** PUBLIC DISCLOSURE COPY **

(Rev. January 2020)

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

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

Department of the Treasury

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

A For the 2019 calendar year, or tax year beginning JUL 1. 2019 and ending JUN 30, 2020 C Name of organization D Employer identification number Check if applicable: Address change UNIVERSITY OF DENVER Name change 84-0404231 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Final return/ termin-ated 2199 S UNIVERSITY BLVD 303-871-2404 1,151,478,051. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended return DENVER, CO 80208 H(a) Is this a group return Applica-tion pending F Name and address of principal officer: JEREMY HAEFNER for subordinates? Yes X No SAME AS C ABOVE **H(b)** Are all subordinates included? Yes Tax-exempt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527 If "No," attach a list. (see instructions) J Website: ► HTTP://DU.EDU **H(c)** Group exemption number ▶ K Form of organization: X Corporation Trust Association Other > L Year of formation: 1864 M State of legal domicile: CO Part I Summary Briefly describe the organization's mission or most significant activities: A HIGHER EDUCATIONAL Governance INSTITUTION. PROVIDING BOTH UNDERGRADUATE AND GRADUATE DEGREES if the organization discontinued its operations or disposed of more than 25% of its net assets. 25 3 Number of voting members of the governing body (Part VI, line 1a) 3 24 Number of independent voting members of the governing body (Part VI, line 1b) 4 4 Activities & 9367 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 3400 6 5,707,873. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, line 39 0. 7h **Prior Year Current Year** 47,281,150, 27,505,454. Contributions and grants (Part VIII, line 1h) 8 Revenue 634,358,300 661,060,303. Program service revenue (Part VIII, line 2g) 9,940,960, 23,825,603. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 4,916,377 4,354,732. 11 696,496,787 716,746,092. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 191,574,069 213,162,257. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 14 Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 305,913,415. 322,569,239. 15 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. **b** Total fundraising expenses (Part IX, column (D), line 25) 187,712,368. 192,217,437. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 685,199,852, 727,948,933. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 11,296,935. -11,202,841. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year** 5 **End of Year** 1,870,633,591. 1,851,080,134. Total assets (Part X, line 16) 382,730,680, 383,859,611. 21 Total liabilities (Part X, line 26) 三年 1,487,902,911. 1,467,220,523. Net assets or fund balances. Subtract line 21 from line 20 ... Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign LESLIE BRUNELLI, SENIOR VICE CHANCELLOR Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature SARAH HINTZ SARAH HINTZ 05/12/21 P00492291 Paid self-employed CLIFTONLARSONALLEN LLP 41-0746749 Preparer Firm's name Firm's EIN ▶ Firm's address > 8390 EAST CRESCENT PARKWAY, SUITE 300 Use Only GREENWOOD VILLAGE, CO 80111 Phone no. (303) 779-5710

No

X Yes

May the IRS discuss this return with the preparer shown above? (see instructions)

Form **990** (2019)

92,159,606.)

651,159,197.

Total program service expenses

Other program services (Describe on Schedule O.)

98,253,903. including grants of \$

14,764,767.) (Revenue \$

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Form 990 (2019) 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		х
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	i i		
Ŭ	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	ل		
U	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		х	
-		6	21	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		_v
_	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	X	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9	Х	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
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	
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
٨	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	110		
u		11d		x
_	Part X, line 16? If "Yes," complete Schedule D, Part IX		Х	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Λ	\vdash
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	
	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	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	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		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
=	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."			
	,	19		x
20-	complete Schedule G, Part III	20a		X
20a	• •	20a 20b		
b O4	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	ZUD		\vdash
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	ا ۾ ا	v	
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	X	

932003 01-20-20

Part IV Checklist of Required Schedules (continued)

23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 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	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a	Х	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Х
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	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			,,
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
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	054		x
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	25b		<u> </u>
26	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
		26		x
27	controlled entity or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part II</i> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	20		
_,	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? 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	Х	
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		v	
2E -	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a	- 23	\vdash
b	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	000		
-	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	"		
-	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	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	Х	
Par				
	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 1099			

(gambling) winnings to prize winners? 932004 01-20-20

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 9367			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Х	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	Х	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Х	
b	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 was required			
	to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		Х
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		Х
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		Х
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<u> </u>	Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	<u> </u>	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
		Form	990	(2019)

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on 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	25			
	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 on Schedule O.				
b	Enter the number of voting members included on line 1a, above, who are independent	24			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	n any other			
	officer, director, trustee, or key employee?		2		Х
3	Did the organization delegate control over management duties customarily performed by or under the dire				
	of officers, directors, 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 v	vas 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	Did the organization have members, stockholders, or other persons who had the power to elect or appoir	t one or			
	more members of the governing body?		7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockly				
	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				
а	The governing body?		8a	X	
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 on Schedule O		9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenu	ue Code.)			
		,		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapte	ers, 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 bef	ore filing the form?	11a	Х	
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 co	onflicts?	12b	Х	
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	Х	
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		Х
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 organizati	on'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,NY,NH,OH,OR,S	C,WA			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990, and 990 or 1024-A, if applicable (1024 or 1024-A), if applicable (1024 or 1024-A), 1024-A,	90-T (Section 501(c)(3)s	only)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.				
	Own website Another's website X Upon request Other (explain on a	Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflic	t of interest policy, and	financ	cial	
	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 a	nd records 🕨			
	ANDREW CULLEN - 303-871-3740				
	2199 S UNIVERSITY BLVD, DENVER, CO 80208				

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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.

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

• 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.

See instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per week	box	not c , unle:	Pos heck ss per	rson i	than on the state of the state	n an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) REBECCA CHOPP	40.00	-								
CHANCELLOR THRU 7/14/19				Х				864,689.	0.	55,127.
(2) JEREMY HAEFNER	40.00	-							_	
CHANCELLOR				Х				612,269.	0.	60,379.
(3) KARLTON CREECH	40.00	-							_	
VICE CHANCELLOR					Х			361,563.	0.	88,313.
(4) DAVID GORDON CARLE	40.00	-							_	
HEAD COACH			_			Х		394,597.	0.	35,792.
(5) GREGG KVISTAD	40.00	-						200 500		20.06
PROVOST EMERITUS - FORMER PROVOST	10.00						Х	392,522.	0.	30,267.
(6) CRAIG WOODY	40.00	-						350 000	•	F.4. 0.00
FRMR TREAS - SNR VICE CHANC	40.00						Х	358,808.	0.	54,373.
(7) BRUCE SMITH	40.00	-						250 640	•	45 500
DEAN	40.00				Х			352,642.	0.	45,509.
(8) JACK STRAUSS	40.00	-						200 125		60 505
PROFESSOR	40.00		_			Х		328,135.	0.	62,707.
(9) MARTIN KATZ	40.00	1					٠,,	254 266	0	22 702
SNR ADV ACDMC INNOV - FORMER DEAN	40.00						Х	354,366.	0.	32,783.
(10) NANCY NICELY	40.00	1		٠,				242 070	0	41 242
SECRETARY - CHIEF OF STAFF	40.00			Х				343,879.	0.	41,342.
(11) JAMES HOLSTON DEAN	40.00	1				, .		210 750	0	E2 000
(12) SHARON LASSAR	40.00					Х		310,750.	0.	53,880.
PROFESSOR	40.00	1				x		312 170	0.	23 726
(13) PAUL CHAN	40.00					^		312,179.	0.	23,726.
UNIVERSITY COUNSEL	40.00	1			х			290,909.	0.	43 063
(14) CHRISTOPHER HILL	40.00				Λ			250,505.	٠.	43,063.
ADVISOR TO THE CHANCELLOR	10.00	1				x		295,261.	0.	38,351.
(15) DONALD HARRIS	40.00					<u> </u>		255,201.	<u> </u>	30,331.
VICE CHANCELLOR	10.00	1			х			272,685.	0.	47,310.
(16) LILIANA RODRIGUEZ	40.00							2,2,000.	<u> </u>	
VICE CHANCELLOR	10.00	1			х			216,949.	0.	89,139.
(17) KEYARMIN AFSAHI	40.00							,	•	
VICE CHANCELLOR		1			х			267,390.	0.	26,009.
		1		I				,	••	Form 990 (2010)

UNIVERSITY OF DENVER 84-0404231

Form 990 (2019) UNIVERSITY C	OF DENVER								84-040423	Page C
Part VII Section A. Officers, Directors, True	stees, Key Emp	oloy	ees,	and	d Hig	ghes	t C	ompensated Employee	s (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do		Pos		າ than d	one	Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	rson i	s both	n an	compensation	compensation	amount of
	week		cer an	id a d	irecto	r/trus	tee)	from	from related	other
	(list any hours for	recto						the	organizations	compensation
	related	ordi	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	ruste	l trus		ee	ubeu		(88-2/1099-181130)		and related
	below	dual t	ntiona	_	nploy	st cor	<u></u>			organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			5. gaa
(18) LESLIE BRUNELLI	40.00									
TREASURER - SENIOR VICE CHANCELLOR				х				254,627.	0.	26,733.
(19) TODD RINEHART	40.00									
VICE CHANCELLOR					Х			237,888.	0.	42,954.
(20) ELRIE LABRENT CHRITE	40.00									
FORMER DEAN							Х	198,382.	0.	50,436.
(21) VIVEK CHOUDHURY	40.00									
DEAN					Х			229,399.	0.	18,518.
(22) JAMES GRIESEMER	41.00									
TRUSTEE - PROFESSOR		Х						203,835.	0.	41,961.
(23) DAVID ETHAN GREENBERG	40.00									
VICE CHANCELLOR					Х			219,879.	0.	24,401.
(24) LAURA MARESCA	40.00									
VICE CHANCELLOR					Х			214,477.	0.	17,912.
(25) ANDREW CULLEN	40.00									
ASSISTANT TREASURER - CONTROLLER				Х				210,226.	0.	17,844.
(26) JAMES ROSNER	40.00									
ASSOCIATE VICE CHANCELLOR					Х			180,308.	0.	35,256.
1b Subtotal							ightharpoons	8,278,614.	0.	1,104,085.
c Total from continuation sheets to Part V	II, Section A						ightharpoonup	405,748.	0.	89,449.
d Total (add lines 1b and 1c)		<u></u> .	<u></u>	<u></u>	<u></u>			8,684,362.	0.	1,193,534.

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

580

			162	INO
3	Did the organization list any former officer, director, 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
$\overline{}$				

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.

the organization. Report compensation for the calendar year ending with or within	i the organization's tax year.	
(A)	(B)	(C)
Name and business address	Description of services	Compensation
TRIBAL LAW POLICY INSTITUTE, 8235 SANTA		
MONICA BLVD, SUITE 211, WEST HOLLYWOOD, CA	RESEARCH GRANT SUBCONTRACTOR	1,681,099.
THE WEITZ COMPANY		
4725 SOUTH MONACO STREET, DENVER, CO 80237	CONSTRUCTION SERVICES	987,660.
ELLUCIAN COMPANY LP, 62578 COLLECTIONS		
CENTER DRIVE, CHICAGO, IL 60693	SOFTWARE MAINTENANCE	949,138.
ZCP VISTA LLC		
1700 HILLSBOROUGH STREET, RALEIGH, NC 27605	PROPERTY MANAGEMENT	641,394.
MASTAYS PAINTING, 1154 WEST 124TH COURT,		
WESTMINSTER, CO 80234	PAINTING SERVICES	422,635.
2 Total number of independent contractors (including but not limited to those listed	d above) who received more than	
\$100,000 of compensation from the organization > 22		

