

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

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

OMB No. 1545-0047

2015Open to Public
Inspection**A** For the 2015 calendar year, or tax year beginning **JUL 1, 2015** and ending **JUN 30, 2016**

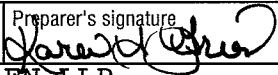
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization COLORADO SEMINARY Doing business as UNIVERSITY OF DENVER Number and street (or P.O. box if mail is not delivered to street address) Room/suite 2199 S UNIVERSITY BLVD City or town, state or province, country, and ZIP or foreign postal code DENVER, CO 80208 F Name and address of principal officer: REBECCA CHOPP SAME AS C ABOVE	D Employer identification number 84-0404231 E Telephone number 303-871-2404 G Gross receipts \$ 1,023,949,727. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)() (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 J Website: ▶ HTTP://DU.EDU		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> 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 24 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 22 5 Total number of individuals employed in calendar year 2015 (Part V, line 2a) 5 8415 6 Total number of volunteers (estimate if necessary) 6 3400 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 6,087,671. 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 36,804,264. Current Year 31,908,981. 9 Program service revenue (Part VIII, line 2g) 527,274,835. 543,992,269. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 17,812,759. 5,688,767. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 3,238,719. 3,142,618. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 585,130,577. 584,732,635.	
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 142,602,226. 154,351,604. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 243,732,818. 254,068,279. 16a Professional fundraising fees (Part IX, column (A), line 11e) 373,502. 464,383. b Total fundraising expenses (Part IX, column (D), line 25) ▶ 16,224,884. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 134,550,711. 141,156,628. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 521,259,257. 550,040,894. 19 Revenue less expenses. Subtract line 18 from line 12 63,871,320. 34,691,741.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16) Beginning of Current Year 1,532,500,947. End of Year 1,529,645,819. 21 Total liabilities (Part X, line 26) 247,393,114. 234,619,483. 22 Net assets or fund balances. Subtract line 21 from line 20 1,285,107,833. 1,295,026,336.	

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 Type or print name and title	Date
Paid Preparer Use Only	Print/Type preparer's name KAREN GRIES Preparer's signature  Date 5/16/16 Check if self-employed <input type="checkbox"/> PTIN P00078514 Firm's name ▶ CLIFTONLARSONALLEN LLP Firm's EIN ▶ 41-0746749 Firm's address ▶ 370 INTERLOCKEN BLVD., SUITE 500 BROOMFIELD, CO 80021 Phone no. 303-466-8822	

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒ **X**

- 1** Briefly describe the organization's mission:
THE UNIVERSITY OF DENVER (COLORADO SEMINARY) IS A HIGHER EDUCATIONAL INSTITUTION, PROVIDING BOTH UNDERGRADUATE AND GRADUATE DEGREES - THE MISSION OF THE UNIVERSITY OF DENVER IS TO PROMOTE LEARNING BY ENGAGING WITH STUDENTS IN ADVANCING SCHOLARLY INQUIRY, CULTIVATING CRITICAL AND
- 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 ☒ No
 If "Yes," describe these new services on Schedule O.
- 3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
 If "Yes," describe these changes on Schedule O.
- 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 \$ 162,218,377. including grants of \$ 0.) (Revenue \$ 444,863,282.)
INSTRUCTION 2015-2016 UNDERGRADUATE 5,758, GRADUATE AND PROFESSIONAL 6,039, TOTAL FALL ENROLLMENT 11,797. DEGREES CONFERRED (2015-2016): BACCALAUREATE 1,285, MASTER'S 2,250, FIRST PROFESSIONAL 275, DOCTORAL 112. TOTAL DEGREES CONFERRED 3,922. 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 DU GRADUATE PROGRAM COMBINES RIGOROUS STUDY WITH CRITICAL THINKING COLLABORATION AND APPLIED
- 4b** (Code:) (Expenses \$ 154,351,604. including grants of \$ 154,351,604.) (Revenue \$ 0.)
STUDENT SCHOLARSHIP 2015-2016 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 2015-2016 ACADEMIC YEAR EQUALED \$140,073,696 ENDOWED AND GIFT SUPPORT SCHOLARSHIP PROGRAMS FUNDED \$12,231,897 AND THE FEDERAL AND STATE PROGRAMS FUNDED \$2,046,011. UP TO 80% OF THE STUDENTS AT THE UNIVERSITY RECEIVE SOME FINANCIAL AID.
- 4c** (Code:) (Expenses \$ 112,599,365. including grants of \$ 0.) (Revenue \$ 14,409,907.)
ACADEMIC SUPPORT AND STUDENT SERVICES 2015-2016 ACADEMIC YEAR: ACADEMIC SUPPORT INCLUDES THE ADMINISTRATIVE SUPPORT FOR 12 GRADUATE SCHOOLS AND PROFESSIONAL PROGRAMS AND 7 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 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 \$ 59,723,519. including grants of \$ 0.) (Revenue \$ 84,699,082.)
- 4e** Total program service expenses **488,892,865.**

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)? If "Yes," complete Schedule A	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? If "Yes," complete Schedule C, Part 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? If "Yes," complete Schedule C, Part II	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? If "Yes," complete Schedule C, Part III		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? If "Yes," complete Schedule D, Part 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? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	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? If "Yes," complete Schedule D, Part IV	X	
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	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? If "Yes," complete Schedule D, Part VI	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? If "Yes," complete Schedule D, Part VII	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? If "Yes," complete Schedule D, Part VIII		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? If "Yes," complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	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)? If "Yes," complete Schedule D, Part X	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	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? If "Yes," complete Schedule F, Parts I and IV	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? If "Yes," complete Schedule F, Parts II and IV		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? If "Yes," complete Schedule F, Parts III and IV	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? If "Yes," complete Schedule G, Part 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 8a? If "Yes," complete Schedule G, Part II	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X

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Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic 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 or for domestic individuals 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), 501(c)(4), and 501(c)(29) 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 "Yes," 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		X
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?	X	

Note. All Form 990 filers are required to complete Schedule O

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Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 1017		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 8415		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	X	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		X
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?	9a		X
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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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

☒**Section A. Governing Body and Management**

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year 1a 24		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
b Enter the number of voting members included in line 1a, above, who are independent 1b 22		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5		X
6 Did the organization have members or stockholders? 6		X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a	X	
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body? 8a	X	
b Each committee with authority to act on behalf of the governing body? 8b	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 9		X

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

	Yes	No
10a Did the organization have local chapters, branches, or affiliates? 10a		X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a		X
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c	X	
13 Did the organization have a written whistleblower policy? 13	X	
14 Did the organization have a written document retention and destruction policy? 14	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official 15a		X
b Other officers or key employees of the organization 15b		X
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a		X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► **AK, ME, MI, MN, MA, MD, NV, NH, NY, ND, OH, OR**

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. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

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, address, and telephone number of the person who possesses the organization's books and records: ►
ANDREW CULLEN - 303-871-3740
2199 S UNIVERSITY BLVD, DENVER, CO 80208

