Form **8868**

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an **Exempt Organization Return**

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Type or Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) print UNIVERSITY OF DENVER 84-0404231 File by the Number, street, and room or suite no. If a P.O. box, see instructions. filing your 2199 S UNIVERSITY BLVD return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions DENVER, CO 80208 Enter the Return Code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Is For Is For Code Code Form 990 or Form 990-EZ Form 1041-A 01 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 Form 990-T (corporation) ANDREW CULLEN The books are in the care of ▶ 2199 S UNIVERSITY BLVD - DENVER, CO 80208 Telephone No. ▶ 303-871-2404 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this . If it is for part of the group, check this box 🕨 and attach a list with the names and TINs of all members the extension is for. MAY 15, 2024 I request an automatic 6-month extension of time until , to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year ► X tax year beginning JUL 1, 2022 JUN 30, 2023 , and ending If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 0. estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions. Form 8868 (Rev. 1-2022)

instructions

** PUBLIC INSPECTION COPY **

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

| Α | For the | f 2022 calendar year, or tax year beginning $f JUL 1, 2022$ and en | nding Jा | JN 30, 2 | 023 | |
|---------------|---------------------------------------|--|-------------|-------------------|-------------------------|-------------------------------|
| | Check if applicable | C Name of organization | | D Emplo | oyer identifi | cation number |
| | Addres | UNIVERSITY OF DENVER | | | | |
| | Name change | Doing business as | | 84 | 1-0404231 | |
| | Initial return Final return/ | Number and street (or P.O. box if mail is not delivered to street address) R 2199 S UNIVERSITY BLVD | Room/suite | | none numbe -871-2000 | |
| | termin- ated | City or town, state or province, country, and ZIP or foreign postal code | | G Gross re | ceipts \$ | 1,346,203,548. |
| | Ameno return | | | H(a) Is th | is a group re | eturn |
| | Application | F Name and address of principal officer: σεκεμί πλεινέκ | | for s | subordinates | ? Yes X No |
| | pendin | SAME AS C ABOVE | | | Il subordinates ir | |
| <u></u> | Tax-exe | empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or | 527 | lf "N | lo," attach a | list. See instructions |
| | Websit | | | H(c) Grou | up exemptio | n number |
| | Form of art I | organization; X Corporation Trust Association Other Summary | L Year | of formation | : 1864 N | M State of legal domicile; CO |
| _ | 1 | Briefly describe the organization's mission or most significant activities: A HIGHER | R EDUCAT | IONAL | | |
| Governance | | INSTITUTION, PROVIDING BOTH UNDERGRADUATE AND GRADUATE DEGREES | s. | | | |
| 7 | 2 | Check this box if the organization discontinued its operations or disposed | d of more | than 25% | of its net ass | sets. |
| 9 | 3 | Number of voting members of the governing body (Part VI, line 1a) | | | 3 | 26 |
| | | Number of independent voting members of the governing body (Part VI, line 1b) \dots | | | | 24 |
| Activities & | 5 | Total number of individuals employed in calendar year 2022 (Part V, line 2a) | | | | 9158 |
| Ξ | 6 | Total number of volunteers (estimate if necessary) | | | | 3000 |
| ζ | 7 a | Total unrelated business revenue from Part VIII, column (C), line 12 | | | | 4,881,897. |
| _ | <u></u> | Net unrelated business taxable income from Form 990-T, Part I, line 11 | ······ | | | 238,864. |
| | | 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | Prior | | Current Year |
| 4 | 8 | Contributions and grants (Part VIII, line 1h) | | | ,265,579. | 36,475,389. |
| Revenue | 9 | Program service revenue (Part VIII, line 2g) | | | ,003,890. ,233,842. | 749,070,919. 16,231,344. |
| ă | 10 | Investment income (Part VIII, column (A), lines 3, 4, and 7d) | | | ,462,576. | 5,495,571. |
| | | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | | ,965,887. | 807,273,223. |
| _ | | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | | | ,739,044. | 237,467,011. |
| | | Grants and similar amounts paid (Part IX, column (A), lines 1-3) | | 232 | 0. | 0. |
| | 45 | Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | | 329 | ,182,061. | 349,843,863. |
| ď | 162 | Professional fundraising fees (Part IX, column (A), line 11e) | | | 0. | 0. |
| Fynenses | h | Total fundraising expenses (Part IX, column (D), line 25) 17,627,19 | | | | |
| Ž | 17 | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | | 209 | ,817,374. | 228,760,547. |
| | | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | | | ,738,479. | 816,071,421. |
| | 1 | Revenue less expenses. Subtract line 18 from line 12 | | | ,227,408. | -8,798,198. |
| or | £ | | Be | | urrent Year | End of Year |
| ets | 20 | Total assets (Part X, line 16) | | 2,179 | ,482,499. | 2,173,355,537. |
| Ass | 21 | Total liabilities (Part X, line 26) | | 365 | ,293,645. | 341,865,539. |
| Net Assets or | 22 | Net assets or fund balances. Subtract line 21 from line 20 | | 1,814 | ,188,854. | 1,831,489,998. |
| P | art II | Signature Block | | | | |
| | | lties of perjury, I declare that I have examined this return, including accompanying schedules a | | | | knowledge and belief, it is |
| true | e, correc | , and Peshijiyere! Déclaration of preparer (other than officer) is based on all information of whic | ch preparer | has any kno | wledge. 714/2024 | 1 |
| | | Mah V. De Loury | | | <u> </u> | T |
| Siç | | Signature of officer | | L | ate | |
| He | re | MARK DELORENZO, SENIOR VICE CHANCELLOR, CFO | | | | |
| | | Type or print name and title | Lr |) oto | 1 | DTIM |
| _ | | Print/Type preparer's name Preparer's signature | | Date | Check if | PTIN |
| Pai | _ | SARAH HINTZ SARAH HINTZ | 10 : | 5/13/24 | self-employ | |
| | parer | Firm's name CLIFTONLARSONALLEN LLP | | F | irm's EIN | 41-0746749 |
| US | Only | Firm's address 8390 EAST CRESCENT PARKWAY, SUITE 300 | | | / 20 | 2\ 770 5710 |
| _ | | GREENWOOD VILLAGE, CO 80111 | | <u> </u> | none no. (30 | 3) 779-5710 |
| Ma | y the IF | RS discuss this return with the preparer shown above? See instructions | | | | X Yes No |

| Form | 990 (2022) UNIVERSITY OF DENVER | 84-0404231 | Page 2 |
|------|---|-----------------------|---------------|
| Pai | t III Statement of Program Service Accomplishments | | |
| | Check if Schedule O contains a response or note to any line in this Part III | | Х |
| 1 | Briefly describe the organization's mission: | | |
| | THE UNIVERSITY OF DENVER IS A HIGHER EDUCATIONAL INSTITUTION, | | |
| | PROVIDING BOTH UNDERGRADUATE AND GRADUATE DEGREES - THE MISSION OF THE | | |
| | UNIVERSITY OF DENVER IS TO PROMOTE LEARNING BY ENGAGING WITH STUDENTS | | |
| | IN ADVANCING SCHOLARLY INQUIRY, CULTIVATING CRITICAL AND CREATIVE | | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on the | | |
| | prior Form 990 or 990-EZ? | Ye | s X No |
| | If "Yes," describe these new services on Schedule O. | | |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program services? | Ye | s X No |
| | If "Yes," describe these changes on Schedule O. | | |
| 4 | Describe the organization's program service accomplishments for each of its three largest program services, as m | neasured by expenses | S. |
| | Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others | * * | |
| | revenue, if any, for each program service reported. | , the total expended, | ai i a |
| 4a | | e\$597,9 | 40.100. |
| ти | INSTRUCTION 2022-2023: UNDERGRADUATE 6,106, GRADUATE AND PROFESSIONAL | | |
| | 7,583, TOTAL FALL ENROLLMENT 13,743. DEGREES CONFERRED (2022-2023): | | |
| | BACCALAUREATE 1,806, MASTER'S 2848, FIRST PROFESSIONAL 307, DOCTORAL | | |
| | 128. TOTAL DEGREES CONFERRED 5,089. UNDERGRADUATE STUDENTS CAN SELECT | | |
| | FROM MORE THAN 100 UNDERGRADUATE PROGRAMS, INCLUDING TRADITIONAL MAJORS | | |
| | AND DUAL DEGREE PROGRAMS THAT SPAN A VARIETY OF DISCIPLINES, INCLUDING | | |
| | , | | |
| | BUSINESS, EDUCATION, SOCIAL WORK, ART HISTORY, GEOGRAPHIC INFORMATION | | |
| | SCIENCE, INTERNATIONAL STUDIES, PUBLIC POLICY AND ENGINEERING. GRADUATE | | |
| | STUDENTS CAN SELECT FROM MORE THAN 120 GRADUATE DEGREE PROGRAMS THAT | | |
| | WILL CHALLENGE, INSPIRE, AND PREPARE THEM TO ACHIEVE THEIR HIGHEST | | |
| | ACADEMIC AND PROFESSIONAL GOALS. EACH DU GRADUATE PROGRAM COMBINES | | |
| | RIGOROUS STUDY WITH CRITICAL THINKING COLLABORATION AND APPLIED | | |
| 4b | (Code:) (Expenses \$ 237,467,011. including grants of \$ 237,467,011.) (Revenue | e \$ | <u> </u> |
| | STUDENT SCHOLARSHIP 2022-2023 ACADEMIC YEAR: THE UNIVERSITY OF DENVER | | |
| | STUDENT CAN APPLY FOR FINANCIAL AID TO ASSIST THEM AND THEIR FAMILY IN | | |
| | COVERING THE COST OF THEIR EDUCATION. SCHOLARSHIPS AND GRANTS ARE | | |
| | AVAILABLE TO STUDENTS FROM FEDERAL, STATE AND INSTITUTIONAL PROGRAMS. | | |
| | INSTITUTIONAL SCHOLARSHIP, WAIVERS AND CASH ASSISTANCE PROGRAMS FOR THE | | |
| | 2022-2023 ACADEMIC YEAR EQUALED \$208,587,154 ENDOWED AND GIFT SUPPORT | | |
| | SCHOLARSHIP PROGRAMS FUNDED \$25,080,216 AND THE FEDERAL AND STATE | | |
| | PROGRAMS FUNDED \$3,799,641. UP TO 80% OF THE STUDENTS AT THE UNIVERSITY | | |
| | RECEIVE SOME FINANCIAL AID. | | |
| | | | |
| | | | |
| | | | |
| 4c | (Code:) (Expenses \$175,069,081. including grants of \$) (Revenue | e\$ 18,2 | 13,521. |
| | 2022-2023 ACADEMIC YEAR: ACADEMIC SUPPORT INCLUDES THE ADMINISTRATIVE | | |
| | SUPPORT FOR 12 GRADUATE SCHOOLS AND PROFESSIONAL PROGRAMS AND 7 | | |
| | UNDERGRADUATE SCHOOLS AND COLLEGES. ACADEMIC SUPPORT ALSO INCLUDES THE | | |
| | UNIVERSITY'S LIBRARIES, MEDIA AND INFORMATION TECHNOLOGY SUPPORT AND | | |
| | OTHER SUPPORT FUNCTIONS FOR THE UNIVERSITY'S PRIMARY MISSIONS. STUDENT | | |
| | SERVICES - CONSISTS OF THE ACTIVITIES OF THE ADMISSIONS, REGISTRAR AND | | |
| | FINANCIAL RESOURCES OFFICES AS WELL AS ACTIVITIES THAT CONTRIBUTE TO | | |
| | THE STUDENTS DEVELOPMENT OUTSIDE THE FORMAL INSTRUCTION PROGRAM THAT | | |
| | INCLUDE INTERCOLLEGIATE ATHLETIC PROGRAMS AND SPORTS AND WELLNESS | | |
| | RECREATION PROGRAMS. INCLUDED IN THESE ACTIVITIES ARE CAMPUS LIFE, | | |
| | CAREER AND COUNSELING CENTERS, LEADERSHIP PROGRAMS AND OTHER CAMPUS | | |
| | ACTIVITIES THAT CONTRIBUE TO THE STUDENTS' EMOTIONAL AND PHYSICAL | | |
| 44 | Other program services (Describe on Schedule O.) | | |
| Tu | | 31 161 598 \ | |
| 40 | (Expenses \$ 98,676,996. including grants of \$ 0.) (Revenue \$ 1.5 Total program service expenses 732,408,704. | ,,, | |
| 46 | Total program service expenses | | |

SEE SCHEDULE O FOR CONTINUATION(S)

Form **990** (2022)

10210513 131839 A355896

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? See instructions | 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 | | | |
| | similar amounts as defined in Rev. Proc. 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 | L, | | |
| _ | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | 6 | | x |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | ۰ | | |
| • | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | l x |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete | - '- | | |
| 0 | , , , | 8 | х | |
| _ | Schedule D, Part III | ├° | | |
| 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? | | х | |
| | If "Yes," complete Schedule D, Part IV | 9 | Λ | |
| 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 | Х | |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X, | | | |
| | as applicable. | | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, | | | |
| | Part VI | 11a | Х | |
| b | Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total | | | |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | Х | |
| С | Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total | | | |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | Х |
| d | Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in | | | |
| | Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | Х |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | Х | |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | | | |
| | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | Х | |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | | | |
| | Schedule D, Parts XI and XII | 12a | х | |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? | | | |
| _ | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | | x |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | Х | |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | х |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, | | | |
| D | 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 | х | |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any | שדו | | |
| 13 | | 15 | | x |
| 16 | foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to | 13 | | |
| 16 | | 46 | х | |
| 47 | or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | Λ | |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, | | | _v |
| | column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions | 17 | | X |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines | | v | |
| | 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," | | | |
| | complete Schedule G, Part III | 19 | | X |
| 20 a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | X |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |
| 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or | | | |
| | domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II | 21 | | Х |

232003 12-13-22

Form **990** (2022)

UNIVERSITY OF DENVER Page 4 84 - 0404231Form 990 (2022)

| Par | TIV Checklist of Required Schedules (continued) | | | |
|--------|--|---------|-----|--------|
| | | | Yes | No |
| 22 | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on | | | |
| | Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | Х | |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current | | | |
| | and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete | | | |
| | Schedule J | 23 | 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 | | х |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | Х |
| | 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 | | | |
| | Schedule L, Part I | 25b | | х |
| 26 | Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current | | | |
| | or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% | | | |
| | controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II | 26 | | х |
| 27 | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, | | | |
| | 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 | | х |
| 28 | Was the organization a party to a business transaction with one of the following parties (see the 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? <i>If</i> | | | |
| | "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 line 28a or 28b? <i>If</i> | | | |
| | "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? <i>If</i> "Yes," <i>complete</i> | | | |
| | Schedule N, Part II | 32 | | х |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | |
| | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | Х | |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and | | | |
| | Part V. line 1 | 34 | х | |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | Х | |
| | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity | | | |
| | within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | | х |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? | | | |
| | If "Yes," complete Schedule R, Part V, line 2 | 36 | | х |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | |
| | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | х |
| 38 | Did the organization complete Schedule O and provide explanations on 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 | <u></u> | | |
| | | | Yes | No |
| 1a | Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 18369 | | | |
| | | | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming | | | |
| | (gambling) winnings to prize winners? | 1c | Х | |
| 232004 | 12-13-22 | Form | 990 | (2022) |

232004 12-13-22

10210513 131839 A355896

Form 990 (2022)
UNIVERSITY OF DENVER

Part V Statements Regarding Other IRS Filings and Tax Compliance Page 5 84 - 0404231

| Par | 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 | 9158 | | | |
| | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | | 2b | X | |
| | 0 , , , , , , , , , , , , , , , , , , , | | 3a | Х | |
| | 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 | - |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a | | _ | | ,, |
| _ | financial account in a foreign country (such as a bank account, securities account, or other financial account)? | | 4a | | Х |
| р | 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). | | | | Х |
| | , | | 5a 5b | | X |
| | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | | 5c | | <u> </u> |
| | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solici | | 30 | | |
| ua | | | 6a | | x |
| h | any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts | | - Oa | | |
| | were not tax deductible? | | 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | | |
| | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods are services provided to the partly as a contribution and partly for goods are services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods are services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods are services provided to the partly as a contribution and partly for goods are services provided to the partly as a contribution and partly for goods are services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods are services provided to the partly as a contribution and partly for goods are services provided to the partly as a contribution and partly for goods are services provided to the partly as a contribution and partly for goods are services provided to the partly as a contribution and partly for goods are services provided to the partly as a contribution and partly for goods are services provided to the partly as a contribution and partly for goods are services provided to the partly as a contribution and partly for goods are services provided to the partly as a contribution and partly for goods are services provided to the partly as a contribution and a contrib | navor? | 7a | Х | |
| | If "Yes," did the organization notify the donor of the value of the goods or services provided? | | 7b | Х | |
| | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required | | | | |
| | to file Form 8282? | | 7c | | x |
| d | | | | | |
| 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 109 | 8-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 | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | | |
| а | Did the sponsoring organization make any taxable distributions under section 4966? | | 9a | | <u> </u> |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | | 9b | | |
| 10 | Section 501(c)(7) organizations. Enter: | | | | |
| | 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: | | | | |
| | | | | | |
| b | Gross income from other sources. (Do not net amounts due or paid to other sources against | | | | |
| 40- | amounts due or received from them.) [11b] Section 1007(AVI) non-account described by the described filing Farm 200 in liquid form 10412 | | 40- | | |
| | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year | | 12a | | |
| 13 | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | | | | |
| | Is the organization licensed to issue qualified health plans in more than one state? | | 13a | | |
| u | Note: See the instructions for additional information the organization must report on Schedule O. | | 100 | | |
| h | 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 | | х |
| | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O | | 14b | | |
| 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 the 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. | | | | |
| 17 | Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities | | | | 1 |
| | that would result in the imposition of an excise tax under section 4951, 4952 or 4953? | | 17 | | |
| | If "Yes," complete Form 6069. | | | | |

Form **990** (2022)

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 | | | |
| | 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 1b 24 | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other | | | |
| | officer, director, trustee, or key employee? | 2 | | Х |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision | | | |
| | of officers, directors, trustees, or key employees to a management company or other person? | 3 | | Х |
| 4 | | 4 | | Х |
| 5 | | 5 | | Х |
| 6 | | 6 | | Х |
| 7a | | | | |
| | | 7a | | Х |
| b | | | | |
| | | 7b | | Х |
| 8 | | | | |
| а | | 8a | X | |
| b | | 8b | Х | |
| 9 | | | | |
| <u>C</u> | 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 Revenue Code.) | | | |
| | | | Yes | No X |
| | | 10a | | Λ. |
| b | | 401 | | |
| 44- | | 10b | Х | |
| | | 11a | Λ | |
| b | | 40- | Х | |
| 12a | · · · | 12a | X | |
| b | | 12b | Λ | |
| С | | 40- | х | |
| 40 | | 12c | X | |
| 13 | • | 13 14 | X | |
| 14 | | 14 | 21 | |
| 15 | | | | |
| _ | | 45. | х | |
| | | 15a 15b | X | |
| b | | 130 | | |
| 162 | | | | |
| ioa | | 16a | | Х |
| h | , | 104 | | - |
| | | | | |
| | | 16b | | |
| Sec | | 100 | | |
| 17 | | | | |
| 18 | | onlv) | availal | ole |
| | Did any officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? But the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization mailing address? If "Yes." provide the names and addresses on Schedule O tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? If "Yes," did the organization have a written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exem | | | |
| | | | | |
| 19 | (************************************** | financ | cial | |
| | | 14 | - | |
| 20 | | | | |
| | ANDREW CULLEN - 303-871-2404 | | | |
| | 2199 S UNIVERSITY BLVD, DENVER, CO 80208 | | | |