SEE PART VII, SECTION A CONTINUATION SHEETS

UNIVERSITY OF DENVER 84-0404231 Form 990

Form 990 UNIVERSITY OF	F DENVER								84-04042	231
Part VII Section A. Officers, Directors, Tru	stees, Key Er	nplo	yee	s, a	nd H	ligh	est (Compensated Employe	es (continued)	
(A)	(B)			((C)			(D)	(E)	(F)
Name and title	Average			Pos	ition	ı		Reportable	Reportable	Estimated
	hours	(c	heck	all '	that	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	-				loyee		the	organizations	compensation
	(list any hours for	or director				d em b		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	related	e or c	stee			satec		(44-2/1099-141130)		and related
	organizations	ndividual trustee	Institutional trustee		yee	Highest compensated employee				organizations
	below	idual	tution	la la	Key employee	estoc	er			
	line)	Indiv	Instil	Officer	Key	High	Former			
(27) MARGARET BRADLEY DOPPES	40.00									
SNR ADV TO CHNCLLR-FRMR VICE CHNCLLR							Х	166,982.	0.	14,512.
(28) ROSALYNN FEAGINS	40.00									
ASSISTANT SECRETARY				Х				102,999.	0.	17,349.
(29) CLAIRE BROWNELL	40.00									
ASSISTANT SECRETARY				Х				78,541.	0.	29,778.
(30) ANGELA DUGGAN	40.00									
ASSISTANT SECRETARY				Х				57,226.	0.	27,810.
(31) DENISE M. OLEARY	1.00									
TRUSTEE - CHAIR		Х		Х				0.	0.	0.
(32) KEVIN C. GALLAGHER	1.00									
TRUSTEE - VICE CHAIR		Х		Х				0.	0.	0,
(33) EDWARD T. ANDERSON	1.00									
TRUSTEE		Х						0.	0.	0.
(34) KATHERINE ARCHULETA	1.00									
TRUSTEE		Х						0.	0.	0.
(35) DANIEL P. CARUSO	1.00									
TRUSTEE		Х						0.	0.	0.
(36) MARY SUE COLEMAN	1.00									
TRUSTEE		Х						0.	0.	0.
(37) DEBORAH DEHAAS	1.00									
TRUSTEE		Х						0.	0.	0.
(38) NAVIN DIMOND	1.00	1								
TRUSTEE		Х						0.	0.	0.
(39) MARK FALCONE	1.00	-								
TRUSTEE		Х						0.	0.	0.
(40) MARGOT GILBERT FRANK	1.00	-						_	_	_
TRUSTEE		Х						0.	0.	0.
(41) PETER A. GILBERTSON	1.00									
TRUSTEE	1 00	Х						0.	0.	0.
(42) CRAIG HARRISON	1.00	ł								
TRUSTEE	1 00	Х						0.	0.	0.
(43) RYAN HECKMAN	1.00	١							_	
TRUSTEE	1 00	Х	-	-	-	-	-	0.	0.	0.
(44) BRANDON C. JOHNSON	1.00	.,							_	_
TRUSTEE	1 00	Х	-		-	-	-	0.	0.	0.
(45) JOHN A. MILLER	1.00								_	
TRUSTEE	4	Х				_		0.	0.	0.
(46) GREGORY L. MOORE	1.00								_	_
TRUSTEE		Х						0.	0.	0 .
T. I. D. I.W. O. I										
Total to Part VII, Section A, line 1c										

Form 990 UNIVERSITY OF DENVER 84-0404231

Form 990 UNIVERSITY OF	F DENVER								84-04042	231
Part VII Section A. Officers, Directors, Tru	ıstees, Key En	nplo	yee	s, ar	nd H	lighe	est (Compensated Employe	es (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average			Pos	ition			Reportable	Reportable	Estimated
	hours	(cl	neck	all t	that	t apply)		compensation	compensation	amount of
	per week (list any hours for related organizations	Individual trustee or director	Institutional trustee		ployee	Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
	below line)	Individu	Instituti	Officer	Key employee	Highest	Former			
(47) TRYGVE E. MYHREN FRUSTEE	1.00	х						0.	0.	0
(48) NANCY PHILLIPS	1.00									
TRUSTEE		х						0.	0.	0
(49) MARY K. RHINEHART	1.00									
TRUSTEE	1.00	х						0.	0.	0
(50) RAY M. ROBINSON	1.00									
TRUSTEE		Х						0.	0.	0
(51) DOUGLAS G. SCRIVNER	1.00									
TRUSTEE (52) CATHERINE C. SHOPNECK	1.00	Х						0.	0.	0
TRUSTEE	1.00	х						0.	0.	0
(53) OTTO TSCHUDI	1.00								•	
TRUSTEE	1.00	х						0.	0.	0
(54) FREDERICK T. WALDECK	1.00							· ·	••	
TRUSTEE		х						0.	0.	0
								1		

Form 990 (2019) UNIVERSITY

Part VIII Statement of Revenue

		Check if Schedule O contains a response	or note to any lin	e in this Part VIII			
		<u> </u>	,	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
					function revenue	business revenue	sections 512 - 514
SΩ	1 a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues 1b					
ନ୍ଦ୍ର ପ୍ର		Fundraising events 1c	358,822.				
ífts, r A		I Related organizations 1d	,				
nila		Government grants (contributions)					
Sir		All other contributions, gifts, grants, and					
uti	•	similar amounts not included above	27,146,632.				
QË OE		Noncash contributions included in lines 1a-1f	1,118,412.				
o bu	_	Total. Add lines 1a-1f	, ,	27,505,454.			
<u> </u>		Total. Add lines 14 11	Business Code				
	2 a	TUITION AND FEES	611310	546,813,907.	546,813,907.		
Vice		AUXILIARY ENTERPRISES	611310	49,348,784.	42,878,048.	6,470,736.	
Ser	-	RESEARCH GRANTS	611310	49,281,558.	49,281,558.	7 - 2 - 7 - 2 - 2	
m S		EDUCATIONAL ACTIVITIES	611310	15,432,025.	15,432,025.		
gra Re	-	STUDENT LOANS	611310	184,029.	184,029.		
Program Service Revenue	f	All other program service revenue					
_		Total. Add lines 2a-2f		661,060,303.			
	3	Investment income (including dividends, intere		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	3	other similar amounts)		2,782,720.		-762,863.	3,545,583.
	4	Income from investment of tax-exempt bond p		1,756,284.		, , , , , , , , ,	1,756,284.
	5	Royalties		73,405.			73,405.
	3	(i) Real	(ii) Personal	,			72,233
	6 3	2 490 700	(1) 1 01001141				
		1 Gross rents 6a 2,460,790. 2 Less: rental expenses 6b 662,047.					
		Rental income or (loss) 6c 1,818,743.					
		Net rental income or (loss)		1,818,743.			1,818,743.
		Gross amount from sales of (i) Securities	(ii) Other	, , , , , , , , , , , , , , , , , , , ,			, , , , , ,
	, ,	assets other than inventory 7a 452,793,945.	(", " : " : " :				
	h	Less: cost or other basis					
<u>o</u>	~	and sales expenses 7b 433,507,346.					
her Revenue	_	Gain or (loss) 76 19,286,599.					
Seve		Net gain or (loss)		19,286,599.			19,286,599.
e F		Gross income from fundraising events (not		, , ,			, , ,
ğ	-	including \$ 358,822. of					
		contributions reported on line 1c). See					
		Part IV, line 18 8a	575,559.				
	h	Less: direct expenses 8b	562,566.				
		Net income or (loss) from fundraising events	, <u> </u>	12,993.			12,993.
		Gross income from gaming activities. See		,			,
	-	Part IV, line 19 9a					
	h	Less: direct expenses 9b					
		Net income or (loss) from gaming activities					
		Gross sales of inventory, less returns					
		and allowances 10a					
	b	Less: cost of goods sold					
		Net income or (loss) from sales of inventory	•				
		, ,	Business Code				
snc	11 a	MISC SERVICE REV	611710	2,449,591.	2,449,591.		
ane Due	b						
Miscellaneous Revenue	c	:					
Aisc B.	d	All other revenue					
2	е	Total. Add lines 11a-11d		2,449,591.			
	12	Total revenue. See instructions		716,746,092.	657,039,158.	5,707,873.	26,493,607.

932009 01-20-20

Part IX Statement of Functional Expenses

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

Do i	Check if Schedule O contains a respons not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.	Total oxpolicos	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations	10 151 600	10 151 600		
	and domestic governments. See Part IV, line 21	12,451,632.	12,451,632.		
2	Grants and other assistance to domestic	107 210 202	105 210 202		
	individuals. See Part IV, line 22	187,312,383.	187,312,383.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	12 200 242	12 200 242		
	individuals. See Part IV, lines 15 and 16	13,398,242.	13,398,242.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	6 400 635	1 647 927	4 550 400	202 20
_	trustees, and key employees	6,499,635.	1,647,827.	4,558,409.	293,399
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	255 576 100	222 525 005	20 002 150	10 100 10
7	Other salaries and wages	255,576,100.	222,535,805.	20,902,158.	12,138,13
8	Pension plan accruals and contributions (include	12 216 141	12 045 401	1 110 010	651 620
_	section 401(k) and 403(b) employer contributions)	13,816,141.	12,045,491. 25,363,520.	1,119,012. 2,566,045.	1,820,60
9	Other employee benefits		14,506,029.		
0	Payroll taxes	16,927,197.	14,500,029.	1,617,440.	803,728
1	Fees for services (nonemployees):				
_	Management	2,483,532.	656,260.	1,617,806.	209,460
b	Legal	238,713.	030,200.	238,713.	209,40
	Accounting	29,295.		29,295.	
	Lobbying	25,255.		25,255.	
_	Professional fundraising services. See Part IV, line 17	3,703,951.		3,703,951.	
f	Investment management fees	3,703,331.		3,703,331.	
g	Other. (If line 11g amount exceeds 10% of line 25,	60,951,284.	54,946,738.	5,027,480.	977,066
^	column (A) amount, list line 11g expenses on Sch 0.)	4,077,993.	3,743,696.	294,129.	40,168
2	Advertising and promotion	34,011,233.	30,463,506.	2,342,275.	1,205,452
3	Office expenses	8,830,367.	4,108,733.	4,658,062.	63,572
4	Information technology	0,030,307.	4,100,733.	1,030,002.	03,377
5 6	Royalties	22,256,093.	21,679,383.	477,281.	99,429
	Occupancy	10,840,781.	10,063,697.	349,321.	427,763
7 8	Travel Payments of travel or entertainment expenses	10,010,701.	10,000,007.	313,321.	127,700
0	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	6,282,066.	4,621,088.	620,715.	1,040,263
9		6,640,535.	6,613,317.	27,218.	2,010,200
1	Payments to affiliates	0,020,000.	5,010,017.	27,220	
	Depreciation, depletion, and amortization	16,467,771.	14,414,272.	2,053,499.	
2 3		3,710,770.	1,228,698.	2,443,269.	38,80
ა 4	Other expenses. Itemize expenses not covered	5,720,770.	_,220,050.	-,110,200.	20,000
•	above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)	7 000 007	7 000 007		
a	BOOKS AND SUBSCRIPTIONS ETNANCIAL EPPS	7,999,087.	7,999,087.	2 270 712	62.46
b	FINANCIAL FEES	3,693,966.	1,359,793.	2,270,712.	63,46
С.					
d					
_е _	All other expenses	727 040 022	6E1 1E0 10F	FC 016 700	10 070 04
5	Total functional expenses. Add lines 1 through 24e	727,948,933.	651,159,197.	56,916,790.	19,872,94
:6	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

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Form 990 (2019) Part X Balance Sheet

Par	τX	Balance Sneet					
		Check if Schedule O contains a response or n	ote to any	/ line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			77,989,136.	1	76,711,10
	2	Savings and temporary cash investments			12,561,080.	2	10,410,92
	3			43,866,911.	3	40,835,12	
	4	Accounts receivable, net			31,075,230.	4	34,280,69
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub	stantial c	ontributor, or 35%			
		controlled entity or family member of any of th	ese perso	ons		5	
	6	Loans and other receivables from other disqua	alified pers	sons (as defined			
		under section 4958(f)(1)), and persons describ	ed in sect	ion 4958(c)(3)(B)		6	
ွှ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			230,094.	8	174,81
₹	9	B			8,517,911.	9	9,882,56
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	. 10a	997,618,149.			
	b	Less: accumulated depreciation	. 10b	233,427,993.	671,025,728.	10c	764,190,15
	11	Investments - publicly traded securities			767,901,114.	11	659,431,87
	12	Investments - other securities. See Part IV, line	11		234,695,275.	12	235,857,05
	13	Investments - program-related. See Part IV, line	e 11		11,451,547.	13	9,216,44
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			11,319,565.	15	10,089,38
	16	Total assets. Add lines 1 through 15 (must ed	ual line 3	3)	1,870,633,591.	16	1,851,080,13
	17	Accounts payable and accrued expenses		82,545,097.	17	91,391,27	
	18	Grants payable				18	
	19	Deferred revenue			28,275,126.	19	33,593,39
	20	Tax-exempt bond liabilities			219,489,186.	20	210,889,89
	21	Escrow or custodial account liability. Complete	e Part IV o	of Schedule D	3,919,567.	21	3,401,86
နွ	22	Loans and other payables to any current or for	mer office	er, director,			
≝		trustee, key employee, creator or founder, sub	stantial c	ontributor, or 35%			
Liabilities		controlled entity or family member of any of the		22			
-	23	Secured mortgages and notes payable to unre			24,535,000.	23	24,535,00
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, p					
		parties, and other liabilities not included on lin	es 17-24).	Complete Part X			
		of Schedule D	23,966,704.	25	20,048,183		
_	26				382,730,680.	26	383,859,61
,,		Organizations that follow FASB ASC 958, cl	neck here	• • X			
ĕ		and complete lines 27, 28, 32, and 33.					
<u>a</u>	27			<u> </u>	861,931,874.	27	853,188,17
n n	28	Net assets with donor restrictions			625,971,037.	28	614,032,340
<u> </u>		Organizations that do not follow FASB ASC	958, che	ck here 🕨 📖			
<u> </u>		and complete lines 29 through 33.					
13 C	29	Capital stock or trust principal, or current fund				29	
Sse	30	Paid-in or capital surplus, or land, building, or				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated			4 400 000 000	31	4 46
<u>8</u>	32	Total net assets or fund balances			1,487,902,911.	32	1,467,220,523
	33	Total liabilities and net assets/fund balances			1,870,633,591.	33	1,851,080,134

