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.

► Go to www.irs.gov/Form990 for instructions and the latest information. ax year beginning JUL 1, 2017 and ending JUN 30,

Open to Public Inspection

OMB No. 1545-0047

_	1 01 111	e 2017 calendar year, or tax year beginning 000 1, 2017 and	ending t	JON 30, 2010						
В	Check if applicab	C Name of organization		D Employer identifi	D Employer identification number					
	Addre									
	Name chan	Doing business as UNIVERSITY OF DENVER		84-0	404231					
	Initial returr		Room/suite	E Telephone numbe	er					
Г	Final return	2100 C INITYEDCITY DIVID			871-2404					
	termii ated			G Gross receipts \$	887,830,150.					
Г	Amen			H(a) Is this a group re						
F	Appli			for subordinates						
	pendi	SAME AS C ABOVE		H(b) Are all subordinates included? Yes No						
$\overline{}$	Tav.ov	empt status: $X = 501(c)(3) = 501(c)(1)$ (insert no.) $4947(a)(1)$	or 52		list. (see instructions)					
		te: HTTP: //DU.EDU	01 02	H(c) Group exemption						
		forganization: X Corporation Trust Association Other	I Year		M State of legal domicile: CO					
	art I	Summary		oriorination, = 0 0 = 1	VI Ciato di logal adminino.					
	1	Briefly describe the organization's mission or most significant activities: A HI	GHER :	EDUCATIONAL						
Activities & Governance	'	INSTITUTION, PROVIDING BOTH UNDERGRADUAT	E AND	GRADUATE DE	GREES.					
rna	2	Check this box if the organization discontinued its operations or dispo								
Š	3			з	23					
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)			21					
တ္	5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)			8868					
iţie	6	Total number of volunteers (estimate if necessary)		_	3400					
듕	1	Total unrelated business revenue from Part VIII, column (C), line 12			6,119,315.					
⋖		Net unrelated business taxable income from Form 990-T, line 34			0.					
		· · · · · · · · · · · · · · · · · · ·		Prior Year	Current Year					
a)	8	Contributions and grants (Part VIII, line 1h)		33,233,518.	43,978,340.					
Ž	9	Program service revenue (Part VIII, line 2g)		562,940,150.						
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		59,711,606.						
ď	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,285,691.						
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		659,170,965.						
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		162,865,745.	179,596,321.					
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.					
S		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		269,647,562.						
Expenses	16a	Professional fundraising fees (Part IX column (Δ) line 11e)		189,560.	18,994.					
ē	b	Total fundraising expenses (Part IX, column (D), line 25) 20,873,7	23.							
ũ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		149,894,720.	171,422,769.					
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		582,597,587.	638,788,838.					
	19	Revenue less expenses. Subtract line 18 from line 12		76,573,378.	15,411,920.					
Net Assets or	3	·		eginning of Current Year	End of Year					
sets	20	Total assets (Part X, line 16)		1,758,522,373.	1,817,594,486.					
ASS	21	Total liabilities (Part X, line 26)		376,680,489.	373,439,614.					
ESE ESE	22	Net assets or fund balances. Subtract line 21 from line 20		1,381,841,884.	1,444,154,872.					
P	art II	Signature Block	•							
Und	der pen	alties of perjury, I declare that I have examined this return, including accompanying schedule	s and stater	nents, and to the best of m	y knowledge and belief, it is					
true	e, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of w	hich prepare	er has any knowledge.						
Sig	jn	Signature of officer		Date						
He	re	CRAIG WOODY, VICE CHANCELLOR								
		Type or print name and title		B	- I					
_		Print/Type preparer's name Preparer's signature		Date Check If	PTIN					
Pai		KAREN GRIES Gara Of Chies	/	5/13/19 self-employ	P00078514					
	parer	Firm's name CLIFTONLARSONALLEN ULP	^	Firm's EIN ▶	41-0746749					
Use Only Firm's address 370 INTERLOCKEN BLVD., SUITE 500										
		BROOMFIELD, CO 80021		Phone no. 30	3-466-8822					
Ма	y the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes No					

Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
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?
	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 X No
Ü	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.
7	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.
40	172 074 004
4a	(Code:) (Expenses \$ 1/3,8/4,094. including grants of \$ 0.) (Revenue \$ 4/6,543,621.) INSTRUCTION 2017-2018 UNDERGRADUATE 5,765, GRADUATE AND PROFESSIONAL
	5,669, TOTAL FALL ENROLLMENT 11,434. DEGREES CONFERRED (2017-2018):
	BACCALAUREATE 1,366, MASTER'S 2,107, FIRST PROFESSIONAL 274, DOCTORAL
	118. TOTAL DEGREES CONFERRED 3,865. 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 \$ 179,596,321. including grants of \$ 179,596,321.) (Revenue \$ 0.)
	2017-2018 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 2017-2018 ACADEMIC YEAR
	EQUALED \$160,681,638 ENDOWED AND GIFT SUPPORT SCHOLARSHIP PROGRAMS
	FUNDED \$15,800,728 AND THE FEDERAL AND STATE PROGRAMS FUNDED
	\$2,529,165. UP TO 80% OF THE STUDENTS AT THE UNIVERSITY RECEIVE SOME
	FINANCIAL AID.
4c	(Code:) (Expenses \$144,018,939. including grants of \$0. (Revenue \$17,074,624.)
	2017-2018 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 THERE ACTIVITIES ARE CAMPUS LIFE,
	CAREER AND COUNSELING CENTERS, LEADERSHIP PROGRAMS AND OTHER CAMPUS
	ACTIVITIES THAT CONTRIBUTE TO THE STUDENTS' EMOTIONAL AND PHYSICAL
4 d	Other program services (Describe in Schedule O.) (Expenses \$ 65,540,290 • including grants of \$ 0 •) (Revenue \$ 93,695,962 •)
	FCO 000 C11
40	Total program service expenses ► 563,029,644. Form 990 (2017)
	Form 990 (2017)

11100513 099347 011-04450400 2017.05050 COLORADO SEMINARY

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	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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	3		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	4	Х	
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	5		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	6	Х	
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	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Х	
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	9	Х	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If</i> "Yes," <i>complete Schedule D, Part V</i>	10	х	
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
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	11b	Х	
С	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	11c		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	11d	37	Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		37	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	х	
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	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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		77	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
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			v
46	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to		Х	
4-	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Λ	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		Х	
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Λ	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40	Х	
10	1c and 8a? If "Yes," complete Schedule G, Part II	18	- 11	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		Х
	complete Schedule G, Part III	19		

Form **990** (2017)

Form 990 (2017) COLORADO SEMINARY Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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	21	Х	
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	22	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	23	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		7.7	
	Schedule K. If "No", go to line 25a	24a	X	37
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			37
	any tax-exempt bonds?	24c		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Х
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			7.7
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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			l 🕶
	Schedule L, Part I	25b		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,"			X
07	complete Schedule L, Part II	26		
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	07		x
28	of any of these persons? If "Yes," complete Schedule L, Part III	27		- 25
20	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 current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Х	
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee: In res, complete ochedule 2, Farth	200		
C	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	Х	
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
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	33	Х	
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	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	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	35b		Х
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	36		Х
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	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		F	$\Omega\Omega\Omega$	(OO4 -1)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part v					
					Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	1145			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r					
	(gambling) winnings to prize winners?	 i	 I	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		0060			
	filed for the calendar year ending with or within the year covered by this return		8868		77	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns			2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)			77	
				3a	X	
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule			3b	Х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other		•			,,
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	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 A					37
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction			5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the					٦,
	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 contribute		-			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).				37	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set			7a	X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w			_		х
	to file Form 8282?	1	 I	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year		<u> </u>	_		Х
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contribution of the language of the languag			7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations are single properties of the design of the d			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained					Х
•	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?			00		Х
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9a 9b		X
	Section 501(c)(7) organizations. Enter:			an		
	Initiation fees and capital contributions included on Part VIII, line 12	10a	1			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:	55	l			
	Gross income from members or shareholders	11a				
	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		?	12a		
	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.					
	Is the organization licensed to issue qualified health plans in more than one state?			13a		
_	Note. See the instructions for additional information the organization must report on Schedule O.					
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				
С	Enter the amount of reserves on hand	13c				
				14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul			14b		
	,				990	/2017

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

	Check if Schedule O contains a response or note to any line in this Part VI			X							
Sec	tion 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										
	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 21										
2											
	officer, director, trustee, or key employee?	2		Х							
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		Х							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х							
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х							
6	Did the organization have members or stockholders?	6		Х							
7a											
	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		Х							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:										
а	The governing body?	8a	Х								
b	Each committee with authority to act on behalf of the governing body?	8b	Х								
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		Х							
Sec	etion 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	Х								
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X								
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe										
	in Schedule O how this was done	12c	Х								
13	Did the organization have a written whistleblower policy?	13	Х								
14	Did the organization have a written document retention and destruction policy?	14	Х								
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?										
а	The organization's CEO, Executive Director, or top management official	15a	X								
b	Other officers or key employees of the organization	15b	Х								
	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									
Sec	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed ►MI, MA, MD, NV, NH, OH, OR, SC, WA										
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) and 990-T (Section 501(c)(3)s only) are	availab	ole								
	for public inspection. Indicate how you made these available. Check all that apply.										
	Own website Another's website X 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	d finan	icial								
	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 Contractors

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)			(C Pos	C) ition	ı		(D)	(E)	(F)
Name and Title	Average hours per	box,	not cl unles	heck ss pe	more rson i	than is bot	h an	Reportable compensation	Reportable compensation	Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer B		Highest compensated highest compensated mployee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) EDWARD T. ANDERSON TRUSTEE	1.00	х						0.	0.	0.
(2) KATHERINE ARCHULETA TRUSTEE	1.00	х						0.	0.	0.
(3) MARY SUE COLEMAN TRUSTEE	1.00	х						0.	0.	0.
(4) DEBORAH DEHAAS TRUSTEE	1.00	х						0.	0.	0.
(5) NAVIN DIMOND TRUSTEE	1.00	х						0.	0.	0.
(6) MARK FALCONE TRUSTEE	1.00	х						0.	0.	0.
(7) MARGOT GILBERT FRANK TRUSTEE-SECRETARY	1.00	х		х				0.	0.	0.
(8) KEVIN C. GALLAGHER TRUSTEE-VICE CHAIR	1.00	х		х				0.	0.	0.
(9) PETER A. GILBERTSON TRUSTEE	1.00	х						0.	0.	0.
(10) JAMES GRIESEMER TRUSTEE, PROFESSOR	41.00	х						229,442.	0.	41,341.
(11) CRAIG HARRISON TRUSTEE	1.00	х						0.	0.	0.
(12) BRANDON C. JOHNSON TRUSTEE	1.00	х						0.	0.	0.
(13) JOHN W. LOW TRUSTEE	1.00	х						0.	0.	0.
(14) JOHN A. MILLER TRUSTEE	1.00	х						0.	0.	0.
(15) GREGORY L. MOORE TRUSTEE	1.00	х						0.	0.	0.
(16) TRYGVE E. MYHREN TRUSTEE	1.00	х						0.	0.	0.
(17) DENISE M. OLEARY TRUSTEE-CHAIR ELECT	1.00	х		х				0.	0.	0.
732007 11-28-17	•					_		-	•	Form 990 (2017)

Form **990** (2017)

Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (A) (F) (D) (E) Position Name and title Average Reportable Reportable Estimated (do not check more than one hours per compensation compensation amount of box, unless person is both an officer and a director/trustee) week from from related other (list any organizations compensation ndividual trustee or director the hours for organization (W-2/1099-MISC) from the related nstitutional trustee (W-2/1099-MISC) organization organizations (ey employee and related below organizations line) 1.00 (18) MARY K. RHINEHART 0. 0. 0. TRUSTEE (19) RAY M. ROBINSON 1.00 X 0 0. 0. TRUSTEE 1.00 (20) DOUGLAS G. SCRIVNER X 0. X 0. 0. TRUSTEE-CHAIR (21) CATHERINE C. SHOPNECK 1.00 X X 0 0. TRUSTEE-VICE CHAIR 0. (22) OTTO TSCHUDI 1.00 0. 0. TRUSTEE Х 0. (23) FREDERICK T. WALDECK 1.00 Х 0. 0. TRUSTEE 0. (24) REBECCA CHOPP 40.00 X 816,240 0. 55,977. CHANCELLOR 40.00 (25) CRAIG WOODY X 79,708. 335,283. TREASURER/VICE CHANCELLOR 40.00 (26) ANDREW CULLEN Х ASSISTANT TREASURER/CONTROLLER 202,636. 0. 16,700. 1,583,601. 0. 193,726. 1b Sub-total 6,687,561. 0. 954,678. c Total from continuation sheets to Part VII, Section A 8,271,162. 0. 1,148,404. d Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable

compensation from the organization

485

			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	3	Х	
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	4	Х	
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	5		Х

Section B. Independent Contractors

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
TRIBAL LAW POLICY INSTITUTE, 8235 SANTA	RESEARCH GRANT	
	SUBCONTRACTOR	2,125,943.
ELLUCIAN COMPANY LP, 62578 COLLECTIONS		
CENTER DRIVE, CHICAGO, IL 60693	SOFTWARE MAINTENANCE	954,300.
THE WEITZ COMPANY	CONSTRUCTION	
4725 S MONACO STREET, DENVER, CO 80237	SERVICES	857,520.
ALAN & BROOKS BUILDERS LLC	CONSTRUCTION	
920 MISSISSIPPI AVENUE, DENVER, CO 80223	SERVICES	805,618.
THE DENVER POST LLC, COMMERCIAL DIRECT	NEWSPAPER	
RECEIVABLES, DENVER, CO 80217	ADVERTISING	434,564.
2 Total number of independent contractors (including but not limited to those lister	ed above) who received more than	
\$100,000 of compensation from the organization > 30		

