or on its behalf to solicit contributions? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If you answered "No" to any of the above, please explain. If you need more space, use Part II. | | |
| 5 Does the organization discriminate by race in any way with respect to: | | |
| a Students' rights or privileges? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| b Admissions policies? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| c Employment of faculty or administrative staff? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| d Scholarships or other financial assistance? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| e Educational policies? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| f Use of facilities? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| g Athletic programs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| h Other extracurricular activities? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. | | |
| 6a Does the organization receive any financial aid or assistance from a governmental agency? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b Has the organization's right to such aid ever been revoked or suspended? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| If you answered "Yes" to either line 6a or line 6b, explain on Part II. | | |
| 7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

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

Schedule E (Form 990 or 990-EZ) (2013)

Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information.

LINE 3 - EXPLANATION OF NONDISCRIMINATION POLICY:

THE UNIVERSITY INCLUDES DESCRIPTIONS ON ITS WEBSITE AND STATES ON THE BOTTOM OF THE UNIVERSITY WEB PAGES THAT "THE UNIVERSITY IS AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION INSTITUTION." THE FOLLOWING NON-DISCRIMINATION POLICY IS PUBLICIZED IN COLLEGE ADMISSION AND OTHER PUBLICATIONS THAT ARE DIRECTED TOWARD THE STUDENT'S EDUCATIONAL EXPERIENCE. THE UNIVERSITY OF DENVER IS AN EQUAL OPPORTUNITY INSTITUTION. IT IS THE POLICY OF THE UNIVERSITY NOT TO DISCRIMINATE IN ADMISSION OF STUDENTS, IN THE PROVISION OF SERVICES, OR IN EMPLOYMENT ON THE BASIS OF RACE, ETHNICITY, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE, MARTIAL STATUS, VETERAN STATUS, SEXUAL ORIENTATION, GENDER IDENTITY, GENDER EXPRESSION OR DISABILITY. THE UNIVERSITY COMPLIES WITH ALL APPLICABLE FEDERAL, STATE, AND LOCAL LAWS, REGULATIONS AND EXECUTIVE ORDERS.

LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:

THE UNIVERSITY PARTICIPATES IN FEDERAL AND STATE FINANCIAL AID PROGRAMS INCLUDING: FEDERAL SUPPLEMENTAL EDUCATION OPPORTUNITY GRANT PROGRAM, FEDERAL FAMILY EDUCATION LOANS, FEDERAL WORK-STUDY PROGRAM, JOB LOCATION AND DEVELOPMENT PROGRAM. COLORADO STATE PROGRAMS INCLUDE: STUDENT INCENTIVE GRANT, GRADUATE GRANT, COLLEGE WORK-STUDY, UNDERGRADUATE MERIT SCHOLARSHIP, PART-TIME STUDENT GRANT, GOVERNOR'S OPPORTUNITY SCHOLARSHIP AND PRE-COLLEGIATE ACADEMIC COMPETITIVE GRANT.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization

COLORADO SEMINARY

Employer identification number

84-0404231

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

| (a) Region | (b) Number of offices in the region | (c) Number of employees, agents, and independent contractors in region | (d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in region | (f) Total expenditures for and investments in region |
|---|-------------------------------------|--|---|--|--|
| CENTRAL AMERICA AND THE CARIBBEAN | 0 | 0 | GRANT MAKING | | 479,150. |
| CENTRAL AMERICA AND THE CARIBBEAN | 0 | 0 | INVESTMENTS | | 130,377,529. |
| CENTRAL AMERICA AND THE CARIBBEAN | 0 | 0 | PROGRAM SERVICES | ACADEMIC SUPPORT & STUDENT SERVICES | 87,583. |
| CENTRAL AMERICA AND THE CARIBBEAN | 0 | 0 | PROGRAM SERVICES | INSTRUCTION | 347,179. |
| CENTRAL AMERICA AND THE CARIBBEAN | 0 | 0 | PROGRAM SERVICES | RESEARCH & PUBLIC SERVICE | 57,067. |
| EAST ASIA AND THE PACIFIC | 0 | 0 | GRANT MAKING | | 5,351,425. |
| EAST ASIA AND THE PACIFIC | 0 | 0 | PROGRAM SERVICES | ACADEMIC SUPPORT & STUDENT SERVICES | 349,270. |
| EAST ASIA AND THE PACIFIC | 0 | 0 | PROGRAM SERVICES | INSTITUTIONAL SUPPORT | 11,560. |
| 3 a Sub-total | 0 | 0 | | | 137,060,763. |
| b Total from continuation sheets to Part I | 0 | 0 | | | 26,648,974. |
| c Totals (add lines 3a and 3b) | 0 | 0 | | | 163,709,737. |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2013

Part I Continuation of Activities per Region (Schedule F (Form 990), Part I, line 3)

| (a) Region | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in region | (f) Total expenditures for region |
|--|-------------------------------------|---|--|--|-----------------------------------|
| EAST ASIA AND THE PACIFIC | 0 | 0 | PROGRAM SERVICES | INSTRUCTION | 1,337,873. |
| EAST ASIA AND THE PACIFIC | 0 | 0 | PROGRAM SERVICES | RESEARCH & PUBLIC SERVICE | 25,404. |
| EUROPE (INCLUDING ICELAND & GREENLAND) | 0 | 0 | GRANT MAKING | | 2,003,496. |
| EUROPE (INCLUDING ICELAND & GREENLAND) | 0 | 0 | INVESTMENTS | | 10,374,000. |
| EUROPE (INCLUDING ICELAND & GREENLAND) | 0 | 0 | PROGRAM SERVICES | ACADEMIC SUPPORT & STUDENT SERVICES | 1,017,843. |
| EUROPE (INCLUDING ICELAND & GREENLAND) | 0 | 0 | PROGRAM SERVICES | INSTITUTIONAL SUPPORT | 20,175. |
| EUROPE (INCLUDING ICELAND & GREENLAND) | 0 | 0 | PROGRAM SERVICES | INSTRUCTION | 4,967,319. |
| EUROPE (INCLUDING ICELAND & GREENLAND) | 0 | 0 | PROGRAM SERVICES | RESEARCH & PUBLIC SERVICE | 116,431. |
| MIDDLE EAST AND NORTH AFRICA | 0 | 0 | GRANT MAKING | | 627,231. |
| MIDDLE EAST AND NORTH AFRICA | 0 | 0 | PROGRAM SERVICES | ACADEMIC SUPPORT & STUDENT SERVICES | 60,447. |
| Totals | | | | | |