Part XI Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI 1 Total revenue (must equal Part VIII, column (A), line 12) 2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses. Subtract line 2 from line 1 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 7 Prior period adjustments 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain on Schedule O) 9 Other changes in net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 1,467,220	age
1 Total revenue (must equal Part VIII, column (A), line 12) 2 Total expenses (must equal Part IX, column (A), line 25) 2 Revenue less expenses. Subtract line 2 from line 1 3 -11, 20; 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain on Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 1,467,226	Х
Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain on Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 1,467,220	
Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain on Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 1,467,220	092.
Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain on Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 1,467,220	
4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 7 Prior period adjustments 8 Other changes in net assets or fund balances (explain on Schedule O) 9 Other changes in net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 1,467,220	
5 -8,869 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 on Schedule O) 9 -614 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 1,467,220	
6 Donated services and use of facilities 6 Investment expenses 7 Prior period adjustments 8 Other changes in net assets or fund balances (explain on Schedule O) 9 Other changes in net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 1,467,220	
7 Investment expenses 7 8 Prior period adjustments 8 9 Other changes in net assets or fund balances (explain on Schedule O) 9 -614 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 1,467,220	,
Prior period adjustments Other changes in net assets or fund balances (explain on Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 1,467,220	
9 Other changes in net assets or fund balances (explain on Schedule O) 9 -614 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 1,467,220	
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 1,467,220	435
column (B)) 10 1,467,220	, 155.
	523
Part XII Financial Statements and Reporting	, 323.
Check if Schedule O contains a response or note to any line in this Part XII	х
Ye.	
1 Accounting method used to prepare the Form 990: Cash X Accrual Other	110
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.	
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	l x
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a	
separate basis, consolidated basis, or both:	
Separate basis Consolidated basis Both consolidated and separate basis	
b Were the organization's financial statements audited by an independent accountant?	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis,	
consolidated basis, or both:	
X Separate basis Consolidated basis Both consolidated and separate basis	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,	
review, or compilation of its financial statements and selection of an independent accountant?	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit	
Act and OMB Circular A-133? 3a X	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit	+-
or audits, explain why on Schedule O and describe any steps taken to undergo such audits	
Form 99	(2019)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization **Employer identification number** UNIVERSITY OF DENVER 84-0404231 Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). Х 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.) 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 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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. 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 II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other n your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions))

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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	31,908,981.	33,233,518.	43,978,340.	47,281,150.	27,505,454.	183,907,443.
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	31,908,981.	33,233,518.	43,978,340.	47,281,150.	27,505,454.	183,907,443.
	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)						23,638,536.
6	Public support. Subtract line 5 from line 4.						160,268,907.
	ction B. Total Support						, ,
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 4	31,908,981.	33,233,518.	43,978,340.	47,281,150.	27,505,454.	183,907,443.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	8,177,293.	3,895,363.	5,238,662.	7,839,358.	7,856,062.	33,006,738.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	2,497,494.	2,527,551.	2,900,515.	3,936,907.	3,025,150.	14,887,617.
11	Total support. Add lines 7 through 10						231,801,798.
12	Gross receipts from related activities,	etc. (see instruction	ns)			12 2	,974,485,864.
13	First five years. If the Form 990 is for	•	,				
	organization, check this box and stop	here			-		
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2019 (li	ine 6, column (f) di	vided by line 11, co	olumn (f))		14	69.14 %
15	Public support percentage from 2018	Schedule A, Part	II, line 14			15	67.94 %
16a	33 1/3% support test - 2019. If the c	organization did no	t check the box or	line 13, and line 1	4 is 33 1/3% or m	ore, check this box	x and
	stop here. The organization qualifies	as a publicly suppo	orted organization				X
b	33 1/3% support test - 2018. If the o	organization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	is box
	and stop here. The organization quali	ifies as a publicly s	upported organiza	tion			>
17a	10% -facts-and-circumstances test	- 2019. If the org	anization did not c	heck a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac-	ts-and-circumstand	es" test, check thi	s box and stop h	ere. Explain in Pa	rt VI how the orgar	nization
	meets the "facts-and-circumstances"	test. The organizat	ion qualifies as a p	oublicly supported	organization		
b	10% -facts-and-circumstances test	- 2018. If the org	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets th	ne "facts-and-circur	nstances" test, ch	eck this box and	stop here. Explair	in Part VI how the	e
	organization meets the "facts-and-circ	umstances" test.	Γhe organization qι	ualifies as a public	ly supported orgar	nization	>
18	Private foundation. If the organizatio	n did not check a l	oox on line 13, 16a	ı, 16b, 17a, or 17b	, check this box a	nd see instructions	· >
							or 000 E7\ 0010

Schedule A (Form 990 or 990-EZ) 2019

Page 3

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	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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 business 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						
ı	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						
8 Se	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6						
ŀ	Unrelated business taxable income (less section 511 taxes) from businesses						
	Add lines 10a and 10b 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.)				1		<u> </u>
14	First five years. If the Form 990 is for	ŭ		•	•	. , . ,	. —
<u>C -</u>	check this box and stop here	- C					>
	ction C. Computation of Publi					T T	
15	Public support percentage for 2019 (I		•	column (f))		15	<u>%</u>
16	Public support percentage from 2018					16	<u>%</u>
_	ction D. Computation of Inves			40 1 (**)		T 4= T	
	Investment income percentage for 20					17	<u>%</u>
18				and the second the second the second		18	<u>%</u>
19	a 33 1/3% support tests - 2019. If the						
ı	more than 33 1/3%, check this box ar 33 1/3% support tests - 2018. If the	organization did r	not check a box on	line 14 or line 19a	a, and line 16 is mo	ore than 33 1/3%, a	and
	line 18 is not more than 33 1/3%, che	ck this box and st	t op here. The orga	nization qualifies a	as a publicly suppo	orted organization	▶□
20	Private foundation If the organization	n did not chack a	boy on line 14, 10	a or 10h chack th	nic boy and soo in	structions	▶ 7

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Schedule A (Form 990 or 990-EZ) 2019

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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")? |f "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 (as 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		
_		
За		
OI:		
3b		
30		
3c		
4a		
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4b		
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7		
8		
9a		
9b		
9c		
10a		
40.		
10b		

Page 5

Pa	rt IV 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		
С	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,			
	supervised, or controlled the supporting organization.	2		
Sec	stion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		100	110
•	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			
		1		
Sec	the supported organization(s). tion D. All Type III Supporting Organizations	<u> </u>		
	uon 217 m. type m. cupper ung ciguminunci		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		163	NO
•	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	4		
0	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			
800	supported organizations played in this regard.	3		
	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 year (see instructions)	•		
a	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 inst	ructions)		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	, , , , , , , , , , , , , , , , , , , ,			
	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		

Sche	edule A (Form 990 or 990-EZ) 2019 UNIVERSITY OF DENVER			84-0404231	Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Organi	zations		
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on N	lov. 20, 1970 (explain in	Part VI). See instr	uctions. A
	other Type III non-functionally integrated supporting organizations must co	mplete Sec	tions A through E.		
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current (optiona	
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 (optiona	
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			
c	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 Y	ear
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-functional	y integrate	d Type III supporting org	anization (see	
	instructions).				

Schedule A (Form 990 or 990-EZ) 2019

Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	inizations _(continued)	
Secti	on D - Distributions		Current Year	
1	Amounts paid to supported organizations to accomplish exer			
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations	S	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	e organization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
			110 2010	Amount for 2010
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
<u>a</u>	From 2014			
b	From 2015			
c	From 2016			
d	From 2017			
<u>e</u>	From 2018			
f	Total of lines 3a through e			
<u>g</u>	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i_	Carryover from 2014 not applied (see instructions)			
<u>j_</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2015			
	Excess from 2016			
с	Excess from 2017			
d	Excess from 2018			
	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

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

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

UN	IVERSITY OF DENVER	84-0404231				
Organization type (check of	Organization type (check one):					
Filers of:	Section:					
Form 990 or 990-EZ	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					
, ,	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e. See instructions.				
Geriei di Tiule						
	For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special Rules						
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.					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions $exclusively$ for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an $exclusively$ religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \ \rightarrow \frac{\text{\$\sigma}}{\text{\$\sigma}} \righta						
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 sertify 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.

Name of organization

Employer identification number

UNIVERSITY OF DENVER

84-0404231

Part I	Contributors (see instructions). Use duplicate copies of Part I if addi	itional space is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
1		Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) (d)
No. 2	Name, address, and ZIP + 4	\$ 2,813,772. Secondary Payroll (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions 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	Total contributions Type of contribution Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
5		Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) (d)
No. 6	Name, address, and ZIP + 4	Total contributions Type of contribution Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

UNIVERSITY OF DENVER

84-0404231

Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$	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
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Hamo, address, and En 1 1	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.

Name of organization

Employer identification number

UNIVERSITY OF DENVER

84-0404231

Part II	Noticasti Property (see instructions). Use duplicate copies of Part	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
		_	
		\$	

Name of or	ganization		Employer identification number
UNIVERSI'	TY OF DENVER		84-0404231
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional) through (e) and the following line er charitable, etc., contributions of \$1,000 or	section 501(c)(7), (8), or (10) that total more than \$1,000 for the year entry. For organizations or less for the year. (Enter this info. once.)
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gi	ift
_	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gi	ift Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gi	ift Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gi	 ift
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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	ions: Complete Part III.			
Nan	ne of organization			Em	oloyer identification number
	UNIVERSITY				84-0404231
Pa	art I-A Complete if the org	anization is exempt und	er section 501(c)	or is a section 527 o	rganization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures			\$0.
Pa	art I-B Complete if the org	anization is exempt und	er section 501(c)(3).	
1	Enter the amount of any excise tax	incurred by the organization unc	ler section 4955	>	\$ 0.
	Enter the amount of any excise tax				
	If the organization incurred a section				
4a	a Was a correction made?				Yes No
	If "Yes." describe in Part IV.				
Pa	art I-C Complete if the org	anization is exempt und	er section 501(c),	except section 501(c)(3).
3	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 emmade payments. For each organization tributions received that were propolitical action committee (PAC). If	ization's funds contributed to ot . Add lines 1 and 2. Enter here a	her organizations for so and on Form 1120-POL N) of all section 527 po d from the filing organia a separate political org	ection 527 , , , , , , , , , , , , , , , , , ,	\$ Yes No ch the filing organization ne amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2019

LHA

932041 11-26-19

	t II-A Complete if the org section 501(h)).		exempt under sectio	n 501(c)(3) and file	d Form 5768 (el	ection under
	if the filing organiza expenses, and shar	e of excess lobb	an affiliated group (and list i lying expenditures). x A and "limited control" pr		group member's nam	e, address, EIN,
<u> </u>	Limi	ts on Lobbying			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influ	uence public opi	nion (grassroots lobbying)			
b	b Total lobbying expenditures to influence a legislative body (direct lobbying)					
С	c Total lobbying expenditures (add lines 1a and 1b)					
	Other exempt purpose expenditure					
	Total exempt purpose expenditure					
f	f Lobbying nontaxable amount. Enter the amount from the following table in both columns.					
}	If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is:					
}	Not over \$500,000 20% of the amount on line 1e.					
	Over \$500,000 but not over \$1,000		00,000 plus 15% of the exc			
ŀ	Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000.					
ŀ	Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000. Over \$17,000,000 \$1,000,000.					
L	Over \$17,000,000					
	Grassroots nontaxable amount (en	ter 25% of line 1	f)			
_	Subtract line 1g from line 1a. If zero					
	Subtract line 1f from line 1c. If zero					
	If there is an amount other than zer	•				•
•	reporting section 4911 tax for this		· · · · · · · · ·			Yes No
	(Some organizations th	nat made a sec	ar Averaging Period Unde ion 501(h) election do not separate instructions for li	have to complete all c	of the five columns b	elow.
		Lobbying	Expenditures During 4-Ye	ar Averaging Period		
	Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
	Lobbying nontaxable amount					
В	Lobbying ceiling amount (150% of line 2a, column(e))					
С	Total lobbying expenditures					
	· otal loop mig on portained					
d	Grassroots nontaxable amount					
е	Grassroots ceiling amount					
	(150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2019

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(2	a)	(b))
of the lobbying activity.	Yes	No	Amo	
During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
a Volunteers?		х		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Х		
c Media advertisements?		Х		
d Mailings to members, legislators, or the public?		Х		
e Publications, or published or broadcast statements?		Х		
f Grants to other organizations for lobbying purposes?		Х		
g Direct contact with legislators, their staffs, government officials, or a legislative body?		Х		
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х		
i Other activities?	Х			29,295.
j Total. Add lines 1c through 1i				29,295.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X		
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), section	501(c)(o), or sec	tion	
501(c)(6).				
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?				
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N		•		3. is
answered "Yes."		` ,	•	•
Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
expenses for which the section 527(f) tax was paid).				
a Current year		2a		
b Carryover from last year				
c Total		I .		
0 4		۱ ۵		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess				
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political				
expenditure next year?		4		
5 Taxable amount of lobbying and political expenditures (see instructions)		5		
Part IV Supplemental Information		•		
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group lis	st); Part II-	A, lines 1 a	nd 2 (see	
instructions); and Part II-B, line 1. Also, complete this part for any additional information.	,,	,	,	
PART II-B, LINE 1, LOBBYING ACTIVITIES:				
THE UNIVERSITY PAYS DUES TO INDEPENDENT HIGHER EDUCATION OF COLORADO				
ALONG WITH TWO PRIVATE HIGHER EDUCATION INSTITUTIONS IN COLORADO. THIS				
ORGANIZATION PROVIDES MOSTLY LEGISLATIVE INFORMATION TO THE COLORADO				
INSTITUTIONS AND AT TIMES SEEKS TO INFLUENCE LEGISLATORS FOR THE				
BENEFIT OF PRIVATE HIGHER EDUCATION.				