SEE PART VII, SECTION A CONTINUATION

Form **990** (2017)

	O SEMINAL	K Y							84-040	4231
Part VII Section A. Officers, Directors,	Trustees, Key E	mple	oyee	s, ar	nd F	ligh	est	Compensated Employ	ees (continued)	
(A)			(C				(D)	(E)	(F)	
Name and title	Average			Posi	tion			Reportable	Reportable	Estimated
	hours	(с	heck	k all t	hat	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	L				oyee		the	organizations	compensation
	(list any	recto				empl		organization	(W-2/1099-MISC)	from the
	hours for	or di	99			sated		(W-2/1099-MISC)		organization
	related organizations	rustee	l frust		ee	u beu:				and related organizations
	below	dualt	tiona	١. ا	nploy	stcor				organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) ROSALYNN FEAGINS	40.00									
ASSISTANT SECRETARY		1		x				88,822.	0.	18,618.
(28) CLAIRE BROWNELL	40.00									
ASSISTANT SECRETARY				X				69,496.	0.	28,059.
(29) ANGELA DUGGAN	40.00									
ASSISTANT SECRETARY				Х				53,269.	0.	25,876.
(30) GREGG KVISTAD	40.00									
PROVOST					Х			359,161.	0.	79,383.
(31) ARMIN AFSAHI	40.00								_	
VICE CHANCELLOR	40.00				X			388,379.	0.	28,973.
(32) MARGARET BRADLEY DOPPES	40.00	_						222 252	•	440 084
VICE CHANCELLOR	40.00			\square	Х			330,978.	0.	110,374.
(33) PAUL CHAN	40.00							0.60 2.40	0	F1 260
UNIVERSITY COUNSEL	40.00				Х			269,340.	0.	51,369.
(34) DAVID GREENBERG	40.00	4			37			222 402	0	24 066
VICE CHANCELLOR	40 00			\sqcup	Х			223,493.	0.	24,866.
(35) TODD RHINEHART	40.00	-			х			184,875.	0.	26 112
VICE CHANCELLOR (36) ELRIE LABRENT CHRITE	40.00				Δ			104,073.	0.	36,112.
DEAN	40.00	1			х			345,724.	0.	64,959.
(37) BRUCE SMITH	40.00			\vdash				343,724.	0.	04,555.
DEAN	40.00	-			х			333,628.	0.	52,395.
(38) LILIANA RODRIGUEZ	40.00			\vdash				333,020.	•	32,333
VICE CHANCELLOR	1000	1			Х			214,766.	0.	87,833.
(39) THOMAS WILLOUGHBY	40.00							22177000		0,,000
VICE CHANCELLOR		1			Х			224,560.	0.	30,631.
(40) DONALD HARRIS	40.00							,	-	, , ,
VICE CHANCELLOR		i			Х			270,864.	0.	47,182.
(41) RENELL WYNN	40.00									-
VICE CHANCELLOR		1			Х			250,428.	0.	15,894.
(42) LAURA MARESCA	40.00									
VICE CHANCELLOR					Х			197,289.	0.	16,014.
(43) JAMES ROSNER	40.00									
ASSOC VICE CHANCELLOR					Х			193,820.	0.	29,327.
(44) JAMES MONTGOMERY	40.00									
HEAD COACH						Х		682,832.	0.	42,683.
(45) WILLIAM TIERNEY	40.00	1							_	
HEAD COACH		<u> </u>		Ш		Х		356,035.	0.	35,124.
(46) DEBORAH ARMSTRONG	40.00	1]		10 11:
ASSOCIATE VICE CHANCELLOR						X		325,568.	0.	10,444.
Total to Part VII, Section A, line 1c										

Form 990 COLORADO	PEMINAL	XΥ							84-040	4231
Part VII Section A. Officers, Directors, Tru	stees, Key Er	nplo	oyee	s, a	nd F	ligh	est	Compensated Employ	ees (continued)	
(A) Name and title	(B) Average hours	(cl	heck	Pos			olv)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per		Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations			
(47) SHARON LASSAR PROFESSOR	40.00					x		323,038.	0.	23,300.
(48) JAMES HOLSTON DEAN OF ENGINEERING	40.00					х		300,972.	0.	51,235.
(49) MARTIN KATZ	40.00									
FORMER DEAN							Х	341,670.	0.	44,027.
(50) JOSEPH SCOTT FORMER HEAD COACH	0.00						х	358,554.	0.	0.
							\vdash			
Total to Part VII, Section A, line 1c								6,687,561.		954,678.

Form 990 (2017) COLORADO
Part VIII Statement of Revenue

		Check if Schedule O conta	ains a respo	nse or note to any lir	ne in this Part VIII			
				,	(A)	(B)	(C)	(D) Revenue excluded
					Total revenue	Related or exempt function	Unrelated business	from tax under
						revenue	revenue	sections 512 - 514
nts nts	1 a	Federated campaigns	1a					
ar our	b	Membership dues	1b					
S, C		Fundraising events		743,042.				
ar j	d	Related organizations	1d					
ïs,	е	Government grants (contributi	ions) 1e					
rior S	f	All other contributions, gifts, grant	ts, and					
ig a		similar amounts not included abov	/e 1f	43,235,298.				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines	1a-1f: \$	2,190,300.				
<u>8</u> ℃	h	Total. Add lines 1a-1f			43,978,340.			
				Business Code				
9	2 a	TUITION AND FEES		611310	476,543,621.	476,543,621.		
Program Service Revenue	b	AUXILIARY ENTERPRISES		611310	63,038,542.	56,706,629.	6,331,913.	
	С	RESEARCH GRANTS		611310	34,422,695.	34,422,695.		
ran ev	d	EDUCATIONAL ACTIVITIES		611310	17,074,624.	17,074,624.		
S	е	STUDENT LOANS		611310	135,016.	135,016.		
<u>-</u>	f	All other program service reve	nue					
	g	Total. Add lines 2a-2f			591,214,498.			
	3	Investment income (including	dividends, i	nterest, and				
		other similar amounts)			1,452,132.		-212,598.	1,664,730.
	4	Income from investment of tax	k-exempt bo	nd proceeds	1,122,867.			1,122,867.
	5	Royalties		>	78,715.			78,715.
			(i) Real	- '				
	6 a	Gross rents						
		Less: rental expenses	699,6					
		Rental income or (loss)						
		Net rental income or (loss)			1,672,711.			1,672,711.
	7 a	Gross amount from sales of	(i) Securit	- ' '				
		assets other than inventory	244,710,7	733.				
	b	Less: cost or other basis						
		and sales expenses	232,164,0	064.				
		Gain or (loss)			10 515 550			10.546.660
		Net gain or (loss)			12,546,669.			12,546,669.
ne	8 a	Gross income from fundraising		ot				
Other Reven		including \$ 743						
Be		contributions reported on line	,	460.003				
her		Part IV, line 18						
₹		Less: direct expenses			-296,796.			-296,796.
		Net income or (loss) from fund			-230,730.			-230,730.
	эa	Gross income from gaming ac Part IV, line 19						
	h							
		Less: direct expensesNet income or (loss) from gam						
		Gross sales of inventory, less		·				
	10 a	and allowances		a				
	h	Less: cost of goods sold						
		Net income or (loss) from sales		•				
ı		Miscellaneous Revenue		Business Code				
ł	11 2	MISC SERVICE REV		611710	2,431,622.	2,431,622.		
	b				, ,	,,		
	C			_				
		All other revenue		_				
		• Total. Add lines 11a-11d			2,431,622.			
	12	Total revenue. See instructions.			654,200,758.	587,314,207.	6,119,315.	16,788,896.

Sect	ion 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. All otl		omplete column (A).	
	Check if Schedule O contains a respo	7-1		(C)	
	not include amounts reported on lines 6b, 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	584,790.	584,790.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	166,214,484 .	166.214.484 .		
3	Grants and other assistance to foreign				
Ū	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	12,797,047.	12,797,047.		
4	Benefits paid to or for members	, - , -	, , , ,		
5	Compensation of current officers, directors,				
_	trustees, and key employees	6,524,830.	1,811,440.	4,295,292.	418,098
6	Compensation not included above, to disqualified				-
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	220 177 507	191,249,012.	25,448,772.	11 470 722
7	Other salaries and wages	220,111,30/•	<u> </u> ±9±,4 4 9,0±4•	43,440,114.	11,413,143
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	12 184 884	10,091,442.	1,333,004.	760,438
0			22,212,996.		1,442,254
9	Other employee benefits Payroll taxes		12,161,620.	1,858,654.	933,309
10 11	Fees for services (non-employees):	14,755,505.	12,101,020.	1,030,034.	233,302
	Management				
		1,550,518.	405,926.	1,139,969.	4,623
	Legal Accounting	230,750.		230,750.	1,020
	Lobbying	56,590.		56,590.	
	Professional fundraising services. See Part IV, line 17	18,994.		, , , , , , , , , , , , , , , , , , , ,	18,994
f	Investment management fees	3,347,531.		3,347,531.	•
g	Other. (If line 11g amount exceeds 10% of line 25,				
·	column (A) amount, list line 11g expenses on Sch O.)	43,548,632.	38,502,213.	3,517,228.	1,529,191
12	Advertising and promotion	3,122,276.	2,916,574.	104,106.	101,596
13	Office expenses		23,989,966.	1,826,403.	1,299,795
14	Information technology	8,549,768.	5,171,981.	3,221,965.	155,822
15	Royalties				
16	Occupancy		20,570,908.	362,825.	262,132
17	Travel	13,699,568.	12,713,503.	488,861.	497,204
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	8,453,984.	5,646,730.	966,861.	1,840,393
20	Interest	10,161,627.		444,063.	
21	Payments to affiliates			-	
22	Depreciation, depletion, and amortization	16,964,036.		744,007.	
23	Insurance	2,969,945.	1,042,174.	1,869,782.	57,989
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 0.)				
а	BOOKS AND SUBSCRIPTIONS	7,764,891.			
b	FINANCIAL FEES	2,690,624.	1,244,354.	1,374,108.	72,162
С					
d					
е	All other expenses	600 F00 505	F.63. 633. 511	E 4 605 151	00 000 000
25	·	638,788,838.	563,029,644.	54,885,471.	20,873,723
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)				Earm 990 (2017

Form **990** (2017)

Part X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	52,362,765.	1	54,104,328
2	Savings and temporary cash investments	21,649,976.	2	15,726,181
3	Pledges and grants receivable, net	36,518,763.	3	42,016,292
4	Accounts receivable, net	24,666,060.	4	24,088,656
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			
ध	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	Notes and loans receivable, net		7	
₹ 8	Inventories for sale or use	144,693.	8	197,062
9	Prepaid expenses and deferred charges	5,958,879.	9	7,693,547
10 a	Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D 10a 874,926,589.			
l k	Less: accumulated depreciation 10b 215,678,598.		10c	659,247,991
11	Investments - publicly traded securities	705,017,077.	11	759,145,591
12	Investments - other securities. See Part IV, line 11	240,092,626.	12	229,283,238
13	Investments - program-related. See Part IV, line 11	16,219,039.	13	14,360,928
14	Intangible assets		14	
15	Other assets. See Part IV, line 11	12,176,020.	15	11,730,672
16	Total assets. Add lines 1 through 15 (must equal line 34)	1,758,522,373.	16	1,817,594,480
17	Accounts payable and accrued expenses	64,532,052.	17	69,995,570
18	Grants payable		18	
19	Deferred revenue	21,905,507.	19	23,250,704
20	Tax-exempt bond liabilities	235,998,863.	20	227,879,082
21	Escrow or custodial account liability. Complete Part IV of Schedule D	3,074,770.	21	3,467,403
ဖ္မ 22	Loans and other payables to current and former officers, directors, trustees,			
┋	key employees, highest compensated employees, and disqualified persons.			
Liabilities 22	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties	24,535,000.	23	24,535,000
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X of			
	Schedule D	26,634,297.	25	24,311,855
26	Total liabilities. Add lines 17 through 25	376,680,489.	26	373,439,614
	Organizations that follow SFAS 117 (ASC 958), check here			
es es	complete lines 27 through 29, and lines 33 and 34.			
ဋ 27	Unrestricted net assets	842,152,259.	27	850,395,625
<u> </u>	Temporarily restricted net assets	201,088,016.	28	230,153,165
29	Permanently restricted net assets	338,601,609.	29	363,606,082
ឨ	Organizations that do not follow SFAS 117 (ASC 958), check here ▶			
<u></u>	and complete lines 30 through 34.			
8 30	Capital stock or trust principal, or current funds		30	
န္မွဴ 31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances 22 28 29 30 31 32 32 32 33 34 35 35 35 35 35 35 35 35 35 35 35 35 35	Retained earnings, endowment, accumulated income, or other funds		32	
Z 33	Total net assets or fund balances	1,381,841,884.	33	1,444,154,872
34	Total liabilities and net assets/fund balances	1,758,522,373.	34	1,817,594,486

Form **990** (2017)