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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) MARY SUE COLEMAN TRUSTEE	1.00	X						0.	0.	0.
(4) NAVIN DIMOND TRUSTEE	1.00	X						0.	0.	0.
(5) MARGOT GILBERT FRANK TRUSTEE-SECRETARY	1.00	X		X				0.	0.	0.
(6) KEVIN C. GALLAGHER TRUSTEE	1.00	X						0.	0.	0.
(7) PETER A. GILBERTSON TRUSTEE	1.00	X						0.	0.	0.
(8) JAMES GRIESEMER TRUSTEE-VICE CHAIRMAN, PROFESSOR	41.00	X		X				219,122.	0.	39,090.
(9) CRAIG HARRISON TRUSTEE	1.00	X						0.	0.	0.
(10) RICHARD R. KELLEY TRUSTEE	1.00	X						0.	0.	0.
(11) PATRICIA A. LIVINGSTON TRUSTEE	1.00	X						0.	0.	0.
(12) JOHN W. LOW TRUSTEE-VICE CHAIRMAN	1.00	X		X				0.	0.	0.
(13) JOHN A. MILLER TRUSTEE	1.00	X						0.	0.	0.
(14) CARRIE MORGRIDGE TRUSTEE	1.00	X						0.	0.	0.
(15) TRYGVE E. MYHREN TRUSTEE	1.00	X						0.	0.	0.
(16) RALPH J. NAGEL TRUSTEE	1.00	X						0.	0.	0.
(17) DENISE M. OLEARY 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) FREDERICO PENA TRUSTEE	1.00	X						0.	0.	0.
(19) SCOTT J. REIMAN TRUSTEE	1.00	X						0.	0.	0.
(20) JOSEPH W. SAUNDERS TRUSTEE	1.00	X						0.	0.	0.
(21) DOUGLAS G. SCRIVNER TRUSTEE-CHAIRMAN	1.00	X		X				0.	0.	0.
(22) CATHERINE C. SHOPNECK TRUSTEE-VICE CHAIRMAN	1.00	X		X				0.	0.	0.
(23) OTTO TSCHUDI TRUSTEE	1.00	X						0.	0.	0.
(24) CLARA VILLAROSA TRUSTEE	1.00	X						0.	0.	0.
(25) FREDERICK T. WALDECK TRUSTEE	1.00	X						0.	0.	0.
(26) REBECCA CHOPP CHANCELLOR	40.00			X				691,666.	0.	90,543.
1b Sub-total								910,788.	0.	129,633.
c Total from continuation sheets to Part VII, Section A								5,982,715.	0.	1,010,227.
d Total (add lines 1b and 1c)								6,893,503.	0.	1,139,860.

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 **396**

	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
THE WEITZ COMPANY 4725 S MONACO STREET, DENVER, CO 80237	CONSTRUCTION SERVICES	12,125,348.
ALAN AND BROOKS BUILDERS, 920 WEST MISSISSIPPI AVENUE, DENVER, CO 80223	CONSTRUCTION SERVICES	776,151.
CUSTOM DIRECT LLC 16163 W 45TH DRIVE, GOLDEN, CO 80403	CUSTOM PRINTING	501,869.
BRUCE MASTAY 1154 W 124TH COURT, WESTMINSTER, CO 80234	PAINTING SERVICES	424,507.
CONSTAGY BROOKS SMITH & PROPHETE LLP 600 17TH ST. #2700S, DENVER, CO 80202	LEGAL	375,001.

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 **24**

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2015)

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) CRAIG WOODY TREASURER/VICE CHANCELLOR	40.00			X				320,251.	0.	78,713.
(28) MARGARET HENRY ASSISTANT TREASURER/CONTROLLER	40.00			X				171,093.	0.	27,922.
(29) ROSALYNN PEAGINS ASSISTANT SECRETARY	40.00			X				68,004.	0.	18,377.
(30) CLAIRE BROWNELL ASSISTANT SECRETARY	40.00			X				64,329.	0.	25,443.
(31) ANGELA DUGGAN ASSISTANT SECRETARY	40.00			X				47,821.	0.	29,304.
(32) GREGG KVISTAD PROVOST	40.00				X			340,710.	0.	78,713.
(33) MARTIN KATZ DEAN	40.00				X			335,139.	0.	48,992.
(34) MARGARET BRADLEY DOPPES VICE CHANCELLOR	40.00				X			316,248.	0.	109,465.
(35) KEVIN CARROLL VICE CHANCELLOR	40.00				X			292,612.	0.	38,317.
(36) SCOTT LUMPKIN VICE CHANCELLOR	40.00				X			373,538.	0.	34,420.
(37) THOMAS WILLOUGHBY VICE CHANCELLOR	40.00				X			247,529.	0.	28,553.
(38) DAVID GREENBERG VICE CHANCELLOR	40.00				X			209,370.	0.	28,847.
(39) PAUL CHAN UNIVERSITY COUNSEL	40.00				X			222,914.	0.	74,200.
(40) JOZEF BEMELEN DIRECTOR OF FACILITIES	40.00				X			191,960.	0.	28,972.
(41) ELRIE LABRENT CHRITE DEAN	40.00				X			319,469.	0.	41,585.
(42) AMY KING VICE CHANCELLOR	40.00				X			158,131.	0.	28,952.
(43) ARMIN AFSAHI VICE CHANCELLOR	40.00				X			193,269.	0.	15,648.
(44) JOSEPH SCOTT HEAD COACH	40.00					X		413,247.	0.	34,029.
(45) JAMES MONTGOMERY HEAD COACH	40.00					X		358,213.	0.	44,721.
(46) WILLIAM TIERNEY HEAD COACH	40.00					X		388,027.	0.	33,196.
Total to Part VII, Section A, line 1c										

[illegible]

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) 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	1,094,101.			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	30,814,880.			
	g	Noncash contributions included in lines 1a-1f: \$		956,697.			
	h	Total. Add lines 1a-1f		31,908,981.			
Program Service Revenue	2 a	TUITION AND FEES	Business Code 611310	444,863,282.	444,863,282.		
	b	AUXILIARY ENTERPRISES	611310	55,123,171.	49,099,296.	6,023,875.	
	c	RESEARCH GRANTS	611310	29,364,138.	29,364,138.		
	d	EDUCATIONAL ACTIVITIES	611310	14,429,907.	14,429,907.		
	e	STUDENT LOANS	611310	211,771.	211,771.		
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		543,992,269.			
	3	Investment income (including dividends, interest, and other similar amounts)		5,668,505.		63,796.	5,604,709.
4	Income from investment of tax-exempt bond proceeds						
5	Royalties		154,312.			154,312.	
Other Revenue	6 a	Gross rents	(i) Real 2,418,272.				
	b	Less: rental expenses	636,625.				
	c	Rental income or (loss)	1,781,647.				
	d	Net rental income or (loss)		1,781,647.		1,781,647.	
	7 a	Gross amount from sales of assets other than inventory	(i) Securities 437,309,894.				
	b	Less: cost or other basis and sales expenses	437,289,632.				
	c	Gain or (loss)	20,262.				
	d	Net gain or (loss)		20,262.		20,262.	
	8 a	Gross income from fundraising events (not including \$ 1,094,101. of contributions reported on line 1c). See Part IV, line 18	a 566,982.				
	b	Less: direct expenses	b 1,290,835.				
	c	Net income or (loss) from fundraising events		-723,853.		-723,853.	
	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	1,930,512.	1,930,512.		
	b						
c							
d	All other revenue						
e	Total. Add lines 11a-11d		1,930,512.				
12	Total revenue. See instructions.		584,732,635.	539,898,906.	6,087,671.	6,837,077.	

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 domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	143,051,303.	143,051,303.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	11,300,301.	11,300,301.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	5,396,222.	1,429,110.	3,349,967.	617,145.
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	202,297,985.	174,012,845.	19,924,472.	8,360,668.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	11,081,106.	9,639,089.	975,873.	466,144.
9 Other employee benefits	22,065,420.	18,849,611.	1,793,864.	1,421,945.
10 Payroll taxes	13,227,546.	11,201,010.	1,455,770.	570,766.
11 Fees for services (non-employees):				
a Management				
b Legal	1,348,873.	273,818.	1,075,055.	
c Accounting	184,000.	25,000.	159,000.	
d Lobbying	58,106.		58,106.	
e Professional fundraising services. See Part IV, line 17	464,383.			464,383.
f Investment management fees	736,532.		736,532.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	35,377,210.	30,383,011.	4,310,297.	683,902.
12 Advertising and promotion	2,285,034.	1,931,146.	70,235.	283,653.
13 Office expenses	23,307,772.	19,927,169.	2,655,754.	724,849.
14 Information technology	9,252,679.	5,986,524.	2,966,393.	299,762.
15 Royalties				
16 Occupancy	19,017,018.	18,156,530.	782,668.	77,820.
17 Travel	11,751,101.	10,758,514.	423,118.	569,469.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	7,872,191.	5,438,810.	808,101.	1,625,280.
20 Interest	3,630,578.	3,453,406.	177,172.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	14,741,635.	14,022,243.	719,392.	
23 Insurance	2,006,734.	953,854.	1,047,679.	5,201.
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	6,978,415.	6,978,415.		
b FINANCIAL FEES	2,608,750.	1,121,156.	1,433,697.	53,897.
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	550,040,894.	488,892,865.	44,923,145.	16,224,884.
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 958-720)