Schedule C (Form 990 or 990-EZ) 2019

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

UNIVERSITY OF DENVER

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

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 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)	5,525,000.	
4	Aggregate value at end of year	3,343,894.	
5	Did the organization inform all donors and donor advisors in		ed funds
	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	dvisors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpose of	conferring
Par	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, F	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that appl <u>y).</u>	
	Preservation of land for public use (for example, recrea	tion or education) Preservation of	a historically important land area
	Protection of natural habitat	Preservation of	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
	Total number of conservation easements		
	Number of conservation easements on a certified historic stru		
d	Number of conservation easements included in (c) acquired a		
_	listed in the National Register		
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the	organization during the tax
	year		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the per		Yes No
6	violations, and enforcement of the conservation easements it Staff and volunteer hours devoted to monitoring, inspecting,		
U	Starr and volunteer riours devoted to morntoning, inspecting,	rialiding of violations, and emorcing cons	servation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservat	tion easements during the year
•	► \$	and children and children g consolvat	tion oddernente daring the year
8	Does each conservation easement reported on line 2(d) abov	re satisfy the requirements of section 170/	h)(4)(B)(i)
_	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation		
	balance sheet, and include, if applicable, the text of the footr	•	
	organization's accounting for conservation easements.	ŭ	
Par	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Ot	her Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue statement a	nd balance sheet works
	of art, historical treasures, or other similar assets held for public	olic exhibition, education, or research in fu	rtherance of public
	service, provide in Part XIII the text of the footnote to its finar	ncial statements that describes these item	S.
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenue statement and b	palance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furth	nerance of public 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		> \$0.
2	If the organization received or held works of art, historical tre-	asures, or other similar assets for financial	l gain, provide
	the following amounts required to be reported under FASB A	-	
а	Revenue included on Form 990, Part VIII, line 1		
	Assets included in Form 990, Part X		
LHA	For Paperwork Reduction Act Notice, see the Instructions	s for Form 990.	Schedule D (Form 990) 2019

n19	UNIVERSITY	OF	DENVE

Sche	dule D (Form 990) 2019 UNIVERSITY					84-040		Pa	age 2
Par	t III Organizations Maintaining Co	ollections of Art	, Historical Tre	asures, or O	ther Sim	ilar Assets	(contin	nued)	
3	Using the organization's acquisition, accession	n, and other records	s, check any of the f	ollowing that ma	ke significa	int use of its	·	,	
	collection items (check all that apply):								
а	X Public exhibition	d	Loan or excl	nange program					
b	X Scholarly research	е	Other						
С	X Preservation for future generations								
4	Provide a description of the organization's co	llections and explain	how they further th	e organization's	exempt pu	rpose in Part	XIII.		
5	During the year, did the organization solicit or								
	to be sold to raise funds rather than to be ma						Yes	X	No
Par	t IV Escrow and Custodial Arrang								,
	reported an amount on Form 990, Part		g			,,	,		
1a	Is the organization an agent, trustee, custodia		ary for contributions	or other assets	not include	ed			
	on Form 990, Part X?		•			_	Yes	Х	No
h	If "Yes," explain the arrangement in Part XIII a						_ 103		_ 110
b	ii res, explain the arrangement iiii art Alli a	ind complete the ion	owing table.				Amount		
c Beginning balance 1c					Amount				
						d			
	Additions during the year					e			
•	Distributions during the year					lf			
0-	Ending balance				·····	X	7 ٧	$\overline{}$	T N I =
	Did the organization include an amount on Fo						_	X	│ No
Par	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds. Complete if							Λ	
ı uı	Endowment Funds: Complete ii	1							la a a la
	<u></u>	(a) Current year	(b) Prior year	(c) Two years ba		ree years back			
	Beginning of year balance	814,517,680.	789,009,879.	733,845,19		3,519,105.		398,	
b	Contributions	12,655,934.	27,320,176.			5,972,426.		770,	
С	Net investment earnings, gains, and losses	16,924,195.	38,610,281.			0,697,217.		244,	
	Grants or scholarships	23,138,434.	23,760,044.	21,647,70	15. 18	3,316,657.	11,	347,	587.
е	Other expenditures for facilities								
	and programs	18,956,942.	13,391,749.			0,090,822.		321,	
f	Administrative expenses	3,703,951.	3,270,863.			2,936,075.		736,	
g	End of year balance	798,298,482.	814,517,680.	789,009,8	79. 733	3,845,194.	628,	519,	105.
2	Provide the estimated percentage of the curre	•	(line 1g, column (a)) held as:					
а	Board designated or quasi-endowment	30.72	_%						
b	Permanent endowment 47.58	%							
С	Term endowment ▶	6							
	The percentages on lines 2a, 2b, and 2c should	ıld equal 100%.							
За	Are there endowment funds not in the posses	sion of the organiza	tion that are held an	d administered f	or the orga	nization	-		
	by:							Yes	No
	(i) Unrelated organizations						3a(i)	Х	
	(ii) Related organizations						3a(ii)		Х
b	If "Yes" on line 3a(ii), are the related organizat	ions listed as require	ed on Schedule R?				3b		
4	Describe in Part XIII the intended uses of the	organization's endov	vment funds.						
Par	t VI Land, Buildings, and Equipme	ent.							
	Complete if the organization answered	"Yes" on Form 990	, Part IV, line 11a. S	ee Form 990, Pa	rt X, line 10).			
	Description of property	(a) Cost or of			(c) Accumu		(d) Bool	k value	<u>——</u>
		basis (investm	• •		depreciat		. ,		
1a	Land		44	,495,849.			44,	495,	849.
	Buildings			,809,801.	173,68	31,927.		127,	
	Leasehold improvements				,	-			
	Equipment	I	62	,717,294.	59 74	16,066.	2	971,	228.
	Other			,595,205.	,,,	,		595,	
	. Add lines 1a through 1e. (Column (d) must ed							190,	
rota	- Add illes Ta tillough Te. (Column (d) must ed	juai Form 990, Part)	k, column (B), line 10	JC.)		Schedule			

UNIVERSITY OF DENVER

Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-o	f-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other	005 605 054		
(A) ALTERNATIVE INVESTMENTS	235,627,051.	END-OF-YEAR MARKET VALUE	
(B) INTERNATIONAL BOND HOLDING	230,000.	END-OF-YEAR MARKET VALUE	
(C)			
(D)			
(E)			
(F)			
(G)			
(H)	225 057 051		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶ Part VIII Investments - Program Related.	235,857,051.		
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-o	f-year market value
<u>(1)</u>			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1d. 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 Part X Other Liabilities.	e 15.)	>	
Complete if the organization answered "Yes"	on Form 990. Part IV line 1	1e or 11f. See Form 990. Part X. line 25	
1. (a) Description of liability	5 Sim 555, Fait IV, III 6	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	(b) Book value
(1) Federal income taxes			(-)
(2) ANNUITY AND LIFE INTEREST OBLIGATIONS			9,451,400.
(3) FEDERAL PERKINS LOAN PROGRAM - REFUND.	ABLE		10,596,781.
(4)			,,,,,,,,,
(5)			
(6)		+	
		+	
<u>(7)</u>			
(8)			
(9)	- 05 \		20,048,181.
 Total. (Column (b) must equal Form 990, Part X, col. (B) line Liability for uncertain tax positions. In Part XIII, provide 		the organization's financial statements that	· · · · · · · · · · · · · · · · · · ·

Schedule D (Form 990) 2019

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				105 070 110
				1	496,879,449.
	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
	Net unrealized gains (losses) on investments	2a	-8,865,112.		
	Donated services and use of facilities	2b			
c l	Recoveries of prior year grants	2c			
d (Other (Describe in Part XIII.)	2d	610,178.		
	Add lines 2a through 2d			2e	-8,254,934.
3 3	Subtract line 2e from line 1			3	505,134,383.
4 /	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a I	nvestment expenses not included on Form 990, Part VIII, line 7b	4a	3,703,951.		
b (Other (Describe in Part XIII.)	4b	207,907,758.		
c /	Add lines 4a and 4b			4c	211,611,709.
5	otal revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) XII Reconciliation of Expenses per Audited Financial Stateme			5	716,746,092.
Part		nts With	Expenses per F	leturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				517 561 937
	otal expenses and losses per audited financial statements			1	517,561,837.
	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 - 1			
	Oonated services and use of facilities	2a			
	Prior year adjustments	2b			
	Other losses	2c	1 004 613		
	Other (Describe in Part XIII.)		1,224,613.		1 004 612
	Add lines 2a through 2d			2e	1,224,613.
	Subtract line 2e from line 1			3	516,337,224.
	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1			
	nvestment expenses not included on Form 990, Part VIII, line 7b		3,703,951.		
	Other (Describe in Part XIII.)	4b	207,907,758.		
	Add lines 4a and 4b			4c	211,611,709.
5	otal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	727,948,933.
	XIII Supplemental Information.				
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I'			; Part X,	line 2; Part XI,
lines 2	d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addit	ional inforr	nation.		
PART	III, LINE 1A:				
	·				
DONAT	ED WORKS OF ART ARE CONSIDERED COLLECTIONS UNDER THE UNIVERSI	TY'S			
POLIC	Y. COLLECTIONS HELD FOR PUBLIC EXHIBITION AND EDUCATION IN				
איים ווא	ERANCE OF PUBLIC SERVICE RATHER THAN FINANCIAL GAIN ARE NOT R	ECORDED			
	MAINED OF TODDIE DERVICE MITHER THAN THANKETHE ONLY IND HOT R	веоприр			
IN TH	E STATEMENTS OF FINANCIAL POSITION.				
PART	III, LINE 4:				
THE U	NIVERSITY ACQUIRES AND MANAGES A WIDE VARIETY OF WORKS OF ART	. THESE			
ARE T	NTENDED TO ENHANCE THE ACADEMIC AND LIFELONG LEARNING EXPERIE	NCES OF			
	THE SECOND STATE OF THE SECOND				
STUDE	NTS, FACULTY, STAFF, AND THE GENERAL PUBLIC. THESE OBJECTS BR	ING THE			
UNIVE	RSITY AND COMMUNITY AUDIENCES TOGETHER THROUGH SHARED EXPERIE	NCES			
WITH	ART AND POSSESS THE POTENTIAL TO EDUCATE, ENLIGHTEN AND INSPI	RE. THE			

Schedule D (Form 990) 2019

Schedule D (Form 990) 2019 UNIVERSITY OF DENVER		84-0404231	Page 5
Part XIII Supplemental Information (continued)			
THE UNIVERSITY EVALUATES ITS TAX POSITION IN ACCORDANCE WITH THE	3		
PROVISIONS OF FASB ASC TOPIC 740-10, INCOME TAXES (FORMERLY, FAS	SB		
INTERPRETATION NO. 48). FASB ASC TOPIC 740-10 CLARIFIES THE ACCO	DUNTING FOR		
UNCERTAINTY IN INCOME TAX RECOGNIZED IN AN ENTITY'S FINANCIAL ST	PATEMENTS.		
FASB ASC TOPIC 740-10 REQUIRES ENTITIES TO DETERMINE WHETHER IT	IS MORE		
LIKELY THAN NOT THAT A TAX POSITION WILL BE SUSTAINED UPON EXAM	INATION BY		
THE APPROPRIATE TAXING AUTHORITIES BEFORE ANY PART OF THE BENEF	IT CAN BE		
RECORDED IN THE FINANCIAL STATEMENTS. IT ALSO PROVIDES GUIDANCE	ON THE		
RECOGNITION, MEASUREMENT, AND CLASSIFICATION OF INCOME TAX UNCER	RTAINTIES,		
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	E TAX		
POSITIONS AS OF JUNE 30, 2020.			
PART XI, LINE 2D - OTHER ADJUSTMENTS:			
SPECIAL EVENT EXPENSES	562,566.		
RENTAL EXPENSES	662,047.		
ACTUARIAL ADJUSTMENT	-614,435.		
TOTAL TO SCHEDULE D, PART XI, LINE 2D	610,178.		
PART XI, LINE 4B - OTHER ADJUSTMENTS:			
SCHOLARSHIPS 2	195,456,126.		
GRANTS TO ORGS	12,451,632.		
TOTAL TO SCHEDULE D, PART XI, LINE 4B	207,907,758.		
PART XII, LINE 2D - OTHER ADJUSTMENTS:			
SPECIAL EVENT EXPENSES	562,566.		
RENTAL EXPENSES	662,047.		
		Schedule D (Form	990) 2019

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

2019

Open to Public Inspection

Name of the organization
UNIVERSITY OF DENVER

Building

84-0404231

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

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

Schedule E (Form 990 or 990-EZ) 2019

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.