Form **990** (2022)

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

| Check this box if neither the organization no | or any related | orga | niza | tion | con | npen | sate | ed any current officer, di | rector, or trustee. | |
|---|------------------------|-------------------------------|-----------------|---------|--------------|---------------------------------|--------|----------------------------|----------------------------------|-----------------------|
| (A) | (B) | | | | C) | | | (D) | (E) | (F) |
| Name and title | Average | (do | not c | Pos | | | one | Reportable | Reportable | Estimated |
| | hours per | box | , unles | ss per | rson i | s both | an | compensation | compensation | amount of |
| | week | | Cei aii | | liecto | i/ii us | (66) | from | from related | other |
| | (list any hours for | lirecto | | | | | | the organization | organizations (W-2/1099-MISC/ | compensation from the |
| | related | e or 0 | trustee | | | satec | | (W-2/1099-MISC/ | 1099-NEC) | organization |
| | organizations | ndividual trustee or director | al tru: | | yee | Highest compensated employee | | 1099-NEC) | , | and related |
| | below | idual | Institutional t | Je. | Key employee | est co loyee | Jer. | · | | organizations |
| | line) | Indiv | Insti | Officer | Key | High emp | Former | | | |
| (1) JEREMY HAEFNER | 40.00 | | | | | | | | | |
| CHANCELLOR | | | | Х | | | | 922,734. | 0. | 63,705. |
| (2) DAVID CARLE | 40.00 | | | | | | | | | |
| HEAD COACH | | | | | | Х | | 721,634. | 0. | 54,261. |
| (3) MARY CLARK | 40.00 | | | | | | | | | |
| PROVOST AND EXEC. VICE CHANCELLOR | | | | | Х | | | 492,659. | 0. | 25,266. |
| (4) VIVEK CHOUDHURY | 40.00 | | | | | | | | | |
| DEAN | | | | | Х | | | 476,551. | 0. | 40,388. |
| (5) LESLIE BRUNELLI | 40.00 | | | | | | | | _ | |
| TREASURER - SENIOR VICE CHANCELLOR | | | | Х | | | | 411,749. | 0. | 43,563. |
| (6) VALERIE OTTEN | 40.00 | | | | | | | | | |
| SENIOR VICE CHANCELLOR | | | | | Х | | | 393,173. | 0. | 54,485. |
| (7) BRUCE SMITH | 40.00 | | | | | | | | | |
| DEAN | 40.00 | | | | Х | | | 376,916. | 0. | 45,223. |
| (8) TODD ADAMS | 40.00 | | | | | | | 24.6.606 | | 400 740 |
| VICE CHANCELLOR | 40.00 | | | | Х | | | 316,606. | 0. | 100,710. |
| (9) RUSSELL KAURLOTO | 40.00 | | | | | | | 360 600 | • | 40.060 |
| VICE CHANCELLOR | 40.00 | | | | Х | | | 360,679. | 0. | 48,960. |
| (10) NANCY NICLEY | 40.00 | | | х | | | | 256 762 | 0 | 46 024 |
| SECRETARY - CHIEF OF STAFF (11) JEFFREY WULBURN | 40.00 | | | ^ | | | | 356,762. | 0. | 46,924. |
| HEAD COACH | 40.00 | | | | | x | | 336,273. | 0. | 52,061. |
| (12) LISA VICTORAVICH | 40.00 | | | | | Λ | | 330,273. | ٠. | 32,001. |
| PROFESSOR | 40.00 | | | | | x | | 351,189. | 0. | 32,278. |
| (13) JACK STRAUS | 40.00 | | | | | | | 331,103. | • | 32,270. |
| PROFESSOR | | • | | | | x | | 326,075. | 0. | 43,249. |
| (14) CHARLES DHANARAJ | 40.00 | | | | | | | | | , |
| PROFESSOR | | - | | | | x | | 326,104. | 0. | 40,247. |
| (15) PAUL CHAN - SPECIAL ADVISOR | 40.00 | | | | | | | , | | , = = . • |
| UNIVERSITY COUNSEL (THROUGH 11/1/22) | - | 1 | | | х | | | 299,073. | 0. | 39,111. |
| (16) RHONDA GONZALES | 40.00 | | | | | | | , , | - | , , , , |
| DEAN | | | | | х | | | 277,461. | 0. | 57,792. |
| (17) ELIZABETH BULLOCK | 40.00 | | | | | | | · | | • |
| UNIVERSITY COUNSEL | | 1 | l | l | х | l | 1 | 283,505. | 0. | 43,872. |

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| Deat VIII | | | | | | | | | | - rage • |
|--|------------------------|--------------------------------|---------------------------|---------|--------------|------------------------------|--------|---------------------------------|------------------------------|-----------------------|
| Part VII Section A. Officers, Directors, Trust | tees, Key Emp | loy | ees, | and | l Hiç | ghes | t Co | mpensated Employee | s (continued) | |
| (A) | (B) | | | (C | ;) | | | (D) | (E) | (F) |
| Name and title | Average | (do | | Posi | | າ than ເ | ne | Reportable | Reportable | Estimated |
| | hours per | box | , unles | ss per | son i | s both | an | compensation | compensation | amount of |
| | week | | Ler an | lu a ui | recto | I / II us | iee) | from | from related | other |
| | (list any hours for | irecto | | | | | | the | organizations | compensation |
| | related | ordi | tee | | | sated | | organization (W-2/1099-MISC/ | (W-2/1099-MISC/ 1099-NEC) | from the organization |
| | organizations | ruste | l trus | | ee | npen | | 1099-NEC) | 1099-NEG) | and related |
| | below | dual t | rtiona | | nploy | st cor | Ji. | 1000 (420) | | organizations |
| | line) | Individual trustee or director | In stit utio nal tru stee | Officer | Key employee | Highest compensated employee | Former | | | |
| (18) TODD RINEHART | 40.00 | | | | | | | | | |
| VICE CHANCELLOR | | | | | Х | | | 270,203. | 0. | 51,779. |
| (19) RENEA MORRIS | 40.00 | | | | | | | | | |
| VICE CHANCELLOR | | | | | Х | | | 257,851. | 0. | 45,247. |
| (20) GREGG KVISTAD - PROVOST EMERITU | 40.00 | | | | | | | | | |
| PROVOST THROUGH 8/31/22 | | | | | Х | | | 259,860. | 0. | 35,618. |
| (21) CHRISTOPHER WHITT | 40.00 | | | | | | | | | |
| VICE CHANCELLOR | | | | | Х | | | 241,087. | 0. | 49,922. |
| (22) LINDA KOSTEN | 40.00 | | | | | | | | | |
| SENIOR VICE PROVOST | | | | | Х | | | 235,029. | 0. | 49,559. |
| (23) KARLTON CREECH | 40.00 | | | | | | | | | |
| VICE CHANCELLOR | | | | | Х | | | 215,105. | 0. | 62,676. |
| (24) ALLAN WILSON | 40.00 | | | | | | | | | |
| ASSOCIATE VICE CHANCELLOR | | | | | Х | | | 217,714. | 0. | 30,055. |
| (25) JEFFREY BANKS | 40.00 | | | | | | | | | |
| VICE CHANCELLOR | | | | | Х | | | 212,815. | 0. | 32,656. |
| (26) STUART HALSALL | 40.00 | | | | | | | | | |
| ASSOCIATE VICE CHANCELLOR | | | | | Х | | | 194,528. | 0. | 49,169. |
| 1b Subtotal | | | | | | | | 9,133,335. | 0. | 1,238,776. |
| c Total from continuation sheets to Part VII | , Section A | | | | | | | 873,830. | 0. | 145,530. |
| d Total (add lines 1b and 1c) | | | | | | | | 10,007,165. | 0. | 1,384,306. |

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

657

| | | | Yes | No |
|---|--|---|-----|----|
| 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 |

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 | | |
|--|---------------------------------|--------------|
| (A) | (B) | (C) |
| Name and business address | Description of services | Compensation |
| LAKELAND HOLDINGS, 5301 SOUTHWEST PARKWAY, | | |
| SUITE 200, AUSTIN, TX 78735 | STUDENT PROGRAM SERVICES | 3,350,904. |
| ADCELLERANT, 865 ALBION STREET, SUITE 400, | | |
| DENVER, CO 80220 | DIGITAL MARKETING | 1,772,557. |
| TRIBAL LAW POLICY INSTITUTE, 8235 SANTA | | |
| MONICA BLVD, SUITE 211, WEST HOLLYWOOD, CA | RESEARCH GRANT SUBCONTRACTOR | 1,507,318. |
| DU UNIV LOFTS ACQ LLC, 4100 EAST | | |
| MISSISSIPPI AVE., UNIT 1450, DENVER, CO | PROPERTY MANAGEMENT | 1,039,113. |
| CARNEGIE DARTLET LLC | | |
| 210 LITTLETON ROAD, WESTFORD, MA 01886 | HIGHER EDUCATION MARKETING | 850,705. |
| 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 32 | | |

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2022)

Form 990 UNIVERSITY OF DENVER 84-0404231

| Form 990 UNIVERSITY (| OF DENVER | | | | | | | | 84-04042 | 231 |
|---|---|--------------------------------|-----------------------|---------|--------------|------------------------------|--------|--|--|---|
| Part VII Section A. Officers, Directors, Tr | ustees, Key Er | nplo | yee | s, aı | nd H | lighe | est (| Compensated Employe | es (continued) | |
| (A) | (B) | | | | C) | | | (D) | (E) | (F) |
| Name and title | Average | | | Pos | ition | | | Reportable | Reportable | Estimated |
| | hours | (c | heck | all t | that | app | ly) | compensation | compensation | amount of |
| | per week (list any hours for related organizations below line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | from the organization (W-2/1099-MISC) | from related organizations (W-2/1099-MISC) | other compensatior from the organization and related organizations |
| (27) ANDREW CULLEN | 40.00 | | | | | | | | | |
| ASSISTANT TREASURER - CONTROLLER | | 1 | | х | | | | 219,391. | 0. | 18,529 |
| (28) STEPHANIE O'MALLEY | 40.00 | | | | | | | , - | | , |
| ASSOCIATE VICE CHANCELLOR | | 1 | | | х | | | 191,706. | 0. | 12,57 |
| (29) JOSHUA BERLO | 40.00 | | | | | | | | | , |
| VICE CHANCELLOR | | 1 | | | х | | | 160,229. | 0. | 20,409 |
| (30) ROSALYN FEAGINS - ASSISTANT | 40.00 | | | | | | | 200,223. | • | 20,103 |
| SECRETARY & ASSISTANT TREASURER | 40.00 | 1 | | х | | | | 126,048. | 0. | 18,762 |
| (31) CLAIRE BROWNELL | 40.00 | | | Λ | | | | 120,040. | ٠. | 10,702 |
| ASSISTANT SECRETARY | 40.00 | 1 | | Х | | | | 90,416. | 0. | 39,450 |
| (32) ANGELA DUGGAN | 40.00 | | | | | | | 90,410. | 0. | 33,430 |
| ASSISTANT SECRETARY | 40.00 | 1 | | Х | | | | 73,041. | 0. | 35,803 |
| (33) GEORGE CASEY | 11.00 | | | Λ | | | | 75,041. | ٠. | 33,00 |
| TRUSTEE - PROFESSOR | 11.00 | x | | | | | | 12,999. | 0. | (|
| (34) JOHN A. MILLER | 1.00 | ^ | | | | | | 12,999. | 0. | |
| TRUSTEE - CHAIR | 1.00 | x | | Х | | | | 0. | 0. | (|
| (35) DEBORAH DEHAAS | 1.00 | ^ | | | | | | 0. | 0. | |
| TRUSTEE - VICE CHAIR | 1.00 | x | | Х | | | | 0. | 0. | (|
| (36) KEVIN C. GALLAGHER | 1.00 | Λ | | Λ | | | | | ٠. | |
| TRUSTEE - VICE CHAIR | 1.00 | x | | Х | | | | 0. | 0. | (|
| (37) GREGORY L. MOORE | 1.00 | Λ | | Λ | | | | · · · | ٠. | |
| TRUSTEE - VICE CHAIR | 1.00 | x | | Х | | | | 0. | 0. | (|
| (38) DOUGLAS G. SCRIVNER | 1.00 | ^ | | | | | | 0. | 0. | • |
| TRUSTEE - VICE CHAIR | 1.00 | x | | Х | | | | 0. | 0. | (|
| (39) EDWARD T. ANDERSON | 1.00 | ^ | | | | | | 0. | 0. | • |
| TRUSTEE | 1.00 | Х | | | | | | 0. | 0. | (|
| (40) JOHN BUCKSBAUM | 1.00 | ^ | | | | | | 0. | 0. | ' |
| TRUSTEE | 1.00 | x | | | | | | 0. | 0. | |
| (41) PETER BURWELL | 1.00 | ^ | | | | | | 0. | 0. | (|
| TRUSTEE | 1.00 | x | | | | | | 0. | 0. | (|
| (42) MARY SUE COLEMAN | 1.00 | ^ | | | | | | 0. | 0. | |
| (42) MARI SUE COLEMAN TRUSTEE | 1.00 | x | | | | | | 0. | 0. | (|
| (43) SUSANA CORDOVA | 1.00 | ^ | | | | | | 0. | 0. | |
| TRUSTEE | 1.00 | X | | | | | | 0. | 0. | (|
| (44) SUSAN DECKER | 1.00 | Λ | \vdash | | | | | | 0, | |
| TRUSTEE | 1.00 | x | | | | | | 0. | 0. | C |
| (45) NAVIN DIMOND | 1.00 | | \vdash | | | | | · · · | 0. | |
| TRUSTEE | 1.00 | X | | | | | | 0. | 0. | (|
| (46) MARGOT GILBERT FRANK | 1.00 | Λ | | | | | | · · | 0, | |
| TRUSTEE | 1.00 | x | | | | | | 0. | 0. | (|
| | | | <u> </u> | | 1 | l | | 0. | 0. | |

Form 990 UNIVERSITY OF DENVER 84-0404231

| Form 990 UNIVERSITY | OF DENVER | | | | | | | | 84-04042 | 231 |
|--|---|--------------------------------|-----------------------|----------|--------------|------------------------------|--------|--|--|--|
| Part VII Section A. Officers, Directors, T | rustees, Key Er | nplo | yee | s, aı | nd H | ligh | 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 | app | ly) | compensation | compensation from related organizations (W-2/1099-MISC) | amount of other compensation from the organization and related organizations |
| | per week (list any hours for related organizations below line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | from the organization (W-2/1099-MISC) | | |
| (47) PETER A. GILBERTSON | 1.00 | | | | | | | | | |
| TRUSTEE | | Х | | | | | | 0. | 0. | (|
| (48) JAMES GRIESEMER | 1.00 | | | | | | | | | |
| TRUSTEE | | Х | | | | | | 0. | 0. | (|
| (49) CRAIG HARRISON | 1.00 | | | | | | | | | |
| TRUSTEE | | Х | | | | | | 0. | 0. | (|
| (50) BRANDON C. JOHNSON | 1.00 | | | | | | | | | |
| TRUSTEE | | Х | | | | | | 0. | 0. | - |
| (51) TRYGVE E. MYHREN | 1.00 | | | | | | | | | |
| TRUSTEE | | Х | | | | | | 0. | 0. | 1 |
| (52) MARY K. RHINEHART | 1.00 | | | | | | | | | |
| TRUSTEE | | Х | | | | | | 0. | 0. | - |
| (53) DENISE M. O'LEARY | 1.00 | | | | | | | | | |
| TRUSTEE | | Х | | | | | | 0. | 0. | 1 |
| (54) CATHERINE C. SHOPNECK | 1.00 | | | | | | | | | |
| TRUSTEE | | Х | | | | | | 0. | 0. | 1 |
| (55) H ANDRE THOMAS | 1.00 | | | | | | | | | |
| TRUSTEE | | Х | | | | | | 0. | 0. | (|
| (56) OTTO TSCHUDI | 1.00 | | | | | | | | | |
| TRUSTEE | | Х | | | | | | 0. | 0. | |
| (57) FREDERICK T. WALDECK | 1.00 | | | | | | | | | |
| TRUSTEE | 1 00 | Х | | | | | | 0. | 0. | |
| (58) MICHAEL D. WEST | 1.00 | | | | | | | | | |
| FRUSTEE | | Х | | | | _ | | 0. | 0. | |
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UNIVERSITY OF DENVER 84-0404231 Page 9 Form 990 (2022)

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) Revenuè excluded Total revenue Related or exempt Unrelated from tax under function revenue business revenue sections 512 - 514 1a Contributions, Gifts, Grants and Other Similar Amounts **1 a** Federated campaigns 1b **b** Membership dues 42,937. c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above ... 36,432,452 1f 7,957,210 g Noncash contributions included in lines 1a-1f 36,475,389 h Total. Add lines 1a-1f **Business Code** 2 a TUITION AND FEES 611310 597,940,100. 597,940,100. Program Service Revenue b AUXILIARY ENTERPRISES 79,538,063 74,389,447. 611310 5,148,616. RESEARCH GRANTS 611310 53,433,939. 53,433,939. EDUCATIONAL ACTIVITIES 611310 18,213,521 18,213,521. STUDENT LOANS 611310 -54,704 -54,704 f All other program service revenue 749,070,919 g Total. Add lines 2a-2f Investment income (including dividends, interest, and 11,063,014 -609,118. 11,672,132. other similar amounts) 1,400 1,400. 4 Income from investment of tax-exempt bond proceeds 254,241, 254,241. 5 Royalties (i) Real (ii) Personal 2,758,320 6 a Gross rents 760,681. **b** Less: rental expenses 1,997,639. c Rental income or (loss) 1,997,639 1,997,639. d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of 7a\$38,281,467. 4,903,182. assets other than inventory **b** Less: cost or other basis **7b**\$31,557,906. 6,459,813 and sales expenses Other Revenue 6,723,561. -1,556,631 c Gain or (loss) 5,166,930. 342,399. 4,824,531. d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ 42,937. of contributions reported on line 1c). See Part IV, line 18 2,700. **b** Less: direct expenses 151,925. -149,225, -149 225 c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9b **b** Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 10a and allowances **b** Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** 11 a MISC SERVICE REVENUE 611710 3,392,916, 3,392,916 b d All other revenue 3,392,916

12 232009 12-13-22

18,600,718. Form 990 (2022)

4,881,897.

807,273,223.

e Total. Add lines 11a-11d

Total revenue. See instructions

747,315,219.