Part I Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

| (a) Region | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in region | (f) Total expenditures for region |
|-------------------------------|-------------------------------------|---|--|--|-----------------------------------|
| MIDDLE EAST AND NORTH AFRICA | 0 | 0 | PROGRAM SERVICES | INSTITUTIONAL SUPPORT | 1,352. |
| MIDDLE EAST AND NORTH AFRICA | 0 | 0 | PROGRAM SERVICES | INSTRUCTION | 460,074. |
| MIDDLE EAST AND NORTH AFRICA | 0 | 0 | PROGRAM SERVICES | RESEARCH & PUBLIC SERVICE | 7,157. |
| NORTH AMERICA | 0 | 0 | GRANT MAKING | | 1,259,371. |
| NORTH AMERICA | 0 | 0 | PROGRAM SERVICES | ACADEMIC SUPPORT & STUDENT SERVICES | 158,394. |
| NORTH AMERICA | 0 | 0 | PROGRAM SERVICES | INSTITUTIONAL SUPPORT | 1,908. |
| NORTH AMERICA | 0 | 0 | PROGRAM SERVICES | INSTRUCTION | 177,039. |
| NORTH AMERICA | 0 | 0 | PROGRAM SERVICES | RESEARCH & PUBLIC SERVICE | 40,819. |
| RUSSIA AND NEIGHBORING STATES | 0 | 0 | GRANT MAKING | | 179,432. |
| RUSSIA AND NEIGHBORING STATES | 0 | 0 | PROGRAM SERVICES | ACADEMIC SUPPORT & STUDENT SERVICES | 9,097. |
| Totals | | | | | |

Part I Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

| (a) Region | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in region | (f) Total expenditures for region |
|-------------------------------|-------------------------------------|---|--|--|-----------------------------------|
| RUSSIA AND NEIGHBORING STATES | 0 | 0 | PROGRAM SERVICES | INSTRUCTION | 42,327. |
| RUSSIA AND NEIGHBORING STATES | 0 | 0 | PROGRAM SERVICES | RESEARCH & PUBLIC SERVICE | 3,209. |
| SOUTH AMERICA | 0 | 0 | GRANT MAKING | | 481,430. |
| SOUTH AMERICA | 0 | 0 | PROGRAM SERVICES | ACADEMIC SUPPORT & STUDENT SERVICES | 138,454. |
| SOUTH AMERICA | 0 | 0 | PROGRAM SERVICES | INSTITUTIONAL SUPPORT | 9,936. |
| SOUTH AMERICA | 0 | 0 | PROGRAM SERVICES | INSTRUCTION | 886,989. |
| SOUTH AMERICA | 0 | 0 | PROGRAM SERVICES | RESEARCH & PUBLIC SERVICE | 11,083. |
| SOUTH ASIA | 0 | 0 | GRANT MAKING | | 599,706. |
| SOUTH ASIA | 0 | 0 | PROGRAM SERVICES | ACADEMIC SUPPORT & STUDENT SERVICES | 59,800. |
| SOUTH ASIA | 0 | 0 | PROGRAM SERVICES | INSTITUTIONAL SUPPORT | 3,436. |
| Totals | | | | | |

Part I Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

| (a) Region | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in region | (f) Total expenditures for region |
|--------------------|-------------------------------------|---|--|--|-----------------------------------|
| SOUTH ASIA | 0 | 0 | PROGRAM SERVICES | INSTRUCTION | 352,689. |
| SOUTH ASIA | 0 | 0 | PROGRAM SERVICES | RESEARCH & PUBLIC SERVICE | 75,662. |
| SUB-SAHARAN AFRICA | 0 | 0 | GRANT MAKING | | 395,982. |
| SUB-SAHARAN AFRICA | 0 | 0 | PROGRAM SERVICES | ACADEMIC SUPPORT & STUDENT SERVICES | 149,940. |
| SUB-SAHARAN AFRICA | 0 | 0 | PROGRAM SERVICES | INSTRUCTION | 467,691. |
| SUB-SAHARAN AFRICA | 0 | 0 | PROGRAM SERVICES | RESEARCH & PUBLIC SERVICE | 125,778. |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Totals | | | | | 26,648,974. |

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 18.
Part III can be duplicated if additional space is needed.

| (a) Type of grant or assistance | (b) Region | (c) Number of recipients | (d) Amount of cash grant | (e) Manner of cash disbursement | (f) Amount of non-cash assistance | (g) Description of non-cash assistance | (h) Method of valuation (book, FMV, appraisal, other) |
|---------------------------------|--|--------------------------|--------------------------|---------------------------------------|-----------------------------------|--|---|
| EDUCATIONAL SCHOLARSHIPS | SUB-SAHARAN AFRICA | 17 | 395,982. | DIRECT APPLICATION TO STUDENT ACCOUNT | 0. | | |
| EDUCATIONAL SCHOLARSHIPS | CENTRAL AMERICA AND THE CARIBBEAN | 17 | 479,150. | DIRECT APPLICATION TO STUDENT ACCOUNT | 0. | | |
| EDUCATIONAL SCHOLARSHIPS | EAST ASIA AND THE PACIFIC | 514 | 5,351,425. | DIRECT APPLICATION TO STUDENT ACCOUNT | 0. | | |
| EDUCATIONAL SCHOLARSHIPS | EUROPE (INCLUDING ICELAND & GREENLAND) | 64 | 2,003,496. | DIRECT APPLICATION TO STUDENT ACCOUNT | 0. | | |
| EDUCATIONAL SCHOLARSHIPS | MIDDLE EAST AND NORTH AFRICA | 40 | 627,231. | DIRECT APPLICATION TO STUDENT ACCOUNT | 0. | | |
| EDUCATIONAL SCHOLARSHIPS | NORTH AMERICA | 38 | 1,259,371. | DIRECT APPLICATION TO STUDENT ACCOUNT | 0. | | |
| EDUCATIONAL SCHOLARSHIPS | RUSSIA AND NEIGHBORING STATES | 8 | 179,432. | DIRECT APPLICATION TO STUDENT ACCOUNT | 0. | | |
| EDUCATIONAL SCHOLARSHIPS | SOUTH AMERICA | 17 | 481,430. | DIRECT APPLICATION TO STUDENT ACCOUNT | 0. | | |
| EDUCATIONAL SCHOLARSHIPS | SOUTH ASIA | 28 | 599,706. | DIRECT APPLICATION TO STUDENT ACCOUNT | 0. | | |

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A) Yes No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471) Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621) Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865) Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report. (see Instructions for Form 5713) Yes No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

PART I, LINE 2:

THE UNIVERSITY OF DENVER HAS A UNIVERSITY WIDE SCHOLARSHIP AND GRANT ALLOCATION SYSTEM AND PROCESS THAT DISTRIBUTES GRANT AND SCHOLARSHIP FUNDS FOR ALL DIVISIONS OF THE UNIVERSITY. THE PURPOSE AND ELIGIBILITY CRITERIA ARE ESTABLISHED AT THE FUND LEVEL. THE EXPENDITURE OF THIS FINANCIAL RESOURCE IS MONITORED THROUGH A COMPREHENSIVE SOFTWARE SYSTEM WHICH ALLOWS FOR RECONCILIATION, ELIGIBILITY CHECKS, AND PREVENTS OVER EXPENDITURE. THE UNIVERSITY ALSO PARTICIPATES IN ANNUAL INDEPENDENT FINANCIAL AUDITS TO ENSURE COMPLIANCE. ALL SCHOLARSHIPS AND GRANTS TO DOMESTIC AND FOREIGN RECIPIENTS ARE DIRECTLY APPLIED TO THE RECIPIENT'S TUITION AND FEE RECEIVABLE ACCOUNT AND IS APPLIED TO ANY OUTSTANDING CHARGES PRIOR TO DISBURSEMENT OF ANY EXCESS AMOUNTS.