2019
Open to Public Inspection

Name of the organization

UNIVERSITY OF DENVER

Employer identification number

84-0404231

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, X Yes the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 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.) (b) Number of (e) If activity listed in (d) (c) Number of (d) Activities conducted in the region (f) Total (a) Region employees, expenditures offices (by type) (such as, fundraising, prois a program service, agents, and for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region CENTRAL AMERICA & CARIBBEAN 0 0 GRANTS 148,251. CENTRAL AMERICA & CARIBBEAN 0 0 INVESTMENTS 208,761,793. CENTRAL AMERICA & ACADEMIC SUPPORT AND STUDENT SERVICES CARIBBEAN 0 0 PROGRAM SERVICES 54,790. CENTRAL AMERICA & CARTBREAN Λ PROGRAM SERVICES TNSTRUCTION 232,088. 0 CENTRAL AMERICA & RESEARCH & PUBLIC 26,375. CARIBBEAN 0 0 PROGRAM SERVICES SERVICE EAST ASTA & THE PACIFIC 0 0 GRANTS 5,126,195. EAST ASIA & THE ACADEMIC SUPPORT AND PACIFIC 0 0 PROGRAM SERVICES STUDENT SERVICES 412,433. EAST ASIA & THE INSTRUCTION PACTETO 0 0 PROGRAM SERVICES 2,344,393. 0 0 217,106,318. 3 a Subtotal **b** Total from continuation 0 0 23,317,235. sheets to Part I Totals (add lines 3a

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

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Schedule F (Form 990) 2019

240,423,553.

and 3b)

Schedule F (Form 990) UNIVERSITY OF DENVER 84-0404231 Page

Schedule F (Form 990) UNIVERSITY OF DENVER 84-0404231 Page 1							
Part I Continuation	n of Activities	s per Regior	1. (Schedule F (Form 990), Part I, line	3)			
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region		
EAST ASIA & THE	0	0	PROGRAM SERVICES	RESEARCH & PUBLIC SERVICE	16,961.		
EUROPE	0	0	GRANTS		2,508,930.		
EUROPE	0	0	INVESTMENTS		3,377,000.		
EUROPE	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT AND STUDENT SERVICES	1,173,679.		
EUROPE	0	0	PROGRAM SERVICES	INSTITUTIONAL SUPPORT	39 037		
BOROFE		0	FROGRAM SERVICES	INSTITUTIONAL SUFFORT	38,937.		
EUROPE	0	0	PROGRAM SERVICES	INSTRUCTION	7,444,613.		
EUROPE	0	0	PROGRAM SERVICES	RESEARCH & PUBLIC SERVICE	130,332.		
MIDDLE EAST & NORTH AFRICA	0	0	GRANTS		840,867.		
MIDDLE EAST & NORTH	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT AND	45,386.		
MIDDLE EAST & NORTH			THE SERVICES	22.11	25,500.		
AFRICA	0	0	PROGRAM SERVICES	INSTITUTIONAL SUPPORT	2,623.		
Totals							

Schedule F (Form 990) UNIVERSITY OF DENVER 84-0404231 Page 1

Schedule F (Form 990)	UNIVERSITY O			84-0404	231 Page
Part I Continuatio	n of Activitie	s per Region	(Schedule F (Form 990), Part I, line 3	3)	
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
MIDDLE EAST & NORTH					
AFRICA	0	0	PROGRAM SERVICES	INSTRUCTION	392,465.
MIDDLE EAST & NORTH				RESEARCH & PUBLIC	
AFRICA	0	0	PROGRAM SERVICES	SERVICE	22,723.
NODWIL AMEDICA	0	0	GD ANTIIC		1 054 006
NORTH AMERICA		0	GRANTS		1,854,806
				Laidenta audoode ind	
NORTH AMERICA	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT AND STUDENT SERVICES	441,288
NORTH AMERICA	0	0	PROGRAM SERVICES	INSTITUTIONAL SUPPORT	51,828
NORTH AMERICA	0	0	PROGRAM SERVICES	INSTRUCTION	133,379
NODEL ANDREA			DDGGDLW GEDWEGEG	RESEARCH & PUBLIC	60 730
NORTH AMERICA	0	0	PROGRAM SERVICES	SERVICE	69,739
RUSSIA AND NEIGHBORING STATES	0	0	GRANTS		205.078
RUSSIA AND				ACADEMIC SUPPORT AND	
NEIGHBORING STATES	0	0	PROGRAM SERVICES	STUDENT SERVICES	16,874
RUSSIA AND					
NEIGHBORING STATES	0	0	PROGRAM SERVICES	INSTRUCTION	65,197
Totals					

Schedule F (Form 990) UNIVERSITY OF DENVER 84-0404231 Page

Schedule F (Form 990) UNIVERSITY OF DENVER 84-0404231 Pa											
Part I Continuation											
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region						
SOUTH AMERICA	0	0	GRANTS		546,409.						
SOUTH AMERICA	0	0	PROGRAM SERVICES	INSTITUTIONAL SUPPORT	1,291.						
SOUTH AMERICA	0	0	PROGRAM SERVICES	INSTRUCTION	685,206.						
SOUTH AMERICA	0	0	PROGRAM SERVICES	RESEARCH & PUBLIC SERVICE	7,304.						
SOUTH ASIA	0	0	GRANTS		1,132,889.						
SOUTH ASIA	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT AND STUDENT SERVICES	71,926.						
SOUTH ASIA	0	0	PROGRAM SERVICES	INSTRUCTION	99,819.						
SOUTH ASIA	0	0	PROGRAM SERVICES	RESEARCH & PUBLIC SERVICE	7,001.						
SUB-SAHARAN AFRICA	0	0	GRANTS		1,034,817.						
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT AND STUDENT SERVICES	278,816.						
Totals											

	UNIVERSITY O			84-0404231	Page 1				
Part I Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)									
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region				
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	INSTRUCTION	458,058.				
				RESEARCH & PUBLIC					
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	SERVICE	12,089.				
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	INSTITUTIONAL SUPPORT	5,665.				
				ACADEMIC SUPPORT AND					
SOUTH AMERICA	0	0	PROGRAM SERVICES	STUDENT SERVICES	84,714.				
EAST ASIA & THE	0	0	PROGRAM SERVICES	INSTITUTIONAL SUPPORT	58,526.				
					, ,				
Totals					23,317,235.				

UNIVERSITY OF DENVER

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)	(c) Region	(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)
			recognized as charities by the					
3 Enter total number of	other organizations of	risei rias provided a sect or entities	tion 501(c)(3) equivalency lette			>		

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.

Schedule F (Form 990) 2019

dditional space is needed	l					
(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			DIRECT APPLICATION TO			
AFRICA	35	1,034,817.	STUDENT ACCOUNT	0.	N/A	N/A
CENTRAL AMERICA	8			0	N/A	N/A
IND THE CHILDREN	<u> </u>	140,231.	DIODENT RECOUNT	•••	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	17/21
EAST ASIA AND THE						
PACIFIC	299	5,126,195.	STUDENT ACCOUNT	0.	N/A	N/A
EUROPE	61			0.	N/A	N/A
MIDDLE EAST AND NORTH AFRICA	37			0.	N/A	N/A
NORTH AMERICA	50	1,854,806.	STUDENT ACCOUNT	0.	N/A	N/A
RUSSIA AND NEIGHBORING			DIRECT APPLICATION TO			
STATES	6	205,078.	STUDENT ACCOUNT	0.	N/A	N/A
SOUTH AMERICA	22			0.	N/A	N/A
SOUTH ASIA	47			0.	N/A	N/A
	(b) Region SUB-SAHARAN AFRICA CENTRAL AMERICA AND THE CARIBBEAN EAST ASIA AND THE PACIFIC EUROPE MIDDLE EAST AND NORTH AFRICA RUSSIA AND NEIGHBORING STATES SOUTH AMERICA	SUB-SAHARAN AFRICA CENTRAL AMERICA AND THE CARIBBEAN EAST ASIA AND THE PACIFIC EUROPE 61 MIDDLE EAST AND NORTH AFRICA NORTH AMERICA TO NORTH AMERICA SOUTH AMERICA SOUTH AMERICA 22	(b) Region (c) Number of recipients (d) Amount of cash grant SUB-SAHARAN AFRICA 35 1,034,817. CENTRAL AMERICA 8 148,251. EAST ASIA AND THE PACIFIC 299 5,126,195. EUROPE 61 2,508,930. MIDDLE EAST AND NORTH AFRICA 37 840,867. NORTH AMERICA 50 1,854,806. RUSSIA AND NEIGHBORING STATES 6 205,078. SOUTH AMERICA 22 546,409.	(b) Region (c) Number of recipients (d) Amount of cash disbursement SUB-SAHARAN AFRICA 35 1,034,817. STUDENT ACCOUNT CENTRAL AMERICA AND THE CARIBBEAN EAST ASIA AND THE PACIFIC 299 5,126,195. STUDENT ACCOUNT DIRECT APPLICATION TO SOUTH AMERICA 22 546,409. STUDENT ACCOUNT DIRECT APPLICATION TO	(c) Number of recipients (d) Amount of cash grant (e) Manner of cash disbursement (f) Amount of noncash assistance SUB-SAHARAN AFRICA 35 1,034,817. STUDENT ACCOUNT 0. CENTRAL AMERICA 8 148,251. STUDENT ACCOUNT 0. EAST ASIA AND THE 299 5,126,195. STUDENT ACCOUNT 0. EAST ASIA AND THE 299 5,126,195. STUDENT ACCOUNT 0. DIRECT APPLICATION TO 0. MIDDLE EAST AND NORTH AFRICA 37 840,867. STUDENT ACCOUNT 0. MIDDLE EAST AND NORTH AFRICA 50 1,854,806. STUDENT ACCOUNT 0. RUSSIA AND NETHERICA 50 1,854,806. STUDENT ACCOUNT 0. RUSSIA AND NETHERICA 50 205,078. STUDENT ACCOUNT 0. SOUTH AMERICA 22 546,409. STUDENT ACCOUNT 0.	(b) Region (c) Number of recipients (d) Amount of cash disbursement (g) Manner of noncash assistance (g) Description of noncash assistance SUB-SAHARAN AFRICA 35 1,034,817. STUDENT ACCOUNT 0.N/A CENTRAL AMERICA AND THE CARIBBEAN 8 148,251. STUDENT ACCOUNT 0.N/A EAST ASIA AND THE PACIFIC 299 5,126,195. STUDENT ACCOUNT 0.N/A EUROPE 61 2,508,930. STUDENT ACCOUNT 0.N/A MIDDLE EAST AND NORTH AFRICA 37 840,867. STUDENT ACCOUNT 0.N/A NORTH AMERICA 50 1,854,806. STUDENT ACCOUNT 0.N/A RUSSIA AND NEIGHBORING STATES 6 205,078. STUDENT ACCOUNT 0.N/A SOUTH AMERICA 22 546,409. STUDENT ACCOUNT 0.N/A

84 - 0404231

Schedule F (Form 990) 2019 Territory 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)	Yes	X 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) 2019

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 IN PART I 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 instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

UNIVERSITY	OF DENVER				84-040423	1
Part I Fundraising Activities. required to complete this part	Complete if the organization answe	red "Y	es" or	n Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not
1 Indicate whether the organization rais a	ed funds through any of the following e Solicitat f Solicitat g Special or oral agreement with any individual art VII) or entity in connection with previduals or entities (fundraisers) pursua	ion of ion of fundra (includ	non-g gover lising of ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?	Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have con or con contribu	Did aiser ustody trol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total 3 List all states in which the organization		ontrib	▶ utions	or has been notified	it is exempt from re	gistration
or licensing.						
				-		