Part X Balance SheetCheck 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	66,350,165.	1	83,279,039.
	2 Savings and temporary cash investments	27,932,693.	2	25,865,812.
	3 Pledges and grants receivable, net	42,402,050.	3	37,793,099.
	4 Accounts receivable, net	19,518,788.	4	20,183,223.
	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	151,221.	8	159,239.
	9 Prepaid expenses and deferred charges	3,830,983.	9	3,742,772.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 822,931,435.		
	b Less: accumulated depreciation	10b 190,930,564.	10c	632,000,871.
	11 Investments - publicly traded securities	556,005,982.	11	494,392,018.
	12 Investments - other securities. See Part IV, line 11	197,899,055.	12	203,229,917.
	13 Investments - program-related. See Part IV, line 11	17,876,730.	13	17,557,233.
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	12,568,206.	15	11,442,596.
16 Total assets. Add lines 1 through 15 (must equal line 34)	1,532,500,947.	16	1,529,645,819.	
Liabilities	17 Accounts payable and accrued expenses	81,630,702.	17	73,779,943.
	18 Grants payable		18	
	19 Deferred revenue	18,322,151.	19	19,285,436.
	20 Tax-exempt bond liabilities	118,050,581.	20	112,046,697.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	1,236,220.	21	2,607,094.
	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		23	
	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	28,153,460.	25	26,900,313.
	26 Total liabilities. Add lines 17 through 25	247,393,114.	26	234,619,483.
	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		736,304,196.	27	795,587,496.
28 Temporarily restricted net assets		243,494,491.	28	177,692,800.
29 Permanently restricted net assets		305,309,146.	29	321,746,040.
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		1,285,107,833.	33	1,295,026,336.
34 Total liabilities and net assets/fund balances		1,532,500,947.	34	1,529,645,819.

Form 990 (2015)

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	584,732,635.
2	Total expenses (must equal Part IX, column (A), line 25)	2	550,040,894.
3	Revenue less expenses. Subtract line 2 from line 1	3	34,691,741.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,285,107,833.
5	Net unrealized gains (losses) on investments	5	-24,607,873.
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	-165,365.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,295,026,336.

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
b 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	
c 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	
b 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 (2015)

Department of the Treasury
Internal Revenue Service

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

2015

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 (Form 990 or 990-EZ).)
- 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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

g Provide the following information about each supported organization(s):						
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2015

Form 990 or 990-EZ. 532021 09-23-15

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 fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	45,625,508.	55,349,703.	60,864,647.	36,804,264.	31,908,981.	230,553,103.
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	45,625,508.	55,349,703.	60,864,647.	36,804,264.	31,908,981.	230,553,103.
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)						40,784,466.
6 Public support. Subtract line 5 from line 4.						189,768,637.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4	45,625,508.	55,349,703.	60,864,647.	36,804,264.	31,908,981.	230,553,103.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	11,602,395.	10,726,195.	6,848,944.	6,493,156.	8,177,293.	43,847,983.
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 VI.)	2,231,668.	2,249,765.	2,156,515.	2,781,598.	2,497,494.	11,917,040.
11 Total support. Add lines 7 through 10						286,318,126.
12 Gross receipts from related activities, etc. (see instructions)					12	2,466,195,355.
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 2015 (line 6, column (f) divided by line 11, column (f))	14	66.28	%
15 Public support percentage from 2014 Schedule A, Part II, line 14	15	69.35	%
16a 33 1/3% support test - 2015. 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 - 2014. 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 - 2015. 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 VI 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 - 2014. 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 VI 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"/>

Schedule A (Form 990 or 990-EZ) 2015

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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6						
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 VI.)						
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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2015.** 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 - 2014.** 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 Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	Yes	No
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI .		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).		

Schedule A (Form 990 or 990-EZ) 2015

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2015:			
a			
b			
c			
d From 2013			
e From 2014			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2015 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 Excess distributions carryover to 2016. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c Excess from 2013			
d Excess from 2014			
e Excess from 2015			

Schedule A (Form 990 or 990-EZ) 2015

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
(See instructions.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:**GROSS INCOME FROM FUNDRAISING EVENTS**

2011 AMOUNT: \$ 560,133.

2012 AMOUNT: \$ 539,097.

2013 AMOUNT: \$ 519,757.

2014 AMOUNT: \$ 516,064.

2015 AMOUNT: \$ 566,982.

MISCELLANEOUS SERVICE REVENUE

2011 AMOUNT: \$ 1,671,535.

2012 AMOUNT: \$ 1,710,668.

2013 AMOUNT: \$ 1,636,758.

2014 AMOUNT: \$ 2,265,534.

2015 AMOUNT: \$ 1,930,512.

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

2015

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, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☒ For an organization described in section 501(c)(3) 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), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions 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 an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled 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 totaling \$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) (2015)

Name of organization

Employer identification number

COLORADO SEMINARY

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
<u>1</u>		\$ <u>6,415,016.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>		\$ <u>2,200,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>		\$ <u>1,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>		\$ <u>1,150,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>		\$ <u>2,495,568.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>6</u>		\$ <u>930,093.</u>	Person <input checked="" 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
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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
<u>7</u>		\$ <u>1,974,800.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>8</u>		\$ <u>9,511,250.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Employer identification number

84-0404231

Part II

[illegible]

Name of organization COLORADO SEMINARY	Employer identification number 84-0404231
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. 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 info. 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
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

2015

**Open to Public
Inspection**

If the organization answered "Yes," on 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," on 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," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), 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 ▶ \$ 0.

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ 0.

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 ▶ \$

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$

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-.

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

Schedule C (Form 990 or 990-EZ) 2015

LHA
532041
10-05-15

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.															
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		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.		
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?		<input type="checkbox"/> Yes	<input type="checkbox"/> 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 separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(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					

Schedule C (Form 990 or 990-EZ) 2015

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 on 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		58,106.
j Total. Add lines 1c through 1i			58,106.
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, lines 1 and 2 (see instructions); 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 SEEKS TO INFLUENCE LEGISLATORS FOR THE
 BENEFIT OF PRIVATE HIGHER EDUCATION (\$58,106).

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on 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

2015

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" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	1	
2 Aggregate value of contributions to (during year)	1,500,000.	
3 Aggregate value of grants from (during year)	0.	
4 Aggregate value at end of year	9,034,862.	
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 checked="" 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

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

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> 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, handling of violations, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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" on 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) Revenue included on 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 Revenue included on 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

d ☐ Loan or exchange programs

b ☒ Scholarly research

e ☐ Other

c ☒ Preservation for future generations

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" on 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
1c	
1d	
1e	
1f	

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☒ Yes ☐ No

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

Part V Endowment Funds. Complete if the organization answered "Yes" on 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	651,398,198.	489,858,681.	419,349,528.	386,749,857.	354,210,152.
b Contributions	17,770,937.	157,918,999.	34,562,402.	19,402,198.	36,370,920.
c Net investment earnings, gains, and losses	-15,244,831.	25,752,051.	54,953,139.	29,424,565.	9,967,274.
d Grants or scholarships	11,347,587.	10,680,778.	9,569,029.	6,479,636.	5,482,627.
e Other expenditures for facilities and programs	13,321,080.	10,634,368.	8,832,950.	9,246,202.	7,897,628.
f Administrative expenses	736,532.	816,387.	604,409.	501,254.	418,234.
g End of year balance	628,519,105.	651,398,198.	489,858,681.	419,349,528.	386,749,857.