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	654			
2	Total expenses (must equal Part IX, column (A), line 25)	2	638			
3	Revenue less expenses. Subtract line 2 from line 1	3		, 41		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	.,381			
5	Net unrealized gains (losses) on investments	5	46	, 25	2,9	99.
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		64	8,0	69.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	.,444	,15	4,8	72.
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: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed					
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	,			
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit	,			
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule C).			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dit			
	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 requi	ired au	dit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u>		3b	X	
				Form	990	(2017)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number COLORADO SEMINARY 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 12, 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). 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: 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). 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.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 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.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. ☐ 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. ☐ 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. 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. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	60,864,647.	36,804,264.	31,908,981.	33,233,518.	43,978,340.	206,789,750.
2	Tax revenues levied for the organ-						_
	ization'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	60,864,647.	36,804,264.	31,908,981.	33,233,518.	43,978,340.	206,789,750.
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)						27,467,429.
6	Public support. Subtract line 5 from line 4.						179,322,321.
	etion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Amounts from line 4	60,864,647.	36,804,264.	31,908,981.	33,233,518.	43,978,340.	206,789,750.
	Gross income from interest,	, ,		, ,	, ,	, ,	
•	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	6,848,944.	6,493,156.	8,177,293.	3,895,363.	5,238,662.	30,653,418.
a	Net income from unrelated business	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , , , , , , , , , , , , , , , , , , ,	7	7=117	7 1 7 1 1 7 1 5
·	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI.)	2,156,515.	2,781,598.	2,497,494.	2,527,551.	2 900 515	12,863,673.
-1-1	Total support. Add lines 7 through 10	2,130,313.	2,701,330.	2,137,131.	2,327,331.	2,300,313.	250,306,841.
12	Gross receipts from related activities,	ote (soo instruction	ne)			12 2,698	,585,307.
13	First five years. If the Form 990 is for			I fourth or fifth to			730373074
13	organization, check this box and stor			,	•		ightharpoonup
Sec	ction C. Computation of Publ		rcentage				
	Public support percentage for 2017 (I			olumn (f))		14	71.64 %
15	Public support percentage from 2016					15	65.29 %
	33 1/3% support test - 2017. If the o						
	stop here. The organization qualifies						► X
b	33 1/3% support test - 2016. If the o						
-	and stop here. The organization qual	•		•		•	▶
17a	10% -facts-and-circumstances tes						or more
	and if the organization meets the "fac	•					•
	meets the "facts-and-circumstances"						
h	10% -facts-and-circumstances tes						
N	more, and if the organization meets the						
	organization meets the "facts-and-circ		•				
12	Private foundation. If the organization			•			
10	i invate roundation. Il tile organizatio	n ala not crieck a l	50 A OLI III I C 13, 108	, 100, 11a, 01 1/D	, OHEON HIIS DUX 8	แน จะะ แจแนนเปป	·

Schedule A (Form 990 or 990-EZ) 2017

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

(Complete only if you checked the box on line 10 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.)

Se	ction A. Public Support	, <u>, , , , , , , , , , , , , , , , , , </u>	,					
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(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 per-							
	formed, 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 bus-							
	iness under section 513							
4	Tax revenues levied for the organ-							
	ization'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							
7	Amounts included on lines 1, 2, and							
	3 received from disqualified persons							
ŀ	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							
	Add lines 7a and 7b							
	Public support. (Subtract line 7c from line 6.)							
	ction B. Total Support							
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total	
	Amounts from line 6							
10	Gross income from interest, dividends, payments received on							
	securities loans, rents, royalties,							
	and income from similar sources							
ŀ	Unrelated business taxable income							
	(less section 511 taxes) from businesses							
	acquired after June 30, 1975							
	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.)							
	Total support. (Add lines 9, 10c, 11, and 12.)						<u> </u>	
14	First five years. If the Form 990 is for	r the organization's	s first, second, thi	rd, fourth, or fifth t	tax year as a secti	on 501(c)(3) organi	zation,	
							>	
	ction C. Computation of Publ					1 1		
	Public support percentage for 2017 (15	<u>%</u>	
	Public support percentage from 2016					16	<u>%</u>	
	ction D. Computation of Inve					11		
	Investment income percentage for 20					17	<u>%</u>	
	8 Investment income percentage from 2016 Schedule A, Part III, line 17							
198								
_	more than 33 1/3%, check this box a							
ł	33 1/3% support tests - 2016. If the							
00	line 18 is not more than 33 1/3%, che							
20	Private tolingation if the organization	IN MICH DOT CDACK 3	DOX OD 1104 1/4 10	n ar iun chackt	THE DAY AND COO IN	ETHICTIONS		

Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **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)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? 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.
- 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)? 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? 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).
- **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? If "Yes," provide detail in Part VI.
- 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? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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))? If "Yes," provide detail in Part VI.
- **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? If "Yes," provide detail in Part VI.
- 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? If "Yes," provide detail in Part VI.
- 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)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
•		
2		
_		
3a		
3b		
3с		
4a		
4b		
4c		
5a		
- Eh		
5b 5c		
6		
7		
_		
8		
9a		
Oh		
9b		
9с		
10a		
401		
10b	990-EZ)	

Par	TIV Supporting Organizations _(continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	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?	11a		
b	A family member of a person described in (a) above?	11b		
	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.	11c		
	tion 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.	1		
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,			
		2		
800	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations			
<u> </u>	tion of Type it Supporting Organizations		V	N.
_	Managarania and the companies time to diversity and the state of		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			
<u> </u>	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations		,, l	
	Did to the state of the state o		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?	1		
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).	2		
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.	3		
Sec	tion 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 yea(see instructions).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instance)	tructions	s).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	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.	2a		
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.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	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.	За		
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.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orga	anizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust o	n Nov. 20, 1970 (explain in	Part VI.) See instructions. A
	other Type III non-functionally integrated supporting organizations must co	mplete S	Sections A through E.	
Sect	ion 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		
Sect	ion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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		
Sect	ion 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	Check here if the current year is the organization's first as a non-functionall	y integra	ated Type III supporting org	anization (see
	instructions).			

Schedule A (Form 990 or 990-EZ) 2017

Par	LV	Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations _(continued)	
Secti	on D -	Distributions			Current Year
1	Amour	nts paid to supported organizations to accomplish exe			
2	Amour				
	organi	zations, in excess of income from activity			
3	Admin	istrative expenses paid to accomplish exempt purpose	es of supported organization	18	
4		nts paid to acquire exempt-use assets			
5		ed set-aside amounts (prior IRS approval required)			
6		distributions (describe in Part VI). See instructions.			
7	Total a	annual distributions. Add lines 1 through 6.			
8		outions to attentive supported organizations to which the	he organization is responsive	е	
		de details in Part VI). See instructions.			
9		outable amount for 2017 from Section C, line 6			
10	Line 8	amount divided by line 9 amount	,	Γ	
Secti	ion E -	Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distrib	outable amount for 2017 from Section C, line 6			
2		distributions, if any, for years prior to 2017 (reason-			
		ause required- explain in Part VI). See instructions.			
3	Excess	s distributions carryover, if any, to 2017			
а					
	From 2				
	From 2				
	From 2				
	From 2				
		of lines 3a through e			
		d to underdistributions of prior years			
		d to 2017 distributable amount			
i		over from 2012 not applied (see instructions)			
j		inder. Subtract lines 3g, 3h, and 3i from 3f.			
4		outions for 2017 from Section D,			
	line 7:	\$			
		d to underdistributions of prior years			
		d to 2017 distributable amount			
		inder. Subtract lines 4a and 4b from 4.			
5		ining underdistributions for years prior to 2017, if			
	,	Subtract lines 3g and 4a from line 2. For result greater			
		ero, explain in Part VI. See instructions.			
6		ining underdistributions for 2017. Subtract lines 3h			
		o from line 1. For result greater than zero, explain in			
_		/I. See instructions.			
7		s distributions carryover to 2018. Add lines 3j			
•	and 4c				
		down of line 7:			
		s from 2013			
		s from 2014			
		s from 2015			
		s from 2016 s from 2017			
е	EXCES!	5 IIUIII 2017			

Schedule A (Form 990 or 990-EZ) 2017

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12;						
1 0.11	Part IV Section A lines 1 2 3h 3c 4h 4c 5a 6 9 9h 9c 11a 11h 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.						
	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, ine 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.)						
	(See instructions.)						
-							
•							
-							

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.

➤ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Name of the organization

Employer identification number

COLORADO SEMINARY

84-0404231

Organization type (check one):							
Filers of:	Section:						
Form 990 or 990-EZ	$\overline{\mathbf{X}}$ 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 Nuie							
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.						
Special Rules							
sections 509(a)(1) any one contributo	X 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.						
year, total contribu	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 <i>exclusively</i> 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 <i>exclusively</i> religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions totaling \$5,000 or more during the year \bigsim							
Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't 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 doesn't 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) (2017)

Name of organization Employer identification number COLORADO SEMINARY 84 - 0404231

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Nume, address, and 211 + 4	\$ 2,652,250.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 4	Name, address, and ZIP + 4	* 1,500,936.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$\$\$\$\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Turno, addresso, and Ell TT	\$	Person Payroll Complete Part II for noncash contributions.)

Name of organization Employer identification number

COLORADO SEMINARY

84-0404231

Part II	Noncash Property (see instructions). Use duplicate copies of Par	t II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
			990 990-EZ, or 990-PF) (2017

Name of organization Employer identification number 84-0404231 COLORADO SEMINARY 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 Part III 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 (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

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) organizat	tions: Complete Part III.			
Nan	ne of organization			Er	mployer identification number
_		O SEMINARY	504/		84-0404231
Pa	art I-A Complete if the org	janization is exempt unde	r section 501(c) o	or is a section 527	organization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures		>	* \$ 0 · 0 ·
Pa	art I-B Complete if the org	ganization is exempt unde	r section 501(c)(3	3).	
1	Enter the amount of any excise tax	incurred by the organization unde	r section 4955	· •	> \$0.
2	Enter the amount of any excise tax	incurred by organization managers	s under section 4955		> \$ 0.
3	If the organization incurred a section	n 4955 tax, did it file Form 4720 fo	or this year?		Yes No
	Was a correction made?				
b	If "Yes." describe in Part IV.				
Pa	art I-C Complete if the org	janization is exempt unde	r section 501(c),	except section 50	01(c)(3).
2 3 4	Enter the amount directly expended Enter the amount of the filing organ exempt function activities Total exempt function expenditures line 17b Did the filing organization file Form Enter the names, addresses and en made payments. For each organiza contributions received that were prepolitical action committee (PAC). If	ization's funds contributed to other. a. Add lines 1 and 2. Enter here and the contributed to other. 1120-POL for this year? Inployer identification number (EIN) tion listed, enter the amount paid comptly and directly delivered to a second to the contributed.	or organizations for second on Form 1120-POL, of all section 527 polition of all section organizations	tical organizations to wation's funds. Also ente	which the filing organization er the amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid froi filing organization's funds. If none, enter	contributions received and

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

Schedule C (Form 990 or 990-EZ) 2017

LHA

732041 11-09-17

Part II-A Complete if the organization 501(h)).	anization is exe	mpt under sectio	n 501(c)(3) and fil	ed Form 5768 (e	lection under
A Check ► if the filing organizat expenses, and share	e of excess lobbying	expenditures).	n Part IV each affiliated	group member's nam	ne, address, EIN,
Limit	s on Lobbying Expe	nd "limited control" pro nditures unts paid or incurred.		(a) Filing organization's totals	(b) Affiliated group totals
 1a Total lobbying expenditures to influ b Total lobbying expenditures to influ c Total lobbying expenditures (add lin d Other exempt purpose expenditures 	ence a legislative boones 1a and 1b)	dy (direct lobbying)			
e Total exempt purpose expenditures	s (add lines 1c and 1d	d)			
f Lobbying nontaxable amount. Ente		bying nontaxable am			
Not over \$500,000		the amount on line 1e			
Over \$500,000 but not over \$1,000		00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,50	· · · · · · · · · · · · · · · · · · ·	00 plus 10% of the exc			
Over \$1,500,000 but not over \$17,0		00 plus 5% of the exce			
Over \$17,000,000	\$1,000,	•	. , ,		
g Grassroots nontaxable amount (entitle in the subtract line 1g from line 1a. If zero is Subtract line 1f from line 1c. If zero just the interest in the subtract line 1f from line 1c. If zero just the interest in the subtract line 1g from line 1a. If zero is an amount other than zero reporting section 4911 tax for this subtract line in the subtract line is a subtract line in the subtract line in the subtract line is a subtract line in the subtract line in the subtract line is a subtract line in the subtract line in the subtract line is a subtract line in the subtract line 1g from line 1a. If zero is a subtract line 1g from line 1a	or less, enter -0- or less, enter -0- or less, enter -0- o on either line 1h or /ear? 4-Year Ave at made a section 5 See the separ	eraging Period Under 01(h) election do not ate instructions for li	section 501(h) have to complete all nes 2a through 2f.)		Yes No
-	Lobbying Expe	nditures During 4-Yea	ar Averaging Period		1
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(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) 2017

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 e	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a)	(b)
of the	e lobbying activity.	Yes	No	Amo	ount
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:				
а	Volunteers?		X		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X		
С	Media advertisements?		X		
d	Mailings to members, legislators, or the public?		X		
е	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			5,590.
j	Total. Add lines 1c through 1i			56	5,590.
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				
С	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?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)	(5), or se	ction	
	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 campaign activity expenditures from the	he prior yea	ır? 3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section	on 501(c)	(5), or se	ction	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	I "No," O	R (b) Par	t III-A, lir	ne 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 expenditures)	ical			
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b	Carryover from last year		2b		
С	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess			
	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		
Par	t IV Supplemental Information				
Provi	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated grou	p list); Part I	I-A, lines 1 a	and 2 (see	
instru	actions); and Part II-B, line 1. Also, complete this part for any additional information.			·	
	RT II-B, LINE 1, LOBBYING ACTIVITIES:				
THE	E UNIVERSITY PAYS DUES TO INDEPENDENT HIGHER EDUCAT	CION O	F COLO	RADO	
ALC	ONG WITH TWO PRIVATE HIGHER EDUCATION INSTITUTIONS	IN CO	LORADO	. THIS	3
ORC	SANIZATION PROVIDES MOSTLY LEGISLATIVE INFORMATION	TO TH	E COLO	RADO	
INS	STITUTIONS AND AT TIMES INFLUENCES LEGISLATORS FOR	THE B	ENEFIT	OF	
PR]	VATE HIGHER EDUCATION.				
		Schedu	ıle C (Form	990 or 990)-EZ) 2017

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.

►Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

COLORADO SEMINARY

Employer identification number 84 - 0404231

Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds o	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	ne 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)	0.	
3	Aggregate value of grants from (during year)	584,790.	
4	Aggregate value at end of year	9,870,710.	
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised	
	are the organization's property, subject to the organization's	exclusive legal control?	X Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be us	sed only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose co	
_			
Pai	·		rt IV, line 7.
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or e	· _	cally important land area
	Protection of natural habitat	Preservation of a certific	ed historic structure
_	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of	
	day of the tax year.		Held at the End of the Tax Year
	Total number of conservation easements		
	Total acreage restricted by conservation easements		
	Number of conservation easements on a certified historic str		
a	Number of conservation easements included in (c) acquired		
3	listed in the National Register		
3	year	leased, extiliguished, or terminated by the t	organization during the tax
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe	<u> </u>	
Ū	violations, and enforcement of the conservation easements i		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
_	>		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation	on easements during the vear
	▶ \$, ,	G ,
8	Does each conservation easement reported on line 2(d) above	ve 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 conservat		
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes th	e organization's accounting for
	conservation easements.		
Pai	t III Organizations Maintaining Collections o		ner Similar Assets.
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue stateme	ent and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	hibition, education, or research in furtherand	ce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descr		
b	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of publi	c service, provide the following amounts
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
_	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre	•	gain, provide
	the following amounts required to be reported under SFAS 1		• •
	Revenue included on Form 990, Part VIII, line 1		
	Assets included in Form 990, Part X For Paperwork Reduction Act Notice, see the Instruction		
∟⊓А	FOI PAPELWORK REGUCTION ACT NOTICE, SEE THE INSTRUCTION	5 IUI FUIIII 33 U.	Schedule D (Form 990) 2017

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		t III Organizations Maintaining C	collections of Ar	t. Historical T	reasures. or C	Other	Simil	ar Asse			<u> </u>
a X Potic arbitron d				•					•		
a	•		ori, aria otrior rocora	o, or our arry or are	ronowing that are	o a oig	, moant	400 01 110	00110011011	1101110	
b	а		d	I can or ex	change programs						
c					onango programo						
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 solicitor receive donations of art, historical resaures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" or 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, 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, line 21. 1b If "Yes," explain the arrangement in Part XIII and complete the following table: 1			ŭ								
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 collection? 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 IV, line 9, or reported an amount on Form 990, Part X ne 21. Is the organization an angent, fustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X ne 21. Is the organization an angent, fustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X line 1 1			allections and explain	how they further	the organization's	evem	nt nurn	ose in Par	+ XIII		
The solution of the raise funds rather than to be maintained as part of the organization answered "Yes" on Form 1990, Part IV, line 9, or reported an amount on Form 990, Part X, line 2, or Form 1990, Part IV, line 9, or reported an amount on Form 990, Part X, line 2, or Form 1990, Part X, line 9, or reported an amount on Form 990, Part X, line 21. Tal Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. The part Y is explain the arrangement in Part XIII and complete the following table: C Beginning balance C Beginning balance C Beginning balance C Beginning balance 1								osc iiii ai	XIII.		
Part V 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 V Yes X No If "Yes," explain the arrangement in Part XIII and complete the following table: C Amount	3								Vec	X	No
Teleprotect an amount on Form 990, Part X, line 21. Teleprotect of an argent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	Par										140
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?				ite ii tile organizati	on answered Tes	OIII	OIIII 33	o, raitiv,	iii le 3, 0i		
on Form 990, Part X? b If *Yes, * explain the arrangement in Part XIII and complete the following table: c Beginning balance d Additions during the year e Distributions during the year f Ending balance 22 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes				iary for contributio	ns or other assets	not ir	ncluded				
Complete the following table: Amount	Iu								Ves	X	No
C Beginning balance C C C C C C C C C	h	If "Ves " explain the arrangement in Part XIII.	and complete the fol	llowing table:					J 163		140
C Beginning balance 1c	b	Tres, explain the arrangement in rait Air	and complete the for	lowing table.					Amount		
d Additions during the year E Distributions during the year E Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Part V Endowment Funds. Complete if the organization has been provided on Part XIII	•	Reginning halance					10		Amount		
E Distributions during the year E											
f Ending balance											
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?											
Part V Endowment Funds. Complete if the explanation has been provided on Part XIII The Part V Endowment Funds. Complete if the organization answered Yes' on Form 990, Part IV, line 10. The Part V Endowment Funds. Complete if the organization answered Yes' on Form 990, Part IV, line 10. The Part V Endowment Funds. Complete if the organization answered Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. The Part V Endowment Funds had been provided on Part XIII Part X								X	Voc		Ma
Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (a) Current year		<u> </u>					y:		J 163		NO
1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back b Contributions 27,319,088 62,921,105 651,398,198 469,858,681 419,349,528 c Net investment earnings, gains, and losses 64,972,143 70,697,217 -15,244,831 25,752,051 54,953,139 d Grants or scholarships 21,647,705 18,316,657 11,347,587 10,680,778 9,569,029 e Other expenditures for facilities and programs 12,131,310 10,090,822 13,321,080 10,634,368 8,832,950 f Administrative expenses 3,347,531 2,936,075 736,532 816,387 604,409 g End of year balance 789,009,879 733,845,194 628,519,105 651,398,198 489,858,681 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: 32,000 32,000 32,000 32,000 32,000 32,000 32,000 32,000 32,000 32,000 32,000 32,000 32,000							<u></u>				
1a Beginning of year balance 733,845,194 628,519,105 651,398,198 489,858,681 419,349,528 b Contributions 27,319,088 65,972,426 17,770,937 157,918,999 34,552,402 c Net investment earnings, gains, and losses of Grants or scholarships 64,972,143 70,697,217 -15,244,831 25,752,051 54,953,139 e Other expenditures for facilities and programs 12,131,310 10,090,822 13,321,080 10,634,368 8,832,950 f Administrative expenses 3,347,531 29,36,075 736,532 816,387 604,409 g End of year balance 789,009,879 733,845,194 628,519,105 651,398,198 489,858,681 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: 32.05 8 a Board designated or quasi-endowment ▶ 32.05 % b Permanent endowment ▶ 23.29 % The percentages on lines 2a, 2b, and 2c should equal 100% 3a(i) X 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: 3a(i) X (i) related organizations 3a(i) X b H 'Yes' on	1 0							vears hack	(a) Four y	rears h	ack
b Contributions 27,319,088. 65,972,426. 17,770,937. 157,918,999. 34,562,402. c Net investment earnings, gains, and losses 64,972,143. 70,697,21715,244,831. 25,752,051. 54,953,139. d Grants or scholarships 21,647,705. 18,316,657. 11,347,587. 10,680,778. 9,569,029. e Other expenditures for facilities and programs 12,131,310. 10,090,822. 13,321,080. 10,634,368. 8,832,950. f Administrative expenses 3,347,531. 2,936,075. 736,532. 816,387. 604,409. g End of year balance 789,009,879. 733,845,194. 628,519,105. 651,398,198. 489,858,681. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 32.05 % b Permanent endowment ▶ 44.66 % c Temporarily restricted endowment ▶ 23.29 % 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 (ii) related organizations (iii) related organizations (iii) related organizations Sendowment funds. 2 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 (other) depreciation depreciation 1a Land	12	Reginning of year halance			+ ` ' '						
c Net investment earnings, gains, and losses d (4, 972, 143, 70, 697, 217, -15, 244, 831, 25, 752, 051, 54, 953, 139, d (3rants or scholarships 21, 647, 705, 18, 316, 657, 11, 347, 587, 10, 680, 778, 9, 569, 029, e Other expenditures for facilities and programs 12, 131, 310, 10, 090, 822, 13, 321, 080, 10, 634, 368, 8, 832, 950, f Administrative expenses 3, 3, 47, 531, 2, 936, 075, 736, 532, 816, 387, 604, 409, g End of year balance Tender of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 32.05 % b Permanent endowment ▶ 44.66 % c Temporarily restricted endowment ▶ 23.29 % 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 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 (other) depreciation depreciation 1a Land 39, 336, 151. b Buildings 748, 083, 690, 168, 005, 403, 580, 078, 287. c Leasehold improvements 6 G6, 015, 482, 47, 673, 195, 18, 342, 287. c Leasehold improvements 6 G6, 015, 482, 47, 673, 195, 18, 342, 287. e Other 21, 491, 266.											
d Grants or scholarships 21,647,705. 18,316,657. 11,347,587. 10,680,778. 9,569,029. e Other expenditures for facilities and programs 12,131,310. 10,090,822. 13,321,080. 10,634,368. 8,832,950. f Administrative expenses 3,347,531. 2,936,075. 736,532. 816,387. 604,409. g End of year balance 789,009,879. 733,845,194. 628,519,105. 651,398,198. 489,858,681. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 32.05 % b Permanent endowment ▶ 44.66 % c Temporarily restricted endowment ▶ 23.29 % 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 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 4 Buildings				· · ·	-						
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and programs			21,017,703.	10,310,037	. 11,317,30	-	10,	300,770.	,	, ,	
## Administrative expenses	-		12 131 310	10 090 822	13 321 08	30	10 6	534 368	8	832 9	150
g End of year balance			· · ·		<u> </u>						
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 32.05 % b Permanent endowment ▶ 44.66						_		· ·			
a Board designated or quasi-endowment ▶ 32.05 % b Permanent endowment ▶ 44.66 % c Temporarily restricted endowment ▶ 23.29 % 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 3a(ii) X 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) basis (other) depreciation 1a Land 39,336,151. 39,336,151. b Buildings 748,083,690.168,005,403.580,078,287. c Leasehold improvements 66,015,482.47,673,195.18,342,287. e Other 21,491,266. 21,491,266.	_					<u>,,,,</u>	031,	330,130.	405,	050,0	
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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 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 Buildings 748,083,690.168,005,403.580,078,287. c Leasehold improvements d Equipment e Other Other 121,491,266.	C	· · · · · · · · · · · · · · · · · · ·									
Ves No (i) unrelated organizations (ii) related organizations (ii) related organizations (ii) related organizations (ii) related organizations (iii) related organ	0-	-	· ·			. عالد ع					
(i) unrelated organizations 3a(i) X (ii) related organizations 3a(ii) X b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b	Sa		ession of the organiza	ation that are neid	and administered	IOI LITE	e organi	Zation	Г	/ 22	—
(ii) related organizations 3a(ii) X b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b X 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 (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land 39,336,151. 39,336,151. 39,336,151. 39,336,151. 39,336,151. 580,078,287. b Buildings 748,083,690.168,005,403.580,078,287. 66,015,482.47,673,195.18,342,287. 18,342,287. 18,342,287. c Leasehold improvements 66,015,482.47,673,195.12. 18,342,287. 21,491,266.		-									NO
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) 1a Land 59 Jan 10 Jan									 		$\overline{\mathbf{x}}$
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 1a Land 39,336,151. 39,336,151. b Buildings 748,083,690.168,005,403.580,078,287. c Leasehold improvements 66,015,482.47,673,195.18,342,287. e Other 21,491,266.	h										
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 1a Land 39,336,151. 39,336,151. b Buildings 748,083,690.168,005,403.580,078,287. c Leasehold improvements 66,015,482.47,673,195.18,342,287. e Other 21,491,266.	4				·				Sb		
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 1a Land 39,336,151. 39,336,151. b Buildings 748,083,690.168,005,403.580,078,287. c Leasehold improvements 66,015,482.47,673,195.18,342,287. e Other 21,491,266.	Par			willerit lurius.							—
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land 39,336,151. 39,336,151. 39,336,151. b Buildings 748,083,690.168,005,403.580,078,287. C Leasehold improvements 66,015,482.47,673,195.18,342,287. c Equipment 66,015,482.47,673,195.18,342,287. 21,491,266.	ı uı			Dart IV line 11a	Soo Form 000 Pa	rt V li	ino 10				
ta Land basis (investment) basis (other) depreciation b Buildings 748,083,690.168,005,403.580,078,287. c Leasehold improvements 66,015,482.47,673,195.18,342,287. e Other 21,491,266.		-						-d	(d) Dools	value	
1a Land 39,336,151. b Buildings 748,083,690.168,005,403.580,078,287. c Leasehold improvements 66,015,482.47,673,195.18,342,287. e Other 21,491,266.		Description of property	1 ' '	' '		-		I	(a) Book	value	
b Buildings 748,083,690.168,005,403.580,078,287. c Leasehold improvements 66,015,482.47,673,195.18,342,287. e Other 21,491,266.		Land	<u> </u>		` '	uepi	COIALIUI	I	0 336	1 5	1
c Leasehold improvements 66,015,482. 47,673,195. 18,342,287. e Other 21,491,266. 21,491,266.						<u>ρ</u> Λ	05 4				
d Equipment 66,015,482. 47,673,195. 18,342,287. e Other 21,491,266.				740,00	, , , , , , , , , , , , , , , , , , ,	J, U	UJ,4	00.00	0,070	, 40	<i>'</i> •
e Other 21,491,266. 21,491,266.				66 01	5 482 4	7 6	72 1	95 1	8 3/13	<u> ၁</u> ဥ	7
						,, 0	, , , 1	7.J. 1	1 /01	26	<u></u>
								<u> </u>	1,491 9 917	90	1

Schedule D (Form 990) 2017

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	229,053,238.	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.)	229,283,238.	
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)		

Part IX Other Assets.