SCHEDULE F, PART I

EXPENDITURES LISTED IN PART I ARE REPORTED USING AN ACCRUAL METHOD OF ACCOUNTING.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

| | | (a) Event #1 | (b) Event #2 | (c) Other events | (d) Total events (add col. (a) through col. (c)) |
|-----------------|----|--|------------------------------------|------------------------|--|
| | | DINNERS (event type) | SPORTING EVENTS (event type) | NONE (total number) | |
| Revenue | 1 | Gross receipts | 1,475,997. | 542,463. | 2,018,460. |
| | 2 | Less: Contributions | 1,240,428. | 258,275. | 1,498,703. |
| | 3 | Gross income (line 1 minus line 2) | 235,569. | 284,188. | 519,757. |
| Direct Expenses | 4 | Cash prizes | | | |
| | 5 | Noncash prizes | 3,812. | 3,088. | 6,900. |
| | 6 | Rent/facility costs | 150,236. | 58,238. | 208,474. |
| | 7 | Food and beverages | 150,122. | 76,899. | 227,021. |
| | 8 | Entertainment | 36,774. | | 36,774. |
| | 9 | Other direct expenses | 410,027. | 40,878. | 450,905. |
| | 10 | Direct expense summary. Add lines 4 through 9 in column (d) | | | 930,074. |
| | 11 | Net income summary. Subtract line 10 from line 3, column (d) | | | -410,317. |

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

| | | (a) Bingo | (b) Pull tabs/instant bingo/progressive bingo | (c) Other gaming | (d) Total gaming (add col. (a) through col. (c)) |
|-----------------|---|--|---|---|---|
| | | | | | |
| Revenue | 1 | Gross revenue | | | |
| | 2 | Cash prizes | | | |
| Direct Expenses | 3 | Noncash prizes | | | |
| | 4 | Rent/facility costs | | | |
| | 5 | Other direct expenses | | | |
| | 6 | Volunteer labor | <input type="checkbox"/> Yes _____ % <input type="checkbox"/> No | <input type="checkbox"/> Yes _____ % <input type="checkbox"/> No | <input type="checkbox"/> Yes _____ % <input type="checkbox"/> No |
| | 7 | Direct expense summary. Add lines 2 through 5 in column (d) | | | |
| | 8 | Net gaming income summary. Subtract line 7 from line 1, column (d) | | | |

9 Enter the state(s) in which the organization operates gaming activities: _____
 a Is the organization licensed to operate gaming activities in each of these states? Yes No
 b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
 b If "Yes," explain: _____

11 Does the organization operate gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity operated in:
a The organization's facility 13a %
b An outside facility 13b %

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:
Name
Address

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$

c If "Yes," enter name and address of the third party:

Name
Address

16 Gaming manager information:

Name

Gaming manager compensation \$

Description of services provided

Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: RUFFALOCODY LLC

(I) ADDRESS OF FUNDRAISER: PO BOX 3018, CEDAR RAPIDS, IA 52406-3018

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
|--|--------------------------|--------------------------|-----------------------------------|---|--|
| FINANCIAL AID - FEDERAL SEOG PROGRAM | 236 | 353,998. | 0. | | |
| FINANCIAL AID - STATE PROGRAMS | 606 | 908,694. | 0. | | |
| FINANCIAL AID - ENDOWED AND GIFT FUNDED | 2028 | 9,770,893. | 0. | | |
| FINANCIAL AID - GTA WAIVERS | 118 | 863,072. | 0. | | |
| FINANCIAL AID - INSTITUTIONAL EDUCATION GRANTS | 7769 | 114,932,847. | 0. | | |

Part IV Supplemental information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

PART I, LINE 2:

THE UNIVERSITY OF DENVER HAS A UNIVERSITY WIDE SCHOLARSHIP AND GRANT ALLOCATION SYSTEM THAT DISTRIBUTES GRANT AND SCHOLARSHIP FUNDS TO ALL DIVISIONS OF THE UNIVERSITY. THE PURPOSE AND ELIGIBILITY CRITERIA ARE ESTABLISHED AT THE FUND LEVEL. THE EXPENDITURE OF THIS FINANCIAL RESOURCE IS MONITORED THROUGH A COMPREHENSIVE SOFTWARE SYSTEM WHICH ALLOWS FOR RECONCILIATION, ELIGIBILITY CHECKS, AND PREVENTS OVER EXPENDITURE. THE UNIVERSITY ALSO PARTICIPATES IN ANNUAL INDEPENDENT FINANCIAL AUDITS TO ENSURE COMPLIANCE. ALL SCHOLARSHIPS AND GRANTS TO DOMESTIC AND FOREIGN

Part IV Supplemental Information

RECIPIENTS ARE DIRECTLY APPLIED TO THE RECIPIENTS' TUITION AND FEE RECEIVABLE ACCOUNT AND IS APPLIED TO ANY OUTSTANDING CHARGES PRIOR TO DISBURSEMENT OF ANY EXCESS AMOUNTS.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
- ▶ Attach to Form 990. ▶ See separate instructions.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization

COLORADO SEMINARY

Employer identification number

84-0404231

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|---|
| <input type="checkbox"/> First-class or charter travel | <input checked="" type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input checked="" type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

| | Yes | No |
|-----------|-----|----|
| 1b | X | |

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?

| | | |
|----------|---|--|
| 2 | X | |
|----------|---|--|

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? **4a** X
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? **4b** X
- c** Participate in, or receive payment from, an equity-based compensation arrangement? **4c** X
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? **5a** X
- b** Any related organization? **5b** X
- If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? **6a** X
- b** Any related organization? **6b** X
- If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III **7** X

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III **8** X

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? **9**

| | | |
|-----------|---|---|
| 4a | X | |
| 4b | X | |
| 4c | | X |
| 5a | | X |
| 5b | | X |
| 6a | | X |
| 6b | | X |
| 7 | | X |
| 8 | | X |
| 9 | | |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2013