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

a Board designated or quasi-endowment ☐ 30.10 %

b Permanent endowment ☐ 20.50 %

c Temporarily restricted endowment ☐ 49.40 %

The percentages on 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:

(i) unrelated organizations

(ii) related organizations

	Yes	No
3a(i)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3a(ii)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3b	<input type="checkbox"/>	<input type="checkbox"/>

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ☐

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" on 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		37,983,224.		37,983,224.
b Buildings		631,659,760.	145,334,173.	486,325,587.
c Leasehold improvements				
d Equipment		62,924,094.	45,596,391.	17,327,703.
e Other		90,364,357.		90,364,357.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				632,000,871.

Schedule D (Form 990) 2015

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on 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	202,999,917.	END-OF-YEAR MARKET VALUE
(B) INTERNATIONAL BOND		
(C) HOLDING	230,000.	END-OF-YEAR MARKET VALUE
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	203,229,917.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on 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)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on 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	10,705,259.	
(4) FEDERAL PERKINS LOAN PROGRAM -		
(5) REFUNDABLE	16,195,054.	
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	26,900,313.	

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 ☒

Schedule D (Form 990) 2015

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

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

1	Total revenue, gains, and other support per audited financial statements	1	409,401,871.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-24,607,873.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	1,762,095.
e	Add lines 2a through 2d	2e	-22,845,778.
3	Subtract line 2e from line 1	3	432,247,649.
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	736,532.
b	Other (Describe in Part XIII.)	4b	151,748,454.
c	Add lines 4a and 4b	4c	152,484,986.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	584,732,635.

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

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

1	Total expenses and losses per audited financial statements	1	399,483,368.
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	1,927,460.
e	Add lines 2a through 2d	2e	1,927,460.
3	Subtract line 2e from line 1	3	397,555,908.
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	736,532.
b	Other (Describe in Part XIII.)	4b	151,748,454.
c	Add lines 4a and 4b	4c	152,484,986.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	550,040,894.

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, ENLIGHTEN AND INSPIRE. THE

Part XIII Supplemental Information (continued)

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 (54%), ACADEMIC PROGRAMS (25%), FACULTY CHAIRS & PROFESSORSHIPS (16%) AND OTHER UNIVERSITY OPERATIONS AND FUNCTIONS(5%).

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, 2016 AND 2015.

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, 2016.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES	1,290,835.
RENTAL EXPENSES	636,625.
ACTUARIAL ADJUSTMENT	-165,365.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	1,762,095.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

SCHOLARSHIPS	151,748,454.
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PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES	1,290,835.
RENTAL EXPENSES	636,625.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	1,927,460.

Part XIII Supplemental Information (continued)

PART XII, LINE 4B - OTHER ADJUSTMENTS:

SCHOLARSHIPS

151,748,454.

SCHEDULE E
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

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

► **Attach to Form 990 or Form 990-EZ.**

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

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Name of the organization

COLORADO SEMINARY

Employer identification number

84-0404231

Part I

- 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?
- 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?
- 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

SEE PART II

- 4 Does the organization maintain the following?
- a Records indicating the racial composition of the student body, faculty, and administrative staff?
- b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?
- c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?
- d Copies of all material used by the organization or on its behalf to solicit contributions?
- 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?
- b Admissions policies?
- c Employment of faculty or administrative staff?
- d Scholarships or other financial assistance?
- e Educational policies?
- f Use of facilities?
- g Athletic programs?
- h Other extracurricular activities?
- 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?
- b Has the organization's right to such aid ever been revoked or suspended?
- If you answered "Yes" on 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

	YES	NO
1	X	
2	X	
3	X	
4a	X	
4b	X	
4c	X	
4d	X	
5a		X
5b		X
5c		X
5d		X
5e		X
5f		X
5g		X
5h		X
6a	X	
6b		X
7	X	

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

Schedule E (Form 990 or 990-EZ) (2015)

Part II **Supplemental Information.** Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable.
Also 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: PELL GRANT PROGRAM, FEDERAL SUPPLEMENTAL EDUCATION OPPORTUNITY GRANT PROGRAM, FEDERAL DIRECT LENDING PROGRAM, FEDERAL WORK-STUDY PROGRAM AND TEACH GRANT PROGRAM. COLORADO STATE PROGRAMS INCLUDE: COLORADO STUDENT GRANT PROGRAM, COLORADO GRADUATE GRANT PROGRAM AND COLORADO COLLEGE WORK-STUDY PROGRAM.

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.

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

OMB No. 1545-0047

2015Open to Public
Inspection

Name of the organization

Employer identification number

COLORADO SEMINARY

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.

1 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**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 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 & CARIBBEAN	0	0	GRANTS		270,082.
SUB-SAHARAN AFRICA	0	0	GRANTS		522,090.
EUROPE	0	0	GRANTS		1,911,347.
MIDDLE EAST & NORTH AFRICA	0	0	GRANTS		669,059.
RUSSIA & THE NEWLY INDEPENDENT STATES	0	0	GRANTS		247,899.
NORTH AMERICA	0	0	GRANTS		1,503,685.
SOUTH AMERICA	0	0	GRANTS		291,061.
SOUTH ASIA	0	0	GRANTS		925,547.
3 a Sub-total	0	0			6,340,770.
b Total from continuation sheets to Part I	0	0			166,393,236.
c Totals (add lines 3a and 3b)	0	0			172,734,006.

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

Schedule F (Form 990) 2015

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
CENTRAL AMERICA & CARIBBEAN	0	0	INVESTMENTS		128,724,895.
EAST ASIA & THE PACIFIC	0	0	INVESTMENTS		15,085,518.
EUROPE	0	0	INVESTMENTS		5,881,687.
CENTRAL AMERICA & CARIBBEAN	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT AND STUDENT SERVICES	64,675.
CENTRAL AMERICA & CARIBBEAN	0	0	PROGRAM SERVICES	INSTITUTIONAL SUPPORT	5,891.
CENTRAL AMERICA & CARIBBEAN	0	0	PROGRAM SERVICES	INSTRUCTION	264,782.
CENTRAL AMERICA & CARIBBEAN	0	0	PROGRAM SERVICES	RESEARCH & PUBLIC SERVICE	124,707.
EAST ASIA & THE PACIFIC	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT AND STUDENT SERVICES	780,786.
EAST ASIA & THE PACIFIC	0	0	PROGRAM SERVICES	INSTITUTIONAL SUPPORT	617.
EAST ASIA & THE PACIFIC	0	0	PROGRAM SERVICES	INSTRUCTION	1,136,860.
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
EAST ASIA & THE PACIFIC	0	0	PROGRAM SERVICES	RESEARCH & PUBLIC SERVICE	95,403.
EUROPE	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT AND STUDENT SERVICES	1,051,510.
EUROPE	0	0	PROGRAM SERVICES	INSTITUTIONAL SUPPORT	31,732.
EUROPE	0	0	PROGRAM SERVICES	INSTRUCTION	5,016,868.
EUROPE	0	0	PROGRAM SERVICES	RESEARCH & PUBLIC SERVICE	185,226.
MIDDLE EAST & NORTH AFRICA	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT AND STUDENT SERVICES	89,394.
MIDDLE EAST & NORTH AFRICA	0	0	PROGRAM SERVICES	INSTITUTIONAL SUPPORT	20,600.
MIDDLE EAST & NORTH AFRICA	0	0	PROGRAM SERVICES	INSTRUCTION	291,886.
MIDDLE EAST & NORTH AFRICA	0	0	PROGRAM SERVICES	RESEARCH & PUBLIC SERVICE	8,259.
NORTH AMERICA	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT AND STUDENT SERVICES	59,964.
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
NORTH AMERICA	0	0	PROGRAM SERVICES	INSTITUTIONAL SUPPORT	1,196.
NORTH AMERICA	0	0	PROGRAM SERVICES	INSTRUCTION	68,323.
NORTH AMERICA	0	0	PROGRAM SERVICES	RESEARCH & PUBLIC SERVICE	18,008.
RUSSIA & THE NEWLY INDEPENDENT STATES	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT AND STUDENT SERVICES	8,292.
RUSSIA & THE NEWLY INDEPENDENT STATES	0	0	PROGRAM SERVICES	INSTITUTIONAL SUPPORT	99.
RUSSIA & THE NEWLY INDEPENDENT STATES	0	0	PROGRAM SERVICES	INSTRUCTION	11,305.
RUSSIA & THE NEWLY INDEPENDENT STATES	0	0	PROGRAM SERVICES	RESEARCH & PUBLIC SERVICE	17,688.
SOUTH AMERICA	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT AND STUDENT SERVICES	105,276.
SOUTH AMERICA	0	0	PROGRAM SERVICES	INSTITUTIONAL SUPPORT	11,840.
SOUTH AMERICA	0	0	PROGRAM SERVICES	INSTRUCTION	839,351.
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 AMERICA	0	0	PROGRAM SERVICES	RESEARCH & PUBLIC SERVICE	4,000.
SOUTH ASIA	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT AND STUDENT SERVICES	45,759.
SOUTH ASIA	0	0	PROGRAM SERVICES	INSTRUCTION	216,548.
SOUTH ASIA	0	0	PROGRAM SERVICES	RESEARCH & PUBLIC SERVICE	133,383.
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT AND STUDENT SERVICES	154,573.
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	INSTRUCTION	522,016.
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	RESEARCH & PUBLIC SERVICE	346,362.
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	INSTITUTIONAL SUPPORT	8,426.
EAST ASIA & THE PACIFIC	0	0	GRANTS		4,959,531.
Totals					166,393,236.