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)

(7) (8) (9)

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	9,810,425.
(4)	FEDERAL PERKINS LOAN PROGRAM-	
(5)	REFUNDABLE	14,501,430.
(6)		
(7)		
(8)		
(9)		
Total.	Column (b) must equal Form 990, Part X, col. (B) line 25.)	24,311,855.

^{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 X

Schedule D (Form 990) 2017

Par	art XI Reconciliation of Revenue per Audite	ed Financial Statements W	ith Revenue per R	etur	n.	
	Complete if the organization answered "Yes" on	Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited fina	ncial statements		1	522,	877,833
2	Amounts included on line 1 but not on Form 990, Part V	III, line 12:				
а	Net unrealized gains (losses) on investments	2a	46,252,999.			
b	Donated services and use of facilities	2b				
С	Recoveries of prior year grants	2c				
d			2,113,397.			
е	Add lines 2a through 2d			2e		366,396
3	Subtract line 2e from line 1			3	474,	511,437
4	Amounts included on Form 990, Part VIII, line 12, but no	ot on line 1:				
а	 Investment expenses not included on Form 990, Part VI Other (Describe in Part XIII.) 	II, line 7b 4a	3,347,531.			
b	o Other (Describe in Part XIII.)	4b	<u>176,341,790.</u>		l	
_						689,321
	Total revenue. Add lines 3 and 4c. (This must equal Forr				_	200,758
Pai	art XII Reconciliation of Expenses per Audi		Vith Expenses per	Retu	ırn.	
	Complete if the organization answered "Yes" on			1	4.60	<u> </u>
1				1	460,	564,845
	,	· .				
	a Donated services and use of facilities	2a				
b						
	p Prior year adjustments	2b				
c	Prior year adjustments Other losses	2b 2c	4.455.200			
c d	Prior year adjustments Other losses Other (Describe in Part XIII.)	2b 2c 2d	1,465,328.		1	465, 200
c d	De Prior year adjustments De Other losses De Other (Describe in Part XIII.) De Add lines 2a through 2d	2b 2c 2d		2e		465,328
c d	De Prior year adjustments De Other losses De Other (Describe in Part XIII.) De Add lines 2a through 2d	2b 2c 2d				465,328 099,517
c d e 3 4	Description Prior year adjustments Description Other losses Description of Description Part XIII.) Description Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not	2b 2c 2d on line 1:				
c d e 3 4 a	Describe in Part XIII.) Describe in Part XIII. D	2b 2c 2d 2d	3,347,531.	3		
c d e 3 4 a b	D Prior year adjustments C Other losses C Other (Describe in Part XIII.) D Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not a Investment expenses not included on Form 990, Part VI D Other (Describe in Part XIII.)	2b 2c 2d 2d		3	459,	099,517
c d e 3 4 a b c	Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not Investment expenses not included on Form 990, Part VI Other (Describe in Part XIII.)	2b 2c 2d 2d	3,347,531. 176,341,790.	3 4c	459, 179,	

| 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

Schedule D (Form 990) 2017

ENLIGHTEN AND INSPIRE. THE

WITH ART AND POSSESS THE POTENTIAL TO EDUCATE,

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 (64%), ACADEMIC PROGRAMS (18%), FACULTY

CHAIRS & PROFESSORSHIPS (15%) AND OTHER UNIVERSITY OPERATIONS AND

FUNCTIONS(3%).

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,

2018 AND 2017.

Schedule D (Form 990) 2017

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, 2018.

PART XI, LINE 2D - OTHER ADJUSTMEN	NTS:	

SPECIAL EVENT EXPENSES	765,689.
RENTAL EXPENSES	699,639.
ACTUARIAL ADJUSTMENT	648,069.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	2,113,397.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

SCHOLARSHIPS	176,341,790.
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	37 T T	T T3TT	2 D	OMITTE	
PART	X I I .	I I IN P.	<i>.</i> –	CHRR	ADJUSTMENTS:

SPECIAL EVENT EXPENSES	765,689.
RENTAL EXPENSES	699,639.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	1,465,328.

Schedule D (Form 990) 2017

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.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization COLORADO SEMINARY

 $Employer\ identification\ number \\ 84-0404231$

P				
	rt I			
			YES	N
	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?	1	X	
:	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?	2	Х	Г
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	3	Х	Г
	SÉE PART II			
_	Does the organization maintain the following?	4-	X	
	Records indicating the racial composition of the student body, faculty, and administrative staff?		X	╀
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	<u> </u>	╀
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student		x	
	admissions, programs, and scholarships?	4c	X	⊢
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	^	1
	If you answered "No" to any of the above, please explain. If you need more space, use Part II.			
	If you answered "No" to any of the above, please explain. If you need more space, use Part II.			
	Does the organization discriminate by race in any way with respect to:			
а	Does the organization discriminate by race in any way with respect to: Students' rights or privileges?	5a		
а	Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies?	5b		1
a b	Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff?	5b 5c		1
a b c	Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance?	5b 5c 5d		1
a b c	Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies?	5b 5c 5d 5e		2
a b c d e f	Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities?	5b 5c 5d 5e 5f		2
a b c d e f	Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs?	5b 5c 5d 5e 5f		
b d e f	Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities?	5b 5c 5d 5e 5f		
a b c d e f	Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs?	5b 5c 5d 5e 5f 5g		
a b c d e f	Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities?	5b 5c 5d 5e 5f 5g		
a b c d e f g h	Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities?	5b 5c 5d 5e 5f 5g	x	2
a b c d e f g h	Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	5b 5c 5d 5e 5f 5g 5h	X	
a b c d e f g h	Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?	5b 5c 5d 5e 5f 5g 5h	X	
a b c d e f g h	Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	5b 5c 5d 5e 5f 5g 5h	X	

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

Schedule E (Form 990 or 990-EZ) 2017

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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

2017
Open 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? _____ X Yes 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 (c) Number of (d) Activities conducted in the region (e) If activity listed in (d) (f) Total employees, agents, and independent expenditures offices (by type) (such as, fundraising, prois a program service, for and in the region gram services, investments, grants to describe specific type investments contractors recipients located in the region) of service(s) in the region in the region in the region CENTRAL AMERICA & CARTBBEAN 0 GRANTS 143,860. CENTRAL AMERICA & CARIBBEAN 0 INVESTMENTS 212.382.611**.** CENTRAL AMERICA & ACADEMIC SUPPORT AND STUDENT SERVICES CARTBBEAN 0 PROGRAM SERVICES 50,206. CENTRAL AMERICA & CARIBBEAN 0 PROGRAM SERVICES INSTITUTIONAL SUPPORT 2,160. CENTRAL AMERICA & CARIBBEAN 0 PROGRAM SERVICES INSTRUCTION 238,506. CENTRAL AMERICA & RESEARCH & PUBLIC CARIBBEAN 0 PROGRAM SERVICES SERVICE 95,149. EAST ASIA & THE PACIFIC 0 GRANTS 5,307,314. EAST ASIA & THE ACADEMIC SUPPORT AND PACIFIC STUDENT SERVICES 0 PROGRAM SERVICES 435,331. 3 a Sub-total 0 0 218,655,137. **b** Total from continuation 0 25,358,071. sheets to Part I c Totals (add lines 3a

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

Schedule F (Form 990) 2017

and 3b)

0

244,013,208.

Schedule F (Form 990) Part I Continuatio	COLORADO n of Activitie		1 Y n. (Schedule F (Form 990), Part I, line 3	84-04	04231 Page 1
(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	INSTRUCTION	1,896,469
EAST ASIA & THE	0	0	PROGRAM SERVICES	RESEARCH & PUBLIC SERVICE	228,908
TACTFIC			r ROGRAM SERVICES	DERVICE	220,300
EUROPE	0	0	GRANTS		1,898,975.
EUROPE	0	0	INVESTMENTS		4,889,928.
EUROPE	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT AND STUDENT SERVICES	1,554,638.
EUROPE	0	0	PROGRAM SERVICES	INSTITUTIONAL SUPPORT	72,840.
EUROPE	0	0	PROGRAM SERVICES	INSTRUCTION	5,916,889.
EUROPE	0	0	PROGRAM SERVICES	RESEARCH & PUBLIC SERVICE	251,010.
MIDDLE EAST & NORTH AFRICA	0	0	GRANTS		955,217.
MIDDLE EAST & NORTH AFRICA	0		PROGRAM SERVICES	ACADEMIC SUPPORT AND STUDENT SERVICES	50,950
Totals					

Schedule F (Form 990)		SEMINAR		84-040	14231 Page 1
Part I Continuation			n. (Schedule F (Form 990), Part I, line		,
(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	INSTITUTIONAL SUPPORT	23,450.
MIDDLE EAST & NORTH					
AFRICA	0	0	PROGRAM SERVICES	INSTRUCTION	345,285.
MIDDLE EAGE C NODELL				DEGEARGIL & DUDI TO	
MIDDLE EAST & NORTH AFRICA		0	PROGRAM SERVICES	RESEARCH & PUBLIC SERVICE	3,059.
			I NOOMAL BENVIOLE		3,003.
NORTH AMERICA	0	0	grants		2,086,097.
				ACADEMIC SUPPORT AND	
NORTH AMERICA	0	0	PROGRAM SERVICES	STUDENT SERVICES	105,455.
NORTH AMERICA	0	0	PROGRAM SERVICES	INSTITUTIONAL SUPPORT	8,885.
NORTH AMERICA	0	0	PROGRAM SERVICES	INSTRUCTION	62,951.
				RESEARCH & PUBLIC	
NORTH AMERICA	O	0	PROGRAM SERVICES	SERVICE	14,712.
RUSSIA AND					
NEIGHBORING STATES	С	0	GRANTS		88,403.
RUSSIA AND		_		ACADEMIC SUPPORT AND	
NEIGHBORING STATES	0	0	PROGRAM SERVICES	STUDENT SERVICES	10,351.
Totals					

Schedule F (Form 990) Part I Continuation	COLORADO		XY n. (Schedule F (Form 990), Part I, line 3	84-04	04231 Page 1
(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
		g.u.	, and the second		
RUSSIA AND NEIGHBORING STATES	0	0	PROGRAM SERVICES	INSTRUCTION	36,496
RUSSIA AND NEIGHBORING STATES	0	0	PROGRAM SERVICES	RESEARCH & PUBLIC SERVICE	20,625.
SOUTH AMERICA	0	0	GRANTS		566,584.
SOUTH AMERICA	0	0	PROGRAM SERVICES	INSTITUTIONAL SUPPORT	11,272.
			PROGRAM SERVICES	BOTTONIA BOTTONIA	11,272.
SOUTH AMERICA	0	0	PROGRAM SERVICES	INSTRUCTION	1,030,973.
SOUTH AMERICA	0	0	PROGRAM SERVICES	RESEARCH & PUBLIC SERVICE	6,291.
BOOTH AMERICA	0		FROGRAM SERVICES	SERVICE	0,291.
SOUTH ASIA	0	0	GRANTS		1,108,391.
				ACADEMIC SUPPORT AND	
SOUTH ASIA	0	0	PROGRAM SERVICES	STUDENT SERVICES	75,235.
SOUTH AMERICA	0	0	PROGRAM SERVICES	INSTITUTIONAL SUPPORT	163,789.
SOUTH ASIA	0	0	PROGRAM SERVICES	INSTRUCTION	112,112.
_					
Totals	•				

Schedule F (Form 990) Part I Continuati	COLORADO		N.(Schedule F (Form 990), Part I, line	84-04042	31 Page
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH ASIA	O	0	PROGRAM SERVICES	RESEARCH & PUBLIC SERVICE	40,775
SUB-SAHARAN AFRICA	O	0	GRANTS		642,206
				ACADEMIC SUPPORT AND	
SUB-SAHARAN AFRICA	O	0	PROGRAM SERVICES	STUDENT SERVICES	177,681
NUD GAUADAN AEDIGA			DDOGDAM GEDVIGEG	TNGMPHGMTON	604 622
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	INSTRUCTION	694,622
SUB-SAHARAN AFRICA	O	0	PROGRAM SERVICES	RESEARCH & PUBLIC SERVICE	196,353
					,
SUB-SAHARAN AFRICA	O	0	PROGRAM SERVICES	INSTITUTIONAL SUPPORT	10,194
					<u> </u>
「otals]	>				25,358,071

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.												
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	I (c) Pagion	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)				

2	Enter total number of r	ecipient organizatio	ns listed above that are	recognized as charities by the	foreign country,	recognized as tax-e	xempt	
	by the IRS, or for which	h the grantee or coւ	ınsel has provided a sec	tion 501(c)(3) equivalency lette	er		> .	
3	Enter total number of o	other organizations	or entities				▶	

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.