Form 990 (2022) UNIVERSITY OF DENVER

Part IX | Statement of Functional Expenses

84-0404231 Page **10**

| Secti | on 501(c)(3) and 501(c)(4) organizations must compl | ete all columns. All othe | r organizations must con | nplete column (A). | |
|-------|---|---------------------------|------------------------------|--|--------------------------|
| | Check if Schedule O contains a respons | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| | not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| 1 | Grants and other assistance to domestic organizations | | · | | |
| | and domestic governments. See Part IV, line 21 | | | | |
| 2 | Grants and other assistance to domestic | | | | |
| | individuals. See Part IV, line 22 | 222,632,522. | 222,632,522. | | |
| 3 | Grants and other assistance to foreign | | | | |
| | organizations, foreign governments, and foreign | | | | |
| | individuals. See Part IV, lines 15 and 16 | 14,834,489. | 14,834,489. | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, | | | | |
| | trustees, and key employees | 8,474,440. | 2,393,762. | 5,633,020. | 447,658. |
| 6 | Compensation not included above to disqualified | | | | |
| | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | 58,479. | 58,479. | | |
| 7 | Other salaries and wages | 276,147,658. | 241,075,566. | 23,951,103. | 11,120,989. |
| 8 | Pension plan accruals and contributions (include | | | | |
| | section 401(k) and 403(b) employer contributions) | 14,512,303. | 12,705,621. | 1,221,349. | 585,333. |
| 9 | Other employee benefits | 31,972,433. | 27,706,218. | 2,974,553. | 1,291,662. |
| 10 | Payroll taxes | 18,678,550. | 16,014,904. | 1,905,278. | 758,368. |
| 11 | Fees for services (nonemployees): | | | | |
| а | Management | | | | |
| | Legal | 1,977,046. | 529,060. | 1,447,986. | |
| | Accounting | 284,374. | | 284,374. | |
| | Lobbying | | | | |
| е | Professional fundraising services. See Part IV, line 17 | | | | |
| f | Investment management fees | 3,684,313. | | 3,684,313. | |
| g | Other. (If line 11g amount exceeds 10% of line 25, | | | | |
| | column (A), amount, list line 11g expenses on Sch 0.) | 80,305,445. | 76,678,279. | 2,738,877. | 888,289. |
| 12 | Advertising and promotion | 5,411,075. | 4,900,468. | 440,777. | 69,830. |
| 13 | Office expenses | 38,046,216. | 33,113,220. | 4,158,774. | 774,222. |
| 14 | Information technology | 11,056,096. | 3,725,977. | 7,147,302. | 182,817. |
| 15 | Royalties | 00 042 102 | 00 065 050 | 1 055 004 | |
| 16 | Occupancy | 22,843,183. | 20,965,259. | 1,877,924. | 274 115 |
| 17 | Travel | 14,093,946. | 13,085,072. | 634,759. | 374,115. |
| 18 | Payments of travel or entertainment expenses | | | | |
| | for any federal, state, or local public officials | 7 226 204 | F 072 422 | 1 000 155 | 1 005 700 |
| 19 | Conferences, conventions, and meetings | 7,236,384. | 5,072,433. | 1,098,155. | 1,065,796. |
| 20 | Interest | 8,158,871. | 8,131,488. | 27,383. | |
| 21 | Payments to affiliates | 10 064 046 | 17 306 561 | 1 660 205 | |
| 22 | Depreciation, depletion, and amortization | 19,064,846. 4,622,171. | 17,396,561. 1,759,949. | 1,668,285. | |
| 23 | Other expanses, Itamiza expanses not covered | 4,022,1/1. | 1,733,343. | 2,002,222. | |
| 24 | Other expenses. Itemize expenses not covered 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.) | | | | |
| а | BOOKS AND SUBSCRIPTIONS | 7,993,876. | 7,993,876. | | |
| b | FINANCIAL FEES | 3,964,117. | 1,616,913. | 2,279,084. | 68,120. |
| С | EVENT EXPENSES | 18,588. | 18,588. | | |
| d | | | | | |
| е | All other expenses | | | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 816,071,421. | 732,408,704. | 66,035,518. | 17,627,199. |
| 26 | Joint costs. Complete this line only if the organization | | | | |
| | reported in column (B) joint costs from a combined | | | | |
| | educational campaign and fundraising solicitation. | | | | |
| | Check here if following SOP 98-2 (ASC 958-720) | | | | |

Form **990** (2022)

Form 990 (2022)

Part X | Balance Sheet

UNIVERSITY OF DENVER

84 - 0404231

Page **11**

| Par | rt X | Balance Sheet | | | | | |
|-----------------------------|------|---|------------|---------------------|--------------------------|-----|---------------------------|
| | | Check if Schedule O contains a response or note | to any | line in this Part X | | | |
| | | | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash - non-interest-bearing | | | 177,304,388. | 1 | 153,243,190 |
| | 2 | Savings and temporary cash investments | | | 15,942,626. | 2 | 19,042,08 |
| | 3 | Pledges and grants receivable, net | | | 77,899,212. | 3 | 51,318,28 |
| | 4 | Accounts receivable, net | | | 38,349,461. | 4 | 46,735,99 |
| | 5 | Loans and other receivables from any current or | | | | | |
| | | trustee, key employee, creator or founder, substa | antial co | ntributor, or 35% | | | |
| | | controlled entity or family member of any of these | e persor | ns | | 5 | |
| | 6 | Loans and other receivables from other disqualifi | ed pers | ons (as defined | | | |
| | | under section 4958(f)(1)), and persons described | in section | on 4958(c)(3)(B) | | 6 | |
| ပ္ | 7 | Notes and loans receivable, net | | | | 7 | 9,352,97 |
| Assets | 8 | Inventories for sale or use | | | 178,492. | 8 | 215,30 |
| As | 9 | B :: | | | 11,571,485. | 9 | 14,418,51 |
| | 10a | Land, buildings, and equipment: cost or other | | | | | |
| | | basis. Complete Part VI of Schedule D | 10a | 1,054,422,034. | | | |
| | b | Less: accumulated depreciation | 10b | 278,406,992. | 773,702,181. | 10c | 776,015,04 |
| | 11 | Investments - publicly traded securities | | | 791,555,279. | 11 | 800,166,67 |
| | 12 | Investments - other securities. See Part IV, line 1 | | | 274,402,620. | 12 | 286,119,93 |
| | 13 | Investments - program-related. See Part IV, line 1 | 1 | | 5,036,419. | 13 | 3,556,96 |
| | 14 | Intangible assets | | | | 14 | |
| | 15 | Other assets. See Part IV, line 11 | | | 13,540,336. | 15 | 13,170,57 |
| | 16 | Total assets. Add lines 1 through 15 (must equa | | | 2,179,482,499. | 16 | 2,173,355,53 |
| | 17 | Accounts payable and accrued expenses | | | 91,080,448. | 17 | 78,294,51 |
| | 18 | Grants payable | | | | 18 | |
| | 19 | Deferred revenue | | | 30,121,362. | 19 | 32,829,99 |
| | 20 | Tax-exempt bond liabilities | | | 199,742,236. | 20 | 194,769,22 |
| | 21 | Escrow or custodial account liability. Complete P | art IV of | Schedule D | 1,505,700. | 21 | 1,571,19 |
| ဇ္ဇ | 22 | Loans and other payables to any current or former | er office | r, director, | | | |
| Ĭ | | trustee, key employee, creator or founder, substa | antial co | ntributor, or 35% | | | |
| Liabilities | | controlled entity or family member of any of these | e persor | ns | | 22 | |
| - | 23 | Secured mortgages and notes payable to unrelate | ed third | parties | 21,310,000. | 23 | 19,510,00 |
| | 24 | Unsecured notes and loans payable to unrelated | third pa | ırties | | 24 | |
| | 25 | Other liabilities (including federal income tax, pay | ables to | related third | | | |
| | | parties, and other liabilities not included on lines | 17-24). | Complete Part X | | | |
| | | of Schedule D | | | 21,533,899. | 25 | 14,890,61 |
| | 26 | Total liabilities. Add lines 17 through 25 | | | 365,293,645. | 26 | 341,865,53 |
| , | | Organizations that follow FASB ASC 958, chec | k here | X | | | |
| Ses | | and complete lines 27, 28, 32, and 33. | | | | | |
| la l | 27 | | | | 952,709,678. | 27 | 963,380,96 |
| Pa | 28 | Net assets with donor restrictions | | | 861,479,176. | 28 | 868,109,03 |
| | | Organizations that do not follow FASB ASC 95 | 8, chec | k here | | | |
| Ī | | and complete lines 29 through 33. | | | | | |
| 2 | 29 | Capital stock or trust principal, or current funds | | | | 29 | |
| SSe | 30 | Paid-in or capital surplus, or land, building, or equ | | | | 30 | |
| Net Assets or Fund Balances | 31 | Retained earnings, endowment, accumulated inc | | | | 31 | |
| Se | 32 | Total net assets or fund balances | | | 1,814,188,854. | 32 | 1,831,489,998 |
| | 33 | Total liabilities and net assets/fund balances | | | 2,179,482,499. | 33 | 2,173,355,53 |

| Form | 1990 (2022) UNIVERSITY OF DENVER | 84-040423 | 31 | Pa | ge 12 |
|------|---|-----------|-------|----------|--------------|
| | rt XI Reconciliation of Net Assets | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XI | | | | X |
| | | | | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | | ,273, | |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | ,071, | |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | -8 | ,798, | 198. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | | 1,814 | <u> </u> | |
| 5 | Net unrealized gains (losses) on investments | 5 | 24 | ,237, | 048. |
| 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 | 1 | ,862, | 294. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, | | | | |
| | column (B)) | 10 | 1,831 | ,489, | 998. |
| Pa | rt XII Financial Statements and Reporting | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | X |
| | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990: Cash X Accrual Other | | | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule | O. | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | | Х |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed | | | | |
| | separate basis, consolidated basis, or both: | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | |
| b | Were the organization's financial statements audited by an independent accountant? | | 2b | Х | |
| | 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 | | | | |
| С | 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? | | 2c | Х | |
| | If the organization changed either its oversight process or selection process during the tax year, explain on Sche | | | | |
| За | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the | | | | |
| | Uniform Guidance, 2 C.F.R. Part 200, Subpart F? | | За | Х | |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required | | | | |
| | or audits, explain why on Schedule O and describe any steps taken to undergo such audits | | 3b | х | |

Form **990** (2022)

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

2022
Open to Public

Inspection
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).) 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 5 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type 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 your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions)) Total

Schedule A (Form 990) 2022

UNIVERSITY OF DENVER

84-0404231

Page 2

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

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

| Sec | tion A. Public Support | | | | | | |
|------|--|-----------------------|----------------------|-----------------------|--------------------|---------------------|---------------------------------------|
| Cale | ndar year (or fiscal year beginning in) | (a) 2018 | (b) 2019 | (c) 2020 | (d) 2021 | (e) 2022 | (f) Total |
| | Gifts, grants, contributions, and | ` , | , , | , , | ` , | ` , | ,, |
| | membership fees received. (Do not | | | | | | |
| | include any "unusual grants.") | 47,281,150. | 27,505,454. | 79,339,770. | 88,265,579. | 36,475,389. | 278,867,342. |
| 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 | 47,281,150. | 27,505,454. | 79,339,770. | 88,265,579. | 36,475,389. | 278,867,342. |
| | 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) | | | | | | 62,804,824. |
| 6 | Public support. Subtract line 5 from line 4. | | | | | | 216,062,518. |
| | tion B. Total Support | | | | | | |
| Cale | ndar year (or fiscal year beginning in) | (a) 2018 | (b) 2019 | (c) 2020 | (d) 2021 | (e) 2022 | (f) Total |
| | Amounts from line 4 | 47,281,150. | 27,505,454. | 79,339,770. | 88,265,579. | 36,475,389. | 278,867,342. |
| | Gross income from interest, | | | | | | |
| | dividends, payments received on | | | | | | |
| | securities loans, rents, royalties, | | | | | | |
| | and income from similar sources | 7,839,358. | 7,856,062. | 6,041,629. | 4,349,050. | 14,686,133. | 40,772,232. |
| 9 | Net income from unrelated business | , , | | | | | |
| _ | activities, whether or not the | | | | | | |
| | business is regularly carried on | 631,462. | 575,559. | | 2,329,746. | 238,864. | 3,775,631. |
| 10 | Other income. Do not include gain | , | , | | , , | , | , , |
| | or loss from the sale of capital | | | | | | |
| | assets (Explain in Part VI.) | 3,305,445. | 2,449,591. | 2,646,044. | | 3,392,916. | 11,793,996. |
| 11 | Total support. Add lines 7 through 10 | , , | , , | , , | | , , | 335,209,201. |
| | Gross receipts from related activities, | etc. (see instructio | ns) | | | 12 3 | ,434,249,832. |
| | First 5 years. If the Form 990 is for th | | | ourth. or fifth tax v | ear as a section 5 | - | · · · · · · · · · · · · · · · · · · · |
| | organization, check this box and stor | | | • | | | |
| Sec | tion C. Computation of Publi | | | | | | |
| 14 | Public support percentage for 2022 (li | ine 6, column (f), di | vided by line 11, c | olumn (f)) | | 14 | 64.46 % |
| 15 | Public support percentage from 2021 | Schedule A, Part I | I, line 14 | | | 15 | 70.52 % |
| | 33 1/3% support test - 2022. If the o | | | | | ore, check this box | k and |
| | stop here. The organization qualifies | | | | | | |
| b | 33 1/3% support test - 2021. If the | | | | | | |
| | and stop here. The organization qual | ifies as a publicly s | upported organiza | tion | | | |
| 17a | 10% -facts-and-circumstances test | | | | | | |
| | and if the organization meets the facts | s-and-circumstance | es test, check this | box and stop her | e. Explain in Part | VI how the organiz | ation |
| | meets the facts-and-circumstances te | st. The organization | n qualifies as a pul | olicly supported or | ganization | - | |
| b | 10% -facts-and-circumstances test | _ | • | * | - | | |
| | more, and if the organization meets the | _ | | | | | |
| | organization meets the facts-and-circu | | · | | | | |
| 18 | Private foundation. If the organization | | | | | | |
| | | | | ,,, | | | (Form 990) 2022 |

Schedule A (Form 990) 2022

UNIVERSITY OF DENVER

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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.)

| qualify under the tests listed I Section A. Public Support | <u>below, please comp</u> | olete Part II.) | | | | |
|--|----------------------------|-------------------------------------|----------------------|---------------------|------------------------|-----------|
| Calendar year (or fiscal year beginning in) | (a) 2018 | (b) 2019 | (c) 2020 | (d) 2021 | (e) 2022 | (f) Total |
| 1 Gifts, grants, contributions, and | (4) = 3 : 3 | (2) 23 : 3 | (0) = 0 = 0 | (4,) = 3 = 1 | (0) = 0 = 0 | (.) |
| membership fees received. (Do not | | | | | | |
| include any "unusual grants.") | | | | | | |
| 2 Gross receipts from admissions, | | | | | | |
| merchandise sold or services per- | | | | | | |
| formed, or facilities furnished in | | | | | | |
| any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 Gross receipts from activities that | | | | | | |
| are not an unrelated trade or bus- | | | | | | |
| | | | | | | |
| iness under section 513 | | | | + | | |
| 4 Tax revenues levied for the organ- | | | | | | |
| ization's benefit and either paid to | | | | | | |
| or expended on its behalf | | | | | | |
| 5 The value of services or facilities | | | | | | |
| furnished by a governmental unit to | | | | | | |
| the organization without charge | | | | | | |
| 6 Total. Add lines 1 through 5 | | | | | | |
| 7a Amounts included on lines 1, 2, and | | | | | | |
| 3 received from disqualified persons | | | | | | |
| b Amounts included on lines 2 and 3 received | | | | | | |
| from other than disqualified persons that exceed the greater of \$5,000 or 1% of the | | | | | | |
| amount on line 13 for the year | | | | | | |
| c Add lines 7a and 7b | | | | | | |
| 8 Public support. (Subtract line 7c from line 6.) | | | | | | |
| Section B. Total Support | | • | • | • | | |
| Calendar year (or fiscal year beginning in) | (a) 2018 | (b) 2019 | (c) 2020 | (d) 2021 | (e) 2022 | (f) Total |
| 9 Amounts from line 6 | | , , | , | | | ,, |
| 10a Gross income from interest, | | | | | | |
| dividends, payments received on | | | | | | |
| securities loans, rents, royalties, and income from similar sources | | | | | | |
| b Unrelated business taxable income | | | | | | |
| (less section 511 taxes) from businesses | | | | | | |
| acquired after June 20, 1075 | | | | | | |
| | | | | | | |
| c Add lines 10a and 10b 11 Net income from unrelated business | | | | | | |
| activities not included on line 10b, | | | | | | |
| whether or not the business is | | | | | | |
| regularly carried on 12 Other income. Do not include gain | | | | | | |
| or loss from the sale of capital | | | | | | |
| assets (Explain in Part VI.) | | | | | | |
| 13 Total support. (Add lines 9, 10c, 11, and 12.) | | | | | | |
| 14 First 5 years. If the Form 990 is for t | he organization's fi | rst, second, third, | fourth, or fifth tax | year as a section (| 501(c)(3) organization | on, |
| | :- C | | | | | |
| Section C. Computation of Publ | | | | | T T | |
| 15 Public support percentage for 2022 | | · · · · · · · · · · · · · · · · · · | | | 15 | <u>%</u> |
| 16 Public support percentage from 202 | | | | | 16 | % |
| Section D. Computation of Inve | | | | | T T | |
| 17 Investment income percentage for 2 | | | | | 17 | % |
| 18 Investment income percentage from | | | | | 18 | <u>%</u> |
| 19a 33 1/3% support tests - 2022. If the | | | | | | 7 is not |
| more than 33 1/3%, check this box a | | | | | | |
| b 33 1/3% support tests - 2021. If the | | | | | | |
| line 18 is not more than 33 1/3%, ch | eck this box and st | top here. The orga | nization qualifies a | as a publicly supp | orted organization | |
| 20 Private foundation. If the organizati | on did not check a | box on line 14, 19 | a, or 19b, check th | nis box and see in: | structions | |