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
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	26	522,090.	DIRECT APPLICATION TO STUDENT ACCOUNT	0. N/A		N/A
EDUCATIONAL SCHOLARSHIPS	CENTRAL AMERICA AND THE CARIBBEAN	7	270,082.	DIRECT APPLICATION TO STUDENT ACCOUNT	0. N/A		N/A
EDUCATIONAL SCHOLARSHIPS	EAST ASIA AND THE PACIFIC	442	4,959,531.	DIRECT APPLICATION TO STUDENT ACCOUNT	0. N/A		N/A
EDUCATIONAL SCHOLARSHIPS	EUROPE	64	1,911,347.	DIRECT APPLICATION TO STUDENT ACCOUNT	0. N/A		N/A
EDUCATIONAL SCHOLARSHIPS	MIDDLE EAST AND NORTH AFRICA	40	669,059.	DIRECT APPLICATION TO STUDENT ACCOUNT	0. N/A		N/A
EDUCATIONAL SCHOLARSHIPS	NORTH AMERICA	53	1,503,685.	DIRECT APPLICATION TO STUDENT ACCOUNT	0. N/A		N/A
EDUCATIONAL SCHOLARSHIPS	RUSSIA AND NEIGHBORING STATES	10	247,899.	DIRECT APPLICATION TO STUDENT ACCOUNT	0. N/A		N/A
EDUCATIONAL SCHOLARSHIPS	SOUTH AMERICA	15	291,061.	DIRECT APPLICATION TO STUDENT ACCOUNT	0. N/A		N/A
EDUCATIONAL SCHOLARSHIPS	SOUTH ASIA	42	925,547.	DIRECT APPLICATION TO STUDENT ACCOUNT	0. N/A		N/A

Schedule F (Form 990) 2015

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 separately 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; do not file with Form 990) ☐ 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 separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990) ☒ Yes ☐ No

Schedule F (Form 990) 2015

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.

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization

COLORADO SEMINARY

Employer identification number

84-0404231

Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a ☒ Mail solicitations
- b ☒ Internet and email solicitations
- c ☒ Phone solicitations
- d ☒ In-person solicitations
- e ☒ Solicitation of non-government grants
- f ☐ Solicitation of government grants
- g ☒ Special fundraising events

- 2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes ☐ No

- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

Total

- 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AL, AK, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY, LA, ND, NC, MS, MO, MN, MI, ME, MD, MA, TN, SC, RI
PA, OR, OK, OH, NY, NV, NM, NJ, NH, WV, WI, WA, VA, UT

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

Schedule G (Form 990 or 990-EZ) 2015

SEE PART IV FOR CONTINUATIONS

532081
09-14-15

Part II Fundraising Events. Complete if the organization answered "Yes" on 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	1,053,959.	607,124.		1,661,083.
	2	Less: Contributions	818,961.	275,140.		1,094,101.
	3	Gross income (line 1 minus line 2)	234,998.	331,984.		566,982.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes	5,400.	1,200.		6,600.
	6	Rent/facility costs	31,934.	68,583.		100,517.
	7	Food and beverages	430,319.	86,903.		517,222.
	8	Entertainment	41,914.			41,914.
	9	Other direct expenses	616,801.	7,781.		624,582.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				1,290,835.
	11	Net income summary. Subtract line 10 from line 3, column (d)				-723,853.

Part III Gaming. Complete if the organization answered "Yes" on 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 conducts gaming activities: _____

a Is the organization licensed to conduct 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 conduct 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 conducted 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 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 IV Supplemental Information (continued)

Lined area for supplemental information.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

OMB No. 1545-0047

2015

Open to Public
Inspection

Name of the organization

COLORADO SEMINARY

Employer identification number
84-0404231

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any

recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2015)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on 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	380	781,805.	0. N/A	N/A	
FINANCIAL AID-STATE PROGRAMS	545	1,264,206.	0. N/A	N/A	
FINANCIAL AID-ENDOWED AND GIFT FUNDED	3470	12,231,897.	0. N/A	N/A	
FINANCIAL AID-GTA WAIVERS	110	587,524.	0. N/A	N/A	
FINANCIAL AID-INSTITUTIONAL EDUCATION GRANTS	9576	125,582,721.	0. N/A	N/A	
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.

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

OMB No. 1545-0047

2015

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 on 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 checked="" 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

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?

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 checked="" 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 on 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?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- 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), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

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

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

6 For persons listed on 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?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

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

8 Were any amounts reported on 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

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

	Yes	No
1b	X	
2	X	
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) 2015

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 on 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 in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JAMES GRIESEMER TRUSTEE-VICE CHAIRMAN, PROFESSOR	(i) 218,402. (ii) 0.	0.	720.	18,423.	20,667.	258,212.	0.
(2) REBECCA CHOPP CHANCELLOR	(i) 603,641. (ii) 0.	75,000.	13,025.	39,200.	51,343.	782,209.	0.
(3) CRAIG WOODY TREASURER/VICE CHANCELLOR	(i) 305,839. (ii) 0.	7,500.	6,912.	71,200.	7,513.	398,964.	0.
(4) MARGARET HENRY ASSISTANT TREASURER/CONTROLLER	(i) 165,613. (ii) 0.	5,000.	480.	13,652.	14,270.	199,015.	0.
(5) GREGG KVISTAD PROVOST	(i) 326,430. (ii) 0.	10,000.	4,280.	71,200.	7,513.	419,423.	0.
(6) MARTIN KATZ DEAN	(i) 319,419. (ii) 0.	15,000.	720.	21,200.	27,792.	384,131.	0.
(7) MARGARET BRADLEY DOPPE VICE CHANCELLOR	(i) 297,908. (ii) 0.	10,000.	8,340.	96,200.	13,265.	425,713.	0.
(8) KEVIN CARROLL VICE CHANCELLOR	(i) 292,612. (ii) 0.	0.	0.	21,200.	17,117.	330,929.	0.
(9) SCOTT LUMPKIN VICE CHANCELLOR	(i) 134,258. (ii) 0.	0.	239,280.	21,200.	13,220.	407,958.	0.
(10) THOMAS WILLOUGHBY VICE CHANCELLOR	(i) 230,629. (ii) 0.	10,000.	6,900.	18,700.	9,853.	276,082.	0.
(11) DAVID GREENBERG VICE CHANCELLOR	(i) 203,290. (ii) 0.	5,000.	1,080.	16,701.	12,146.	238,217.	0.
(12) PAUL CHAN UNIVERSITY COUNSEL	(i) 218,574. (ii) 0.	3,500.	840.	18,161.	56,039.	297,114.	0.
(13) JOZEF BEMELEN DIRECTOR OF FACILITIES	(i) 178,200. (ii) 0.	5,000.	8,760.	14,700.	14,272.	220,932.	0.
(14) ELRIE LABRENT CHRITE DEAN	(i) 307,469. (ii) 0.	12,000.	0.	21,200.	20,385.	361,054.	0.
(15) AMY KING VICE CHANCELLOR	(i) 152,051. (ii) 0.	5,000.	1,080.	12,593.	16,359.	187,083.	0.
(16) ARMIN AFSABI VICE CHANCELLOR	(i) 152,989. (ii) 0.	35,000.	5,280.	11,833.	3,815.	208,917.	0.