	d.					
(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
SUB-SAHARAN AFRICA	31			0.	N/A	n/A
CENTRAL AMERICA	6			0.	N/A	N/A
EAST ASIA AND THE	376			0	N/A	N/A
Therrice .	370	3,307,314.	DIODENI NECCONI	-		N/ 11
EUROPE	57			0.	N/A	N/A
MIDDLE EAST AND	43			0.	N/A	N/A
NORTH AMERICA	54			0.	N/A	N/A
RUSSIA AND NEIGHBORING STATES	5			0.	N/A	N/A
SOUTH AMERICA	26		DIRECT APPLICATION TO	0.	N/A	N/A
SOUTH ASTA	51		DIRECT APPLICATION TO			N/A
	SUB-SAHARAN AFRICA CENTRAL AMERICA AND THE CARIBBEAN EAST ASIA AND THE PACIFIC EUROPE MIDDLE EAST AND NORTH AFRICA NORTH AMERICA RUSSIA AND NEIGHBORING STATES	SUB-SAHARAN AFRICA CENTRAL AMERICA AND THE CARIBBEAN EAST ASIA AND THE PACIFIC STATES SOUTH AMERICA recipients recipients recipients recipients 11 recipients	Cash grant Cash grant	SUB-SAHARAN AFRICA 31 642,206.STUDENT ACCOUNT CENTRAL AMERICA AND THE CARIBBEAN 6 143,860.STUDENT ACCOUNT EAST ASIA AND THE PACIFIC 376 5,307,314.STUDENT ACCOUNT DIRECT APPLICATION TO APPLICATION TO DIRECT APPLICATION TO	SUB-SAHARAN AFRICA 31 642,206 STUDENT ACCOUNT 0. CENTRAL AMERICA AND THE CARIBBEAN 6 143,860 STUDENT ACCOUNT 0. EAST ASIA AND THE PACIFIC 376 5,307,314 STUDENT ACCOUNT 0. EUROPE 57 1,898,975 STUDENT ACCOUNT 0. MIDDLE EAST AND NORTH AFRICA 43 955,217 STUDENT ACCOUNT 0. NORTH AMERICA 54 2,086,097 STUDENT ACCOUNT 0. RUSSIA AND NORTH AFRICA 55 88,403 STUDENT ACCOUNT 0. SOUTH AMERICA 26 566,584 STUDENT ACCOUNT 0.	SUB-SAHARAN AFRICA 31 642,206.STUDENT ACCOUNT O.N/A CENTRAL AMERICA AND THE CARIBBEAN EAST ASIA AND THE FACIFIC STUDENT ACCOUNT O.N/A DIRECT APPLICATION TO O.N/A DIRECT APPLICATION TO O.N/A DIRECT APPLICATION TO O.N/A EAST ASIA AND THE STORM ACCOUNT O.N/A DIRECT APPLICATION TO O.N/A DIRECT APPLICATION TO O.N/A DIRECT APPLICATION TO O.N/A MIDDLE EAST AND NORTH AFRICA O.N/A DIRECT APPLICATION TO O.N/A DIRECT APPLICATION TO O.N/A DIRECT APPLICATION TO O.N/A NORTH AMERICA S4 2,086,097.STUDENT ACCOUNT O.N/A DIRECT APPLICATION TO O.N/A

Page 4

Schedule F (Form 990) 2017 (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)	X 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; don't file with Form 990)	Yes	X 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)	X 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	X 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)	X 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; don't file with Form 990)	X Yes	☐ No

Schedule F (Form 990) 2017

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. See instructions.

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	ΤN	PART	 ARE	REPORTED	USING	AN	ACCRUAL	METHOD	OF.
ACCOUNTING.										

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for the latest instructions.

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization

COLORADO SEMINARY

Employer identification number

	O SEMINARY				04-0404	43I		
Fundraising Activities required to complete this pa	Complete if the organization answert.	ered "Y	es" or	n Form 990, Part IV,	line 17. Form 990-EZ	filers are not		
 Indicate whether the organization rail a X Mail solicitations b X Internet and email solicitation c X Phone solicitations d X In-person solicitations 2 a Did the organization have a written key employees listed in Form 990, F b If "Yes," list the 10 highest paid indicompensated at least \$5,000 by the 	e X Solicita f Solicita g X Special or oral agreement with any individua Part VII) or entity in connection with prividuals or entities (fundraisers) pursi	tion of tion of I fundra I (includ profess	non-gover ising of ding of ional f	overnment grants nment grants events fficers, directors, true undraising services?	stees, or X Yes			
(i) Name and address of individual or entity (fundraiser)	I III ACTIVITY I have custody I in the control of t							
THE ASPIRE SPORT MARKETING	SOLICIT CONTRIBUTIONS AND	Yes	No					
GROUP LLC - 1720 PEACHTREE	SEAT LICENSES FOR	163	X	142,170.	18,994.	123,176.		
Total			>	142,170.	18,994.	123,176.		
3 List all states in which the organization or licensing.					·			
AL,AK,AR,CA,CO,CT,FL, PA,OR,OK,OH,NY,NV,NM,			NC,	MS,MO,MN,M	I,ME,MD,MA	,TN,SC,RI		

732081 09-13-17

Schedule G (Form 990 or 990-EZ) 2017

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

SEE PART IV FOR CONTINUATIONS

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

		of fundraising event contributions and gro	oss income on Form 990	J-EZ, lines I and 60. List		ots greater than \$5,000.
			(a) Event #1	(b) Event #2 SPORTING	(c) Other events NONE	(d) Total events (add col. (a) through
			DINNERS	EVENTS		col. (c))
ne			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	718,868.	493,067.		1,211,935.
	2	Less: Contributions	501,667.	241,375.		743,042.
	3	Gross income (line 1 minus line 2)	217,201.	251,692.		468,893.
	4	Cash prizes				
Se	5	Noncash prizes	1,100.			1,100.
xpense	6	Rent/facility costs	99,157.	8,894.		108,051.
Direct Expenses	7	Food and beverages	218,342.	127,442.		345,784.
	8	Entertainment	24,875.			24,875.
	9	Other direct expenses	275,499.			285,879.
	10	Direct expense summary. Add lines 4 through	n 9 in column (d)		>	765,689.
	11	Net income summary. Subtract line 10 from li				-296,796.
Pa	rt I		answered "Yes" on Form	n 990, Part IV, line 19, or	reported more than	
		\$15,000 on Form 990-EZ, line 6a.	ı	a Dullack - for about		
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Be	4	Gross revenue				
	•	areas revenue				
S	2	Cash prizes				
Direct Expenses		Noncash prizes				
Jirect E	4	Rent/facility costs				
	5	Other direct expenses	N 0/	N 0/		
	6	Volunteer labor	Yes % No	Yes % No	Yes %	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		>	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
9	Ent	ter the state(s) in which the organization condu	ucts gaming activities:			
а	ls t	the organization licensed to conduct gaming a	ctivities in each of these	states?		Yes No
b	If "	No," explain:				
		ere any of the organization's gaming licenses re Yes," explain:	· · · · · · · · · · · · · · · · · · ·		year?	Yes No

732082 09-13-17

Schedule G (Form 990 or 990-EZ) 2017

Schedule G (Form 990 or 990-EZ) 2017 COLORADO SEMINARY	84-0404231 Page 3
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 forme	
to administer charitable gaming?	
13 Indicate the percentage of gaming activity conducted in:	
a The organization's facility	13a %
b An outside facility	
14 Enter the name and address of the person who prepares the organization's gaming/special events books and re	
14 Enter the name and address of the person who prepares the organization's gaming/special events books and re	colus.
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 a	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 sp	
organization's own exempt activities during the tax year ▶ \$	2.1.2 11.2
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); a	nd Part III lines 9 9h 10h 15h
15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUND	RAISERS:
/T/ NAME OF FINIDDATOED. MUE ACOTOE COODE MADVEMENT COOLED I	
(I) NAME OF FUNDRAISER: THE ASPIRE SPORT MARKETING GROUP L	ПC
(I) ADDRESS OF FUNDRAISER:	
1720 PEACHTREE STREET NW SUITE 1062, ATLANTA, GA 30309	
	AMUI EMICO
(II) ACTIVITY: SOLICIT CONTRIBUTIONS AND SEAT LICENSES FOR	AIUTELICS

Schedule G	(Form 990 or 990-EZ)	COLORADO	SEMINARY	84-0404231	Page 4
Part IV	(Form 990 or 990-EZ) Supplemental Information	mation (continue	d)		
	•••	•	,		

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.

► Go to www.irs.gov/Form990 for the latest information.

2017
Open to Public

Inspection

Name of the organization **Employer identification number** COLORADO SEMINARY 84-0404231 Part I **General Information on Grants and Assistance** 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? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 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. (f) Method of (c) IRC section 1 (a) Name and address of organization (b) EIN (d) Amount of (e) Amount of (a) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant non-cash noncash assistance or assistance FMV, appraisal, assistance other) SUMMIT HUTS ASSOCIATION 524 WELLINGTON ROAD BRECKENRIDGE, CO 80204 84-1072451 501(C)3 0.N/A N/A CONSTRUCTION 334,790. ROCKY MOUNTAIN PUBLIC MEDIA, INC 1089 BANNOCK STREET 84-0510785 501(C)3 N/A CONSTRUCTION DENVER, CO 80204 250,000. 0.N/A 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 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) (2017)

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 noncash assistance
FINANCIAL AID-FEDERAL SEOG PROGRAM	289	668,507.	0.	N/A	N/A
FINANCIAL AID-STATE PROGRAMS	445	1,860,658.	0.	N/A	N/A
FINANCIAL AID-ENDOWED AND GIFT FUNDED	2334	15,800,728.	0.	N/A	N/A
FINANCIAL AID-GTA WAIVERS	124	524,986.	0.	N/A	N/A
FINANCIAL AID-INSTITUTIONAL EDUCATION GRANTS	8280	144,689,864.	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 III Continuation of Grants and Other Assistance to Individ	luals in the Unit	ed States (Schedule	e I (Form 990), Part II	I.)	
(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
EDUCATIONAL AWARDS AND ASSISTANCE	643.	2,669,741.	0.	N/A	N/A
				l	2

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)

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.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

► Go to www.irs.gov/Form990 for instructions and the latest information.

COLORADO SEMINARY

Employer identification number 84 - 0404231

_	COLORADO SEMINARI	04-040423		
Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 9	90,		
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Musing allowance or residence for personal	ıl use		
	Travel for companions Payments for business use of personal residual Payments for business use of personal Payments (Payments For Payments For Paymen	dence		
	Tax indemnification and gross-up payments X Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as, 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	1b	Х	
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 on line 1a?	2	х	
	traditions, and officers, morading the GEG, Exceditive photocol, regulating the feather choosed on the Fat.			
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization	nn'e		
Ü	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization			
	establish compensation of the CEO/Executive Director, but explain in Part III.	110		
	Compensation committee Written employment contract			
	Form 990 of other organizations X Approval by the board or compensation cor	nmittee		
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:			
а	Receive a severance payment or change-of-control payment?	4a	Х	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?		Х	
С	Participate in, or receive payment from, an equity-based compensation arrangement?			Х
	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			
Ĭ	contingent on the revenues of:			
а	The organization?	5a		х
	Any related organization?			X
	If "Yes" on 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			
6	contingent on the net earnings of:			
_		6-		Х
a	The organization?	6a		X
Ö	Any related organization?	6b		1
_	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 nonfixed payments		х	
_	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			37
		8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9	ı	l

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

Schedule J (Form 990) 2017

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 aren't 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.

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation (ii) Bonus & (iii) Other reportable compensation compensation		` '	other deferred benefits compensation		(B)(i)-(D)	reported as deferred on prior Form 990
(1) JAMES GRIESEMER	i)	228,722.	0.	720.	19,327.	22,014.	270,783.	0.
TRUSTEE, PROFESSOR	ii)	0.	0.	0.	0.	0.	0.	0.
(2) REBECCA CHOPP	(i)	631,980.	75,000.	109,260.	39,600.	16,377.	872,217.	0.
CHANCELLOR (ii)	0.	0.	0.	0.	0.	0.	0.
(3) CRAIG WOODY	i)	321,783.	7,500.	6,000.	71,600.	8,108.	414,991.	0.
TREASURER/VICE CHANCELLOR	ii)	0.	0.	0.	0.	0.	0.	0.
(4) ANDREW CULLEN	i)	199,256.	2,600.	780.	16,000.	700.	219,336.	0.
ASSISTANT TREASURER/CONTROLLER (ii)	0.	0.	0.	0.	0.	0.	0.
(5) GREGG KVISTAD	i)	344,881.	7,500.	6,780.	71,600.	7,783.	438,544.	0.
PROVOST	ii)	0.	0.	0.	0.	0.	0.	0.
(6) ARMIN AFSAHI	i)	370,819.	7,000.	10,560.	21,027.	7,946.	417,352.	0.
VICE CHANCELLOR	ii)	0.	0.	0.	0.	0.	0.	0.
(7) MARGARET BRADLEY DOPPES	i)	315,638.	7,000.	8,340.	96,600.	13,774.	441,352.	0.
VICE CHANCELLOR	ii)	0.	0.	0.	0.	0.	0.	0.
(8) PAUL CHAN	i)	265,500.	3,000.	840.	21,600.	29,769.	320,709.	0.
UNIVERSITY COUNSEL (ii)	0.	0.	0.	0.	0.	0.	0.
(9) DAVID GREENBERG	i)	217,413.	5,000.	1,080.	17,532.	7,334.	248,359.	0.
VICE CHANCELLOR	ii) 🗆	0.	0.	0.	0.	0.	0.	0.
(10) TODD RHINEHART	i)	177,975.	5,000.	1,900.	15,000.	21,112.	220,987.	0.
VICE CHANCELLOR	ii) 🗆	0.	0.	0.	0.	0.	0.	0.
(11) ELRIE LABRENT CHRITE	i)	342,724.	3,000.	0.	21,600.	43,359.	410,683.	0.
DEAN (ii) 🗆	0.	0.	0.	0.	0.	0.	0.
(12) BRUCE SMITH	i)	330,628.	3,000.	0.	21,600.	30,795.	386,023.	0.
DEAN (ii)	0.	0.	0.	0.	0.	0.	0.
(13) LILIANA RODRIGUEZ	i)	208,766.	6,000.	0.	17,150.	70,683.	302,599.	0.
VICE CHANCELLOR	ii) 🗆	0.	0.	0.	0.	0.	0.	0.
(14) THOMAS WILLOUGHBY	i)	220,535.	0.	4,025.	18,050.	12,581.	255,191.	0.
VICE CHANCELLOR	ii) 🗆	0.	0.	0.	0.	0.	0.	0.
(15) DONALD HARRIS	i)	262,304.	7,000.	1,560.	21,600.	25,582.	318,046.	0.
	ii)	0.	0.	0.	0.	0.	0.	0.
(16) RENELL WYNN	i)	245,988.	3,000.	1,440.	6,667.	9,227.	266,322.	0.
VICE CHANCELLOR	ii)	0.	0.	0.	0.	0.	0.	0.