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

Schedule G (Form 990 or 990-EZ) 2019

Page 2 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 gro	oss income on Form 990	EZ, lines 1 and 6b. List e	vents with gross receipt	s greater than \$5,000.		
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events		
					NONE	(add col. (a) through		
			DINNERS	SPORTING EVENTS		col. (c))		
a)			(event type)	(event type)	(total number)	001. (0))		
Revenue								
eve.	1	Gross receipts	483,676.	450,705.		934,381.		
ш								
	2	Less: Contributions	350,444.	8,378.		358,822.		
	3	Gross income (line 1 minus line 2)	133,232.	442,327.		575,559.		
	4	Cash prizes						
	_	Managah milan	1 007			1 007		
S	5	Noncash prizes	1,987.			1,987.		
nse	6	Pont/facility costs	47,481.	6,929.		54,410.		
Direct Expenses	6	Rent/facility costs	47,401.	0,323.		31,110.		
ΉĒ	7	Food and beverages	237,188.	110,324.		347,512.		
irec	•	1 ood and beverages				,		
	8	Entertainment						
	9	Other direct expenses		6,404.		158,657.		
	10	Direct expense summary. Add lines 4 through			•	562,566.		
	11					12,993.		
Pa	rt I	II Gaming. Complete if the organization a	answered "Yes" on Form	990, Part IV, line 19, or r	reported more than			
		\$15,000 on Form 990-EZ, line 6a.						
a)			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add		
Revenue			(4, 595	bingo/progressive bingo	(e, e and gaming	col. (a) through col. (c))		
3ev								
_	1	Gross revenue						
es	2	Cash prizes						
ens	_	Namanah minan						
Direct Expenses	3	Noncash prizes						
ect	4	Rent/facility costs						
Ę	•	Tiena lability code						
	5	Other direct expenses						
			Yes %	Yes %	Yes %			
	6	Volunteer labor	No No	No	No No			
	7	Direct expense summary. Add lines 2 through	5 in column (d)		>			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d))			
		ter the state(s) in which the organization condu						
a Is the organization licensed to conduct gaming activities in each of these states?								
b	If "	No," explain:						
	_							
40	<u></u>		ordered as a second second	and the same of th				
		ere any of the organization's gaming licenses re	•			Yes No		
O	11 "	Yes," explain:						
	_							
	_							

932082 09-11-19

Schedule G (Form 990 or 990-EZ) 2019

Sch	nedule G (Form 990 or 990-EZ) 2019 UNIVERSITY OF DENVER	4-0404231	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 formed		
	to administer charitable gaming?	Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:		
á	The organization's facility	13a	%
	a An outside facility		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address		
15	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
ŀ	of "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount		
	of gaming revenue retained by the third party \$		
(c If "Yes," enter name and address of the third party:		
	Name		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation > \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
á	a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	L No
ŀ	neter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	;	
	organization's own exempt activities during the tax year > \$		
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and	Part III, lines 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		
_			
_			

Schedule G	G (Form 990 or 990-EZ)	UNIVERSITY OF DENVER	84 - 0404231	Page 4
Part IV	G (Form 990 or 990-EZ) Supplemental Infor	mation (continued)		
		•		
-				
-				
i				
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1				
-				

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.

2019

Open to Public Inspection

Name of the organization							Employer identification number
UNIVERSITY OF							84-0404231
Part I General Information on Grants ar							
1 Does the organization maintain records to		amount of the grants	or assistance, the	grantees' eligibility	/ for the grants or assi	stance, and the selecti	
criteria used to award the grants or assis							Yes No
2 Describe in Part IV the organization's pro							
Part II Grants and Other Assistance to I	-				anization answered "	es" on Form 990, Part	IV, line 21, for any
recipient that received more than \$					(f) Method of	(a) Description of	(L) D
Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
THE DENIZED ADD MICELIA							
THE DENVER ART MUSEUM 100 WEST 14TH AVENUE PARKWAY							
DENVER CO 80204	84-6038240	501 (C) 3	5,500,000.	0	N/A	N/A	CONSTRUCTION
		561(5)5	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
THE NATURE CONSERVANCY							
4245 NORTH FAIRFAX DRIVE SUITE 100							
ARLINGTON, VA 22203	53-0242652	501(C)3	25,000.	0.	N/A	N/A	GENERAL USE
BARTON INSTITUTE FOR COMMUNITY							
ACTION - 111F WEST 7TH AVENUE							
SUITE 215 - DENVER, CO 80204	83-4295300	501(C)3	6,926,632.	0.	N/A	N/A	GENERAL USE
	al marramana art ann	naninationa lista d'Arth	a line d deble				3.
2 Enter total number of section 501(c)(3) ar3 Enter total number of other organizations	•	•	e iine 1 table				
LHA For Paperwork Reduction Act Notice,							Schedule I (Form 990) (2019)

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 (c) Amount of (d) Amount of non-(e) Method of valuation (f) Description of noncash assistance (book, FMV, appraisal, other) recipients cash grant cash assistance FINANCIAL AID-FEDERAL SEOG PROGRAM 0.N/A 192 499,580 N/A FINANCIAL AID-STATE PROGRAMS 395 1.846.164 0.N/A N/A FINANCIAL AID-ENDOWED AND GIFT FUNDED 2228 20,367,475, 0.N/A N/A FINANCIAL AID-GTA WAIVERS 103 531,940, 0.N/A N/A FINANCIAL AID-INSTITUTIONAL EDUCATION GRANTS 8240 158 812 725. 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 Individuals in the United States (Schedule I (Form 990), Part III.) (a) Type of grant or assistance (b) Number of (c) Amount of (d) Amount of non-(e) Method of (f) Description of non-cash assistance recipients cash grant cash assistance valuation (book, FMV, appraisal, other) 2,941,364. EDUCATIONAL AWARDS AND ASSISTANCE 688. 0.N/A N/A EMERGENCY FINANCIAL AID TO STUDENTS - CARES ACT 1,587. 2,313,135. 0.N/A N/A

Page 2

Schedule I (Form 990)

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.

QU 19
Open to Public

OMB No. 1545-0047

Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

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

UNIVERSITY OF DENVER

Part I Questions Regarding Compensation

Employer identification number 84-0404231

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel X Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	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	
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee X Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Х	
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		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			
	contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		Х
	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			
	contingent on the net earnings of:			
	The organization?	6a		X
b	Any related organization?	6b		Х
	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			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2019

Schedule J (Form 990) 2019 UNIVERSITY OF DENVER 84-0404231 Page 2

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-MISC compensation		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		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benents	(5)(1)-(5)	reported as deferred on prior Form 990
(1) REBECCA CHOPP	(i)	670,429.	85,000.	109,260.	41,400.	13,727.	919,816.	0.
CHANCELLOR THRU 7/14/19	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) JEREMY HAEFNER	(i)	563,429.	0.	48,840.	41,400.	18,979.	672,648.	0.
CHANCELLOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) KARLTON CREECH	(i)	353,223.	0.	8,340.	72,400.	15,913.	449,876.	0.
VICE CHANCELLOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) DAVID GORDON CARLE	(i)	297,779.	85,000.	11,818.	22,400.	13,392.	430,389.	0.
HEAD COACH	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) GREGG KVISTAD	(i)	392,522.	0.	0.	22,400.	7,867.	422,789.	0.
PROVOST EMERITUS - FORMER PROVOST	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) CRAIG WOODY	(i)	353,308.	0.	5,500.	47,400.	6,973.	413,181.	0.
FRMR TREAS - SNR VICE CHANC	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) BRUCE SMITH	(i)	352,642.	0.	0.	22,400.	23,109.	398,151.	0.
DEAN	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) JACK STRAUSS	(i)	325,391.	0.	2,744.	19,927.	42,780.	390,842.	0.
PROFESSOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) MARTIN KATZ	(i)	353,566.	0.	800.	22,400.	10,383.	387,149.	0.
SNR ADV ACDMC INNOV - FORMER DEAN	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) NANCY NICELY	(i)	342,439.	0.	1,440.	22,400.	18,942.	385,221.	0.
SECRETARY - CHIEF OF STAFF	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) JAMES HOLSTON	(i)	309,670.	0.	1,080.	22,400.	31,480.	364,630.	0.
DEAN	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) SHARON LASSAR	(i)	311,231.	0.	948.	22,400.	1,326.	335,905.	0.
PROFESSOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) PAUL CHAN	(i)	290,069.	0.	840.	22,400.	20,663.	333,972.	0.
UNIVERSITY COUNSEL	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) CHRISTOPHER HILL	(i)	288,607.	0.	6,654.	22,400.	15,951.	333,612.	0.
ADVISOR TO THE CHANCELLOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) DONALD HARRIS	(i)	271,245.	0.	1,440.	22,400.	24,910.	319,995.	0.
VICE CHANCELLOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(16) LILIANA RODRIGUEZ	(i)	216,949.	0.	0.	18,143.	70,996.	306,088.	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	W-2 and/or 1099-MIS	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		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Deficits	(13)(1)-(10)	reported as deferred on prior Form 990
(17) KEYARMIN AFSAHI	(i)	260,350.	0.	7,040.	20,920.	5,089.	293,399.	0.
VICE CHANCELLOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(18) LESLIE BRUNELLI	(i)	200,183.	0.	54,444.	16,000.	10,733.	281,360.	0.
TREASURER - SENIOR VICE CHANCELLOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(19) TODD RINEHART	(i)	230,988.	0.	6,900.	19,317.	23,637.	280,842.	0.
VICE CHANCELLOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(20) ELRIE LABRENT CHRITE	(i)	198,382.	0.	0.	16,041.	34,395.	248,818.	0.
FORMER DEAN	(ii)	0.	0.	0.	0.	0.	0.	0.
(21) VIVEK CHOUDHURY	(i)	156,812.	25,000.	47,587.	12,800.	5,718.	247,917.	0.
DEAN	(ii)	0.	0.	0.	0.	0.	0.	0.
(22) JAMES GRIESEMER	(i)	203,115.	0.	720.	17,370.	24,591.	245,796.	0.
TRUSTEE - PROFESSOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(23) DAVID ETHAN GREENBERG	(i)	218,889.	0.	990.	17,046.	7,355.	244,280.	0.
VICE CHANCELLOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(24) LAURA MARESCA	(i)	214,477.	0.	0.	17,209.	703.	232,389.	0.
VICE CHANCELLOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(25) ANDREW CULLEN	(i)	209,506.	0.	720.	16,835.	1,009.	228,070.	0.
ASSISTANT TREASURER - CONTROLLER	(ii)	0.	0.	0.	0.	0.	0.	0.
(26) JAMES ROSNER	(i)	179,408.	0.	900.	15,273.	19,983.	215,564.	0.
ASSOCIATE VICE CHANCELLOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(27) MARGARET BRADLEY DOPPES	(i)	160,082.	0.	6,900.	0.	14,512.	181,494.	0.
SNR ADV TO CHNCLLR-FRMR VICE CHNCLLR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2019

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.

PART I, LINE 1A:

THE UNIVERSITY PROVIDES CHANCELLORS REBECCA CHOPP AND JEREMY HAEFNER WITH A

TAXABLE HOUSING ALLOWANCE. THE UNIVERSITY PROVIDES HOUSING FOR LILIANA

RODRIGUEZ FOR THE CONVENIENCE OF THE UNIVERSITY. THE HOUSING IS NOT

INCLUDED IN TAXABLE COMPENSATION.

CHANCELLORS REBECCA CHOPP AND JEREMY HAEFNER BOTH RECEIVED COMPANION TRAVEL

DURING THE YEAR. IN LIMITED INSTANCES WITH DOCUMENTATION FOR THE BUSINESS

PURPOSE FULFILLED BY THE COMPANION AND ANY REQUIRED PRIOR APPROVALS. THE

UNIVERSITY WILL PAY FOR TRAVEL EXPENSES OF A COMPANION WHEN THE COMPANION

TRAVEL IS FOR A BONA FIDE BUSINESS PURPOSE. AND IMPORTANT TO THE

ACHIEVEMENT OF THE UNIVERSITY'S PURPOSES THAT REQUIRE THE TRAVEL OF THE

EMPLOYEE AND COMPANION.

REBECCA CHOPP RECEIVED A COUNTRY CLUB MEMBERSHIP DURING THE YEAR. 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.

Page 3

UNIVERSITY OF DENVER

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.
PART I, LINE 4B:
CRAIG WOODY RECEIVED A TAXABLE DISTRIBUTION FROM HIS 457(F) PLAN OF
\$40,337.
KARLETON CREECH - PARTICIPATION IN 457(F) PLAN - \$31,000
CRAIG WOODY - PARTICIPATION IN 457(F) PLAN - \$6,000
SCHEDULE J, PART II, LINES 1 & 2
REBECCA CHOPP SERVED AS CHANCELLOR FOR THE UNIVERSITY THROUGH
7/14/2019.
JEREMY HAEFNER BECAME CHANCELLOR FOR THE UNIVERSITY ON 7/15/2019.