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Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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 on 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 on 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 line 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 |
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| ıle A (Forn | n 990) | 2022 |
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| Sche | dule A | (1 01111 000) LOLL | 84-0404231 | Pa | age 5 |
|--------|------------------------------------|---|-----------------------|------|--------------|
| Pa | rt IV | Supporting Organizations (continued) | | | |
| | | · · · · · · | | Yes | No |
| 11 | Has th | he organization accepted a gift or contribution from any of the following persons? | | | |
| а | A pers | son who directly or indirectly controls, either alone or together with persons described on lines 11b and | | | |
| | 11c b | elow, the governing body of a supported organization? | 11a | | |
| b | A fam | nily member of a person described on line 11a above? | 11b | | |
| С | A 35% | 6 controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide | | | |
| | | in Part VI. | 11c | | |
| Sec | tion E | 3. Type I Supporting Organizations | | | |
| | | | | Yes | No |
| 1 | more direct effects organ | ne governing body, members of the governing body, officers acting in their official capacity, or membership of on supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) ively operated, supervised, or controlled the organization's activities. If the organization had more than one supposization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among to | cers, orted the | | |
| _ | | orted organizations and what conditions or restrictions, if any, applied to such powers during the tax year. | 1 | | |
| 2 | | ne organization operate for the benefit of any supported organization other than the supported | | | |
| | | ization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in | | | |
| | | how providing such benefit carried out the purposes of the supported organization(s) that operated, | _ | | |
| 800 | super | vised, or controlled the supporting organization. C. Type II Supporting Organizations | 2 | | |
| 360 | tion | 5. Type ii Supporting Organizations | | | Г |
| 1 | Were | a majority of the organization's directors or trustees during the tax year also a majority of the directors | | Yes | No |
| - | | stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control | | | |
| | | inagement of the supporting organization was vested in the same persons that controlled or managed | | | |
| | | inagement of the supporting organization was vested in the same persons that controlled of managed apported organization(s). | 1 | | |
| Sec | tion [| D. All Type III Supporting Organizations | | | |
| | | <i>y</i> 11 0 0 | | Yes | No |
| 1 | Did th | ne organization provide to each of its supported organizations, by the last day of the fifth month of the | | 103 | 140 |
| • | | ization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax | | | |
| | | | | | |
| | | (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the | 1 | | |
| • | | ization's governing documents in effect on the date of notification, to the extent not previously provided? | - | | |
| 2 | | any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported | | | |
| | | ization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how | | | |
| 2 | | rganization maintained a close and continuous working relationship with the supported organization(s). | 2 | | |
| 3 | | ason of the relationship described on line 2, above, did the organization's supported organizations have a | | | |
| | | icant voice in the organization's investment policies and in directing the use of the organization's | | | |
| | | ne or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's | | | |
| Sec | suppo tion F | orted organizations played in this regard. E. Type III Functionally Integrated Supporting Organizations | 3 | | |
| | | | | | |
| 1 a | | k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instru The organization satisfied the Activities Test. <i>Complete</i> line 2 below. | actions). | | |
| b | | The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i> | | | |
| С | | The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity | y (see instruction | ns). | |
| 2 | | ties Test. Answer lines 2a and 2b below. | | Yes | No |
| а | Did su | ubstantially all of the organization's activities during the tax year directly further the exempt purposes of | | | |
| | the su | upported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify | | | |
| | | e supported organizations and explain how these activities directly furthered their exempt purposes, | | | |
| | | he organization was responsive to those supported organizations, and how the organization determined | | | |
| | | hese activities constituted substantially all of its activities. | 2a | | |
| b | | ne activities described on line 2a, above, constitute activities that, but for the organization's involvement, | | | |
| | | r more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in | | | |
| | | the reasons for the organization's position that its supported organization(s) would have engaged in | | | |
| | | activities but for the organization's position that its supported organization(s) would have organization and activities but for the organization's involvement. | 2b | | |
| 3 | | nt of Supported Organizations. Answer lines 3a and 3b below. | | | |
| а | | ne organization have the power to regularly appoint or elect a majority of the officers, directors, or | | | |
| - | | the supported organizations? If "Yes" or "No" provide details in Part VI. | За | | |
| b | | ne organization exercise a substantial degree of direction over the policies, programs, and activities of each | 32 | | |
| ~ | | Supported organizations? If "Ves " describe in Part VI the role played by the organization in this regard | 3b | | |

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| Sche | edule A (Form 990) 2022 UNIVERSITY OF DENVER | | | 84-0404231 | Page 6 |
|----------------------------------|---|----------------|---------------------------|-------------------------|----------|
| Pa | rt V Type III Non-Functionally Integrated 509(a)(3) Supporti | ng Organi | zations | | |
| 1 | Check here if the organization satisfied the Integral Part Test as a qualifyi | ng trust on N | lov. 20, 1970 (explain i | n Part VI). See insti | uctions. |
| | All other Type III non-functionally integrated supporting organizations must | | | | |
| Sect | tion 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 | | | |
| Section 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 | | | |
| | 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 0.015 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 0.035. | 6 | | | |
| 7 | Recoveries of prior-year distributions | 7 | | | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | | | |
| Sect | tion C - Distributable Amount | | | Current Y | 'ear |
| 1 | Adjusted net income for prior year (from Section A, line 8, column A) | 1 | | | |
| 2 | Enter 0.85 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-function | ally integrate | d Type III supporting or | ganization (see | |

UNIVERSITY OF DENVER 84-0404231 Schedule A (Form 990) 2022 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** 1 1 Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported 2 organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 3 4 4 Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 6 6 Other distributions (describe in Part VI). See instructions. 7 7 Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 8 9 Distributable amount for 2022 from Section C, line 6 10 Line 8 amount divided by line 9 amount 10 (i) (ii) Underdistributions Distributable **Excess Distributions** Section E - Distribution Allocations (see instructions) Pre-2022 Amount for 2022 Distributable amount for 2022 from Section C, line 6 2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2022 **a** From 2017 **b** From 2018 c From 2019 **d** From 2020 e From 2021 f Total of lines 3a through 3e g Applied to underdistributions of prior years h Applied to 2022 distributable amount i Carryover from 2017 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2022 from Section D, line 7: a Applied to underdistributions of prior years **b** Applied to 2022 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2022, 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 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2023. Add lines 3i and 4c. 8 Breakdown of line 7: a Excess from 2018 **b** Excess from 2019 c Excess from 2020

Schedule A (Form 990) 2022

d Excess from 2021e Excess from 2022

| Schedule A (Form 990) 2022 UNIVERSITY OF DENVER | 84-0404231 | Page 8 |
|---|--|--------|
| Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a o 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 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 Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional (See instructions.) | 1 and 2; Part IV, Sectior V, Section B, line 1e; Pa | n C, |
| SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME: | | |
| MISCELLANEOUS SERVICE REVENUE | | |
| 2018 AMOUNT: \$ 3,305,445. | | |
| 2019 AMOUNT: \$ 2,449,591. | | |
| 2020 AMOUNT: \$ 2,646,044. | | |
| 2022 AMOUNT: \$ 3,392,916. | | |
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Schedule B

(Form 990)

Schedule of Contributors

Attach to Form 990 or Form 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Department of the Treasury Internal Revenue Service

Name of the organization

UNIVERSITY OF DENVER

Organization type (check one):

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

Employer identification number 84–0404231

| | ONI | VERSIII OF DENVER | 04-0404231 | | | |
|--------------|--|---|---|--|--|--|
| Organizat | Prganization 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 | | | | |
| | | | | | | |
| | | 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. | . See instructions. | | | |
| General R | | | | | | |
| ☐ F | or an organization roperty) from any | filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling some contributor. Complete Parts I and II. See instructions for determining a contributor's | | | | |
| Special R | ules | | | | | |
| s | 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), 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. | | | | | |
| C li | 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 (entering "N/A" in column (b) instead of the contributor name and address), II, and III. | | | | | |
| y is p | ear, contributions checked, enter h urpose. Don't con | described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from an exclusively for religious, charitable, etc., purposes, but no such contributions totaled more re the total contributions that were received during the year for an exclusively religious, applete any of the parts unless the General Rule applies to this organization because it respectively, etc., contributions totaling \$5,000 or more during the year | re than \$1,000. If this box charitable, etc., eceived nonexclusively | | | |
| Caution: A | An organization th | at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (For | m 990) but it must | | | |

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

 $\ \ \, \text{LHA} \ \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$

Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022) Page **2**

Name of organization

Employer identification number

UNIVERSITY OF DENVER

84-0404231

| Part I | Contributors (see instructions). Use duplicate copies of Part I if a | dditional space is needed. | |
|------------|--|----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | | \$\$ | Person X Payroll Noncash X (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 2 | | \$\$ | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 3 | | \$\$\$\$ | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 4 | | \$\$, 6,896,311. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 5 | | \$\$ | Person Payroll Noncash X (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 6 | | \$\$ | Person X Payroll Noncash (Complete Part II for noncash contributions.) |

223452 11-15-22

Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022) Page **2**

Name of organization

Employer identification number

UNIVERSITY OF DENVER

84-0404231

| Part I | Contributors (see instructions). Use duplicate copies of Part I if ad | ditional 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 |
| 8 | | \$\$ | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) | (b) | (c) | (d) |
| 9 9 | Name, address, and ZIP + 4 | * 1,000,000. | 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 |
| 10 | Name, address, and Zir + 4 | \$\$850,000. | 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.) |

223452 11-15-22

Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022) Page **3**

Name of organization

Employer identification number

UNIVERSITY OF DENVER

84-0404231

| Part II | Noncash Property (see instructions). Use duplicate copies of Pa | Noncash 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 | | | | | |
| | PROMISSARY NOTE | | | | | | | |
| 1 | | | | | | | | |
| | | \$\$ | 06/27/02 | | | | | |
| (a) No. from | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received | | | | | |
| Part I | | (See instructions.) | | | | | | |
| 5 | REAL ESTATE | | | | | | | |
| | - | | | | | | | |
| | | \$6,459,813. | 02/02/23 | | | | | |
| (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 | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | - | \$ | | | | | | |

Schedule B (Form 990) (2022) Name of organization **Employer identification number** UNIVERSITY OF DENVER 84 - 0404231Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

10210513 131839 A355896

Page 4

SCHEDULE C (Form 990)

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

Complete if the organization is described below. Attach to Form 990 or Form 990-l

OMB No. 1545-0047

Open to Public Inspection

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.

Political Campaign and Lobbying Activities

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

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

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

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

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

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

| Name of orga | | | | Empl | loyer identification number |
|-----------------------------------|--|--|--|--|---|
| Doubla | UNIVERSITY | | law as ation FO4(a) | ovio o costion 507 ov | 84-0404231 |
| Part I-A | Complete if the org | anization is exempt und | ler section 501(c) | or is a section 527 or | ganization. |
| | | ation's direct and indirect politic | | | _ |
| | | ures | | \$ | |
| 3 Volunte | er hours for political campai | gn activities | | | 0. |
| Part I-B | Complete if the org | anization is exempt und | ler section 501(c)(| 3). | |
| | | incurred by the organization und | | | |
| | | incurred by organization manag | | | |
| | | n 4955 tax, did it file Form 4720 | | | |
| | | | | | Yes No |
| b If "Yes," | describe in Part IV. | anization is exempt und | ler section 501(c) | except section 501/c | 1/3/ |
| | | by the filing organization for se | | | |
| | • • | ization's funds contributed to of | · · · · · · · · · · · · · · · · · · · | | |
| | | | G | | } |
| • | | . Add lines 1 and 2. Enter here a | | | · |
| | | | | | |
| | | 1120-POL for this year? | | | |
| 5 Enter th made pa contribu | e names, addresses and em ayments. For each organiza itions received that were pro | nployer identification number (El tion listed, enter the amount pai omptly and directly delivered to additional space is needed, pro- | IN) of all section 527 po id from the filing organiz a separate political orga | litical organizations to which zation's funds. Also enter the anization, such as a separat | n the filing organization e 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) 2022

LHA

232041 11-08-22

| Sche | edule C (Form 990) 2022 | | ITY OF DE | | | | 0404231 Page 2 |
|------------|---|--------------------|----------------|---|---|--------------------------|-----------------------|
| Pa | | • | on is exen | npt under sectior | 1 501(c)(3) and file | d Form 5768 (el | ection under |
| | section 501(h |)). | | | | | |
| Α (| Check if the filing of | organization belor | ngs to an affi | liated group (and list in | Part IV each affiliated | group member's nan | ne, address, EIN, |
| | expenses, a | and share of exce | ss lobbying e | expenditures). | | | |
| B (| Check if the filing o | organization chec | ked box A ar | nd "limited control" pro | visions apply. | | |
| | | Limits on Lob | hvina Evne | nditurae | | (a) Filing | (b) Affiliated group |
| | (The term | | | ints paid or incurred.) | | organization's totals | totals |
| | | | | | | totais | |
| | Total lobbying expenditure | | - | | | | |
| b | Total lobbying expenditure | | | | | | |
| С | , , , | | d 1b) | | | | |
| | Other exempt purpose exp | | | | | | |
| | Total exempt purpose expenses | • | | , | | | |
| f | Lobbying nontaxable amou | | ount from the | e following table in both | n columns. | | |
| | If the amount on line 1e, colu | mn (a) or (b) is: | The lob | bying nontaxable am | ount is: | | |
| | Not over \$500,000 | | 20% of | the amount on line 1e. | | | |
| | Over \$500,000 but not ove | - , , | | 00 plus 15% of the exc | | | |
| | Over \$1,000,000 but not or | ver \$1,500,000 | | 00 plus 10% of the exc | | | |
| | Over \$1,500,000 but not or | ver \$17,000,000 | | 00 plus 5% of the exce | ss over \$1,500,000. | | |
| | Over \$17,000,000 | | \$1,000, | 000. | | | |
| | | | | | | | |
| _ | Grassroots nontaxable amo | • | , | | | | |
| | Subtract line 1g from line 1 | | | | | | |
| i | Subtract line 1f from line 1 | • | | | | | |
| j | If there is an amount other | than zero on eith | er line 1h or | line 1i, did the organiza | ation file Form 4720 | | |
| | reporting section 4911 tax | for this year? | | | | | Yes No |
| | (0 | | | eraging Period Under | • • | (H - C | .1 |
| | (Some organiza | | | ori(n) election do not la ate instructions for lir | have to complete all o nes 2a through 2f) | of the five columns b | elow. |
| | | | | nditures During 4-Yea | | | |
| | | | bying Exper | | Averaging Period | | |
| | Calendar year | (a) | 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) Total |
| | (or fiscal year beginning in |) (2) | 2010 | (5) 2020 | (6) 2021 | (d) 2022 | (c) rotal |
| | | | | | | | |
| 20 | Lobbying nontaxable amou | ınt | | | | | |
| | Lobbying ceiling amount | arit. | | | | | |
| U | (150% of line 2a, column(e) | , | | | | | |
| | (10070 01 1110 24, 00141111(0) | | | | | | |
| ^ | : Total lobbying expenditure | <u> </u> | | | | | |
| | Total lobbying expenditure | | | | | | |
| H | Grassroots nontaxable amo | ount | | | | | |
| | Grassroots ceiling amount | 5 516 | | | | | |
| | (150% of line 2d, column (e | e)) | | | | | |
| | , | | | | | | |
| | | -Parisson | | | | | |

Schedule C (Form 990) 2022

UNIVERSITY OF DENVER

84-0404231

Page 3

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)).

| | | (a | <u>.)</u> | (b) | |
|---|--|-----------------------------|--------------|-----------|--|
| For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity. | | | _ | | |
| OI LIII | e lobbyling activity. | Yes | No | Amount | |
| 1 | During the year, did the filing organization attempt to influence foreign, national, state, or | | | | |
| | local legislation, including any attempt to influence public opinion on a legislative matter | | | | |
| | or referendum, through the use of: | | | | |
| a | Volunteers? | | X | | |
| | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | X | | |
| | Media advertisements? | | X | | |
| | Mailings to members, legislators, or the public? Publications, or published or broadcast statements? | | X | | |
| | | | X | | |
| | Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? | | X | | |
| | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | X | | |
| | Other activities? | Х | | 59,790 | |
| | Total. Add lines 1c through 1i | | | 59,790 | |
| | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | Х | | |
| | If "Yes," enter the amount of any tax incurred under section 4912 | | | | |
| | If "Yes," enter the amount of any tax incurred by organization managers under section 4912 | | | | |
| d | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | | | |
| Par | t III-A Complete if the organization is exempt under section 501(c)(4), section | n 501(c)((| 5), or sec | etion | |
| | 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 Par | Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section | e prior year: n 501(c)(/ | ? 3 | tion | |
| ı aı | 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered | | | | |
| | answered "Yes." | | (2) | 7 ., 3, | |
| 1 | Dues, assessments and similar amounts from members | | 1 | | |
| 2 | Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political | | | | |
| | expenses for which the section 527(f) tax was paid). | | | | |
| а | Current year | | 2a | | |
| | Carryover from last year | | | | |
| | Total | | | | |
| | A consistency of the second consistency $OOO(4)/A/A$ and it can be consistent $OO(4)$ does | | ١. | | |
| 4 | If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc | ess | | | |
| | does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and per | olitical | | | |
| | expenditures next year? | | 4 | | |
| 5 | Taxable amount of lobbying and political expenditures. See instructions | | 5 | | |
| Par | | | | | |
| | de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group | list); Part II- | A, lines 1 a | nd 2 (See | |
| | uctions); and Part II-B, line 1. Also, complete this part for any additional information. | | | | |
| PART | II-B, LINE 1, LOBBYING ACTIVITIES: | | | | |
| שעע | UNIVERSITY PAYS DUES TO INDEPENDENT HIGHER EDUCATION OF COLORADO | | | | |
| 11111 | UNIVERSITI TATO DOES TO INDEFENDENT INTOINER EDUCATION OF COMORADO | | | | |
| ALON | G WITH TWO PRIVATE HIGHER EDUCATION INSTITUTIONS IN COLORADO. THIS | | | | |
| | | | | | |
| ORG | NIZATION PROVIDES MOSTLY LEGISLATIVE INFORMATION TO THE COLORADO | | | | |
| | | | | | |
| INST | TITUTIONS AND AT TIMES SEEKS TO INFLUENCE LEGISLATORS FOR THE | | | | |
| | | | | | |

Schedule C (Form 990) 2022

BENEFIT OF PRIVATE HIGHER EDUCATION.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" 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.