Schedule J (Form 990) 2015

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 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.

IN LIMITED INSTANCES WITH DOCUMENTATION FOR THE BUSINESS PURPOSE FULFILLED
BY THE COMPANION AND ANY REQUIRED PRIOR APPROVALS, THE UNIVERSITY WILL PAY
FOR TRAVEL EXPENSES OF A COMPANION WHEN THE COMPANION TRAVEL IS FOR A BONA
FIDE BUSINESS PURPOSE, AND IMPORTANT TO THE ACHIEVEMENT OF THE UNIVERSITY'S
PURPOSES THAT REQUIRE THE TRAVEL OF THE EMPLOYEE AND COMPANION.

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:

MARGARET BRADLEY-DOPPE - 457(F) RETIREMENT PLAN - \$75,000

GREGG KVISTAD - 457(F) RETIREMENT PLAN - \$50,000

Part III Supplemental Information

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

CRAIG WOODY - 457(F) RETIREMENT PLAN - \$50,000

REBECCA CHOPP - 457(F) RETIREMENT PLAN - \$18,000

SCOTT LUMPKIN - SEVERANCE PAYMENT - \$235,500

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

ENTITY 1

OMB No. 1545-0047

2015
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	No	Yes	No
COLORADO EDUCATION & CULTURAL FACILITIES - SE84-089672719645RSR3			03/01/13	24,159,389.	REFUNDING SERIES 2005B BONDS								
COLORADO EDUCATION & CULTURAL FACILITIES - SE84-089672719645RFA4			03/04/08	9,953,292.	REFUNDING SERIES 1997 BONDS								
COLORADO EDUCATION & CULTURAL FACILITIES - SE84-08967271964584T7			10/10/07	45,839,717.	REFUNDING SERIES 2001A AND 2005B BONDS								
COLORADO EDUCATION & CULTURAL FACILITIES - SE84-0896727		NONE	09/01/15	29,075,000.	REFUNDING SERIES 2005A BONDS AND 2005B BONDS								

Part II Proceeds

	A	B	C	D
1 Amount of bonds retired	260,000.	3,805,000.		28,105,000.
2 Amount of bonds legally defeased				
3 Total proceeds of issue	24,159,389.	9,953,292.	45,839,717.	29,075,000.
4 Gross proceeds in reserve funds				
5 Capitalized interest from proceeds				
6 Proceeds in refunding escrows				28,793,113.
7 Issuance costs from proceeds	245,451.	199,064.	318,434.	281,888.
8 Credit enhancement from proceeds			698,000.	
9 Working capital expenditures from proceeds		2,996.	3,197.	
10 Capital expenditures from proceeds				
11 Other spent proceeds	23,913,938.	9,751,232.	44,820,086.	
12 Other unspent proceeds				
13 Year of substantial completion	2013	2008	2007	2015
14 Were the bonds issued as part of a current refunding issue?	Yes	No	Yes	No
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

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

532121
10-22-15

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

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Schedule K (Form 990) 2015

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

ENTITY 2

OMB No. 1545-0047

2015

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	No	Yes	No
COLORADO EDUCATION & CULTURAL FACILITIES - SE	84-0896727	NONE	03/01/16	12,500,000.	REFUNDING SERIES 2005B BONDS			X			X		X
B													
C													
D													

Part II Proceeds

	A		B		C	
	Yes	No	Yes	No	Yes	No
1 Amount of bonds retired		12,085,000.				D
2 Amount of bonds legally defeased						
3 Total proceeds of issue		12,500,000.				
4 Gross proceeds in reserve funds						
5 Capitalized interest from proceeds						
6 Proceeds in refunding escrows		12,379,090.				
7 Issuance costs from proceeds		120,910.				
8 Credit enhancement from proceeds						
9 Working capital expenditures from proceeds						
10 Capital expenditures from proceeds						
11 Other spent proceeds						
12 Other unspent proceeds						
13 Year of substantial completion	2016					
14 Were the bonds issued as part of a current refunding issue?	X					
15 Were the bonds issued as part of an advance refunding issue?		X				
16 Has the final allocation of proceeds been made?	X					
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X					

Part III Private Business Use

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

532121
10-22-15

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

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Schedule K (Form 990) 2015

COLORADO SEMINARY
Part III Private Business Use (Continued)

	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		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?								
c Are there any research agreements that may result in private business use of bond-financed property?		X		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?								
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 %		.15 %		.42 %
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 %		.15 %		.42 %
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 "Yes" to 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?								

Part III Private Business Use (Continued)

	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						
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?								
c Are there any research agreements that may result in private business use of bond-financed property?		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?								
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	%		%		%	
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	%		%		%	
6 Total of lines 4 and 5		.00	%		%		%	
7 Does the bond issue meet the private security or payment test?		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						
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							

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						
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?	X							
b Exception to rebate?		X						
c No rebate due?		X						
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?		X						
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X						
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								

Part V: Procedures To Undertake Corrective Action									
		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									
c Term of GIC									
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?									
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									
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?		Yes	No	Yes	No	Yes	No	Yes	No
		X				X		X	
Part VI: Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).									

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)?								
b Name of provider		X						
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
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							

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 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 2014A

(F) DESCRIPTION OF PURPOSE:

REFUNDING SERIES 2005A BONDS AND 2014A CAPITALIZED INTEREST

(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL FACILITIES - SERIES 2014B

(F) DESCRIPTION OF PURPOSE: REFUNDING SERIES 2005B 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

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

DATE THE REBATE COMPUTATION WAS PERFORMED: 01/10/2017

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**

▶ **Attach to Form 990 or Form 990-EZ.**

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

OMB No. 1545-0047

2015

**Open To Public
Inspection**

Name of the organization

COLORADO SEMINARY

Employer identification number

84-0404231

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1 (a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
			Yes	No

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No

Total ▶ \$

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

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

Schedule L (Form 990 or 990-EZ) 2015

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
EVENT RENTS USA, LLC	TRUSTEE, KEVIN C. G	266,781.	RENTAL OF F		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: EVENT RENTS USA, LLC

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

TRUSTEE, KEVIN C. GALLAGHER - OWNER OF LLC'S

(D) DESCRIPTION OF TRANSACTION: RENTAL OF FURNISHING & EQUIPMENT

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

- ▶ **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.**

OMB No. 1545-0047

2015

**Open To Public
Inspection**

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	9	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	68	956,697	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				
16 Real estate - Commercial				
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

3

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 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?

Yes No

30a		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?

31	X	
----	---	--

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash
contributions?

32a		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) (2015)

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

2015

Open to Public
Inspection

Name of the organization

COLORADO SEMINARY

Employer identification number
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FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

CREATIVE THOUGHT AND GENERATING KNOWLEDGE. OUR ACTIVE PARTNERSHIPS WITH
LOCAL AND GLOBAL COMMUNITIES CONTRIBUTE TO A SUSTAINABLE COMMON GOOD.

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

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:

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
TEACHER/SCHOLAR MODEL FOR ITS FACULTY, ENCOURAGING PROFESSIONS TO EXCEL
IN THE CLASSROOM AND IN RESEARCH. MUCH OF THE FACULTY SCHOLARSHIP
CONTRIBUTES TO THE UNIVERSITY OF SERVING THE PUBLIC GOOD.

EXPENSES \$ 23,991,279. INCLUDING GRANTS OF \$ 0. REVENUE \$ 29,364,139.