1

SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service

Part I

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.

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

OMB No. 1545-0047 2019 Open to Public Inspection

Name of the organization

Bond Issues

Employer identification number UNIVERSITY OF DENVER 84-0404231

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issu	ue price	(f) Descripti	on of purpose	(g) Def	eased	(h) On of is:			ooled ncing
								Yes	No	Yes	No	Yes	No
COLORADO EDUCATION & CULTURAL					I	REFUNDING SE	RIES 2005B						
A FACILITIES - SERIES 2013	84-0896727	19645RSR3	03/01/13	24,1	.59,389.	BONDS			Х		Х		х
COLORADO EDUCATION & CULTURAL						REFUNDING SE	RIES 2001A						
B FACILITIES - SERIES 2007	84-0896727	1964584T7	10/10/07	45,8	39,717.	AND 2005B BO	NDS		X		Х		Х
COLORADO EDUCATION & CULTURAL						REFUNDING SE	RIES 2005A						
C FACILITIES - SERIES 2014A	84-0896727	NONE	09/01/15	29,0	75,000.	BONDS AND 20	14A CAPITALIZ	: :	X		Х		Х
COLORADO EDUCATION & CULTURAL					I	REFUNDING SE	RIES 2005B						
D FACILITIES - SERIES 2014B	84-0896727	NONE	03/01/16	12,5	500,000.	BONDS			Х		Х		х
Part II Proceeds					•								
			Α			В	С				D		
1 Amount of bonds retired			5	,015,000.			16,26	55,000			5	,460,	000.
2 Amount of bonds legally defeased													
3 Total proceeds of issue			24	,159,389.		45,839,717.	29,07	75,000			12	,500,	000.
4 Gross proceeds in reserve funds													
5 Capitalized interest from proceeds													
6 Proceeds in refunding escrows													
7 Issuance costs from proceeds				245,452.		321,631.	28	31,888				120,	910.
8 Credit enhancement from proceeds						698,000.							
9 Working capital expenditures from proceed	ds												
40 0 11 11 11 1													
11 Other spent proceeds			23	,913,938.		44,820,085.	28,79	3,113			12	379,	090.
12 Other unspent proceeds													
13 Year of substantial completion				2013		2007	20:	15				2016	
			Yes	No	Yes	No	Yes	No		Yes		No	
14 Were the bonds issued as part of a refundi	ing issue of tax-exempt	bonds (or,											
if issued prior to 2018, a current refunding	issue)?			Х		Х	Х			Х			
15 Were the bonds issued as part of a refundi	ing issue of taxable bon	ds (or, if											
issued prior to 2018, an advance refunding	g issue)?		х		Х			X					Х
16 Has the final allocation of proceeds been n	nade?		х		Х		Х			X			
17 Does the organization maintain adequate b	books and records to su	pport the											
final allocation of proceeds?			х		Х		х			Х			
I HA For Paperwork Reduction Act Notice, se	e the Instructions for	Form 990			. <u></u>				Scho	dule K	(Forn	990	2010

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

Schedule K (Form 990) 2019

2

SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service

Bond Issues

Part I

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.

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

OMB No. 1545-0047 2019 Open to Public Inspection

Name of the organization UNIVERSITY OF DENVER **Employer identification number** 84-0404231

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issued	(e) Issu	ie price	(f) Description of purpose (g) Defeased (h) On bel of issue			(i) Po	
									Yes	No	 			<u> </u>
COLORAI	DO EDUCATION & CULTURAL						CONSTRUCTION	1,	100	110	100	-110	100	110
A FACILI	TIES - SERIES 2017A	84-0896727	19645R6D8	06/27/17	133,0	26,969.	RENOVATION,	, IMPROVEMENT AI	1	х		х		х
					,		,							
В														
С														
D														
Part II P	roceeds													
				Α			В	С				D		
1 Amour	nt of bonds retired													
2 Amour	nt of bonds legally defeased													
3 Total p	proceeds of issue			138	555,264.									
4 Gross	proceeds in reserve funds													
5 Capita	lized interest from proceeds			. 11	851,860.									
6 Procee	eds in refunding escrows													
7 Issuan	ce costs from proceeds			1	070,109.									
8 Credit	enhancement from proceeds													
9 Workin	ng capital expenditures from proceeds													
10 Capita	l expenditures from proceeds			111	177,524.									
11 Other	spent proceeds													
12 Other	unspent proceeds			14	455,771.									
13 Year o	f substantial completion													
				Yes	No	Yes	No	Yes	No		Yes		No	
14 Were t	he bonds issued as part of a refunding is	ssue of tax-exempt l	bonds (or,											
if issue	ed prior to 2018, a current refunding issu	ıe)?			X									
15 Were t	he bonds issued as part of a refunding is	ssue of taxable bone	ds (or, if											
issued	prior to 2018, an advance refunding iss	ue)?			X									
16 Has th	e final allocation of proceeds been made	e?			X									
17 Does t	he organization maintain adequate book	s and records to su	pport the											
final al	location of proceeds?			Х										
LHA For Pa	perwork Reduction Act Notice, see th	ne Instructions for I	Form 990.							Sche	dule K	(Form	n 990)	2019

Page 2

84-0404231

Part I	II Private Business Use								
		1	A		В		С	[)
1 \	Nas the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No
\	which owned property financed by tax-exempt bonds?		Х		Х		Х		Х
2 /	Are there any lease arrangements that may result in private business use of								
	pond-financed property?		Х	Х			х		х
	Are there any management or service contracts that may result in private								
	ousiness use of bond-financed property?	Х		Х		х		Х	
	f "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?	Х		Х		х		Х	
	Are there any research agreements that may result in private business use of								
	cond-financed property?	Х		Х			х		х
	f "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		Х					
	Enter the percentage of financed property used in a private business use by				•				
	entities other than a section 501(c)(3) organization or a state or local government		.00 %		.00 %		.00 %		.00 %
	Enter the percentage of financed property used in a private business use as a result of		,,,		,,,		,,,		70
	unrelated trade or business activity carried on by your organization, another								
	section 501(c)(3) organization, or a state or local government		.00 %		.00 %		.00 %		.00 %
	Fotal of lines 4 and 5		.00 %		.00 %		.00 %		.00 %
	Does the bond issue meet the private security or payment test?		X		T x		T 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?		х		x		x		x
	f "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed								
	of		%		%		%		%
	f "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections						70		70
	1.141-12 and 1.145-2?								
	Has the organization established written procedures to ensure that all nonqualified								
	conds of the issue are remediated in accordance with the requirements under								
	Regulations sections 1.141-12 and 1.145-2?	Х		х		x		Х	
	V Arbitrage		<u> </u>		L		ļ		l
1 arti	Ablitage		Δ		В		С	-)
4 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?	163	X	163	X	163	X	163	X
	f "No" to line 1, did the following apply?				<u> </u>				<u> </u>
	Rebate not due yet?		Х		Тх	х		X	
	Exception to rebate?		X		x		x		Х
		X		x			x		X
	No rebate due? f "Yes" to line 2c, provide in Part VI the date the rebate computation was								···
	performed		l x		X		х		х
3	s the bond issue a variable rate issue?		Λ.		Λ Λ		Δ.		Λ

84-0404231

Part	III Private Business Use									
			Α		E	3		С)
1	Was the organization a partner in a partnership, or a member of an LLC,	Yes	No		Yes	No	Yes	No	Yes	No
	which owned property financed by tax-exempt bonds?		Х							
2	Are there any lease arrangements that may result in private business use of									
	bond-financed property?		Х							
За	Are there any management or service contracts that may result in private									
	business use of bond-financed property?		Х							
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?									
С	Are there any research agreements that may result in private business use of									
	bond-financed property?		Х							
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside									
	counsel to review any research agreements relating to the financed property?									
4	Enter the percentage of financed property used in a private business use by									
	entities other than a section 501(c)(3) organization or a state or local government		.00	%		%		%		%
5	Enter the percentage of financed property used in a private business use as a result of									
	unrelated trade or business activity carried on by your organization, another									
	section 501(c)(3) organization, or a state or local government		.00	%		%		%		%
6	Total of lines 4 and 5		.00	%		%		%		<u>%</u>
7	Does the bond issue meet the private security or payment test?		Х							
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?		Х							
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed									
	of		1	%		%		%		<u>%</u>
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?	Х								
Part	IV Arbitrage									
_	Head the Server Clad Farm 2000 T. Additional Palents World Park of Server		A l		E			C I) ,,
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No X		Yes	No	Yes	No	Yes	No
	Penalty in Lieu of Arbitrage Rebate?		Λ.							
	If "No" to line 1, did the following apply?	x								
	Rebate not due yet?	^A	x					 		
	Exception to rebate?		X					+		
C	No rebate due?		1 4					 		l
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed									
2	ls the bond issue a variable rate issue?		х							
J	is the bolid issue a validate late issue!	l								l

UNIVERSITY OF DENVER 84-0404231 Schedule K (Form 990) 2019

Schedule K (Form 990) 2019 UNIVERSITY OF DENVER			84-0	404231				Page 3
Part IV Arbitrage (continued)								
		A		<u></u> В		<u> </u>		<u> </u>
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?		Х		Х		Х		Х
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		Х		Х		Х
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		Х		Х		Х		Х
7 Has the organization established written procedures to monitor the requirements of								
section 148?	Х		Х		Х		Х	
Part V Procedures To Undertake Corrective Action								
		A	l	В		9)
Has the organization established written procedures to ensure that violations of	Yes	No	Yes	No	Yes	No	Yes	No
federal tax requirements are timely identified and corrected through the voluntary								
closing agreement program if self-remediation isn't available under applicable								
regulations?	Х		Х		Х		Х	
Part VI Supplemental Information. Provide additional information for responses to questions	on Schedule	e K. See instr	uctions					
SCHEDULE K, PART I, BOND ISSUES:								
(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL FACILITIES - SERIES 2013								
(F) DESCRIPTION OF PURPOSE: REFUNDING SERIES 2005B BONDS								
(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL FACILITIES - SERIES 2007								
(F) DESCRIPTION OF PURPOSE: REFUNDING SERIES 2001A AND 2005B BONDS								
(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL FACILITIES - SERIES 2014	A							
(F) DESCRIPTION OF PURPOSE:								
REFUNDING SERIES 2005A BONDS AND 2014A CAPITALIZED INTEREST								
(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL FACILITIES - SERIES 2014	3							
(F) DESCRIPTION OF PURPOSE: REFUNDING SERIES 2005B BONDS								
(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL FACILITIES - SERIES 20172	A							
(F) DESCRIPTION OF PURPOSE:								
CONSTRUCTION, RENOVATION, IMPROVEMENT AND EQUIPPING OF CAMPUS IMPROVEMENT	rs							
SCHEDULE K, PART IV, ARBITRAGE, LINE 2C:								
(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL FACILITIES - SERIES 2013								

Schedule K (Form 990) 2019

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Page 3

Schedule K (Form 990) 2019 UNIVERSITY OF DENVER 84-0404231

Part IV Arbitrage (continued)								
	Ą		E	3		Ç	C)
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?		Х						<u> </u>
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		Х						
7 Has the organization established written procedures to monitor the requirements of								
section 148?	Х							İ
Part V Procedures To Undertake Corrective Action								
		Α	E	3		С)
Has the organization established written procedures to ensure that violations of	Yes	No	Yes	No	Yes	No	Yes	No
federal tax requirements are timely identified and corrected through the voluntary								1
closing agreement program if self-remediation isn't available under applicable								I
regulations?	Х							İ.
Part VI Supplemental Information. Provide additional information for responses to questions	on Schedule	e K. See instru	uctions					
SCHEDULE K, PART I, BOND ISSUES:								
(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL FACILITIES - SERIES 2013								
(F) DESCRIPTION OF PURPOSE: REFUNDING SERIES 2005B BONDS								
(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL FACILITIES - SERIES 2007								
(F) DESCRIPTION OF PURPOSE: REFUNDING SERIES 2001A AND 2005B BONDS								
(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL FACILITIES - SERIES 2014A	A							
(F) DESCRIPTION OF PURPOSE:								
REFUNDING SERIES 2005A BONDS AND 2014A CAPITALIZED INTEREST								
(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL FACILITIES - SERIES 2014E	3							
(F) DESCRIPTION OF PURPOSE: REFUNDING SERIES 2005B BONDS								
(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL FACILITIES - SERIES 2017A	A							
(F) DESCRIPTION OF PURPOSE:								
CONSTRUCTION, RENOVATION, IMPROVEMENT AND EQUIPPING OF CAMPUS IMPROVEMENT	rs							
SCHEDULE K, PART IV, ARBITRAGE, LINE 2C:								
(A) ISSUER NAME: COLORADO EDUCATION & CULTURAL FACILITIES - SERIES 2013								

Schedule K (Form 990) 2019

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

➤ Attach to Form 990.