2022 Open to Public

Name of the organization

Employer identification number

| | UNIVERSITY OF DENVER | | | 84-0404231 | |
|-----|---|--|------------------|-----------------------|------------|
| Pa | organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, li | | or Accou | nts. Complete if the | ne |
| | | (a) Donor advised funds | (b) Fu | nds and other accou | nts |
| 1 | Total number at end of year | ` ' | (2): 3 | | |
| 2 | Aggregate value of contributions to (during year) | | | | |
| 3 | Aggregate value of grants from (during year) | | | | |
| 4 | Aggregate value at end of year | | | | |
| 5 | Did the organization inform all donors and donor advisors in | | ed funds | | |
| Ū | are the organization's property, subject to the organization's | _ | | Yes | No |
| 6 | Did the organization inform all grantees, donors, and donor a | | | | |
| _ | for charitable purposes and not for the benefit of the donor | | | | |
| | · · | | · · | Yes | ☐ No |
| Pai | | rganization answered "Yes" on Form 990, I | Part IV, line 7 | | |
| 1 | Purpose(s) of conservation easements held by the organizat | | | | |
| | Preservation of land for public use (for example, recreation) | ation or education) Preservation of | f a historically | y important land area | ı |
| | Protection of natural habitat | Preservation of | f a certified h | istoric structure | |
| | Preservation of open space | | | | |
| 2 | Complete lines 2a through 2d if the organization held a qual | ified conservation contribution in the form | of a conserva | ation easement on th | e last |
| | day of the tax year. | | | Held at the End of th | e Tax Year |
| а | Total number of conservation easements | | 2a | | |
| b | - | | | | |
| С | Number of conservation easements on a certified historic st | ructure included in (a) | 2c | | |
| d | Number of conservation easements included in (c) acquired | after July 25,2006, and not on a | | | |
| | | | | | |
| 3 | Number of conservation easements modified, transferred, re- | eleased, extinguished, or terminated by the | organization | during the tax | |
| | year | | | | |
| 4 | Number of states where property subject to conservation ea | · · · · · · · · · · · · · · · · · · · | | | |
| 5 | Does the organization have a written policy regarding the pe | | | | |
| 6 | violations, and enforcement of the conservation easements | | | Yes | No |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting | , rialiding of violations, and emorcing cons | sei valioni easi | ements during the ye | zai |
| 7 | Amount of expenses incurred in monitoring, inspecting, han | dling of violations, and enforcing conserva- | tion easemer | nts during the year | |
| | · ···································· | | | , | |
| 8 | Does each conservation easement reported on line 2(d) abo | ve satisfy the requirements of section 170(| h)(4)(B)(i) | | |
| | | | | Yes | ☐ No |
| 9 | In Part XIII, describe how the organization reports conservat | | | nd | |
| | balance sheet, and include, if applicable, the text of the foot | note to the organization's financial stateme | ents that des | cribes the | |
| | organization's accounting for conservation easements. | | | | |
| Pa | | · | her Simila | ır Assets. | |
| | Complete if the organization answered "Yes" on Forr | | | | |
| 1a | If the organization elected, as permitted under FASB ASC 98 | | | | |
| | of art, historical treasures, or other similar assets held for pu | · · · · · · · · · · · · · · · · · · · | | public | |
| | service, provide in Part XIII the text of the footnote to its fina | | | | |
| b | If the organization elected, as permitted under FASB ASC 9 | , , | | | |
| | art, historical treasures, or other similar assets held for publi | c exnibition, education, or research in furth | nerance of pu | blic service, | |
| | provide the following amounts relating to these items: | | | Φ. | ^ |
| | (i) Revenue included on Form 990, Part VIII, line 1 | | | \$ | 0. |
| _ | | the control of the co | | \$ | υ, |
| 2 | If the organization received or held works of art, historical tre | | ı gaın, provid | е | |
| _ | the following amounts required to be reported under FASB / | | | Φ. | 0. |
| a | Revenue included on Form 990, Part VIII, line 1 | | | \$ | 0. |
| Ø | Assets included in Form 990, Part X | | | Φ | ٠. |

232051 09-01-22

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

| | dule D (Form 990) 2022 UNIVERSITY Till Organizations Maintaining C | | t. Historical Tre | asures. or C | Other S | imilar | 84-040 Assets | | Page 2 |
|-----|---|-------------------------|--------------------------------------|---------------------------------------|-------------|--------------------|-------------------------|-----------|-----------------------------|
| 3 | Using the organization's acquisition, accessi | | | | | | | (COIIIII | <u>uea)</u> |
| _ | collection items (check all that apply): | o.,, aa ooooo.a | | onouning and in | anto orgini | | | | |
| а | X Public exhibition | c | Loan or exc | hange program | | | | | |
| b | X Scholarly research | 6 | | 9- 9 | | | | | |
| С | X Preservation for future generations | | | | | | | | |
| 4 | Provide a description of the organization's co | ollections and explain | n how they further th | ne organization's | s exempt | purpos | se in Part | XIII. | |
| 5 | During the year, did the organization solicit of | | | | | | | | |
| | to be sold to raise funds rather than to be ma | | | | | | | Yes | X No |
| Par | | | ete if the organizatio | n answered "Ye | es" on Fo | rm 990 | , Part IV, I | ine 9, or | |
| | reported an amount on Form 990, Pa | , | | | | | | | |
| 1a | Is the organization an agent, trustee, custodi | | • | | | | _ | _ | |
| | on Form 990, Part X? | | | | | | L | Yes | X No |
| b | If "Yes," explain the arrangement in Part XIII $$ | and complete the fo | llowing table: | | | | | | |
| | | | | | | | | Amount | |
| | Beginning balance | | | | | 1c | | | |
| | Additions during the year | | | | | 1d | | | |
| е | Distributions during the year | | | | | 1e | | | |
| f | Ending balance | | | | | 1f | | 7 | |
| | Did the organization include an amount on F | | | | - | | LX | Yes | ∐ No |
| Par | If "Yes," explain the arrangement in Part XIII. | | | | | | | | X |
| rai | t V Endowment Funds. Complete | | | | | Throny | oare back | (a) Four | voore book |
| 4. | Danisaria a africa a balanca | (a) Current year | (b) Prior year 1,103,878,037. | (c) Two years b | | | ears back | | years back |
| | Beginning of year balance | 26,369,802. | | 798,298,4 54,971,0 | | | 17,680. | | 009,879. |
| | Contributions | 36,590,547. | | | | | 55,934. 24,195. | | $\frac{320,176.}{610,281.}$ |
| | Net investment earnings, gains, and losses | 27,648,155. | | | | | 38,434. | | 760,044. |
| | Grants or scholarships | 27,040,133. | 20,394,944. | 23,037,3 | 303. | 23,1 | 00,404. | 25, | 700,044. |
| е | Other expenditures for facilities | 16,779,342. | 14,564,185. | 13,025,7 | 747 | 10 0 | 56,942. | 13 | 301 7/0 |
| | and programs | 3,684,313. | · · · | | | | 03,951. | | 391,749. 270,863. |
| | Administrative expenses | 1,057,395,384. | | | | | 98,482. | | 517,680. |
| _ | End of year balance | | • | • | 337. | 750,2. | 70,402. | 014, | 317,000. |
| 2 | Provide the estimated percentage of the current | ent year end balanc | e (line 1g, column (a) | neid as: | | | | | |
| _ | Board designated or quasi-endowment Permanent endowment 45.9000 | % | | | | | | | |
| b | | % % | | | | | | | |
| C | The percentages on lines 2a, 2b, and 2c sho | • - | | | | | | | |
| 32 | Are there endowment funds not in the posse | | ation that are held ar | nd administered | for the | | | | |
| Ja | organization by: | ssion of the organiza | ation that are neid ar | id administered | i ioi tiie | | | Γ | Yes No |
| | (i) Unrelated organizations | | | | | | | 3a(i) | X |
| | (ii) Related organizations | | | | | | | 3a(ii) | Х |
| h | If "Yes" on line 3a(ii), are the related organization | ations listed as requir | red on Schedule R2 | | | | | 3b | |
| 4 | Describe in Part XIII the intended uses of the | | | | | | | 0.0 | |
| | t VI Land, Buildings, and Equipm | | Willom Idilas. | | | | | | |
| | Complete if the organization answere | d "Yes" on Form 990 |), Part IV, line 11a. S | ee Form 990, P | art X, line | 10. | | | |
| | Description of property | (a) Cost or o | | or other (other) | (c) Accu | ımulate ciation | d | (d) Book | value |
| | Land | <u> </u> | | ,013,815. | | | | 48. | 013,815. |
| | Buildings | | | ,592,664. | 230 | ,168, | 266. | | 424,398. |
| | Leasehold improvements | | | · · · · · · · · · · · · · · · · · · · | | | | | |
| | Equipment | | 62 | ,930,040. | 48 | ,238, | 726. | 14, | 691,314. |
| | Other | | | ,885,515. | | | | | 885,515. |
| | . Add lines 1a through 1e. (Column (d) must e | | X. column (B). line 1 | 0c.) | | | | 776, | 015,042. |

| Schedule D (Form 990) 2022 UNIVERSITY OF DE | INVER | | 84-0404231 Page 3 |
|--|----------------------------|--|--------------------------|
| Part VII Investments - Other Securities. | | | <u> </u> |
| Complete if the organization answered "Yes' | on Form 990, Part IV, line | 11b. See Form 990, Part X, line 12. | |
| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation: Cost or | end-of-year market value |
| (1) Financial derivatives | | | |
| (2) Closely held equity interests | | | |
| (3) Other | | | |
| (A) ALTERNATIVE INVESTMENTS | 285,889,937. | | |
| (B) INTERNATIONAL BOND HOLDING | 230,000. | END-OF-YEAR MARKET VALUE | |
| (C) | | | |
| (D) | | | |
| (E) | | | |
| (F) (G) | | | |
| (H) | | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) | 286,119,937. | | |
| Part VIII Investments - Program Related. | | | |
| Complete if the organization answered "Yes' | on Form 990, Part IV, line | 11c. See Form 990, Part X, line 13. | |
| (a) Description of investment | (b) Book value | (c) Method of valuation: Cost or | end-of-year market value |
| (1) | | | |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) | | | |
| Part IX Other Assets. | Law Farms 000 Dart IV line | 11d Cos Farms 000 Post V line 15 | |
| Complete if the organization answered "Yes" | Description | 11d. See Form 990, Part X, line 15. | (h) Pook value |
| | Description | | (b) Book value |
| (1) | | | |
| (2) | | | |
| (3) | | | |
| (4) (5) | | | |
| (6) | | | |
| | | | |
| (8) | | | |
| (9) | | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) lin | e 15.) | | |
| Part X Other Liabilities. | | | |
| Complete if the organization answered "Yes' | on Form 990, Part IV, line | 11e or 11f. See Form 990, Part X, line | e 25. |
| 1. (a) Description of liability | | | (b) Book value |
| (1) Federal income taxes | | | |
| (2) ANNUITY AND LIFE INTEREST OBLIGATIONS | 5 | | 7,342,289 |
| (3) FEDERAL PERKINS LOAN PROGRAM - REFUNI | DABLE | | 4,890,955. |
| (4) OPERATING LEASE LIABILITY | | | 2,657,372. |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | 14 000 515 |
| Total. (Column (b) must equal Form 990. Part X. col. (B) lin | e 25) | | 14,890,616. |

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

Schedule D (Form 990) 2022

X

| Sche | dule D (Form 990) 2022 UNIVERSITY OF DENVER | | | 84-04 | 04231 Page 4 |
|--------|--|------------------|---------------------------------------|-----------|----------------------|
| Par | t XI Reconciliation of Revenue per Audited Financial Statem | | Revenue per Re | turn. | |
| | Complete if the organization answered "Yes" on Form 990, Part IV, line 12 | | | | E07 773 272 |
| 1 | | | | 1 | 597,773,272. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | 2a | 24,237,048. | | |
| a | Net unrealized gains (losses) on investments | | 24,237,040. | - | |
| b | Donated services and use of facilities | | | - | |
| c d | Recoveries of prior year grants Other (Describe in Part XIII.) | | 2,774,900. | - | |
| u e | | | | 2e | 27,011,948. |
| 3 | | | | 3 | 570,761,324. |
| 4 | Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | | | 3,0,,01,321. |
| а | | 4a | 3,684,313. | | |
| b | Other (Describe in Part XIII.) | ···· ··· | 232,827,586. | 1 | |
| | | | | 4c | 236,511,899. |
| 5 | Add lines 4a and 4b Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I. line 12.) | | | 5 | 807,273,223. |
| | t XII Reconciliation of Expenses per Audited Financial Stater | nents With | Expenses per F | | , , |
| | Complete if the organization answered "Yes" on Form 990, Part IV, line 12 | | | | |
| 1 | Total expenses and losses per audited financial statements | | | 1 | 580,472,128. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | | | , , |
| a | Donated services and use of facilities | 2a | | | |
| b | Prior year adjustments | | | | |
| c | Other losses | | | | |
| d | Other (Describe in Part XIII.) | | 912,606. | | |
| | Add lines 2a through 2d | | · · · · · · · · · · · · · · · · · · · | 2e | 912,606. |
| 3 | Subtract line 2e from line 1 | | | 3 | 579,559,522. |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | | | , , |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | 3,684,313. | | |
| b | Other (Describe in Part XIII.) | | 232,827,586. | | |
| | Add lines 4a and 4b | · | · · · | 4c | 236,511,899. |
| 5 | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I. line 18.) | | | 5 | 816,071,421. |
| Pai | t XIII Supplemental Information. | | | | |
| Provi | de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa | art IV, lines 1b | and 2b; Part V, line 4 | ; Part X, | line 2; Part XI, |
| | 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any ac | | | , | , |
| | | | | | |
| | | | | | |
| PART | III, LINE 1A: | | | | |
| DOMA | MED MODEL OF ADM ADE CONCEDED COLLEGIZANG INDED MILE INTERP | army'a | | | |
| DONA | TED WORKS OF ART ARE CONSIDERED COLLECTIONS UNDER THE UNIVER | ISITY S | | | |
| POT.T | CY. COLLECTIONS HELD FOR PUBLIC EXHIBITION AND EDUCATION IN | | | | |
| 1011 | CI, CONDUCTIONS HELD FOR TODDIC EMHIDITION AND EDUCATION IN | | | | |
| FURT | HERANCE OF PUBLIC SERVICE RATHER THAN FINANCIAL GAIN ARE NOT | RECORDED | | | |
| | | | | | |
| IN T | HE STATEMENTS OF FINANCIAL POSITION. | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| PART | III, LINE 4: | | | | |
| | | | | | |
| THE | UNIVERSITY ACQUIRES AND MANAGES A WIDE VARIETY OF WORKS OF A | RT. THESE | | | |
| | | | | | |
| ARE | INTENDED TO ENHANCE THE ACADEMIC AND LIFELONG LEARNING EXPER | IENCES OF | | | |
| CMITT | באושם בארווו אין פאובים אווח שום מפאופסאו מווסודר שעפפים המדוברים | מסדאות שעם | | | |
| 210L | ENTS, FACULTY, STAFF, AND THE GENERAL PUBLIC. THESE OBJECTS | DITING TUE | | | |
| UNIV | ERSITY AND COMMUNITY AUDIENCES TOGETHER THROUGH SHARED EXPER | IENCES | | | |
| | | | | | |
| WITH | ART AND POSSESS THE POTENTIAL TO EDUCATE, ENLIGHTEN AND INS | PIRE. THE | | | |
| 232054 | 99-01-22 | | <u></u> | Schedu | le D (Form 990) 2022 |

UNIVERSITY OF DENVER 84-0404231 Schedule D (Form 990) 2022 Page 5 Part XIII | Supplemental Information (continued) UNIVERSITY'S ART AND COLLECTION HOLDINGS WILL GENERALLY BE CONSIDERED AS BELONGING TO ONE OF TWO CATEGORIES: 1) ARTWORK OF GENERAL INTEREST VALUED PRIMARILY AS ORNAMENTS FOR THE UNIVERSITY'S BUILDINGS AND GROUNDS; OR 2) THOSE ARTWORKS DEEMED TO BE OF SUFFICIENT ARTISTIC, SCHOLARLY OR FINANCIAL VALUE TO JUSTIFY INCLUSION IN THE FORMAL UNIVERSITY ART COLLECTIONS. PART IV, LINE 2B: THE DISTRIBUTION OF CERTAIN STUDENT FEES IS GOVERNED BY STUDENT ORGANIZATIONS. THESE FUNDS ARE TEMPORARILY HELD IN THE UNIVERSITY'S OPERATING BANK ACCOUNT AND RECORDED AS A LIABILITY ON THE UNIVERSITY'S BALANCE SHEET. PART V, LINE 4: SPENDING DISTRIBUTIONS FROM THE UNIVERSITY'S ENDOWMENT FUNDS PROVIDE SUPPORT TO UNIVERSITY SCHOLARSHIPS (62%), ACADEMIC PROGRAMS (22%), FACULTY CHAIRS & PROFESSORSHIPS (13%) AND OTHER UNIVERSITY OPERATIONS AND FUNCTIONS (3%). PART X, LINE 2: THE UNIVERSITY IS RECOGNIZED AS AN ORGANIZATION GENERALLY EXEMPT FROM INCOME TAXES UNDER SECTION 501(A) OF THE INTERNAL REVENUE CODE (THE CODE) AS AN ORGANIZATION DESCRIBED IN SECTION 501(C)(3) AND A PUBLIC CHARITY, AND NOT AS A PRIVATE FOUNDATION, UNDER SECTION 509(A)(1). HOWEVER, INCOME GENERATED FROM ACTIVITIES UNRELATED TO THE UNIVERSITY'S EXEMPT PURPOSE IS SUBJECT TO TAX UNDER SECTION 511 OF THE CODE. THE UNIVERSITY HAD NO MATERIAL AMOUNTS OF UNRELATED BUSINESS INCOME FOR THE YEARS ENDED JUNE 30. 2023 AND 2022.

| Schedule D (Form 990) 2022 UNIVERSITY OF DENVER | 84-0404231 | Page 5 |
|--|------------|--------|
| Part XIII Supplemental Information (continued) | | |
| THE UNIVERSITY EVALUATES ITS TAX POSITION IN ACCORDANCE WITH THE | | |
| PROVISIONS OF FASB ASC TOPIC 740-10, INCOME TAXES (FORMERLY, FASB | | |
| INTERPRETATION NO. 48). FASB ASC TOPIC 740-10 CLARIFIES THE ACCOUNTING FOR | | |
| UNCERTAINTY IN INCOME TAX RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS. | | |
| FASB ASC TOPIC 740-10 REQUIRES ENTITIES TO DETERMINE WHETHER IT IS MORE | | |
| LIKELY THAN NOT THAT A TAX POSITION WILL BE SUSTAINED UPON EXAMINATION BY | | |
| THE APPROPRIATE TAXING AUTHORITIES BEFORE ANY PART OF THE BENEFIT CAN BE | | |
| RECORDED IN THE FINANCIAL STATEMENTS. IT ALSO PROVIDES GUIDANCE ON THE | | |
| RECOGNITION, MEASUREMENT, AND CLASSIFICATION OF INCOME TAX UNCERTAINTIES, | | |
| ALONG WITH ANY RELATED INTEREST OR PENALTIES. A TAX POSITION IS MEASURED | | |
| AT THE LARGEST AMOUNT OF BENEFIT THAT IS GREATER THAN 50% LIKELY BEING | | |
| REALIZED UPON SETTLEMENT. THE UNIVERSITY HAS NO UNCERTAIN INCOME TAX | | |
| POSITIONS AS OF JUNE 30, 2023 AND 2022. | | |
| | | |
| PART XI, LINE 2D - OTHER ADJUSTMENTS: | | |
| RENTAL EXPENSES 760,681. | | |
| ACTUARIAL ADJUSTMENTS 1,862,294. | | |
| SPECIAL EVENT EXPENSES 151,925. | | |
| TOTAL TO SCHEDULE D, PART XI, LINE 2D 2,774,900. | | |
| | | |
| PART XI, LINE 4B - OTHER ADJUSTMENTS: | | |
| SCHOLARSHIPS 232,827,586. | | |
| | | |
| PART XII, LINE 2D - OTHER ADJUSTMENTS: | | |
| RENTAL EXPENSES 760,681. | | |
| SPECIAL EVENTS EXPENSES 151,925. | | |
| TOTAL TO SCHEDULE D, PART XII, LINE 2D 912,606. | | |
| | | |

| Schedule D (Form 990) 2022 Part XIII Supplemental Info | UNIVERSITY OF DENVER | | 84-0404231 | Page 5 |
|---|--------------------------------|--------------|------------|---------------|
| Part XIII Supplemental Info | rmation _(continued) | | | |
| PART XII, LINE 4B - OTHER AI | THEMPNOE. | | | |
| FART ATT, DINE 46 - OTHER AT | OUSIMENIS: | | | |
| SCHOLARSHIPS | | 232,827,586. | | |
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SCHEDULE E

Department of the Treasury Internal Revenue Service

(Form 990)

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

2022

Open to Public Inspection

Name of the organization

Employer identification number

UNIVERSITY OF DENVER 84-0404231 Part I YES NO 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? X Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, 2 X catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet homepage at all times during its tax year in a manner reasonably expected to be noticed by visitors to the homepage, or 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 X community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II 3 SEE PART II Does the organization maintain the following? 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 Copies of all catalogues, brochures, announcements, and other written communications to the public dealing Х with student admissions, programs, and scholarships? 4c Х d Copies of all material used by the organization or on its behalf to solicit contributions? 4d If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: Х a Students' rights or privileges? Х Admissions policies? 5b Employment of faculty or administrative staff? Х Scholarships or other financial assistance? Х 5d х Educational policies? Х f Use of facilities? 5f х g Athletic programs? 5a Х Other extracurricular activities? 5h If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. 6a Does the organization receive any financial aid or assistance from a governmental agency? Х 6a **b** Has the organization's right to such aid ever been revoked or suspended? Х If you answered "Yes" on either line 6a or line 6b, explain on Part II. 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, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, covering racial nondiscrimination? If "No," explain on Part II

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

| Schedule E (Form 990) 2022 UNIVERSITY OF DENVER | 84-0404231 | Page 2 |
|---|------------|--------|
| 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. See instructions. | | |
| 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. | | |
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| | | |

SCHEDULE F (Form 990)

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.