Part II: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

| (A) Name and Title | (B) Breakdown of W-2 and/or 1099-MISC compensation | | | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation reported as deferred in prior Form 990 |
|---|--|-------------------------------------|-------------------------------------|--|-------------------------|---------------------------------|---|
| | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | | | | |
| (1) JAMES GRIESEMER TRUSTEE-PROFESSOR | (i) 211,638. (ii) 0. (iii) 0. | 0. | 0. | 14,670. | 18,337. | 244,645. | 0. |
| (2) ROBERT COOMER CHANCELLOR | (i) 401,372. (ii) 45,000. (iii) 9,960. | 0. | 0. | 20,400. | 33,659. | 510,391. | 0. |
| (3) CRAIG WOODY TREASURER/VICE CHANCELLOR | (i) 278,938. (ii) 7,500. (iii) 6,912. | 0. | 0. | 52,900. | 11,187. | 357,437. | 0. |
| (4) MARGARET HENRY ASST TREASURER/CONTROLLER | (i) 150,742. (ii) 7,000. (iii) 480. | 0. | 0. | 12,617. | 17,515. | 188,354. | 0. |
| (5) GREGG KVISTAD PROVOST | (i) 282,742. (ii) 7,500. (iii) 780. | 0. | 0. | 52,900. | 6,255. | 350,177. | 0. |
| (6) SCOTT LUMPKIN VICE CHANCELLOR | (i) 228,491. (ii) 5,000. (iii) 7,560. | 0. | 0. | 19,040. | 20,888. | 280,979. | 0. |
| (7) MARGARET BRADLEY DOPPE VICE CHANCELLOR | (i) 280,575. (ii) 10,000. (iii) 8,340. | 0. | 0. | 52,900. | 11,259. | 363,074. | 0. |
| (8) THOMAS WILLOUGHBY VICE CHANCELLOR | (i) 218,489. (ii) 5,000. (iii) 6,900. | 0. | 0. | 17,600. | 6,255. | 254,244. | 0. |
| (9) PAUL CHAN UNIVERSITY COUNSEL | (i) 189,198. (ii) 5,000. (iii) 840. | 0. | 0. | 15,760. | 17,045. | 227,843. | 0. |
| (10) CHRISTINE RIORDAN DEAN | (i) 227,859. (ii) 0. (iii) 650. | 0. | 0. | 18,284. | 0. | 246,793. | 0. |
| (11) CHARLES PARTI INTERIM DEAN | (i) 296,959. (ii) 0. (iii) 626. | 0. | 0. | 20,400. | 17,765. | 335,750. | 0. |
| (12) MARTIN KATZ DEAN | (i) 292,232. (ii) 8,000. (iii) 1,410. | 0. | 0. | 20,400. | 12,985. | 335,027. | 0. |
| (13) JOZEF BEMLEN DIRECTOR OF FACILITIES | (i) 164,854. (ii) 7,000. (iii) 5,073. | 0. | 0. | 13,586. | 12,510. | 203,023. | 0. |
| (14) KEVIN CARROLL VICE CHANCELLOR | (i) 283,364. (ii) 5,000. (iii) 0. | 0. | 0. | 15,413. | 10,093. | 313,870. | 0. |
| (15) TUDMY BROOKS VICE CHANCELLOR | (i) 253,266. (ii) 0. (iii) 1,080. | 0. | 0. | 19,600. | 14,606. | 288,552. | 0. |
| (16) DAVID GREENBERG VICE CHANCELLOR | (i) 194,470. (ii) 5,000. (iii) 1,080. | 0. | 0. | 16,000. | 12,760. | 229,310. | 0. |
| | (i) 0. (ii) 0. (iii) 0. | 0. | 0. | 0. | 0. | 0. | 0. |

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 1A:

THE UNIVERSITY PROVIDES HOUSING FOR THE CHANCELLOR WHO USES

THE PROPERTY FOR UNIVERSITY ACTIVITIES.

CERTAIN EMPLOYEES RECEIVE ATHLETIC/COUNTRY CLUB MEMBERSHIPS AS PART OF THEIR COMPENSATION. THE NON-BUSINESS USE PORTION OF THE MEMBERSHIP IS RECORDED AS TAXABLE EARNINGS TO THE EMPLOYEE.

PART I, LINES 4A-B:

GEORGE GWOZDECKY RECEIVED AN EMPLOYMENT SEPARATION PAYMENT OF \$197,536.

MARGARET BRADLEY-DOPPE (PARTICIPATION IN 457(F) RETIREMENT PLAN \$32,500)

GREGG KVISTAD (PARTICIPATION IN 457(F) RETIREMENT PLAN \$32,500)

CRAIG WOODY (PARTICIPATION IN 457(F) RETIREMENT PLAN \$32,500)

SCHEDULE K
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

Attach to Form 990. See separate instructions. Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

ENTITY 1

OMB No. 1545-0047

2013
Open to Public Inspection

Name of the organization

COLORADO SEMINARY

Employer identification number
84-0404231

Part I Bond Issues

SEE PART VI FOR COLUMNS (A) AND (F) CONTINUATIONS

| (a) Issuer name | (b) Issuer EIN | (c) CUSIP # | (d) Date issued | (e) Issue price | (f) Description of purpose | (g) Defeased (h) On behalf of issuer | | (i) Pooled financing | | |
|--|-----------------------|-------------|-----------------|--|----------------------------|--------------------------------------|----|----------------------|----|-----|
| | | | | | | Yes | No | Yes | No | Yes |
| COLORADO EDUCATION & CULTURAL FACILITIES - SE84-089672719645RSR3 | SE84-089672719645RSR3 | 03/01/13 | 24,159,389. | REFUNDING SERIES 2005B BONDS | | | X | | | X |
| COLORADO EDUCATION & CULTURAL FACILITIES - SE84-089672719645RPP0 | SE84-089672719645RPP0 | 04/20/01 | 9,031,913. | REFUNDING SERIES 2001B BONDS | | | X | | | X |
| COLORADO EDUCATION & CULTURAL FACILITIES - SE84-089672719645RFA4 | SE84-089672719645RFA4 | 03/04/08 | 9,953,292. | REFUNDING SERIES 1997 BONDS | | | X | | | X |
| COLORADO EDUCATION & CULTURAL FACILITIES - SE84-08967271964584T7 | SE84-08967271964584T7 | 10/10/07 | 45,839,717. | REFUNDING SERIES 2001A AND 2005B BONDS | | | X | | | X |

Part II Proceeds

| | A | B | C | D |
|--|-------------|------------|------------|-------------|
| 1 Amount of bonds retired | 140,000. | 2,685,000. | 3,220,000. | |
| 2 Amount of bonds legally defeased | | | | |
| 3 Total proceeds of issue | 24,159,389. | 9,031,912. | 9,953,292. | 45,839,717. |
| 4 Gross proceeds in reserve funds | | | | |
| 5 Capitalized interest from proceeds | | | | |
| 6 Proceeds in refunding escrows | | | | |
| 7 Issuance costs from proceeds | 245,451. | 180,638. | 199,064. | 321,632. |
| 8 Credit enhancement from proceeds | | | | 698,000. |
| 9 Working capital expenditures from proceeds | | | | |
| 10 Capital expenditures from proceeds | | | 2,996. | |
| 11 Other spent proceeds | 23,913,938. | 8,851,274. | 9,751,232. | 44,820,085. |
| 12 Other unspent proceeds | | | | |
| 13 Year of substantial completion | 2013 | 2012 | 2008 | 2007 |

| | 2013 | | 2012 | | 2008 | | 2007 | |
|---|------|----|------|----|------|----|------|----|
| | Yes | No | Yes | No | Yes | No | Yes | No |
| 14 Were the bonds issued as part of a current refunding issue? | | X | | X | | X | | X |
| 15 Were the bonds issued as part of an advance refunding issue? | X | | X | | X | | X | |
| 16 Has the final allocation of proceeds been made? | X | | X | | X | | X | |
| 17 Does the organization maintain adequate books and records to support the final allocation of proceeds? | X | | X | | X | | X | |