UNIVERSITY OF DENVER

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

Employer identification number 84-0404231

Pai	rt I Types of Property						
		(a)	(b)	(c)	(d)		
		Check if	Number of contributions or	Noncash contribution amounts reported on	Method of determ	•	
		applicable		Form 990, Part VIII, line 1g	noncash contribution	amount	.S
1	Art - Works of art	Х	5	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	Х	46	1,118,412.	FMV		
10	Securities - Closely held stock						
11	Securities - Partnership, LLC, or						
	trust interests						
12	Securities - Miscellaneous						
13	Qualified conservation contribution -						
	Historic structures						
14	Qualified conservation contribution - Other						
15	Real estate - Residential						
16	Real estate - Commercial						
17	Real estate - Other						
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other • ()						
26	Other • ()						
27	Other						
28	Other ()						
29	Number of Forms 8283 received by the organization	_	•				
	for which the organization completed Form 828	3, Part IV, [Donee Acknowledg	gement 29		0	Т
						Yes	No
30a	During the year, did the organization receive by						
	must hold for at least three years from the date		l contribution, and	which isn't required to be us			
	exempt purposes for the entire holding period?				30a	1	Х
	If "Yes," describe the arrangement in Part II.						
31	Does the organization have a gift acceptance po	-	· ·	•	ions? 31	Х	
32a	Does the organization hire or use third parties o		_				
	contributions?					1	Х
	If "Yes," describe in Part II.	. l () (Annual Cale and Annual Cale	also d		
33	If the organization didn't report an amount in co	olumn (c) foi	a type of property	tor which column (a) is chec	cked,		
	describe in Part II.						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2019

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
SCHEDULE M, PART I, COLUMN (B):
THE NUMBER OF CONTRIBUTIONS WAS USED IN PART I.
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 0

(Form 990 or 990-EZ) Department of the Treasury

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.

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

OMB No. 1545-0047 Inspection

Internal Revenue Service Name of the organization

Employer identification number

UNIVERSITY OF DENVER	84-0404231
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:	
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:	
AND APPLIED LEARNING EXPERIENCES THAT WILL ENABLE STUDENTS TO EXPAND	
THEIR SKILLS, DEEPEN THEIR EXPERTISE AND APPLY THEIR KNOWLEDGE TO	
BENEFIT THEMSELVES AND THE WORLD.	
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:	
WELL-BEING AND INTELLECTUAL, CULTURAL AND SOCIAL DEVELOPMENT.	
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:	
THE UNIVERSITY OF DENVER FACULTY MEMBERS RECEIVED SUBSTANTIAL FUNDING	
FROM GOVERNMENTAL AND PRIVATE SOURCES TO SUPPORT THEIR SCHOLARSHIP. THE	
UNIVERSITY HAS LONG PROMOTED A TEACHER/SCHOLAR MODEL FOR ITS FACULTY,	
ENCOURAGING PROFESSIONS TO EXCEL IN THE CLASSROOM AND IN RESEARCH, MUCH	
OF THE FACULTY SCHOLARSHIP CONTRIBUTES TO THE UNIVERSITY OF SERVING THE	
PUBLIC GOOD.	
EXPENSES \$ 54,015,582. INCL GRANTS OF \$ 14,764,767. REVENUE \$ 49,281,558	
2019-2020 ACADEMIC YEAR: THE AUXILIARY ENTERPRISES AT THE UNIVERSITY OF	
DENVER EXIST TO FURNISH GOODS OR SERVICES TO STUDENTS, FACULTY, STAFF,	
INSTITUTIONAL DEPARTMENTS AND THE PUBLIC. THE MOST PROMINENT OF THESE	
ENTERPRISES PROVIDE SUPPORT TO OUR STUDENTS WHICH INCLUDES; A	
UNIVERSITY HEALTH CENTER AND RESIDENCE AND FOOD FACILITIES. THE	chedule () (Form 990 or 990-E7) (2019)

932211 09-06-19

Name of the organization UNIVERSITY OF DENVER	Employer identification number 84-0404231
UNIVERSITY ALSO HAS A PERFORMING ARTS CENTER THAT HOSTS PERFORMANCES BY	
THE FACULTY AND STUDENTS OF THE UNIVERSITY AND THE REGION'S FINEST	
PERFORMING ARTS ORGANIZATIONS. A SMALL CONFERENCE AND EVENTS SERVICES	
DEPARTMENT ROUNDS OUT THE UNIVERSITY'S AUXILIARY ENTERPRISE ACTIVITIES.	
EXPENSES \$ 44,238,321. INCLUDING GRANTS OF \$ 0. REVENUE \$ 42,878,048.	
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 CHAIR, CHAIR ELECT, AND ALL VICE	
CHAIRS, TOGETHER WITH THE SECRETARY AND THE TREASURER, IF THE SECRETARY OR	
TREASURER IS A TRUSTEE, (B) THOSE TRUSTEES WHO MAY FROM TIME TO TIME CHAIR	
THE FOLLOWING COMMITTEES: FINANCE AND BUDGET, FACULTY AND EDUCATIONAL	
AFFAIRS, CAMPUS LIFE AND STUDENT SUCCESS, ADVANCEMENT, NOMINATING AND	
GOVERNANCE, AUDIT, INVESTMENT, AND ATHLETIC AFFAIRS, AND (C) SUCH	
ADDITIONAL TRUSTEES AS THE CHAIR MAY APPOINT. ONLY TRUSTEES MAY SERVE ON	
THE EXECUTIVE COMMITTEE.	
FORM 990, PART VI, SECTION A, LINE 4:	
DURING THE FISCAL YEAR, THE ORGANIZATION'S BYLAWS WERE UPDATED TO INCLUDE	
OR CHANGE THE FOLLOWING:	
THE ORGANIZATION'S NAME HAS BEEN CHANGED TO "UNIVERSITY OF DENVER".	
THE MAXIMUM NUMBER OF MEMBERS OF THE BOARD OF TRUSTEES HAS BEEN INCREASED	
TO 38 MEMBERS.	

Name of the organization UNIVERSITY OF DENVER	Employer identification number 84-0404231
MUST BE APPROVED BY THE METHODIST CHURCH.	
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	
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. WHEN A CONFLICT IS DISCLOSED, THE CHAIR AND	
THE BOARD OF TRUSTEES WORK TO RESOLVE THE CONFLICT WITH THE INDIVIDUAL. THE	
BOARD HAS THE FINAL AUTHORITY ON THE MATTER. THE DELIBERATIONS AND	
DECISIONS ARE DOCUMENTED IN THE BOARD MINUTES.	
FORM 990, PART VI, SECTION B, LINE 15:	
DELIBERATIONS AND DISCUSSIONS FOR THE CHANCELLOR'S COMPENSATION PACKAGE ARE	

Schedule O (Form 990 or 990-EZ) (2019)	Page 2
Name of the organization UNIVERSITY OF DENVER	Employer identification number 84-0404231
CARRIED ON IN EXECUTIVE SESSION OF THE BOARD OR ITS EXECUTIVE COMMITTEE,	
AFTER INITIAL CONSIDERATION BY THE COMPENSATION 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 EXECUTIVE COMMITTEE DISCUSSED	
COMPENSATION FOR THE CHANCELLOR DURING DECEMBER 2019.	
DELIBERATIONS AND DISCUSSIONS FOR THE COMPENSATION OF THE CHANCELLOR'S	
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	
MEETING THAT APPROVES THE BUDGET FOR THE UPCOMING YEAR. THIS PROCESS LAST	
TOOK PLACE IN JUNE 2019 FOR FISCAL YEAR 2020. 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.	

Schedule O (Form 990 or 990-EZ) (2019) Name of the organization UNIVERSITY OF DENVER Employer identification 84-0404231 FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	n number
FORM 990 DADT YT LINE 9 CHANGES IN NET ASSETS.	
FORM 990 DADT YT LINE 9 CHANGES IN NET ASSETS.	
TOWN 350, TAKE AI, BINE 5, CHANGED IN NET ADDRES.	
ACTUARIAL ADJUSTMENTS -614,435.	
FORM 990, PART XII, LINE 2C	
THE PROCESS FOR OVERSEEING AND SELECTING AN INDEPENDENT ACCOUNTANT HAS	
NOT CHANGED FROM THE PRIOR YEAR.	

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

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

 $84 \!-\! 0404231$

Part I Identification of Disregarded Entities. Con	The organization answered Tes	or officially section, fine of	J.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state o foreign country)	(d) or Total inco			ssets Direct cor entit		9
HRGC AT DU, LLC - 84-0404231								
9000 CREEKSIDE WAY								
HIGHLANDS RANCH, CO 80129	GOLF COURSE OPERATIONS	COLORADO	3,347	,791. 4,65	8,449. U	JNIVERSITY (OF DENV	ER
KNOBEL EVENTS, LLC - 84-0404231								
2199 S UNIVERSITY BLVD	EDUCATIONAL							
DENVER, CO 80208	EVENTS/RESTAURANT	COLORADO	308	,400.	0.0	JNIVERSITY (OF DENV	'ER
Identification of Related Tax-Exempt Orga	winsting. Complete if the every institute	applyand "Vas" on Form 000	Dort IV line 24 h	and the days		related to year		
Part II organizations during the tax year.	inizations. Complete if the organization	ranswered fes on Form 990	o, Part IV, line 34, i	because it riad one	or more r	elated tax-exer	прі	
(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) t controlling entity	conti	g) 512(b)(13) rolled ity?
Ç		Toroigh Soundry)		501(c)(3))				No

UNIVERSITY OF DENVER

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.

organization treated as a particular particular 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	Direct controlling entity	Predominant income (related, unrelated,	Predominant income (related, unrelated,	Predominant income (related, unrelated,	Predominant income (related, unrelated,	Predominant income (related, unrelated, excluded from tax under	Predominant income (related, unrelated, excluded from tax under	(related, unrelated, income end-	Share of end-of-year assets	1	ortionate itions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Genera manag partne	Percentage ownership
		foreign country)		sections 512-514)	ns 512-514)		Yes	No	K-1 (Form 1065)	Yes I	10					
]															
	1															
	1															
	1															
						l .										

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)	(b) (c) (d) (e)		(e)	(f)	(g)	(h)	(1)	i)	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	enti	tion b)(13) rolled tity?
CUIDITADI E DEVIZINDED EDUCATO (12)		country)						Yes	No
CHARITABLE REMAINDER TRUSTS (13)	4							'	
2199 S UNIVERSITY BLVD			UNIVERSITY OF					'	
DENVER, CO 80208	INVESTMENTS	co	DENVER	TRUST				Х	
								<u> </u>	

Page 2

UNIVERSITY OF DENVER 84-0404231 Schedule R (Form 990) 2019 Page 3

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

Yes No

Х

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?

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

b	Gift, grant, or capital contribution to related organization(s)				1b		Х			
	Gift, grant, or capital contribution from related organization(s)				1c		Х			
	d Loans or loan guarantees to or for related organization(s)									
е	Loans or loan guarantees by related organization(s)				1e		Х			
	Dividends from related organization(s)				1f		X			
	Sale of assets to related organization(s)				1g		Х			
h	Purchase of assets from related organization(s)				1h		<u>х</u>			
i Exchange of assets with related organization(s)										
j Lease of facilities, equipment, or other assets to related organization(s)										
					4.		v			
	Lease of facilities, equipment, or other assets from related organization(s)				1k					
	Performance of services or membership or fundraising solicitations for related organization(s)				11					
	n Performance of services or membership or fundraising solicitations by related organization(s)				1m 1n	х				
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)										
0	Sharing of paid employees with related organization(s)				10	Х				
p Reimbursement paid to related organization(s) for expenses										
q	Reimbursement paid by related organization(s) for expenses				1q		Х			
r	Other transfer of cash or property to related organization(s)				1r		Х			
	Other transfer of cash or property from related organization(s)				1s		Х			
2	If the answer to any of the above is "Yes," see the instructions for information on who must co	mplete th	is line, including covered r	elationships and transaction thresholds.						
	(a) (b) (c) (d) Name of related organization type (a-s) (b) Amount involved Method of determining amount inv									
(1)										
(2)										
(3)										
•										
(4)										
(5)										
(6)										
	63 09-10-19	l		Schedule I	3 (Forr	n 990\	2019			
JUZ 10	20 00-10-10			Schedule	. (1 011	555)	_0.3			

Schedule R (Form 990) 2019 UNIVERSITY OF DENVER 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) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.? Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionate allocation	Code V-UBI amount in box 2 of Schedule K-	General of managing partner? Yes No	(k) r Percentage ownership