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection

Name of the organization **Employer identification number** UNIVERSITY OF DENVER 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 No 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, (by type) (such as, fundraising, proexpenditures offices is 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 AND THE CARIBBEAN 0 0 GRANTMAKING 287,830. CENTRAL AMERICA AND THE CARIBBEAN 0 0 PROGRAM SERVICES INSTRUCTION 176,155. CENTRAL AMERICA AND ACADEMIC SUPPORT AND THE CARIBBEAN PROGRAM SERVICES STUDENT SERVICES 0 0 133,634. CENTRAL AMERICA AND THE CARIBBEAN 0 TNVESTMENTS 260,702,298. 0 CENTRAL AMERICA AND THE CARIBBEAN 0 0 PROGRAM SERVICES INSTRUCTION 3,875. CENTRAL AMERICA AND THE CARIBBEAN 0 0 PROGRAM SERVICES INSTRUCTION 17,714. EAST ASIA AND THE ACADEMIC SUPPORT AND PACIFIC 0 0 PROGRAM SERVICES STUDENT SERVICES 182,319. EAST ASIA AND THE PACTETO 0 0 GRANTMAKING 2,729,026. 0 0 264,232,851. 3 a Subtotal **b** Total from continuation 0 26,048,765. 0 sheets to Part I Totals (add lines 3a 290,281,616**.** and 3b)

232071 10-17-22

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

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

| Schedule F (Form 990) | UNIVERSITY C | | | 84-040 | 4231 Page |
|---|-------------------------------------|--|---|--|---|
| | 1 | | 1. (Schedule F (Form 990), Part I, line 3 | | 1 |
| (a) Region | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in region | (f) Total expenditures for region |
| | | | | | |
| EAST ASIA AND THE | | | | | |
| PACIFIC | 0 | 0 | PROGRAM SERVICES | INSTITUTIONAL SUPPORT | 750,617 |
| EAST ASIA AND THE | | | | RESEARCH & PUBLIC | |
| PACIFIC | 0 | 0 | PROGRAM SERVICES | SERVICE | 1,393. |
| | | | | | |
| EUROPE (INCLUDING ICELAND & GREENLAND) | 0 | 0 | PROGRAM SERVICES | INSTRUCTION | 7,095,888. |
| | | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| EUROPE (INCLUDING | | | | | |
| ICELAND & GREENLAND) | 0 | 0 | PROGRAM SERVICES | INSTITUTIONAL SUPPORT | 113,593. |
| EUDODE / INGLUDING | | | | AGADEMIG GUDDODE AND | |
| EUROPE (INCLUDING ICELAND & GREENLAND) | 0 | 0 | PROGRAM SERVICES | ACADEMIC SUPPORT AND STUDENT SERVICES | 1,183,036 |
| | | | | | , , |
| EUROPE (INCLUDING | | | | | |
| ICELAND & GREENLAND) | 0 | 0 | INVESTMENTS | | 2,674,000. |
| EUDODE / TNOLUDING | | | | | |
| EUROPE (INCLUDING ICELAND & GREENLAND) | 0 | 0 | GRANTMAKING | | 3,595,231. |
| | | | | | |
| EUROPE (INCLUDING | | | | RESEARCH & PUBLIC | |
| ICELAND & GREENLAND) | 0 | 0 | PROGRAM SERVICES | SERVICE | 205,920 |
| MIDDLE EAST AND | | | | ACADEMIC SUPPORT AND | |
| NORTH AFRICA | 0 | 0 | PROGRAM SERVICES | STUDENT SERVICES | 37,358. |
| | | | | | |
| MIDDLE EAST AND | | | | | |
| NORTH AFRICA | 0 | 0 | PROGRAM SERVICES | INSTITUTIONAL SUPPORT | 1,056 |
| | | | | | |
| Totals | | | | | |
| | • | • | | | |

UNIVERSITY OF DENVER 84-0404231 Schedule F (Form 990) Page 1 Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3) Part I (b) Number of (c) Number of (a) Region (d) Activities conducted in region (e) If activity listed in (d) (f) Total offices employees or is a program service, expenditures (by type) (i.e., fundraising, in the region agents in program services, grants to describe specific type for region recipients located in the region) of service(s) in region region MIDDLE EAST AND NORTH AFRICA 0 0 GRANTMAKING 1,151,837. MIDDLE EAST AND NORTH AFRICA 0 0 PROGRAM SERVICES INSTRUCTION 118,455. MIDDLE EAST AND NORTH AFRICA 0 0 PROGRAM SERVICES INSTITUTIONAL SUPPORT 27,076. 0 NORTH AMERICA 0 PROGRAM SERVICES INSTRUCTION 116,363. RESEARCH & PUBLIC 0 0 PROGRAM SERVICES SERVICE NORTH AMERICA 27,076. NORTH AMERICA 0 0 GRANTMAKING 2,384,292. ACADEMIC SUPPORT AND NORTH AMERICA 0 0 PROGRAM SERVICES STUDENT SERVICES 480,999. NORTH AMERICA 0 0 PROGRAM SERVICES INSTITUTIONAL SUPPORT 18,962. RESEARCH & PUBLIC 0 PROGRAM SERVICES SERVICE NORTH AMERICA 0 50,581.

Totals

RUSSIA AND

NEIGHBORING STATES

0

0

GRANTMAKING

295,486.

UNIVERSITY OF DENVER 84-0404231 Schedule F (Form 990) Page 1 Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3) Part I (b) Number of (c) Number of (a) Region (d) Activities conducted in region (e) If activity listed in (d) (f) Total offices employees or is a program service, expenditures (by type) (i.e., fundraising, in the region agents in program services, grants to describe specific type for region recipients located in the region) of service(s) in region region RESEARCH & PUBLIC SOUTH AMERICA 0 0 PROGRAM SERVICES SERVICE 11,978. SOUTH AMERICA 0 0 GRANTMAKING 527,401. ACADEMIC SUPPORT AND 0 0 PROGRAM SERVICES STUDENT SERVICES SOUTH AMERICA 42,278. 0 SOUTH AMERICA 0 PROGRAM SERVICES INSTITUTIONAL SUPPORT 1,592. 0 0 SOUTH AMERICA PROGRAM SERVICES INSTRUCTION 412,284. RESEARCH & PUBLIC SOUTH AMERICA 0 0 PROGRAM SERVICES SERVICE 11,978. SOUTH ASIA 0 0 GRANTMAKING 2,143,408. ACADEMIC SUPPORT AND STUDENT SERVICES 63,734. SOUTH ASIA 0 0 PROGRAM SERVICES RESEARCH & PUBLIC SOUTH ASIA 0 PROGRAM SERVICES SERVICE 0 5,296. 0 0 PROGRAM SERVICES INSTRUCTION SOUTH ASIA 33,761. **Totals**

UNIVERSITY OF DENVER 84-0404231 Schedule F (Form 990) Page 1 Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3) Part I (b) Number of (c) Number of (e) If activity listed in (d) (a) Region (d) Activities conducted in region (f) Total offices employees or is a program service, expenditures (by type) (i.e., fundraising, in the region agents in program services, grants to describe specific type for region recipients located in the region) of service(s) in region region SUB-SAHARAN AFRICA 0 0 GRANTMAKING 1,719,978. ACADEMIC SUPPORT AND SUB-SAHARAN AFRICA 0 0 PROGRAM SERVICES STUDENT SERVICES 237,146. RESEARCH & PUBLIC SUB-SAHARAN AFRICA 0 0 PROGRAM SERVICES SERVICE 83,306. INSTITUTIONAL SUPPORT 0 SUB-SAHARAN AFRICA 0 PROGRAM SERVICES 3,866. 0 0 PROGRAM SERVICES INSTRUCTION SUB-SAHARAN AFRICA 421,540. 26,048,765. **Totals**

<u>Schedule F (Form 990) 2022</u> UNIVERSITY OF DENVER 84-0404231 Page **2**

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) |
|----------------------------|---|--------------------------|--|--------------------------|---------------------------------|----------------------------------|---------------------------------------|---|
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| | nization by the IRS, o | or for which the grantee | recognized as charities by the for counsel has provided a sect | | | . | | |

Schedule F (Form 990) 2022

UNIVERSITY OF DENVER

84-0404231

Page 3

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed. (c) Number of (d) Amount of (e) Manner of (f) Amount of (g) Description of (h) Method of (a) Type of grant or assistance (b) Region valuation (book, FMV, recipients cash grant cash disbursement noncash noncash assistance assistance appraisal, other) SUB-SAHARAN DIRECT APPLICATION TO EDUCATIONAL SCHOLARSHIPS AFRICA 1,719,978, STUDENT ACCOUNT 0. N/A N/A CENTRAL AMERICA DIRECT APPLICATION TO EDUCATIONAL SCHOLARSHIPS AND THE CARIBBEAN 287,830. STUDENT ACCOUNT 0. N/A N/A EAST ASIA AND THE DIRECT APPLICATION TO EDUCATIONAL SCHOLARSHIPS PACIFIC 2,729,026, STUDENT ACCOUNT 0.N/A N/A EUROPE (INCLUDING ICELAND & DIRECT APPLICATION TO EDUCATIONAL SCHOLARSHIPS GREENLAND) 3,595,231, STUDENT ACCOUNT 0.N/A N/A MIDDLE EAST AND DIRECT APPLICATION TO 43 1,151,837. STUDENT ACCOUNT NORTH AFRICA EDUCATIONAL SCHOLARSHIPS 0.N/A N/A DIRECT APPLICATION TO 2,384,292. STUDENT ACCOUNT EDUCATIONAL SCHOLARSHIPS NORTH AMERICA 0.N/A N/A RUSSIA AND NEIGHBORING DIRECT APPLICATION TO STATES 0.N/A EDUCATIONAL SCHOLARSHIPS 11 295 486 STUDENT ACCOUNT N/A DIRECT APPLICATION TO EDUCATIONAL SCHOLARSHIPS SOUTH AMERICA 20 527 401 STUDENT ACCOUNT 0. N/A N/A DIRECT APPLICATION TO 2 143 408 STUDENT ACCOUNT SOUTH ASIA EDUCATIONAL SCHOLARSHIPS 0. N/A N/A

| Sched | dule F (Form 990) 2022 UNIVERSITY OF DENVER | 84-0404231 | Page 4 |
|-------|---|------------|--------|
| Par | t IV Foreign Forms | | |
| 1 | Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) | X Yes | ☐ No |
| 2 | Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990) | Yes | X No |
| 3 | Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471) | 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 G (Form 990)

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.

2022

ZUZZ

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-EZ.

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

Open to Public

| Name of the organization | o www.irs.gov/Formaao for mstruc | JUUIS | anu u | ie latest illioi illatioi | | Employer ide | ntification number |
|---|---|--|--|---|--------|---|---|
| UNIVERSITY | OF DENVER | | | | | 84-040423 | 1 |
| Part I Fundraising Activities. required to complete this part | Complete if the organization answe | red "Y | es" or | Form 990, Part IV, I | ine 1 | 7. Form 990-EZ | filers are not |
| 1 Indicate whether the organization rais a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, P b If "Yes," list the 10 highest paid individual | e Solicita f Solicita g Special or oral agreement with any individual art VII) or entity in connection with p | tion of tion of fundra (includ | non-governising of onal fu | overnment grants nment grants events ficers, directors, trus undraising services? | | Yes | |
| compensated at least \$5,000 by the | | une 10 1 | ag. 00. | nonto andor whom a | 10 101 | | |
| (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 | to (c | Amount paid or retained by) fundraiser ted in col. (i) | (vi) Amount paid to (or retained by) organization |
| | | Yes | No | | | | |
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| Total | | • | | | | | |
| List all states in which the organization or licensing. | | | utions | or has been notified | it is | exempt from re | gistration |
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| LHA For Paperwork Reduction Act Noti | ce. see the Instructions for Form 9 | 90 or | 990-F | Z . | | Schedule | G (Form 990) 2022 |

DocuSign Envelope ID: 68C3B65F-DB88-41B5-A18B-FAA447594F9A UNIVERSITY OF DENVER 84-0404231 Schedule G (Form 990) 2022 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 gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events NONE (add col. (a) through DINNERS col. (c)) (total number) (event type) (event type) 45,637 45,637. Gross receipts 2 Less: Contributions 42,937 42,937. Gross income (line 1 minus line 2) 2,700 2,700. Cash prizes Noncash prizes 527 527. Direct Expenses 13,955. 13,955. Rent/facility costs 62,236. 62,236. 7 Food and beverages Entertainment 8 75,207. 75,207. Other direct expenses 151,925, **10** Direct expense summary. Add lines 4 through 9 in column (d) -149,225 11 Net income summary. Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (d) Total gaming (add (b) Pull tabs/instant (a) Bingo (c) Other gaming Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes Yes Yes Volunteer labor No Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d)

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

232082 10-27-22

a Is the organization licensed to conduct gaming activities in each of these states?

9 Enter the state(s) in which the organization conducts gaming activities:

b If "No," explain:

| Sch | nedule G (Form 990) 2022 UNIVERSITY OF DENVER | 84-0404 | 231 | Page 3 |
|-----|---|-------------|---|---------------|
| 11 | Does the organization conduct gaming activities with nonmembers? | | Yes | No |
| | 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 | | | | |
| | a The organization's facility | 13 | اءا | % |
| | b An outside facility | | | // |
| | | | , <u>, , , , , , , , , , , , , , , , , , </u> | /0 |
| 14 | Effici the fiame and address of the person who prepares the organization's gaming/special events books and records. | | | |
| | Name | | | |
| | - Indition of the state of the | | | |
| | Address | | | |
| | Address | | | |
| 15a | a Does the organization have a contract with a third party from whom the organization receives gaming revenue? | | Yes | ☐ No |
| | b If "Yes," enter the amount of gaming revenue received by the organization \$ and the amour | nt | | |
| • | of gaming revenue retained by the third party \$ | | | |
| , | c If "Yes," enter name and address of the third party: | | | |
| • | on res, enternance and address of the time party. | | | |
| | Name | | | |
| | | | | |
| | Address | | | |
| | | | | |
| 16 | Gaming manager information: | | | |
| | | | | |
| | Name | | | |
| | | | | |
| | Gaming manager compensation \$ | | | |
| | | | | |
| | Description of services provided | | | |
| | | | | |
| | | | | |
| | | | | |
| | Director/officer Employee Independent contractor | | | |
| | | | | |
| 17 | Mandatory distributions: | | | |
| | a Is the organization required under state law to make charitable distributions from the gaming proceeds to | | | |
| - | retain the state gaming license? | | Yes | No |
| ŀ | b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the | ie | | |
| | organization's own exempt activities during the tax year \$ | | | |
| Pa | art IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and | d Part III. | lines 9. | 9b. 10b. |
| | 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions. | , | , | , |
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| Schedule G | (Form 990) | UNIVERSITY OF DENVER | 84-0404231 | Page 4 |
|------------|---------------------------------|----------------------|------------|--------|
| Part IV | (Form 990) Supplemental Info | rmation (continued) | | |
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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.

OMB No. 1545-0047

Open to Public Inspection

| Name of the organization | | | | | | | Employer identification number |
|--|---------------------------------------|------------------------------------|--------------------------|----------------------------------|--|---------------------------------------|------------------------------------|
| | Y OF DENVER | | | | | | 84-0404231 |
| Part I General Information on Gra | nts and Assistance | | | | | | |
| 1 Does the organization maintain rec | | | | | | | |
| criteria used to award the grants or | | | | | | | X Yes No |
| 2 Describe in Part IV the organization | | | | | | | _ |
| Part II Grants and Other Assistance recipient that received more | | | | | anization answered "\ | es" on Form 990, Part | t IV, line 21, for any |
| 1 (a) Name and address of organizat or government | ion (b) EIN | (c) IRC section (if applicable) | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of noncash assistance | (h) Purpose of grant or assistance |
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| | | | | | | | |
| 2 Enter total number of section 501(c | c)(3) and government or | ganizations listed in th | e line 1 table | | | | |
| 3 Enter total number of other organiz | · · · · · · · · · · · · · · · · · · · | - | | | | | |
| LHA For Paperwork Reduction Act N | otice, see the Instruct | ions for Form 990. | | | | | Schedule I (Form 990) 2022 |

Schedule I (Form 990) 2022 UNIVERSITY OF DENVER 84-0404231 Page **2**

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

| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non- cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of noncash assistance |
|---|---------------------------------|--------------------------|---------------------------------------|---|---------------------------------------|
| | | | | | |
| INANCIAL AID-FEDERAL SEOG PROGRAM | 449 | 1,305,354. | 0. | N/A | N/A |
| | | | | | |
| 'INANCIAL AID-STATE PROGRAMS | 601 | 2,494,287. | 0. | N/A | N/A |
| INANCIAL AID-ENDOWED AND GIFT FUNDED | 2472 | 25,080,216. | 0. | N/A | N/A |
| INANCIAL AID-GTA WAIVERS | 118 | 691,819. | 0. | N/A | N/A |
| INANCIAL AID-INSTITUTIONAL EDUCATION GRANTS | 9108 | 188,421,421. | 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:

Part III

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

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

| Part III Continuation of Grants and Other Assistance to Domestic Individuals (Schedule I (Form 990), Part III.) | | | | | | | | |
|---|--------------------------|--------------------------|---------------------------------------|---|---------------------------------------|--|--|--|
| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non- cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of noncash assistance | | | |
| | | | | | | | | |
| DUCATIONAL AWARDS AND ASSISTANCE | 781. | 4,639,425. | 0. | N/A | N/A | | | |
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| Schedule I (Form 990) UNIVERSITY OF DENVER | 84-0404231 | Page 2 |
|--|------------|--------|
| Schedule I (Form 990) UNIVERSITY OF DENVER Part IV Supplemental Information | | |
| | | |
| RECIPIENTS ARE DIRECTLY APPLIED TO THE RECIPIENTS' TUITION AND FEE | | |
| RECEIVABLE ACCOUNT AND IS APPLIED TO ANY OUTSTANDING CHARGES PRIOR TO | | |
| | | |
| DISBURSEMENT OF ANY EXCESS AMOUNTS. | | |
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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.