AUXILIARY ACTIVITIES 2015-2016 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

Name of the organization

COLORADO SEMINARY

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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 \$ 35,732,240. INCLUDING GRANTS OF \$ 0. REVENUE \$ 55,334,943.

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

IN ACCORDANCE WITH THE BYLAWS OF THE UNIVERSITY, BETWEEN SESSIONS OF THE BOARD OF TRUSTEES THE FUNCTIONS AND POWERS OF THE BOARD ARE VESTED IN AN EXECUTIVE COMMITTEE COMPOSED OF (A) THE CHAIRMAN, CHAIR ELECT, VICE CHAIRMEN 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 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

Name of the organization

COLORADO SEMINARY

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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 15:

DELIBERATIONS AND DISCUSSIONS FOR THE CHANCELLOR'S COMPENSATION PACKAGE ARE CARRIED ON IN EXECUTIVE SESSION OF THE BOARD OR ITS EXECUTIVE COMMITTEE, FOR WHICH DETAILED MINUTES ARE NOT PREPARED. THE COMPENSATION OF THE 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 REFLECTED IN THE CHANCELLOR'S EMPLOYMENT CONTRACT) AND REVIEWED, AND ADJUSTED IF APPROPRIATE, ANNUALLY BY THE BOARD OR ITS EXECUTIVE COMMITTEE. THE EXECUTIVE COMMITTEE DISCUSSED COMPENSATION FOR THE CHANCELLOR DURING DECEMBER 2015.

DELIBERATIONS AND DISCUSSIONS REGARDING BUDGETED COMPENSATION POOLS FOR ALL EMPLOYEES INCLUDING TOP MANAGEMENT AND KEY EMPLOYEES, EXCEPT THE CHANCELLOR (CEO), ARE CONTEMPORANEOUSLY DOCUMENTED IN THE MINUTES OF THE ANNUAL BOARD

Name of the organization

COLORADO SEMINARY

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MEETING THAT APPROVES THE BUDGET FOR THE UPCOMING YEAR. THIS PROCESS LAST
TOOK PLACE IN JUNE 2015 FOR FISCAL YEAR 2016.

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, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AK, ME, MI, MN, MA, MD, NV, NH, NY, ND, OH, OR, SC, WA

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 -165,365.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Name of the organization

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 9000 CREEKSIDE WAY HIGHLANDS RANCH, CO 80129	GOLF COURSE OPERATIONS	COLORADO	2,848,834.	4,992,606.	COLORADO SEMINARY
KNOEBEL EVENTS, LLC 2199 S UNIVERSITY BLVD DENVER, CO 80208	EDUCATIONAL EVENTS/RESTAURANT	COLORADO	424,939.	0.	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 80208	EDUCATIONAL EVENTS/RESTAURANT	COLORADO	501.(C)(2)		COLORADO SEMINARY		X

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

Schedule R (Form 990) 2015

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.	
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
b	Gift, grant, or capital contribution to related organization(s)
c	Gift, grant, or capital contribution from related organization(s)
d	Loans or loan guarantees to or for related organization(s)
e	Loans or loan guarantees by related organization(s)
f	Dividends from related organization(s)
g	Sale of assets to related organization(s)
h	Purchase of assets from related organization(s)
i	Exchange of assets with related organization(s)
j	Lease of facilities, equipment, or other assets to related organization(s)
k	Lease of facilities, equipment, or other assets from related organization(s)
l	Performance of services or membership or fundraising solicitations for related organization(s)
m	Performance of services or membership or fundraising solicitations by related organization(s)
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
o	Sharing of paid employees with related organization(s)
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.

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

[illegible]

Exempt Organization Business Income Tax Return

(and proxy tax under section 6033(e))

OMB No. 1545-0687

For calendar year 2015 or other tax year beginning JUL 1, 2015, and ending JUN 30, 2016.

2015

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury
Internal Revenue ServiceInformation about Form 990-T and its instructions is available at www.irs.gov/form990t.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

A <input type="checkbox"/> Check box if address changed B Exempt under section <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)	Print or Type Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) COLORADO SEMINARY Number, street, and room or suite no. If a P.O. box, see instructions. 2199 S UNIVERSITY BLVD City or town, state or province, country, and ZIP or foreign postal code DENVER, CO 80208	D Employer identification number (Employees' trust, see instructions.) 84-0404231	
		E Unrelated business activity codes (See instructions.) 713940 713910	
		C Book value of all assets at end of year 1,529,645,819.	
		F Group exemption number (See instructions.) G Check organization type <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust	

H Describe the organization's primary unrelated business activity. **SEE STATEMENT 1**I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ☐ Yes ☒ No

If "Yes," enter the name and identifying number of the parent corporation.

J The books are in care of **ANDREW CULLEN** Telephone number **303-871-3740**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a Gross receipts or sales	6,023,875.			
b Less returns and allowances		1c 6,023,875.		
2 Cost of goods sold (Schedule A, line 7)		2 908,847.		
3 Gross profit. Subtract line 2 from line 1c		3 5,115,028.		5,115,028.
4 a Capital gain net income (attach Schedule D)		4a 76,062.		76,062.
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)		4b		
c Capital loss deduction for trusts		4c		
5 Income (loss) from partnerships and S corporations (attach statement)		5 -12,266.		-12,266.
6 Rent income (Schedule C)		6		
7 Unrelated debt-financed income (Schedule E)		7		
8 Interest, annuities, royalties, and rents from controlled organizations (Sch. F)...		8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)		9		
10 Exploited exempt activity income (Schedule I)		10		
11 Advertising income (Schedule J)		11		
12 Other income (See instructions; attach schedule)		12		
13 Total. Combine lines 3 through 12		13 5,178,824.		5,178,824.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.)

(Except for contributions, deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors, and trustees (Schedule K)	14	
15 Salaries and wages	15	1,807,574.
16 Repairs and maintenance	16	
17 Bad debts	17	
18 Interest (attach schedule)	18	
19 Taxes and licenses	19	
20 Charitable contributions (See instructions for limitation rules)	20	
21 Depreciation (attach Form 4562)	21	106,968.
22 Less depreciation claimed on Schedule A and elsewhere on return	22a	
23 Depletion	23	
24 Contributions to deferred compensation plans	24	
25 Employee benefit programs	25	373,415.
26 Excess exempt expenses (Schedule I)	26	
27 Excess readership costs (Schedule J)	27	
28 Other deductions (attach schedule) SEE STATEMENT 2	28	2,197,909.
29 Total deductions. Add lines 14 through 28	29	4,485,866.
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	692,958.
31 Net operating loss deduction (limited to the amount on line 30) SEE STATEMENT 3	31	692,958.
32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30	32	0.
33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)	33	1,000.
34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32	34	0.

Part III Tax Computation**35 Organizations Taxable as Corporations.** See instructions for tax computation.Controlled group members (sections 1561 and 1563) check here ☐ See instructions and:**a** Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):