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 aren't 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.

		(B) Breakdown of	N-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title	compensation incentive reportable			compensation	Denents	(15)(1)-(15)	reported as deferred on prior Form 990	
(17) LAURA MARESCA	(i)	192,289.	5,000.	0.	15,427.	587.	213,303.	0.
VICE CHANCELLOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(18) JAMES ROSNER	(i)	190,520.	2,250.	1,050.	9,600.	19,727.	223,147.	0.
ASSOC VICE CHANCELLOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(19) JAMES MONTGOMERY	(i)	397,632.	276,500.	8,700.	21,600.	21,083.	725,515.	0.
HEAD COACH	(ii)	0.	0.	0.	0.	0.	0.	0.
(20) WILLIAM TIERNEY	(i)	350,155.	0.	5,880.	19,623.	15,501.	391,159.	0.
HEAD COACH	(ii)	0.	0.	0.	0.	0.	0.	0.
(21) DEBORAH ARMSTRONG	(i)	264,463.	20,000.	41,105.	0.	10,444.	336,012.	0.
ASSOCIATE VICE CHANCELLOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(22) SHARON LASSAR	(i)	318,090.	4,000.	948.	21,600.	1,700.	346,338.	0.
PROFESSOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(23) JAMES HOLSTON	(i)	294,892.	5,000.	1,080.	21,600.	29,635.	352,207.	0.
DEAN OF ENGINEERING	(ii)	0.	0.	0.	0.	0.	0.	0.
(24) MARTIN KATZ	(i)	336,670.	5,000.	0.	18,253.	25,774.	385,697.	0.
FORMER DEAN	(ii)	0.	0.	0.	0.	0.	0.	0.
(25) JOSEPH SCOTT	(i)	0.	0.	358,554.	0.	0.	358,554.	0.
FORMER HEAD COACH	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Dort 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.

PART I, LINE 1A:

THE UNIVERSITY PROVIDES THE CHANCELLOR WITH A TAXABLE HOUSING ALLOWANCE.

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

IN LIMITED INSTANCES WITH DOCUMENTATION FOR THE BUSINESS PURPOSE FULFILLED

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:

DEBORAH ARMSTRONG RECEIVED AN EMPLOYMENT SEPARATION PAYMENT OF \$15,000.

MARGARET BRADLEY-DOPPES PARTICIPATION IN 457(F) RETIREMENT PLAN \$57,000

GREGG KVISTAD PARTICIPATION IN 457(F) RETIREMENT PLAN \$32,000

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 PARTICIPATION IN 457(F) RETIREMENT PLAN \$32,000
PART I, LINE 7:
WITH THE EXCEPTION OF COACHES, INDIVIDUALS LISTED IN PART II RECEIVE A
BONUS OR INCENTIVE COMPENSATION BASED ON ACHIEVEMENT OF CERTAIN PERFORMANCE
CRITERIA DURING THE YEAR.

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. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 2017 Open to Public Inspection

Internal Revenue Service Attach to Form 990. Go to www.irs.go	ON/FOLLISSO IOL IUST	uctions and	trie iatest ir	normation.				mapeci		
Name of the organization COLORADO SEMINARY								entificati 0423		nber
Part I Bond Issues SEE PART VI FOR COL	<u>JUMNS (A) A</u>	ND (F)	CONTIN	UATIONS						
(a) Issuer name (b) Issuer EIN (c) CUSIP	# (d) Date issue	ed (e) Issu	ue price	(f) Descripti	on of purpose	(g) Def	eased (h) On beha	lf (i) Po	ooled
							(of issuer	finar	ncing
						Yes	No Y	es No	Yes	No
COLORADO EDUCATION &					G SERIES					
A CULTURAL FACILITIES - SE84-089672719645RS	SR3 03/01/1	3 24,	159,389.2	1005В ВО	NDS		X	X		X
COLORADO EDUCATION &					G SERIES					
BCULTURAL FACILITIES - SE84-08967271964584	ŀT7 10/10/0	7 45,	839,717.2	001A AN	D 2005B	в	X	X		X
COLORADO EDUCATION &			R	EFUNDIN	G SERIES					
c CULTURAL FACILITIES - SE84-0896727 NONE	09/01/1	5 29,	075,000.2	005A BO	NDS AND	2	X	X		X
COLORADO EDUCATION &			R	EFUNDIN	G SERIES					
D CULTURAL FACILITIES - SE84-0896727 NONE	03/01/1	6 12,	500,000.2	005B BO	NDS		X	X		X
Part II Proceeds										
		A		В	С			D		
1 Amount of bonds retired	1,9	55,000.			4,100	,000	•	5,2	50,0	00.
2 Amount of bonds legally defeased										
3 Total proceeds of issue		59,389.	45,839,717. 29,075,			,000	•	12,5	00,0	00.
4 Gross proceeds in reserve funds										
5 Capitalized interest from proceeds								,		
6 Proceeds in refunding escrows										
7 Issuance costs from proceeds	2	45,451.		21,632.	281	,888	•	1:	20,9	10.
8 Credit enhancement from proceeds			698,000							
9 Working capital expenditures from proceeds										
10 Capital expenditures from proceeds										
11 Other spent proceeds	23,9	13,938.	44,8	20,085.	28,793	,113	•	12,3	79,0	90.
12 Other unspent proceeds										
13 Year of substantial completion		2013		2007	20	15			2016	,
	Yes	No	Yes	No	Yes	No		es	No	
14 Were the bonds issued as part of a current refunding issue?		X		X	Х			X		
15 Were the bonds issued as part of an advance refunding issue?			X			Х				Х
16 Has the final allocation of proceeds been made?			X		Х			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										
		Ą		В	Ç			D		
1 Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Ye	es	No	
which owned property financed by tax-exempt bonds?		X		X		Х				Х
2 Are there any lease arrangements that may result in private business use of										
hand financed preparty?		l y	l x			x	1			X

SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Working capital expenditures from proceeds

Capital expenditures from proceeds

Other spent proceeds

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.

OMB No. 1545-0047

2017
Open to Public Inspection

Employer identification number

84-0404231 COLORADO SEMINARY SEE PART VI FOR COLUMNS (A) AND (F) CONTINUATIONS Part I **Bond Issues** (c) CUSIP # (e) Issue price (a) Defeased (h) On behalf (i) Pooled (a) Issuer name (b) Issuer EIN (d) Date issued (f) Description of purpose of issuer financing No Yes Yes No Yes No COLORADO EDUCATION & CONSTURCTION, A CULTURAL FACILITIES - SE84-089672719645R6D8 06/27/17 Х Х 133,026,969. RENOVATION, IMPROV Х С D Part II Proceeds Α C D 1 Amount of bonds retired 2 Amount of bonds legally defeased 134,504,069. Total proceeds of issue Gross proceeds in reserve funds 11,851,860. Capitalized interest from proceeds **6** Proceeds in refunding escrows 1,070,109. Issuance costs from proceeds Credit enhancement from proceeds

	Other spent proceeds								
12	Other unspent proceeds	118,43	17,181.						
13	Year of substantial completion								
		Yes	No	Yes	No	Yes	No	Yes	No
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							
Da	rt III Privato Rusinoss Uso								

3,164,919.

Part III Private Business Use В C D Α Yes No Yes Yes 1 Was the organization a partner in a partnership, or a member of an LLC, No Yes No No which owned property financed by tax-exempt bonds? 2 Are there any lease arrangements that may result in private business use of Х bond-financed property?

	t III Private Business Use (Continued)								90 =
			A		В		С		D
За	Are there any management or service contracts that may result in private	Yes	No	Yes	No	Yes	No	Yes	No
	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?	X		X		X		X	
С	Are there any research agreements that may result in private business use of bond-financed property?	Х		X			X		X
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside								
	counsel to review any research agreements relating to the financed property?		X		X				
4	Enter the percentage of financed property used in a private business use by								
	entities other than a section 501(c)(3) organization or a state or local government		.00 %	6	.00 %		.00 %		.00 %
5	Enter the percentage of financed property used in a private business use as a result of								
	unrelated trade or business activity carried on by your organization, another								
	section 501(c)(3) organization, or a state or local government		.00 %	6	.00 %		.00 %		.00 %
6	Total of lines 4 and 5		.00 %	ó	.00 %		.00 %		.00 %
7	Does the bond issue meet the private security or payment test?		X		X		X		X
	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		%	6	%		%		%
С	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		Х		X	
Par	t IV Arbitrage				•				•
			A		В		С		
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
	Penalty in Lieu of Arbitrage Rebate?		X		X		X		X
2	If "No" to line 1, did the following apply?		1		·				
	Rebate not due yet?	X		Х		Х		Х	
	Exception to rebate?		X		Х		X		Х
	No rebate due?		X	Х			X	Х	
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was		1						
	performed								
3	Is the bond issue a variable rate issue?		X		X		X		X
	Has the organization or the governmental issuer entered into a qualified								
	hedge with respect to the bond issue?		Х		x		x		х
h	Name of provider		1		1		1		
	Term of hedge								
	Was the hedge superintegrated?								
	Was the hedge terminated?				1				
	rras the heage terminated:		1						

Post III Private Preimage Has (Continued)				<u> </u>	7404231				Page
Part III Private Business Use (Continued)		^		E	, 1		С		
26. Are there any management or consider contracts that may recult in private	Yes	No	٠,	Yes	No	Yes	No	Yes	No No
3a Are there any management or service contracts that may result in private	162	X		162	NO	162	NO	162	INO
business use of bond-financed property?		- 21							
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside									
counsel to review any management or service contracts relating to the financed property?		X							
c Are there any research agreements that may result in private business use of bond-financed property?		<u> </u>							
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		0.0							
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			%		%		%		%
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							1		
of			%		%		%		9/
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections			,,		,,		1		
1.141-12 and 1.145-2?									
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?	Х								
	21								
Part IV Arbitrage					, 1				
4 H H H H H H H H H H H H H H H H H H H		A	+,	E			C		D
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No X	<u> </u>	Yes	No	Yes	No	Yes	No
Penalty in Lieu of Arbitrage Rebate?		Λ	_						
2 If "No" to line 1, did the following apply?	77	1					_		1
a Rebate not due yet?	Х								
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?									
								adula I/ (Fa	000) 004

chedule K (Form 990) 2017 COLORADO SEMINARY			84-0	0404231	L			Page
art IV Arbitrage (Continued)								
	1	A		3)	[)
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		X		X
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
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?	Х		X		X		X	
art V Procedures To Undertake Corrective Action								
		A	E	3))
	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 isn't available under applicable								
regulations?	X		X		X		Х	

Schedule K (Form 990) 2017 COLORADO SEMINARY			84-(0404231				Page 3
Part IV Arbitrage (Continued)								
		4	E	3		,)
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						<u> </u>
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								1
6 Were any gross proceeds invested beyond an available temporary period?		X						
7 Has the organization established written procedures to monitor the requirements of	x							
section 148?	Λ							
Part V Procedures To Undertake Corrective Action			_		<u> </u>	_	_	
		\	E		1	;		
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of								1
federal tax requirements are timely identified and corrected through the voluntary								1
closing agreement program if self-remediation isn't available under applicable	3,7							1
regulations?	X							,
Part VI Supplemental Information. Provide additional information for responses to questions	s on Schedul	e K. See inst	ructions					
SCHEDULE K, PART I, BOND ISSUES:	3 OTT TM:		, , , , , , , , , , , , , , , , , , ,	2012				
(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL F.			SERIES A	2013				
(F) DESCRIPTION OF PURPOSE: REFUNDING SERIES 200	2R ROM)S						
(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL F.	ACTT TM	בהים כ	י מתדתתי	0007				
``				2007				
(F) DESCRIPTION OF PURPOSE: REFUNDING SERIES 200	IA AND	Z003B	ВОИОВ					
(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL F.	ΔCTT.TT	FFC _ C	י סקדקק	201/2				
(F) DESCRIPTION OF PURPOSE:	ACIDII	LEO L	DEKTED A	OLTAN				
REFUNDING SERIES 2005A BONDS AND 2014A CAPITALIZ	ED TNTI	TR EST						
REPONDING DERIED 2003A DONDS AND 2014A CALITADIA	11V11	TUDDI						
(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL F.	ΔΟΤΤ.ΤͲ	TES - S	CHITARS '	2014B				
(F) DESCRIPTION OF PURPOSE: REFUNDING SERIES 200				10140				
(1) DEBORTITION OF TORTOBE: REFORDING BERTED 200	JD DOM							
(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL F.	ACILIT	IES - S	SERIES 2	2017A				
(F) DESCRIPTION OF PURPOSE:								
CONSTURCTION, RENOVATION, IMPROVEMENT AND EQUIPPI	NG OF (CAMPUS	IMPROVI	EMENTS				
SCHEDULE K, PART IV, ARBITRAGE, LINE 2C:								
(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL F.	ACILIT:	IES - S	SERIES 2	2007				
DATE THE REBATE COMPUTATION WAS PERFORMED: 0								
	. ,							

SCHEDULE L

Department of the Treasury

Internal Revenue Service

Transactions With Interested Persons

(Form 990 or 990-EZ) ► 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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open To Public Inspection