2022

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

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

UNIVERSITY OF DENVER

Employer identification number

84-0404231

| Pa | art I Questions Regarding Compensation | | | |
|------------|--|----|-----|----------|
| | | | Yes | No |
| 1 a | 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. | | | |
| | X 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 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 Written employment contract | | | |
| | Independent compensation consultant X Compensation survey or study | | | |
| | Form 990 of other organizations X Approval by the board or compensation committee | | | |
| 4 | During the year did any nerson listed on Form 000 Part VIII Section A line 1s with respect to the filing | | | |
| 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: | | | |
| • | | 4a | | х |
| h | Receive a severance payment or change-of-control payment? Participate in or receive payment from a supplemental nonqualified retirement plan? | 4b | Х | |
| C | Participate in or receive payment from an equity-based compensation arrangement? | 4c | | Х |
| Ĭ | 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 | | Х |
| 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: | | | |
| а | The organization? | 6a | | Х |
| 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 | | <u> </u> |

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

Schedule J (Form 990) 2022 UNIVERSITY OF DENVER 84-0404231

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-MIS0 compensation | C and/or 1099-NEC | (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 | | | reported as deferred on prior Form 990 |
| (1) JEREMY HAEFNER | (i) | 724,084. | 103,200. | 95,450. | 44,900. | 18,805. | 986,439. | 0. |
| CHANCELLOR | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (2) DAVID CARLE | (i) | 427,184. | 291,000. | 3,450. | 24,400. | 29,861. | 775,895. | 0. |
| HEAD COACH | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (3) MARY CLARK | (i) | 491,659. | 1,000. | 0. | 24,400. | 866. | 517,925. | 0. |
| PROVOST AND EXEC. VICE CHANCELLOR | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (4) VIVEK CHOUDHURY | (i) | 475,551. | 1,000. | 0. | 24,400. | 15,988. | 516,939. | 0. |
| DEAN | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (5) LESLIE BRUNELLI | (i) | 410,749. | 1,000. | 0. | 24,400. | 19,163. | 455,312. | 0. |
| TREASURER - SENIOR VICE CHANCELLOR | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (6) VALERIE OTTEN | (i) | 392,173. | 1,000. | 0. | 24,400. | 30,085. | 447,658. | 0. |
| SENIOR VICE CHANCELLOR | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (7) BRUCE SMITH | (i) | 375,916. | 1,000. | 0. | 24,400. | 20,823. | 422,139. | 0. |
| DEAN | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (8) TODD ADAMS | (i) | 315,606. | 1,000. | 0. | 24,400. | 76,310. | 417,316. | 0. |
| VICE CHANCELLOR | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (9) RUSSELL KAURLOTO | (i) | 359,679. | 1,000. | 0. | 14,965. | 33,995. | 409,639. | 0. |
| VICE CHANCELLOR | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (10) NANCY NICLEY | (i) | 355,762. | 1,000. | 0. | 24,400. | 22,524. | 403,686. | 0. |
| SECRETARY - CHIEF OF STAFF | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (11) JEFFREY WULBURN | (i) | 265,273. | 71,000. | 0. | 21,933. | 30,128. | 388,334. | 0. |
| HEAD COACH | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (12) LISA VICTORAVICH | (i) | 346,189. | 5,000. | 0. | 22,398. | 9,880. | 383,467. | 0. |
| PROFESSOR | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (13) JACK STRAUS | (i) | 325,075. | 1,000. | 0. | 20,747. | 22,502. | 369,324. | 0. |
| PROFESSOR | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (14) CHARLES DHANARAJ | (i) | 321,187. | 4,917. | 0. | 24,259. | 15,988. | 366,351. | 0. |
| PROFESSOR | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (15) PAUL CHAN - SPECIAL ADVISOR | (i) | 299,073. | 0. | 0. | 24,370. | 14,741. | 338,184. | 0. |
| UNIVERSITY COUNSEL (THROUGH 11/1/22) | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (16) RHONDA GONZALES | (i) | 276,461. | 1,000. | 0. | 23,095. | 34,697. | 335,253. | 0. |
| DEAN | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |

Schedule J (Form 990) 2022 UNIVERSITY OF DENVER 84-0404231

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-MIS0 compensation | C and/or 1099-NEC | (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 | | | reported as deferred on prior Form 990 |
| (17) ELIZABETH BULLOCK | (i) | 253,172. | 30,333. | 0. | 19,200. | 24,672. | 327,377. | 0. |
| UNIVERSITY COUNSEL | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (18) TODD RINEHART | (i) | 265,203. | 5,000. | 0. | 21,930. | 29,849. | 321,982. | 0. |
| VICE CHANCELLOR | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (19) RENEA MORRIS | (i) | 256,851. | 1,000. | 0. | 21,261. | 23,986. | 303,098. | 0. |
| VICE CHANCELLOR | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (20) GREGG KVISTAD - PROVOST EMERITU | (i) | 259,860. | 0. | 0. | 21,052. | 14,566. | 295,478. | 0. |
| PROVOST THROUGH 8/31/22 | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (21) CHRISTOPHER WHITT | (i) | 240,087. | 1,000. | 0. | 19,845. | 30,077. | 291,009. | 0. |
| VICE CHANCELLOR | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (22) LINDA KOSTEN | (i) | 229,029. | 6,000. | 0. | 18,932. | 30,627. | 284,588. | 0. |
| SENIOR VICE PROVOST | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (23) KARLTON CREECH | (i) | 215,105. | 0. | 0. | 50,737. | 11,939. | 277,781. | 0. |
| VICE CHANCELLOR | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (24) ALLAN WILSON | (i) | 216,714. | 1,000. | 0. | 17,697. | 12,358. | 247,769. | 0. |
| ASSOCIATE VICE CHANCELLOR | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (25) JEFFREY BANKS | (i) | 212,482. | 333. | 0. | 14,933. | 17,723. | 245,471. | 0. |
| VICE CHANCELLOR | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (26) STUART HALSALL | (i) | 193,278. | 1,250. | 0. | 16,437. | 32,732. | 243,697. | 0. |
| ASSOCIATE VICE CHANCELLOR | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (27) ANDREW CULLEN | (i) | 218,391. | 1,000. | 0. | 17,541. | 988. | 237,920. | 0. |
| ASSISTANT TREASURER - CONTROLLER | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (28) STEPHANIE O'MALLEY | (i) | 190,706. | 1,000. | 0. | 2,815. | 9,762. | 204,283. | 0. |
| ASSOCIATE VICE CHANCELLOR | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (29) JOSHUA BERLO | (i) | 127,969. | 30,000. | 2,260. | 7,000. | 13,409. | 180,638. | 0. |
| VICE CHANCELLOR | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | _ | _ | | | | |
| | (i) | | _ | _ | | | | |
| | (ii) | | | | | | | |

UNIVERSITY OF DENVER 84-0404231 Schedule J (Form 990) 2022 Page 3 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 CHANCELLOR JEREMY HAEFNER WITH A TAXABLE HOUSING ALLOWANCE. THE UNIVERSITY PROVIDES HOUSING FOR TODD ADAMS FOR THE CONVENIENCE OF THE UNIVERSITY. THE HOUSING FOR TODD ADAMS IS NOT INCLUDED IN TAXABLE COMPENSATION. CHANCELLOR JEREMY HAEFNER RECEIVED COMPANION TRAVEL DURING THE YEAR. IN LIMITED INSTANCES WITH DOCUMENTATION FOR THE BUSINESS PURPOSE FULFILLED BY THE COMPANION AND ANY REQUIRED 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. PART I LINE 4B: KARLTON CREECH - PARTICIPATION IN 457(F) PLAN - \$12,833. \$12,833 WAS FORFEITED DURING THE TAX YEAR SINCE HIS EMPLOYMENT ENDED PRIOR TO THE VESTING DATE.

SCHEDULE K (Form 990)

Part I

Department of the Treasury Internal Revenue Service

Bond Issues

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.

2022
Open to Public Inspection

Name of the organization

UNIVERSITY OF DENVER

Employer identification number
84-0404231

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

| (a) Issuer name | (b) Issuer EIN | (c) CUSIP # | (d) Date issued | (e) Issu | e price | (f) Description | on of purpose | (g) De | feased (| h) On of iss | | (i) Po | |
|---|----------------------|-------------|-----------------|-----------|-----------|-----------------|---------------|---------|----------|------------------------|------|--------|------|
| | | | | | | | | Yes | No | Yes | No | Yes | |
| COLORADO EDUCATION & CULTURAL | | | | | R: | EFUNDING SE | RIES 2001A | | | | | | |
| A FACILITIES - SERIES 2007 | 84-0896727 | 1964584T7 | 10/10/07 | 45,8 | 39,717. A | ND 2005B BO | NDS | | х | | х | | Х |
| COLORADO EDUCATION & CULTURAL | | | | | R: | EFUNDING SE | RIES 2014A | | | | | | |
| B FACILITIES - SERIES 2021 | 84-0896727 | NONE | 02/26/21 | 18,5 | 00,000. A | ND 2014B BO | NDS | | х | | х | | Х |
| COLORADO EDUCATION & CULTURAL | | | | | R: | EFUNDING SE | RIES 2005B | | | | | | |
| C FACILITIES - SERIES 2013 | 84-0896727 | 19645RSR3 | 03/01/13 | 24,1 | 59,389.B | ONDS | | | х | | х | | Х |
| COLORADO EDUCATION & CULTURAL | | | | | C | ONSTRUCTION | , | | | | | | |
| D FACILITIES - SERIES 2017A | 84-0896727 | 19645R6D8 | 06/27/17 | 133,0 | 26,969.R | ENOVATION, I | MPROVEMENT A | AN | х | | х | | Х |
| Part II Proceeds | | | | | | | | • | | | | | |
| | | | Α | | | В | С | | | | D | | |
| 1 Amount of bonds retired | | | 1 | 650,000. | | 7,395,000. | 8, | 420,000 | ٠. | | | | |
| 2 Amount of bonds legally defeased | | | | | | | | | | | | | |
| 3 Total proceeds of issue | | | 45 | 839,717. | 1 | 18,500,000. | 24, | 159,389 | ٠. | | 137, | ,745, | 307. |
| 4 Gross proceeds in reserve funds | | | I | | | | | | | | | | |
| 5 Capitalized interest from proceeds | | | | | | | | | | | 14, | ,644, | 602. |
| 6 Proceeds in refunding escrows | | | | | | | | | | | | | |
| 7 Issuance costs from proceeds | | | | 321,631. | | 150,000. | : | 245,452 | ١. | | 1, | ,070, | 109. |
| 8 Credit enhancement from proceeds | | | | 698,000. | | | | | | | | | |
| 9 Working capital expenditures from proceeds | | | | | | | | | | | | | |
| 10 Capital expenditures from proceeds | | | | | | | | | | | 121, | ,416, | 333. |
| 11 Other spent proceeds | | | 44 | ,820,085. | 1 | 18,350,000. | 23, | 913,938 | ١. | | | | |
| 12 Other unspent proceeds | | | | | | | | | | | | 614, | 263. |
| 13 Year of substantial completion | | | | 2007 | | 2021 | 2 | 013 | | | | 2021 | |
| | | | Yes | No | Yes | No | Yes | No | , | Yes | | No | |
| 14 Were the bonds issued as part of a refunding i | ssue of tax-exempt | bonds (or, | | | | | | | | | | | |
| if issued prior to 2018, a current refunding issued | ue)? | | | Х | Х | | | Х | | | | | X |
| 15 Were the bonds issued as part of a refunding i | ssue of taxable bon | nds (or, if | | | | | | | | | | | |
| issued prior to 2018, an advance refunding iss | sue)? | | | | | х | Х | | | | | | X |
| 16 Has the final allocation of proceeds been made | e? | | Х | | Х | | Х | | | | | | X |
| 17 Does the organization maintain adequate book | ks and records to su | upport the | | | | | | | | | | | |
| final allocation of proceeds? | | | X | | Х | | Х | | | Х | | | |

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

Schedule K (Form 990) 2022 UNIVERSITY OF DENVER 84-0404231 Page **2**

| _ | addle N (1 offin 990) 2022 Shirthbill Si Bhirthh | | | | | | | | | | age z |
|-----|---|-----|-------------|----|-----|----------|-----|-------------|-----|--------------|-----------|
| Par | t III Private Business Use | | Α | | | В | | С | | D | |
| | Was the organization a partner in a partnership, or a member of an LLC, | Yes | No | | Yes | No | Yes | No | Yes | - | lo |
| ' | which owned property financed by tax-exempt bonds? | 162 | X | | 162 | X | 162 | X | 162 | N | X |
| 2 | | | | | | + | | | | | |
| 2 | Are there any lease arrangements that may result in private business use of | х | | | | x | | x | | | х |
| 0- | bond-financed property? | Α | | | | A | | A | | | |
| за | Are there any management or service contracts that may result in private | х | | | х | | x | | | | х |
| | business use of bond-financed property? | Λ | | | Λ | | | | | | |
| b | If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside | х | | | х | | x | | | | |
| | counsel to review any management or service contracts relating to the financed property? | X | | | Х | | X | | | | |
| С | Are there any research agreements that may result in private business use of | | | | | | | | | | |
| | bond-financed property? | Х | 1 | | | X | Х | | | | 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? | Х | | | | | Х | | | | |
| 4 | Enter the percentage of financed property used in a private business use by entities | | | | | | | | | | |
| | other than a section 501(c)(3) organization or a state or local government | | .00 | % | | .00 % | | .00 % | | .00 | % |
| 5 | Enter the percentage of financed property used in a private business use as a | | | | | | | | | | |
| | result of unrelated trade or business activity carried on by your organization, | | | | | | | | | | |
| | another section 501(c)(3) organization, or a state or local government | | .00 | % | | .00 % | | .00 % | | .00 | % |
| 6 | Total of lines 4 and 5 | | .00 | % | | .00 % | | .00 % | | .00 | % |
| 7 | Does the bond issue meet the private security or payment test? | | Х | | | х | | х | | | 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 | | | x | | x | | | Х |
| h | If "Yes" to line 8a, enter the percentage of bond-financed property sold or | | | | | | | l | | | |
| - | disposed of | | | % | | % | | % | | | % |
| | If "Yes" to line 8a, was any remedial action taken pursuant to Regulations | | T | 70 | | | | 70 | | | |
| · | sections 1.141-12 and 1.145-2? | | | | | | | | | | |
| | Has the organization established written procedures to ensure that all | | | | | | | | | | |
| 9 | | | | | | | | | | | |
| | nonqualified bonds of the issue are remediated in accordance with the | х | | | х | | x | | x | | |
| Dav | requirements under Regulations sections 1.141-12 and 1.145-2? | Λ | 1 | | Λ | | Δ. | | Λ | | |
| Par | t IV Arbitrage | | | П | | _ | | | | | |
| | | | <u> </u> | | | <u>B</u> | | <u>C</u> | | D | |
| 1 | Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and | Yes | No | | Yes | No | Yes | No | Yes | l N | <u>lo</u> |
| | Penalty in Lieu of Arbitrage Rebate? | | Х | | | Х | | Х | | | Х |
| | If "No" to line 1, did the following apply? | | | | | _ | | | | | |
| | Rebate not due yet? | | Х | } | Х | | | X | Х | 1 | |
| | Exception to rebate? | | Х | | | X | | Х | | 1 | Х |
| С | No rebate due? | Х | | | | X | Х | | | | Х |
| | If "Yes" to line 2c, provide in Part VI the date the rebate computation was | | | | | | | | | | |
| | performed | | | | | _ | | | | _ | |
| 3 | Is the bond issue a variable rate issue? | | Х | | | Х | | Х | | | Х |

84-0404231 Schedule K (Form 990) 2022 UNIVERSITY OF DENVER Page 3 Part IV Arbitrage (continued) В C D 4a Has the organization or the governmental issuer entered into a qualified Yes No Yes No Yes No Yes No Х Х Х hedge with respect to the bond issue? **b** Name of provider **c** Term of hedge d Was the hedge superintegrated? e Was the hedge terminated? Х Х Х Х 5a Were gross proceeds invested in a guaranteed investment contract (GIC)? **b** Name of provider c Term of GIC d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? Х Х **6** Were any gross proceeds invested beyond an available temporary period? 7 Has the organization established written procedures to monitor the requirements of section 148? Х Х Х Х Procedures To Undertake Corrective Action R C D Has the organization established written procedures to ensure that violations No Yes Yes No Yes No Yes No of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation isn't available under Х Х applicable regulations? Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. See instructions. SCHEDULE K, PART I, BOND ISSUES: (A) ISSUER NAME: COLORADO EDUCATION & CULTURAL FACILITIES - SERIES 2007 (F) DESCRIPTION OF PURPOSE: REFUNDING SERIES 2001A AND 2005B BONDS (A) ISSUER NAME: COLORADO EDUCATION & CULTURAL FACILITIES - SERIES 2021 (F) DESCRIPTION OF PURPOSE: REFUNDING SERIES 2014A AND 2014B BONDS (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 2017A (F) DESCRIPTION OF PURPOSE: CONSTRUCTION, RENOVATION, IMPROVEMENT AND EQUIPPING OF CAMPUS IMPROVEMENTS SCHEDULE K, PART IV, ARBITRAGE, LINE 2C: (A) ISSUER NAME: COLORADO EDUCATION & CULTURAL FACILITIES SERIES 2007 DATE THE REBATE COMPUTATION WAS PERFORMED: 02/09/2022 (A) ISSUER NAME: COLORADO EDUCATION & CULTURAL FACILITIES - SERIES 2013 DATE THE REBATE COMPUTATION WAS PERFORMED: 03/28/2023

SCHEDULE L

Department of the Treasury

(Form 990)