Part III Private Business Use

| 1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds? | A | | B | | C | | D | |
|--|-----|----|-----|----|-----|----|-----|----|
| | Yes | No | Yes | No | Yes | No | Yes | No |
| 2 Are there any lease arrangements that may result in private business use of bond-financed property? | | X | | X | | X | | X |

SCHEDULE K
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information on Tax-Exempt Bonds
Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

Attach to Form 990. See separate instructions. Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990

ENTITY 2

CMB No. 1545-0047

2013
Open to Public Inspection

Employer identification number
84-0404231

COLORADO SEMINARY

SEE PART VI FOR COLUMNS (A) AND (F) CONTINUATIONS

| | (a) Issuer name | (b) Issuer EIN | (c) CUSIP # | (d) Date issued | (e) Issue price | (f) Description of purpose | (g) Defeated (h) On behalf of issuer | | (i) Pooled financing | | |
|----------------------------|--|---------------------|-------------|-----------------|-----------------|-----------------------------------|--------------------------------------|----|----------------------|----|-----|
| | | | | | | | Yes | No | Yes | No | Yes |
| Part I: Bond Issues | | | | | | | | | | | |
| A | COLORADO EDUCATION & CULTURAL FACILITIES - SE84-0896727196458T37 | 84-0896727196458T37 | | 12/21/05 | 63,962,445. | CONSTRUCTION AND REFUNDING SERIES | | X | | X | X |
| B | COLORADO EDUCATION & CULTURAL FACILITIES - SE84-0896727196458H97 | 84-0896727196458H97 | | 07/12/05 | 32,548,112. | REFUNDING SERIES | | X | | X | X |
| C | | | | | | | | | | | |
| D | | | | | | | | | | | |

Part II: Proceeds

| | A | | B | | C | | D | |
|----|-----|----|-----|----|-----|----|-----|----|
| | Yes | No | Yes | No | Yes | No | Yes | No |
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | | | | | | |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | | | | | | | |
| 13 | | | | | | | | |

| | 2005 | | 2005 | | 2005 | |
|----|------|----|------|----|------|----|
| | Yes | No | Yes | No | Yes | No |
| 14 | | | | | | |
| 15 | | | | | | |
| 16 | | | | | | |
| 17 | | | | | | |

Part III: Private Business Use

| | A | | B | | C | | D | |
|---|-----|----|-----|----|-----|----|-----|----|
| | Yes | No | Yes | No | Yes | No | Yes | No |
| 1 | | | | | | | | |
| 2 | | | | | | | | |

392121 10-09-13 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

| | A | | B | | C | | D | |
|--|-----|-------|-----|-------|-----|-------|-----|-------|
| | Yes | No | Yes | No | Yes | No | Yes | No |
| 3a Are there any management or service contracts that may result in private business use of bond-financed property? | X | | | X | | | X | |
| b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? | X | | | | X | | | |
| c Are there any research agreements that may result in private business use of bond-financed property? | X | | | X | | | X | |
| d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? | | X | | | | | | X |
| 4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government | | .00 % | | .00 % | | .00 % | | .00 % |
| 5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government | | .00 % | | .00 % | | .00 % | | .00 % |
| 6 Total of lines 4 and 5 | | .00 % | | .00 % | | .00 % | | .00 % |
| 7 Does the bond issue meet the private security or payment test? | | X | | X | | X | | X |
| 8a Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued? | | X | | X | | X | | X |
| b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of | | | | | | | | |
| c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2? | | | | | | | | |
| 9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2? | X | | X | | X | | X | |

Part IV Arbitrage

| | A | | B | | C | | D | |
|---|-----|----|-----|----|-----|----|-----|----|
| | Yes | No | Yes | No | Yes | No | Yes | No |
| 1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate? | | X | | X | | X | | X |
| 2 If "No" to line 1, did the following apply? | | | | | | | | |
| a Rebate not due yet? | X | | X | | X | | X | |
| b Exception to rebate? | | X | | X | | X | | X |
| c No rebate due? | | X | | X | | X | | X |
| If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed | | | | | | | | |
| 3 Is the bond issue a variable rate issue? | | X | | X | | X | | X |
| 4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue? | | X | | X | | X | | X |
| b Name of provider | | | | | | | | |
| c Term of hedge | | | | | | | | |
| d Was the hedge superintegrated? | | | | | | | | |
| e Was the hedge terminated? | | | | | | | | |

| | A | | B | | C | | D | |
|----|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-----|----|-----|----|
| | Yes | No | Yes | No | Yes | No | Yes | No |
| 3a | <input checked="" type="checkbox"/> | | | | | | | |
| b | <input checked="" type="checkbox"/> | | <input checked="" type="checkbox"/> | | | | | |
| c | <input checked="" type="checkbox"/> | | | <input checked="" type="checkbox"/> | | | | |
| d | | <input checked="" type="checkbox"/> | | | | | | |
| 4 | | 1.00 | | 2.00 | | | | |
| 5 | | .00 | | .00 | | | | |
| 6 | | 1.00 | | 2.00 | | | | |
| 7 | | <input checked="" type="checkbox"/> | | <input checked="" type="checkbox"/> | | | | |
| 8a | | <input checked="" type="checkbox"/> | | <input checked="" type="checkbox"/> | | | | |
| b | <input checked="" type="checkbox"/> | | | | | | | |
| c | | | | | | | | |
| 9 | | | | | | | | |

Part IV Arbitrage

| | A | | B | | C | | D | |
|----|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-----|----|-----|----|
| | Yes | No | Yes | No | Yes | No | Yes | No |
| 1 | | <input checked="" type="checkbox"/> | | <input checked="" type="checkbox"/> | | | | |
| 2 | | | | | | | | |
| a | | <input checked="" type="checkbox"/> | | <input checked="" type="checkbox"/> | | | | |
| b | | <input checked="" type="checkbox"/> | | <input checked="" type="checkbox"/> | | | | |
| c | <input checked="" type="checkbox"/> | | <input checked="" type="checkbox"/> | | | | | |
| 3 | | | | | | | | |
| 4a | | <input checked="" type="checkbox"/> | | <input checked="" type="checkbox"/> | | | | |
| b | | <input checked="" type="checkbox"/> | | <input checked="" type="checkbox"/> | | | | |
| c | | | | | | | | |
| d | | | | | | | | |
| e | | | | | | | | |