Name of the organization

Employer identification number

	_			SEMINARY									042	31		
Part I	Excess Bene	fit Trans	sacti	ons (section 50	01(c)(3	3), sect	ion 501	I(c)(4), and 50)1(c)	(29) organization	ns only	<i>'</i>).				
	Complete if the c	organization	n ansv	vered "Yes" on I	Form 9	990, Pa	art IV, li	ne 25a or 25l	b, or	Form 990-EZ, P	art V,	ine 40	Ob.			
1				Relationship bety										(d)	Corre	cted?
(a) N	lame of disqualified p	person	. ,	person and or				(0	c) De	escription of tran	sactio	n			es	No
															-	
2 Ente	er the amount of tax i	ncurred by	the o	rganization man	agers	or disc	nualifie	d nersons du	rina	the year under						
		•		•	•		•	•	·			\$				
	er the amount of tax,											\$				
• Line	or the amount of tax,	ii arry, orr ii	110 2, 6	above, reimbara	ocu by	tile or	garnzar					Ψ				
Part II	Loans to and	d/or Fron	n Int	erested Per	sons	 										
	Complete if the o						Part \	/ line 38a or l	Forn	n 000 Part IV lin	26.	or if th	ne oraș	nizati	on	
	reported an amo	-					., I ait v	, iii le Joa oi i	OIII	11 990, 1 art 10, 111	16 20,	01 11 11	ie orga	ııızatı	OH	
	(a) Name of	(b) Relatio		(c) Purpose		oan to or	(0)) Original	/+) Balance due	(g)	In	(h) App	oroved	/i) W	ritten
	erested person	with organi		of loan		m the ization?		ipal amount	۱,) Dalarice due	defa		by bo	ard or	agree	ment?
					To	From					Yes	No	Yes	No	Yes	No
					10	1 10111					163	140	163	140	163	140
															_	
otal Part II	I Grants or As	oiotopoo	Dor	ofiting Into	rooto	d Do	roono	> \$								
raitii				_												
	Complete if the c	_								l						
(a)	Name of interested p	oerson	(b) Relationship interested pers			٠,	assistance		(d) Type assistan			• •) Purp assista		ľ
				the organiza		iu	'	assistance		assistan	CC		•	233131	arice	
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2017

Complete if the organization answ (a) Name of interested person		ip between interested	(c) Amount of	(d) Description of	(e) Sha	aring of
(a) Hame of morested person		d the organization	transaction	transaction	organiz reven	:ation's jues?
EVENT RENTS USA, LLC	TRUSTEE	(KEVIN C. G	186 /81	RENTAL OF F	Yes	No X
EVENT KENTS USA, LLC	IKOSIEE	(KEVIN C. G	100,401.	RENTAL OF F		
						ļ
Part V Supplemental Information Provide additional information for		ons on Schedule L (see	instructions).			
SCH L, PART IV, BUSINES			·	ED PERSONS:		
(A) NAME OF PERSON: EVE	NT RENTS US	SA, LLC				
(B) RELATIONSHIP BETWEE	N INTERESTE	ED PERSON AN	D ORGANIZAT	ION:		
TRUSTEE (KEVIN C. GALLA	GHER)					
	,					
(D) DESCRIPTION OF TRAN	SACTION: RE	ENTAL OF FUR	NISHINGS &	EQUIPMENT		

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

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

Pai	rt I Types of Property							
		(a)	(b)	(c)	(d			
		Check if applicable	Number of contributions or	Noncash contribution amounts reported or			•	
		• •		Form 990, Part VIII, line		ution ai	Hourit	3
1	Art - Works of art	X	20		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	77	1,881,30	0.FMV			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential	X	1	309,00	0.APPRAISAL			
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 completed Form 828		•				0	
	for which the organization completed Form 828	33, Part IV,	Donee Acknowled	gement 29				No
200	During the year did the ergenization receive by	, contributio	on any proporty ro	aartad in Bart I linas 1 th	arough 20, that it		Yes	No
Sua	During the year, did the organization receive by must hold for at least three years from the date							
	exempt purposes for the entire holding period?		•	•		30a		Х
h	If "Yes," describe the arrangement in Part II.					30a		
31	Does the organization have a gift acceptance p	oolicy that r	equires the review	of any nonstandard con	tributions?	31	Х	
	Does the organization have a gift acceptance plant become a companied to the parties of the part							
02a			•			32a		х
b	contributions? If "Yes," describe in Part II.					- SEU		= -
33	If the organization didn't report an amount in c	olumn (c) fo	r a type of propert	v for which column (a) is	checked.			
	describe in Part II.	2.3 (0) 10	, pc or propert	,				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2017

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):
COLUMN (B) REPORTS THE NUMBER OF CONTRIBUTORS
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)

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury ▶ Go to www.irs.gov/Form990 for the latest information. Internal Revenue Service

Name of the organization

COLORADO SEMINARY

Employer identification number 84-0404231

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: WELL-BEING AND INTELLECTUAL, CULTURAL AND SOCIAL DEVELOPMENT.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: 2017-2018 ACADEMIC YEAR: THE AUXILLARY ENTERPRISES AT THE UNIVERSITY OF DENVER EXIST TO FURNISH GOODS OR SERVICES TO STUDENTS, FACULTY, STAFF, INSTITUTIONAL DEPARTMENTS AND THE PUBLIC. THE MOST PROMINENT OF THESE ENTERPRISES PROVIDE SUPPORT TO OUR STUDENTS WHICH INCLUDES; A UNIVERSITY HEALTH CENTER AND RESIDENCE AND FOOD FACILITIES. 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 AUXILARY ENTERPRISE ACTIVITIES. EXPENSES \$ 45,461,092. INCLUDING GRANTS OF \$ 0. REVENUE \$ 56,706,629.

THE UNIVERSITY OF DENVER FACULTY MEMBERS RECEIVED SUBSTANTIAL FUNDING FROM GOVERNMENTAL AND PRIVATE SOURCES TO SUPPORT THEIR SCHOLARSHIP. THE LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2017) Name of the organization COLORADO SEMINARY

Employer identification number 84-0404231

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 \$ 20,079,198. INCLUDING GRANTS OF \$ 0. REVENUE \$ 36,989,333.

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
CHAIRMAN AND SECRETARY, TOGETHER WITH THE TREASURER, IF THE TREASURER IS A
TRUSTEE, (B) THOSE TRUSTEES WHO MAY FROM TIME TO TIME CHAIR THE FOLLOWING
COMMITTEES: FINANCE AND BUDGET, FACULTY AND EDUCATIONAL AFFAIRS, STUDENT
AFFAIRS, INSTITUTIONAL ADVANCEMENT, BUILDING AND GROUNDS, TRUSTEE AFFAIRS,
AUDIT, INVESTMENT, AND ATHLETIC AFFAIRS, AND (C) SUCH ADDITIONAL TRUSTEES
AS THE CHAIRMAN MAY APPOINT PROVIDED

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

FORMS 990 AND 990-T ARE PREPARED BY AN INDEPENDENT AUDIT FIRM,

CLIFTONLARSONALLEN LLP, USING INFORMATION PROVIDED BY MANAGEMENT. THE FORMS

ARE THEN FORWARDED TO MANAGEMENT FOR REVIEW. THE FORM IS PRESENTED TO AND

REVIEWED BY THE UNIVERSITY'S AUDIT COMMITTEE WHICH HAS THE AUTHORITY TO

ACCEPT THE SUBMISSION AND REPORT TO THE EXECUTIVE COMMITTEE OR FULL BOARD

OF TRUSTEES. A COMPLETE COPY OF FORM 990 IS MADE AVAILABLE ON A WEBSITE

Schedule O (Form 990 or 990-EZ) (2017)

Name of the organization

COLORADO SEMINARY

Employer identification number 84-0404231

ACCESSIBLE BY MEMBERS OF THE BOARD OF TRUSTEES AND TRUSTEES ARE NOTIFIED OF THE AVAILABILITY OF THE POSTED FORM 990 BEFORE FILING IS COMPLETED.

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.

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 BOARD OR
ITS EXECUTIVE COMMITTEE RECEIVES A RECOMMENDATION REGARDING THE
CHANCELLOR'S COMPENSATION PACKAGE FROM THE COMPENSATION SUBCOMMITTEE. THE
EXECUTIVE COMMITTEE DISCUSSED COMPENSATION FOR THE CHANCELLOR DURING
SEPTEMBER 2018.

DELIBERATIONS AND DISCUSSIONS FOR THE COMPENSATION OF THE CHANCELLOR'S

Name of the organization **Employer identification number** COLORADO SEMINARY 84-0404231 DIRECT REPORTS ARE CARRIED ON BY THE COMPENSATION SUBCOMMITTEE OF THE BOARD OF TRUSTEES. THE COMPENSATION SUBCOMMITTEE REVIEWS MARKET DATA AND THE CHANCELLOR'S RECOMMENDATION FOR THE COMPENSATION OF DIRECT REPORTS. THE CHANCELLOR'S DIRECT REPORTS INCLUDE THE PROVOST, GENERAL COUNSEL, AND ALL VICE-CHANCELLORS INCLUDED ON FORM 990 PART VII, SECTION A. 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 MEETNG THAT APPROVES THE BUDGET FOR THE UPCOMING YEAR. THIS PROCESS LAST TOOK PLACE IN JUNE 2018 FOR FISCAL YEAR 2019. COMPENSATION FOR ALL EMPLOYEES INCLUDING TOP MANAGEMENT AND KEY EMPLOYEES IS REVIEWED ANNUALLY AS A PART OF THE UNIVERSITY'S PERFORMANCE AND MERIT PROCESS. FORM 990, PART VI, SECTION C, LINE 19: THE UNIVERSITY HAS ITS BOARD POLICIES AND CONFLICTS OF COMMITMENT AND INTEREST, AND THE FINANCIAL STATEMENTS AVAILABLE ON THE UNIVERSITY'S WEBSITE. THE ORGANIZING DOCUMENTS ARE AVAILABLE UPON REQUEST. FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: ACTUARIAL ADJUSTMENTS 648,069.

SCHEDULE R (Form 990)

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.

Department of the Treasury
Internal Revenue Service

Name of the organization

COLORADO SEMINARY

► Go to www.irs.gov/Form990 for instructions and the latest information.

2017

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

84-0404231

Part I Identification of Disregarded Entities. Comple	ete if the organization answered "Yes" o	on Form 990, Part IV, line 33.			
(a)	(b)	(c)	(d)	(e)	(f)
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets	Direct controlling entity
HIGHLANDS RANCH GOLF CLUB - 84-0404231					
9000 CREEKSIDE WAY					
HIGHLANDS RANCH, CO 80129	GOLF COURSE OPERATIONS	COLORADO	3,032,949.	4,778,670.	COLORADO SEMINARY
KNOBEL EVENTS, LLC					
2199 S UNIVERSITY BLVD	EDUCATIONAL				
DENVER, CO 80208	EVENTS/RESTAURANT	COLORADO	390,576.	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	(f) Direct controlling entity	contr	g) 512(b)(13) rolled ity?
				501(c)(3))		Yes	No

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

Schedule R (Form 990) 2017

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)		Predominant income (related, unrelated, excluded from tax under sections 512-514)		Share of end-of-year assets	Disprop alloca	ortionate tions?	Code V-UBI amount in box 20 of Schedule		
				,			1.55		,		

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	512(l contr ent	tion b)(13) rolled tity?
CHARITABLE REMAINDER TRUSTS (13) 2199 S UNIVERSITY BLVD			COLORADO						No
DENVER, CO 80208	INVESTMENTS	СО	SEMINARY	TRUST				Х	

Page 3

Yes No

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

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

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 organiza					1b		Δ				
c Gift, grant, or capital contribution from related organ	nization(s)				1c		X				
d Loans or loan guarantees to or for related organization(s)											
e Loans or loan guarantees by related organization(s)					1e		X				
f Dividends from related organization(s)					1f		X				
Sale of assets to related organization(s)											
h Purchase of assets from related organization(s)					1h		X				
i Exchange of assets with related organization(s)											
j Lease of facilities, equipment, or other assets to rela	ated organization(s)				1j		Х				
							X				
 k Lease of facilities, equipment, or other assets from related organization(s) I 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) 											
Performance of services or membership or fundraising solicitations for related organization(s)											
					1m	X	Х				
	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)										
p Reimbursement paid to related organization(s) for ex	kpenses				1 p		X				
q Reimbursement paid by related organization(s) for ex	xpenses				1q		X				
r Other transfer of cash or property to related organization	ation(s)				1r		X				
s Other transfer of cash or property from related organ					1s		Х				
2 If the answer to any of the above is "Yes," see the in	nstructions for information on w	vho must complete t	nis line, including covered	relationships and transaction thresholds.							
(a)		_ (b)	(c)	(d)							
Name of related organization	1	Transaction type (a-s)	Amount involved	Method of determining amount inv	olved						
		type (a-s)									
(1)											
(0)											
(2)											
(0)											
(3)											
(4)											
(4)											
(5)											
(5)											
(6)											
732163 09-11-17											
		77		Schedule	R (Forr	n gan	2017				

COLORADO SEMINARY 84-0404231 Page 4

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a)	(b)	(c)	(d)	(e) Are a partners 501(c) orgs.)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related, unrelated, excluded from tax under sections 512-514)	partners	S Sec.	Share of	Share of	Disp	ropor- nate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Genera	Percentage
of entity		(state or foreign	excluded from tax under	orgs.)(3) .?	total	end-of-year	alloca	tions?	of Schedule K-1	partne	ownership
		country)	sections 512-514)	Yes I		income	assets	Yes	No	(Form 1065)	Yes N	ю
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Schedule R (Form 990) 2017