(1) \$ (2) \$ (3) \$

b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$

(2) Additional 3% tax (not more than \$100,000) \$

c Income tax on the amount on line 34 **35c** 0.**36 Trusts Taxable at Trust Rates.** See instructions for tax computation. Income tax on the amount on line 34 from:☐ Tax rate schedule or ☐ Schedule D (Form 1041) **36****37 Proxy tax.** See instructions **37****38 Alternative minimum tax** **38****39 Total.** Add lines 37 and 38 to line 35c or 36, whichever applies **39** 0.**Part IV Tax and Payments****40a** Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) **40a****b** Other credits (see instructions) **40b****c** General business credit. Attach Form 3800 **40c****d** Credit for prior year minimum tax (attach Form 8801 or 8827) **40d****e** Total credits. Add lines 40a through 40d **40e****41** Subtract line 40e from line 39 **41** 0.**42** Other taxes. Check if from: ☐ Form 4255 ☐ Form 8611 ☐ Form 8697 ☐ Form 8866 ☐ Other (attach schedule) **42****43** Total tax. Add lines 41 and 42 **43** 0.**44a** Payments: A 2014 overpayment credited to 2015 **44a****b** 2015 estimated tax payments **44b****c** Tax deposited with Form 8868 **44c****d** Foreign organizations: Tax paid or withheld at source (see instructions) **44d****e** Backup withholding (see instructions) **44e****f** Credit for small employer health insurance premiums (Attach Form 8941) **44f****g** Other credits and payments: ☐ Form 2439 **44g**☐ Form 4136 ☐ Other Total **44g****45** Total payments. Add lines 44a through 44g **45****46** Estimated tax penalty (see instructions). Check if Form 2220 is attached ☐ **46****47** Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed **47** 0.**48** Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid **48** 0.**49** Enter the amount of line 48 you want: Credited to 2016 estimated tax Refunded **49****Part V Statements Regarding Certain Activities and Other Information** (see instructions)**1** At any time during the 2015 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here **Yes** **No****2** During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file. **Yes** **No****3** Enter the amount of tax-exempt interest received or accrued during the tax year **\$****Schedule A - Cost of Goods Sold.** Enter method of inventory valuation **COST****1** Inventory at beginning of year **1** 129,625. **6** Inventory at end of year **6** 137,642.**2** Purchases **2** 906,453. **7** Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2 **7** 908,847.**3** Cost of labor **3****4a** Additional section 263A costs (att. schedule) **4a****b** Other costs (attach schedule) **4b** 10,411. **8** Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? **Yes** **No****5** Total. Add lines 1 through 4b **5** 1,046,489. **X****Sign Here**

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 taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer Date **VICE CHANCELLOR** Title May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No**Print/Type preparer's name**
Preparer's signature
Date
Check ☐ if self-employed
PTIN

KAREN GRIES

5/1/2017

P00078514

Firm's name **CLIFTONLARSONALLEN LLP**Firm's EIN **41-0746749**Firm's address **370 INTERLOCKEN BLVD., SUITE 500**Phone no. **303-466-8822****BROOMFIELD, CO 80021**

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions)

1. Description of property

(1)
(2)
(3)
(4)

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total 0.	Total 0.	

(c) **Total income.** Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) 0.(b) **Total deductions.**

Enter here and on page 1, Part I, line 6, column (B) 0.

Schedule E - Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property		2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals			Enter here and on page 1, Part I, line 7, column (A). 0.	Enter here and on page 1, Part I, line 7, column (B). 0.
Total dividends-received deductions included in column 8			0.	0.

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
Totals			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A). 0.	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B). 0.

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization
(see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
Totals	0.			0.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income
(see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals	0.	0.				0.

Schedule J - Advertising Income (see instructions)**Part I Income From Periodicals Reported on a Consolidated Basis**

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))	0.	0.				0.

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals from Part I	0.	0.				0.
Totals, Part II (lines 1-5)	0.	0.				0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			0.

FORM 990-T	DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED BUSINESS ACTIVITY	STATEMENT	1
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ACTIVITY CODE 713940 FITNESS AND RECREATION CENTERS: THE ATHLETIC FACILITIES GENERATE UNRELATED REVENUE THROUGH THE USE OF THE FITNESS CENTER BY THE PUBLIC.

ACTIVITY CODE 713910 GOLF COURSES AND COUNTRY CLUBS: THE UNIVERSITY OWNS AND OPERATES THE HIGHLIGHTS RANCH GOLF CLUB. UNRELATED BUSINESS INCOME IS GENERATED FROM THE GOLF COURSE OPERATIONS.

ACTIVITY CODE 722320 CATERERS: THE UNIVERSITY CONDUCTS ON CAMPUS CONFERENCES AND CATERING SERVICES.

ACTIVITY CODE 453220 GIFT NOVELTY AND SOUVENIR STORES: THE ATHLETICS DEPARTMENT OPERATES A GIFT SHOP TO SELL APPAREL AND GIFTS.

ACTIVITY CODE 523000 SECURITIES AND OTHER FINANCIAL INVESTMENTS AND RELATED ACTIVITIES: THE UNIVERSITY HAS PARTNERSHIP INVESTMENTS WHICH GENERATE UNRELATED BUSINESS INCOME (LOSS).

TO FORM 990-T, PAGE 1

FORM 990-T	OTHER DEDUCTIONS	STATEMENT	2
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DESCRIPTION	AMOUNT
DIRECT EXPENSES: MATERIALS AND OPERATING EXPENSES	1,310,755.
INDIRECT EXPENSE ALLOCATION OF SPACE, INSTITUTIONAL AND MANAGEMENT EXPENSES	887,154.
TOTAL TO FORM 990-T, PAGE 1, LINE 28	2,197,909.

FORM 990-T	NET OPERATING LOSS DEDUCTION	STATEMENT	3
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TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/00	198,672.	198,672.	0.	0.
06/30/01	542,885.	542,885.	0.	0.
06/30/02	236,642.	236,642.	0.	0.
06/30/03	899,725.	721,290.	178,435.	178,435.
06/30/04	620,021.	0.	620,021.	620,021.
06/30/05	712,853.	0.	712,853.	712,853.
06/30/06	641,850.	0.	641,850.	641,850.
06/30/07	592,496.	0.	592,496.	592,496.
06/30/08	251,523.	0.	251,523.	251,523.
06/30/09	260,711.	0.	260,711.	260,711.
06/30/10	91,358.	0.	91,358.	91,358.
06/30/11	107,397.	0.	107,397.	107,397.
06/30/12	159,371.	0.	159,371.	159,371.
NOL CARRYOVER AVAILABLE THIS YEAR			3,616,015.	3,616,015.

FORM 990-T	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT	4
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PARTNERSHIP NAME	GROSS INCOME	DEDUCTIONS	NET INCOME OR (LOSS)
AXIOM ASIA PRIVATE CAPITAL FUND I, L.P. 98-0488598	10.	25.	-15.
DENHAM COMMODITY PARTNERS FUND VI LP 45-2484628	215,755.	209,664.	6,091.
EIG ENERGY FUND XIV-A, L.P. 20-8019409	-14,188.	43,608.	-57,796.
EIG ENERGY FUND XVI, L.P. 46-2825629	46,232.	99,013.	-52,781.
HIGHFIELDS CAPITAL IV LP 11-3841276	772.	181.	591.
LIME ROCK RESOURCES C, L.P. 81-0681143	139,353.	47,878.	91,475.
STEPSTONE INTERNATIONAL INVESTORS III, L.P. 98-0508679	484.	760.	-276.
FORTRESS CREDIT OPPORTUNITIES FUND (B), LP 26-1701442	514.	69.	445.
TOTAL TO FORM 990-T, PAGE 1, LINE 5	388,932.	401,198.	-12,266.

FORM 990-T	COST OF GOODS SOLD - OTHER COSTS	STATEMENT	5
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DESCRIPTION	AMOUNT
WRITE-OFFS AND ADJUSTMENTS	10,411.
AVOCADO PRODUCTION COSTS	
TOTAL TO FORM 990-T, SCHEDULE A, LINE 4B	10,411.

SCHEDULE D
(Form 1120)

Department of the Treasury
Internal Revenue Service

Capital Gains and Losses

▶ Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.
▶ Information about Schedule D (Form 1120) and its separate instructions is at www.irs.gov/form1120.

OMB No. 1545-0123

2015

Name

Employer identification number

COLORADO SEMINARY

84-0404231

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked				
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				1,703.
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				
4 Short-term capital gain from installment sales from Form 6252, line 26 or 37			4	
5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824			5	
6 Unused capital loss carryover (attach computation)			6	()
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h			7	1,703.

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked				74,359.
10 Totals for all transactions reported on Form(s) 8949 with Box F checked				
11 Enter gain from Form 4797, line 7 or 9			11	
12 Long-term capital gain from installment sales from Form 6252, line 26 or 37			12	
13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824			13	
14 Capital gain distributions			14	
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h			15	74,359.

Part III Summary of Parts I and II

16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15)	16	1,703.
17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7)	17	74,359.
18 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the proper line on other returns	18	76,062.

Note: If losses exceed gains, see **Capital losses** in the instructions.

**Social security number or
taxpayer identification no.**
84-0404231

84-0404231