Part IV Arbitrage (Continued)

| | A | | B | | C | | D | |
|---|-----|----|-----|----|-----|----|-----|----|
| | Yes | No | Yes | No | Yes | No | Yes | No |
| 5a Were gross proceeds invested in a guaranteed investment contract (GIC)? | | X | | X | | X | | X |
| b Name of provider | | | | | | | | |
| c Term of GIC | | | | | | | | |
| d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? | | X | | X | | X | | X |
| 6 Were any gross proceeds invested beyond an available temporary period? | | X | | X | | X | | X |
| 7 Has the organization established written procedures to monitor the requirements of section 148? | X | | X | | X | | X | |

Part V Procedures To Undertake Corrective Action

| | A | | B | | C | | D | |
|--|-----|----|-----|----|-----|----|-----|----|
| | Yes | No | Yes | No | Yes | No | Yes | No |
| Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations? | X | | X | | X | | X | |

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

Multiple horizontal lines for supplemental information.

Part IV Arbitrage (Continued)

| | A | | B | | C | | D | |
|--|----------------------|----|-----|----|-----|----|-----|----|
| | Yes | No | Yes | No | Yes | No | Yes | No |
| 5a. Were gross proceeds invested in a guaranteed investment contract (GIC)? | X | | | | | | | |
| b. Name of provider | PRINITY PLUS FUNDING | | | | | | | |
| c. Term of GIC | 2.7000000 | | | | | | | |
| d. Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? | X | | | | | | | |
| 6. Were any gross proceeds invested beyond an available temporary period? | | X | | | | | | |
| 7. Has the organization established written procedures to monitor the requirements of section 148? | X | | X | | | | | |

Part V Procedures To Undertake Corrective Action

| | A | | B | | C | | D | |
|--|-----|----|-----|----|-----|----|-----|----|
| | Yes | No | Yes | No | Yes | No | Yes | No |
| Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations? | X | | | | | | | |

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

SCHEDULE K, PART I, BOND ISSUES:

(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL FACILITIES - SERIES 2013

(F) DESCRIPTION OF PURPOSE: REFUNDING SERIES 2005B BONDS

(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL FACILITIES - SERIES 2012

(F) DESCRIPTION OF PURPOSE: REFUNDING SERIES 2001B BONDS

(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL FACILITIES - SERIES 2008

(F) DESCRIPTION OF PURPOSE: REFUNDING SERIES 1997 BONDS

(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL FACILITIES - SERIES 2007

(F) DESCRIPTION OF PURPOSE: REFUNDING SERIES 2001A AND 2005B BONDS

(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL FACILITIES - SERIES 2005B

(F) DESCRIPTION OF PURPOSE:

CONSTRUCTION AND REFUNDING SERIES 1997 BONDS AND 2005B CAPITALIZED INTEREST

(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL FACILITIES - SERIES 2005A

(F) DESCRIPTION OF PURPOSE: REFUNDING SERIES 2000 BONDS

SCHEDULE K, PART IV, ARBITRAGE, LINE 2C:

(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL FACILITIES - SERIES 2008

DATE THE REBATE COMPUTATION WAS PERFORMED: 03/04/2013

Part VI Supplemental information. Provide additional information for responses to questions on Schedule K (see instructions) (Continued)

(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL FACILITIES - SERIES 2007
DATE THE REBATE COMPUTATION WAS PERFORMED: 01/10/2012

(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL FACILITIES - SERIES 2005B
DATE THE REBATE COMPUTATION WAS PERFORMED: 12/21/2010

(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL FACILITIES - SERIES 2005A
DATE THE REBATE COMPUTATION WAS PERFORMED: 07/14/2010

SCHEDULE K, PART IV, LINE 2 C

REBATE COMPUTATION PERFORMED ON THE FOLLOWING DATES: SERIES 2008
3/4/2013, SERIES 2007 1/10/2012, SERIES 2005B 12/21/2010, SERIES 2005A
7/14/2010

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

| (a) Name of interested person | (b) Relationship between interested person and the organization | (c) Amount of transaction | (d) Description of transaction | (e) Sharing of organization's revenues? | |
|-------------------------------|---|---------------------------|--------------------------------|---|----|
| | | | | Yes | No |
| CALHAVEN, LLC | SEE PART V | 26,831,825. | SALE OF PRO | | X |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: CALHAVEN, LLC

(D) DESCRIPTION OF TRANSACTION: SALE OF PROPERTY.

SCHEDULE L, PART IV

(A) NAME OF INTERESTED PERSON: CALHAVEN, LLC, A WISCONSIN LLC

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND THE ORGANIZATION:

CALHAVEN, LLC IS AN ENTITY WHICH IS MORE THAN 35% CONTROLLED BY A

TRUSTEE OF THE UNIVERSITY OF DENVER (SCOTT REIMAN)

(D) DESCRIPTION OF PROPERTY: ON AUGUST 23, 2013 THE UNIVERSITY SOLD THE

MONTECITO AVOCADO RANCH AND RELATED PROPERTY TO CALHAVEN, LLC. THE

PROPERTY WAS GIFTED TO THE UNIVERSITY DURING THE PREVIOUS FISCAL YEAR.

THE SELLING PRICE OF THE PROPERTY WAS EQUAL TO THE FAIR MARKET VALUE AS

DETERMINED BY AN INDEPENDENT APPRAISAL DATED MAY 15, 2013.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990

Name of the organization

COLORADO SEMINARY

Employer identification number

84-0404231

Part I Types of Property

| | (a) Check if applicable | (b) Number of contributions or items contributed | (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g | (d) Method of determining noncash contribution amounts |
|--|----------------------------|---|--|---|
| 1 Art - Works of art | X | 16 | 0. | APPRAISAL |
| 2 Art - Historical treasures | | | | |
| 3 Art - Fractional interests | | | | |
| 4 Books and publications | | | | |
| 5 Clothing and household goods | | | | |
| 6 Cars and other vehicles | | | | |
| 7 Boats and planes | | | | |
| 8 Intellectual property | | | | |
| 9 Securities - Publicly traded | X | 62 | 3,347,344. | FMV |
| 10 Securities - Closely held stock | | | | |
| 11 Securities - Partnership, LLC, or trust interests | | | | |
| 12 Securities - Miscellaneous | | | | |
| 13 Qualified conservation contribution - Historic structures | | | | |
| 14 Qualified conservation contribution - Other | | | | |
| 15 Real estate - Residential | X | 2 | 455,000. | APPRAISAL |
| 16 Real estate - Commercial | X | 1 | 475,000. | APPRAISAL |
| 17 Real estate - Other | | | | |
| 18 Collectibles | | | | |
| 19 Food inventory | | | | |
| 20 Drugs and medical supplies | | | | |
| 21 Taxidermy | | | | |
| 22 Historical artifacts | | | | |
| 23 Scientific specimens | | | | |
| 24 Archeological artifacts | | | | |
| 25 Other () | | | | |
| 26 Other () | | | | |
| 27 Other () | | | | |
| 28 Other () | | | | |

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 4

| | Yes | No |
|--|-----|----|
| 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 - 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? | | X |
| b If "Yes," describe the arrangement in Part II. | | |
| 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? | X | |
| 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? | | X |
| b If "Yes," describe in Part II. | | |
| 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II. | | |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) (2013)

Part II

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

THE UNIVERSITY PROVIDED THE NUMBER OF CONTRIBUTORS IN PART I, COLUMN B.