Transactions With Interested Persons

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open To Public Inspection

| Internal Revenue Service | Go to | www.irs | s.gov/Form | 1990 fo | or insti | ruction | s and the la | test ir | nformation. | | | In | spect | ion | |
|----------------------------|--------------------|-----------|----------------------------|--------------|------------------|-------------|----------------|---------|----------------------|----------|-----------------|---------------|---------|-------|----------|
| Name of the organization | | | | | | | | | | Em | oloyer | ident | ificati | on nu | mber |
| | UNIVERSITY | OF DEN | VER | | | | | | | 84 | 4-040 | 4231 | | | |
| Part I Excess Ben | nefit Transa | ctions | (section 50 | 01(c)(3 |), secti | ion 501 | (c)(4), and se | ection | 501(c)(29) orga | nizatio | ns on | ly). | | | |
| Complete if the | organization a | answered | d "Yes" on F | orm 9 | 90, Pa | art IV, lir | ne 25a or 25l | b, or F | orm 990-EZ, Pa | art V, I | ine 40 | b. | | | |
| 1 (a) Name of diagnalified | noroon | | onship betv | | | ified | , | (a) Do | porintion of tran | ocotio | n | | (d) | Corre | cted? |
| (a) Name of disqualified | person | pe | rson and or | ganiza | ation | | | (c) Des | scription of tran | ISactio | · | | Υ. | es | No |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | _ | _ | |
| | | | | | | | | | | | | | - | - | |
| | | | | | | | | | | | | | _ | - | |
| | | | | | | | | | | | | | | | |
| 2 Enter the amount of tax | | | | | | | | | | | • | | | | |
| | | | | | | | | | | | • • | | | | |
| 3 Enter the amount of tax | k, if any, on line | e 2, abov | e, reimburs | ed by | tne org | ganizati | on | | | | Ф | | | | |
| Part II Loans to an | nd/or From | Interes | sted Pers | sons. | | | | | | | | | | | |
| Complete if the | | | | | | Part V | line 38a or | Form | 990 Part IV lin | o 26: 0 | or if th | e oraș | nizatio | n | |
| reported an am | • | | | | | , i ait v | , iiiic ooa oi | Ollin | 550, i ait iv, iii | C 20, (|) II (II | c orga | inzatio | ,,,, | |
| (a) Name of | (b) Relations | | Purpose | (d) Lo | an to or | (e) | Original | (f) | Balance due | (a) | ln | (h) Ap | | (i) V | /ritten |
| interested person | with organiza | | of loan | | n the zation? | | pal amount | " | | | ult? | by bo | | agree | ment? |
| | | | | To | From | 1 | | | | Yes | No | Yes | No | Yes | No |
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| Part III Grants or A | esistance l | Renefit | ina Inter | <u>astar</u> | l Par | eone | \$ | 5 | | | | | | | |
| Complete if the | | | - | | | | 27 | | | | | | | | |
| (a) Name of interested | | | | | | <u> </u> | Amount of | Т | (d) Typo | of | | 10 |) Purp | 000.0 | <u> </u> |
| (a) Name of interested | i person | | elationship rested pers | | | | assistance | | (d) Type assistan | | | | assista | | ' |
| | | | he organiza | | _ | | | | | | | | | | |
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

| Schedule L (Form 990) 2022 UNIVERSI | TY OF DENVER | | 84-040423 | 31 | Page 2 |
|--|--|--------------------------------------|--------------------------------|--------|-------------------------------|
| Part IV Business Transactions Involv | = | | | | |
| Complete if the organization answered (a) Name of interested person | "Yes" on Form 990, Part IV, line 28a, 28 (b) Relationship between interested person and the organization | b, or 28c. (c) Amount of transaction | (d) Description of transaction | organi | aring of zation's nues? |
| | | | | Yes | No |
| EVENT RENTS USA LLC | TRUSTEE K GALLAGHER | 132,789. | RENTAL OF F | | Х |
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| D. IVI C. I. III C. II | | | | | |
| Part V Supplemental Information. | Och edule I (e.e.) | - t t' \ | | | |
| Provide additional information for response | onses to questions on Schedule L (see in | istructions). | | | |
| SCH L, PART IV, BUSINESS TRANSACTIONS | INVOLVING INTERESTED PERSONS: | | | | |
| | | | | | |
| (A) NAME OF PERSON: EVENT RENTS USA LL | С | | | | |
| | | | | | |
| D) DESCRIPTION OF TRANSACTION: RENTAL | OF FURNISHINGS AND EQUIPMENT | | | | |
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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.

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

Employer identification number UNIVERSITY OF DENVER 84-0404231

| Pai | rti liyp | es of Property | | | | | | | |
|-----------------|------------------|--|----------------|----------------------------|--|-------------------------------|---------|--------|-----|
| | | | (a) | (b) | (c) | (d) | | | |
| | | | Check if | Number of contributions or | Noncash contribution amounts reported on | Method of de noncash contribu | | | _ |
| | | | applicable | | Form 990, Part VIII, line 1g | Horicasii contribt | JUON AI | Hourts | 5 |
| 1 | Art - Works | of art | Х | 16 | 0. | APPRAISAL | | | |
| 2 | Art - Historic | al treasures | | | | | | | |
| 3 | Art - Fraction | nal interests | | | | | | | |
| 4 | Books and p | oublications | | | | | | | |
| 5 | Clothing and | d household goods | | | | | | | |
| 6 | Cars and oth | ner vehicles | | | | | | | |
| 7 | Boats and p | lanes | | | | | | | |
| 8 | Intellectual p | | | | | | | | |
| 9 | Securities - I | Publicly traded | Х | 71 | 1,445,897. | FMV | | | |
| 10 | Securities - 0 | Closely held stock | | | | | | | |
| 11 | Securities - I | Partnership, LLC, or | | | | | | | |
| | trust interes | | | | | | | | |
| 12 | Securities - I | Miscellaneous | Х | 2 | 9,352,975. | PRESENT VALUE | | | |
| 13 | Qualified co | nservation contribution - | | | | | | | |
| | Historic stru | | | | | | | | |
| 14 | | nservation contribution - Other | | | | | | | |
| 15 | | Residential | | | | | | | |
| 16 | | Commercial | Х | 1 | 6,459,813. | APPRAISAL | | | |
| 17 | | Other | | | | | | | |
| 18 | | | | | | | | | |
| 19 | | ory | | | | | | | |
| 20 | | nedical supplies | | | | | | | |
| 21 | | | | | | | | | |
| 22 | | tifacts | | | | | | | |
| 23 | | ecimens | | | | | | | |
| 24 | Archeologic | al artifactsPROMISSARY NOTE) | x | 1 | 0 777 073 | PRESENT VALUE | | | |
| 25 | | MUSICAL INSTRUM | X | 4 | 51,500. | | | | |
| 26 27 | Other (|) | | - | 31,300. | 2001115 | | | |
| 28 | Other (| | | | | | | | |
| <u>20</u> 29 | | Forms 8283 received by the organiz | zation during | the tay year for co | ontributions | | | | |
| 25 | | e organization completed Form 828 | | | | | | 12 | |
| | TOT WITHOUT LITE | o organization completed i om oze | 50, r art v, E | once / tellinewicag | omone | | | Yes | No |
| 30a | During the v | ear, did the organization receive by | / contributio | n any property rep | orted in Part I. lines 1 throug | sh 28, that it | | | 110 |
| | | or at least 3 years from the date of t | | | | | | | |
| | | poses for the entire holding period? | | • | | | 30a | | Х |
| b | | cribe the arrangement in Part II. | | | | | | | |
| 31 | | ganization have a gift acceptance p | oolicy that re | equires the review of | of any nonstandard contribu | tions? | 31 | х | |
| 32a | | ganization hire or use third parties | | | | | | | |
| | contribution | • | | _ | • | | 32a | | Х |
| b | If "Yes," des | cribe in Part II. | | | | | | | |
| 33 | If the organi | zation didn't report an amount in c | olumn (c) fo | r a type of property | for which column (a) is che | cked, | | | |
| | describe in F | | | | | | | | |

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

Schedule M (Form 990) 2022

232142 09-09-22

SCHEDULE 0 (Form 990)

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.

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

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

Inspection

| Name of the organization UNIVERSITY OF DENVER | Employer identification number 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: | |
| 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: | |
| RESEARCH AND PUBLIC SERVICE 2022-2023 ACADEMIC YEAR: 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 \$ 42,453,372. INCLUDING GRANTS OF \$ 0. REVENUE \$ 53,433,939. | |
| 2022-2023 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 | |

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

232211 10-28-22

| Schedule O (Form 990) 2022 | Page 2 |
|---|---|
| Name of the organization UNIVERSITY OF DENVER | Employer identification number 84-0404231 |
| UNIVERSITY HEALTH CENTER AND RESIDENCE AND FOOD FACILITIES. THE | |
| UNIVERSITY ALSO HAS A PERFORMING ARTS CENTER THAT HOSTS PERFORMANCES BY | |
| THE FACULTY AND STUDENTS OF THE UNIVERSITY AND THE REGION'S FINEST | |
| PERFORMING ARTS ORGANIZATIONS. A SMALL CONFERENCE AND EVENTS SERVICES | |
| DEPARTMENT ROUNDS OUT THE UNIVERSITY'S AUXILIARY ENTERPRISE ACTIVITIES. | |
| EXPENSES \$ 56,223,624. INCLUDING GRANTS OF \$ 0. REVENUE \$ 77,727,659. | |
| FORM 990, PART VI, SECTION A, LINE 1A: | |
| 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 B, LINE 11B: | |
| FORMS 990 AND 990-T ARE PREPARED BY AN INDEPENDENT AUDIT FIRM, | |
| CLIFTONLARSONALLEN LLP, USING INFORMATION PROVIDED BY MANAGEMENT. THE FORM | |
| IS 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 AN ELECTRONIC | |
| DOCUMENT PORTAL ACCESSIBLE BY MEMBERS OF THE BOARD OF TRUSTEES AND TRUSTEES | |
| ARE NOTIFIED OF THE AVAILABILITY OF THE POSTED FORM 990 BEFORE FILING IS | 0.4.4.4.0 (5 |

| Schedule O (Form 990) 2022 | Page 2 |
|---|---|
| Name of the organization UNIVERSITY OF DENVER | Employer identification number 84-0404231 |
| 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. FOR ALL UNIVERSITY REPRESENTATIVES EXCEPT | |
| TRUSTEES, THE SENIOR VICE CHANCELLOR OF LEGAL AFFAIRS & GENERAL COUNSEL AND | |
| THE EXECUTIVE DIRECTOR OF ENTERPRISE RISK MANAGEMENT WILL CONFER TO | |
| DETERMINE WHETHER A REPORTED CONCERN AMOUNTS TO AN ACTUAL OR APPARENT | |
| CONFLICT OF INTEREST. THE SENIOR VICE CHANCELLOR OF LEGAL AFFAIRS & GENERAL | |
| COUNSEL AND THE EXECUTIVE DIRECTOR OF ENTERPRISE RISK MANAGEMENT HAVE THE | |
| DISCRETION TO REVIEW AND DISCUSS, AS NEEDED, CONFLICT OF INTEREST CONCERNS | |
| WITH THE SENIOR VICE CHANCELLOR OF BUSINESS AND FINANCIAL AFFAIRS. FOR | |
| TRUSTEES, THE CHAIR OF THE AUDIT COMMITTEE DETERMINES WHETHER A REPORTED | |
| CONCERN AMOUNTS TO AN ACTUAL OR APPARENT CONFLICT OF INTEREST. THE CHAIR OF | |
| THE BOARD OF TRUSTEES MUST MAKE THE DETERMINATION IF THE CONFLICT OF | |
| INTEREST CONCERN INVOLVES THE AUDIT COMMITTEE CHAIR. THE PERSON MAKING THE | |
| DETERMINATION HAS THE DISCRETION TO REVIEW AND DISCUSS, AS NEEDED, CONFLICT | |
| OF INTEREST CONCERNS WITH THE FULL AUDIT COMMITTEE, THE CHAIR OF THE BOARD | |
| OF TRUSTEES, THE CHAIR OF THE NOMINATING & GOVERNANCE COMMITTEE, AND/OR THE | |
| SENIOR VICE CHANCELLOR OF LEGAL AFFAIRS & GENERAL COUNSEL. | |
| | |
| FORM 990, PART VI, SECTION B, LINE 15: | |
| DELIBERATIONS AND DISCUSSIONS FOR THE CHANCELLOR'S COMPENSATION PACKAGE ARE | |
| CARRIED ON IN EXECUTIVE SESSION OF THE BOARD OR A COMMITTEE THEREOF. THE | |
| COMPENSATION OF THE UNIVERSITY'S CHANCELLOR IS DETERMINED BY UTILIZING DATA | |
| 000010 10 00 00 | Schodulo () (Form 000) 2022 |

| Schedule O (Form 990) 2022 | Page 2 |
|---|---|
| Name of the organization UNIVERSITY OF DENVER | Employer identification number 84-0404231 |
| 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 COMMITTEE THEREOF. THE EXECUTIVE COMPENSATION COMMITTEE | |
| DISCUSSED COMPENSATION FOR THE CHANCELLOR DURING SEPTEMBER 2021. | |
| 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. THE PROCESS LAST TOOK PLACE | |
| IN JUNE 2023 FOR FISCAL YEAR 2024. 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, INCLUDING THE CONFLICT OF INTERESTS | |
| POLICY, AND THE FINANCIAL STATEMENTS AVAILABLE ON THE UNIVERSITY'S WEBSITE. | |
| THE ORGANIZING DOCUMENTS ARE AVAILABLE UPON REQUEST. | |
| | |
| FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: | |
| ACTUARIAL ADJUSTMENTS 1,862,294. | |
| | |
| EODM 000 DADM VII IINE 2C. | |

FORM 990, PART XII, LINE 2C:

| Schedule O (Form 990) 2022 | Page 2 |
|--|---|
| Name of the organization UNIVERSITY OF DENVER | Employer identification number 84-0404231 |
| THE PROCESS FOR SELECTION OF AN INDEPENDENT ACCOUNTANT HAS NOT CHANGED | • |
| FROM THE PRIOR YEAR. | |
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Schedule O (Form 990) 2022 232212 10-28-22

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

OMB No. 1545-0047

Open to Public

| Internal Revenue Se | vice Go to www.irs.gov/Form990 for instructions and the latest information. | inspection | | | | | | |
|---------------------|---|-------------------------------|--|--|--|--|--|--|
| Name of the o | ganization | nployer identification number | | | | | | |
| | UNIVERSITY OF DENVER | | | | | | | |
| Part I Ide | ntification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. | | | | | | | |

| (a) Name, address, and EIN (if applicable) of disregarded entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Total income | (e) End-of-year assets | (f) Direct controlling entity |
|--|-------------------------|---|---------------------|---------------------------|-------------------------------|
| HRGC AT DU, LLC - 84-0404231 | | | | | |
| 9000 CREEKSIDE WAY | | | | | |
| HIGHLANDS RANCH, CO 80129 | GOLF COURSE OPERATIONS | COLORADO | 4,064,971. | 4,546,794. | UNIVERSITY OF DENVER |
| KNOBEL EVENTS, LLC - 84-0404231 | | | | | |
| 2199 S UNIVERSITY BLVD | EDUCATIONAL | | | | |
| DENVER, CO 80208 | EVENTS/RESTAURANT | COLORADO | 342,522. | 0. | UNIVERSITY OF DENVER |
| FRANK AND JOY LLC - 84-0404231 | | | | | |
| 2199 S UNIVERSITY BLVD | | | | | |
| DENVER, CO 80208 | REAL ESTATE INVESTMENTS | COLORADO | 0. | 1,650,000. | UNIVERSITY OF DENVER |
| | | | | | |

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

| (a) Name, address, and EIN of related organization | (b) Primary activity Le | | (d) Exempt Code section | Exempt Code | (e) Public charity status (if section | (f) Direct controlling entity | 1 | g) 512(b)(13) rolled tity? |
|--|--------------------------------|--|-------------------------------|-------------|---------------------------------------|--------------------------------------|-----|--|
| | | | | 501(c)(3)) | | Yes | No | |
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2022 UNIVERSITY OF DENVER 84-0404231

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.

| | organisation is a contract at a 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 foreign | Direct controlling entity | Predominant income (related, unrelated, excluded from tax under sections 512-514) | Share of total income | Share of end-of-year assets | | ortionate itions? | Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) | General of managin partner? | Percentage ownership |
| | | country) | | sections 512-514) | | a33013 | Yes | No | K-1 (Form 1065) | Yes No | , |
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Type of entity (C corp, S corp, or trust) | (f) Share of total income | (g) Share of end-of-year assets | (h) Percentage ownership | ent | tion b)(13) rolled tity? |
|--|--------------------------------|---|-------------------------------|---|--|--|--------------------------------|-----|-----------------------------------|
| CHARITABLE REMAINDER TRUSTS (11) | | | TINTUID GIEW, OF | | | | | Yes | No |
| 2199 S UNIVERSITY BLVD DENVER, CO 80208 | INVESTMENTS | | UNIVERSITY OF DENVER | TRUST | | | | х | |
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<u>Schedule R (Form 990) 2022</u> UNIVERSITY OF DENVER 84-0404231

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

| | | | | | | | 1 |
|------------|---|---------------------------|--|--|---------|-----|----|
| Not | e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. | | | | | Yes | No |
| 1 | During the tax year, did the organization engage in any of the following transactions v | | | | | | |
| а | Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity | | | | 1a | | Х |
| b | Gift, grant, or capital contribution to related organization(s) | | | | 1b | | Х |
| С | Gift, grant, or capital contribution from related organization(s) | | | | 1c | | Х |
| | Loans or loan guarantees to or for related organization(s) | | | | 1d | | Х |
| | Loans or loan guarantees by related organization(s) | | | | 1e | | Х |
| | | | | | | | |
| f | Dividends from related organization(s) | | | | 1f | | Х |
| | Sale of assets to related organization(s) | | | | 1g | | Х |
| h | Purchase of assets from related organization(s) | | | | 1h | | Х |
| i | Exchange of assets with related organization(s) | | | | 1i | | Х |
| i | Lease of facilities, equipment, or other assets to related organization(s) | | | | 1j | | Х |
| • | , | | | | | | |
| k | Lease of facilities, equipment, or other assets from related organization(s) | | | | 1k | | х |
| | Performance of services or membership or fundraising solicitations for related organic | | | | | | Х |
| | Performance of services or membership or fundraising solicitations by related organizations | | | | | | Х |
| | Sharing of facilities, equipment, mailing lists, or other assets with related organization | | | | | х | |
| | | | | | 10 | х | |
| • | | | | | | | |
| n | Reimbursement paid to related organization(s) for expenses | | | | 1p | | х |
| | Reimbursement paid by related organization(s) for expenses | | | | 1q | | Х |
| ч | Tromparounteric para by related enganization (6) for expenses | | | | | | |
| 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 |
| <u>,</u> | If the answer to any of the above is "Yes," see the instructions for information on who | o must complete th | is line including covered re | elationships and transaction thresholds | | - | 1 |
| _ | , , | • | , <u>, , </u> | | | | |
| | (a) Name of related organization | (b) Transaction | (c) Amount involved | (d) Method of determining amount i | nvolved | | |
| | | type (a-s) | , | | | | |
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Schedule R (Form 990) 2022 UNIVERSITY OF DENVER 84-0404231

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) Legal domicile (state or foreign country) | (d) Predominant income (related, unrelated, excluded from tax under sections 512-514) | Are all partners sec 501(c)(3) orgs.? | (g) Share of end-of-year assets | Dispretion allocat | opor- ate tions? | Genera manag partne | (k) al or Percentage ping ownership |
|--|-------------------------|---|---|---------------------------------------|--|--------------------|------------------------|---------------------------|-------------------------------------|
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|------------|------------------------------------|--|------------|--------|
| Part VII | (Form 990) 2022 Supplemental Info | rmation | | |
| | | nation for responses to questions on Schedule R. See instructions. | | |
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