SCHEDULE M, LINE 33:

DONATED WORKS OF ART ARE CONSIDERED COLLECTIONS UNDER THE UNIVERSITY'S POLICY. THE COLLECTIONS ARE HELD FOR PUBLIC EXHIBITIONS AND EDUCATION IN FURTHERANCE OF PUBLIC SERVICE RATHER THAN FINANCIAL GAIN.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization

COLORADO SEMINARY

Employer identification number
84-0404231

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

RIGOROUS STUDY WITH CRITICAL THINKING, COLLABORATION AND APPLIED
LEARNING EXPERIENCES THAT WILL ENABLE STUDENTS TO EXPAND THEIR SKILLS,
DEEPEN THEIR EXPERTISE AND APPLY THEIR KNOWLEDGE TO BENEFIT THEMSELVES
AND THE WORLD.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

STUDENTS' EMOTIONAL AND PHYSICAL WELL-BEING AND INTELLECTUAL, CULTURAL
AND SOCIAL DEVELOPMENT.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

AUXILIARY ACTIVITIES 2013-2014 ACADEMIC YEAR: THE AUXILIARY ENTERPRISES
AT THE UNIVERSITY OF DENVER EXIST TO FURNISH GOODS OR SERVICES TO
STUDENTS, FACULTY, STAFF, INSTITUTIONAL DEPARTMENTS AND THE PUBLIC. THE
MOST PROMINENT OF THESE ENTERPRISES PROVIDE SUPPORT TO OUR STUDENTS
WHICH INCLUDES; A UNIVERSITY HEALTH CENTER AND RESIDENCE AND FOOD
FACILITIES. THE UNIVERSITY ALSO HAS A PERFORMING ARTS CENTER THAT
HOSTS PERFORMANCES BY THE FACULTY AND STUDENTS OF THE UNIVERSITY AND
THE REGION'S FINEST PERFORMING ARTS ORGANIZATIONS. A SMALL CONFERENCE
AND EVENTS SERVICES DEPARTMENT ROUNDS OUT THE UNIVERSITY'S AUXILIARY
ENTERPRISE ACTIVITIES.

EXPENSES \$ 32,490,457. INCLUDING GRANTS OF \$ 0. REVENUE \$ 43,754,605.

RESEARCH AND PUBLIC SERVICE: THE UNIVERSITY OF DENVER FACULTY MEMBERS
RECEIVED SUBSTANTIAL FUNDING FROM GOVERNMENTAL AND PRIVATE SOURCES TO
SUPPORT THEIR SCHOLARSHIP. THE UNIVERSITY HAS LONG PROMOTED A

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

Schedule O (Form 990 or 990-EZ) (2013)

832211
08-04-18

Name of the organization

COLORADO SEMINARY

Employer identification number

84-0404231

TEACHER/SCHOLAR MODEL FOR ITS FACULTY, ENCOURAGING PROFESSORS TO EXCEL
 IN THE CLASSROOM AND IN RESEARCH. THE UNIVERISTY CONSISTANTLY
 CONTRIBUTES TO SERVING THE PUBLIC GOOD THROUGH FACULTY SCHOLARSHIP.
 EXPENSES \$ 20,344,293. INCLUDING GRANTS OF \$ 0. REVENUE \$ 25,358,373.

FORM 990, SECTION A, PART VI, LINE 1A

THE BOARD OF TRUSTEES HAS VESTED ITS FUNCTIONS AND POWERS
 BETWEEN SESSIONS IN AN EXECUTIVE COMMITTEE COMPOSED OF (A) THE
 CHAIRMAN, CHAIR ELECT, VICE CHAIRMAN AND SECRETARY, TOGETHER WITH THE
 TREASURER, IF THE TREASURER IS A TRUSTEE, (B) THOSE TRUSTEES WHO MAY
 FROM TIME TO TIME CHAIR THE FOLLOWING COMMITTEES: FINANCE AND BUDGET,
 FACULTY AND EDUCATIONAL AFFAIRS, STUDENT AFFAIRS, INSTITUTIONAL
 ADVANCEMENT, BUILDING AND GROUNDS, TRUSTEE AFFAIRS, AUDIT, INVESTMENT,
 AND ATHLETIC AFFAIRS, AND (C) SUCH ADDITIONAL TRUSTEES AS THE CHAIRMAN
 MAY APPOINT PROVIDED.

FORM 990, PART VI, SECTION A, LINE 4:

THE UNIVERSITY'S BYLAWS WERE AMENDED DURING THE FISCAL YEAR.
 THE AMENDMENTS REMOVES THE 15 MEMBER LIMIT ON THE ON THE BOARD'S EXECUTIVE
 COMMITTEE AND PROVIDES FOR ANNUAL APPROVAL OF THE EXECUTIVE COMMITTEE
 MEMBERSHIP BY THE BOARD. THE AMENDMENT ALSO CLARIFIED THAT THE BOARD CHAIR
 MAY APPOINT NON-VOTING MEMBERS WHO ARE NOT TRUSTEES TO STANDING COMMITTEES.
 IN ADDITION, THE AMENDMENTS ADDED THE UNIVERSITY VICE-CHAIRS AS NON-VOTING
 EX-OFFICIO MEMBERS OF ALL BOARD COMMITTEES AND CLARIFIED THAT THE
 CHANCELLOR IS A NON-VOTING EX-OFFICIO MEMBER OF ALL BOARD COMMITTEES EXCEPT
 FOR THE AUDIT COMMITTEE.

| | |
|---|--|
| Name of the organization COLORADO SEMINARY | Employer identification number 84-0404231 |
|---|--|

FORM 990, PART VI, SECTION A, LINE 7A:

THE BOARD OF TRUSTEES NOMINATES INCOMING TRUSTEES TO BE RECOMMENDED FOR APPOINTMENT BY THE UNITED METHODIST CHURCH AT THEIR ANNUAL CONFERENCE.

FORM 990, PART VI, SECTION B, LINE 11:

FORMS 990 AND 990-T ARE PREPARED BY AN INDEPENDENT AUDIT FIRM, CLIFTONLARSONALLEN LLP, USING INFORMATION PROVIDED BY MANAGEMENT. THE FORMS ARE THEN FORWARDED TO MANAGEMENT FOR REVIEW. THE FORM IS PRESENTED TO AND REVIEWED BY THE UNIVERSITY'S AUDIT COMMITTEE WHICH HAS THE AUTHORITY TO ACCEPT THE SUBMISSION AND REPORT TO THE EXECUTIVE COMMITTEE OR FULL BOARD OF TRUSTEES.

FORM 990, PART VI, SECTION B, LINE 12C:

THE UNIVERSITY PROVIDES ALL TRUSTEES, OFFICERS, DEANS, AND DIRECTORS WITH A CONFLICT OF INTEREST DISCLOSURE FORM ANNUALLY IN ACCORDANCE WITH BOARD POLICY. THE DISCLOSURE FORM ADDRESSES TRANSACTIONS WITH INTERESTED PERSONS, COMPENSATION FROM RELATED ORGANIZATIONS, RELATIONSHIPS AMONG TRUSTEES AND INDEPENDENCE OF TRUSTEES. ALL DISCLOSURES FROM STAFF ARE REVIEWED BY THE UNIVERSITY'S INTERNAL AUDIT FUNCTION AND REPORTED TO THE SENIOR STAFF AND AUDIT COMMITTEE, IF APPROPRIATE. ALL DISCLOSURES FROM TRUSTEES ARE REVIEWED AND REPORTED ON THE FORM 990, IF APPROPRIATE, AND DISCLOSED TO THE UNIVERSITY'S AUDIT COMMITTEE.

FORM 990, PART VI, SECTION B, LINE 15B:

DELIBERATIONS AND DISCUSSIONS FOR THE CHANCELLOR'S COMPENSATION PACKAGE ARE CARRIED ON IN EXECUTIVE SESSION OF THE BOARD FOR WHICH DETAILED MINUTES ARE NOT PREPARED. THE COMPENSATION OF THE

Name of the organization

COLORADO SEMINARY

Employer identification number

84-0404231

UNIVERSITY'S CHANCELLOR IS DETERMINED BY UTILIZING DATA FROM SURVEYS AND OTHER PUBLISHED SOURCES ON COMPARABLE INSTITUTIONS. THE INITIAL COMPENSATION IS SET BY THE BOARD AND REVIEWED, AND ADJUSTED IF APPROPRIATE, ANNUALLY BY THE BOARD. THIS PROCESS LAST TOOK PLACE IN DECEMBER 2013 FOR FISCAL YEAR 2014.

DELIBERATIONS AND DISCUSSIONS REGARDING COMPENSATION PLANS FOR ALL EMPLOYEES INCLUDING TOP MANAGEMENT AND KEY EMPLOYEES, EXCEPT THE CHANCELLOR (CEO), ARE CONTEMPORANEOUSLY DOCUMENTED IN THE MINUTES OF THE ANNUAL BOARD MEETING THAT APPROVES THE BUDGET FOR THE UPCOMING YEAR. THIS PROCESS LAST TOOK PLACE IN JUNE 2013 FOR FISCAL YEAR 2014.

COMPENSATION FOR ALL EMPLOYEES INCLUDING TOP MANAGEMENT AND KEY EMPLOYEES IS REVIEWED ANNUALLY AS A PART OF THE UNIVERSITY'S PERFORMANCE AND MERIT PROCESS.

FORM 990, PART VI, SECTION C, LINE 19:

THE UNIVERSITY HAS ITS BOARD POLICIES AND CONFLICTS OF COMMITMENT AND INTEREST, AND THE FINANCIAL STATEMENTS AVAILABLE ON THE UNIVERSITY'S WEBSITE. THE ORGANIZING DOCUMENTS ARE AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

ACTUARIAL ADJUSTMENTS 2,166,880.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public Inspection

COLORADO SEMINARY

Employer identification number
84-0404231

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

| (a) Name, address, and EIN (if applicable) of disregarded entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Total income | (e) End-of-year assets | (f) Direct controlling entity |
|---|-------------------------|---|---------------------|---------------------------|-------------------------------------|
| HIGHLANDS RANCH GOLF CLUB - 84-0404231 2199 S UNIVERSITY BLVD HIGHLANDS RANCH, CO 80129 | GOLF COURSE OPERATIONS | COLORADO | 2,698,329. | 5,205,543. | COLORADO SEMINARY |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Exempt Code section | (e) Public charity status (if section 501(c)(3)) | (f) Direct controlling entity | (g) Section 512(b)(13) controlled entity? | |
|--|----------------------------------|---|-------------------------------|---|-------------------------------------|--|----|
| | | | | | | Yes | No |
| KNOEBEL EVENTS, INC - 43-2083191 2199 S UNIVERSITY BLVD DENVER, CO 80308 | EDUCATIONAL EVENTS/RESTAURANT | COLORADO | 501(C)(2) | | | | X |
| | | | | | | | |
| | | | | | | | |
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| | | | | | | | |
| | | | | | | | |

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

SEE PART VII FOR CONTINUATIONS

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

| | | Yes | No |
|----------|---|-----|----|
| 1 | During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? | | |
| a | Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity | X | X |
| b | Gift, grant, or capital contribution to related organization(s) | X | X |
| c | Gift, grant, or capital contribution from related organization(s) | X | X |
| d | Loans or loan guarantees to or for related organization(s) | X | X |
| e | Loans or loan guarantees by related organization(s) | X | X |
| f | Dividends from related organization(s) | | |
| g | Sale of assets to related organization(s) | X | X |
| h | Purchase of assets from related organization(s) | X | X |
| i | Exchange of assets with related organization(s) | X | X |
| j | Lease of facilities, equipment, or other assets to related organization(s) | X | X |
| k | Lease of facilities, equipment, or other assets from related organization(s) | X | X |
| l | Performance of services or membership or fundraising solicitations for related organization(s) | X | X |
| m | Performance of services or membership or fundraising solicitations by related organization(s) | X | X |
| n | Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) | X | X |
| o | Sharing of paid employees with related organization(s) | X | X |
| p | Reimbursement paid to related organization(s) for expenses | | |
| q | Reimbursement paid by related organization(s) for expenses | | |
| r | Other transfer of cash or property to related organization(s) | | |
| s | Other transfer of cash or property from related organization(s) | | |

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

| (1) | (a) Name of related organization | (b) Transaction type (a-s) | (c) Amount involved | (d) Method of determining amount involved |
|-----|-------------------------------------|-------------------------------|------------------------|--|
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions).

PART I, IDENTIFICATION OF DISREGARDED ENTITIES:

NAME, ADDRESS, AND EIN OF DISREGARDED ENTITY:

HIGHLANDS RANCH GOLF CLUB

EIN: 84-0404231

2199 S UNIVERSITY BLVD

HIGHLANDS RANCH, CO 80129

PRIMARY ACTIVITY: GOLF COURSE OPERATIONS

DIRECT CONTROLLING ENTITY: COLORADO SEMINARY