### \*\* 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.

Department of the Treasury Internal Revenue Service

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

Α	For the	2022 calendar year, or tax year beginning $JUL 1$ , 2022 and end	ding JU	JN 30, 2023			
В	Check if applicable	C Name of organization		D Employer id	lentific	cation number	
	Addres						
	Name change			84-040	2510		
	Initial return		om/suite	E Telephone n	umber	•	
	Final return/	14 E. CACHE LA POUDRE	511 <i>11</i> , 5 G115	719-389-			
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		<b>G</b> Gross receipts \$		436,062	2,054.
	Amend return		H(a) Is this a gr				
	Applica	F Name and address of principal officer: LORIN SEAGER		for subord		_	X No
	pendin	SAME AS C ABOVE		<b>H(b)</b> Are all subord			No
Ι.	Tax-exe	mpt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or	527			list. See instruction	
	Websit			H(c) Group exe			
		organization: X Corporation Trust Association Other	L Year o			1 State of legal domi	cile: CO
P	art I	Summary				3	
	1	Briefly describe the organization's mission or most significant activities: TO TRANSF	ORM OU	R STUDENTS B	Y		
Activities & Governance	:	PROVIDING THE FINEST LIBERAL ARTS EDUCATION AVAILABLE, TAUGHT					
nar	2	Check this box if the organization discontinued its operations or disposed	of more	than 25% of its n	et ass	ets.	
Ver	3	Number of voting members of the governing body (Part VI, line 1a)			3		36
ဗိ	4	Number of independent voting members of the governing body (Part VI, line 1b)					34
o V	5	Fotal number of individuals employed in calendar year 2022 (Part V, line 2a)			$\overline{}$		2458
itie	6	Total number of volunteers (estimate if necessary)			6		460
cţi	7 a	Fotal unrelated business revenue from Part VIII, column (C), line 12			7a	1,971	,614.
ď	b	Net unrelated business taxable income from Form 990-T, Part I, line 11			7b		0.
		· · ·		Prior Year		Current Yea	ar
•	8	Contributions and grants (Part VIII, line 1h)		42,907,	761.	20,035	6,634.
Revenue	9	Program service revenue (Part VIII, line 2g)		170,022,	016.	179,080	,809.
eve	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		88,224,	997.	61,342	2,954.
ď	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,083,	358.		8,849.
	1	Fotal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		304,238,	132.	263,303	3,246.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		55,796,	797.	57,048	3,543.
	1	Benefits paid to or for members (Part IX, column (A), line 4)			0.		0.
G	45 .	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		88,102,	598.	89,756	5,117.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		16,	650.	180,165.	
De	b	Fotal fundraising expenses (Part IX, column (D), line 25) 6,082,660					
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		78,663,	215.	85,083	3,149.
		Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		222,579,	260.	232,067	,974.
		Revenue less expenses. Subtract line 18 from line 12		81,658,	872.	31,235	,272.
Net Assets or	í		Beg	jinning of Current	Year	End of Yea	r
sets	20	Fotal assets (Part X, line 16)		1,346,394,	475.	1,399,096	878.
t As	21	Fotal liabilities (Part X, line 26)		214,892,	332.	201,941	,980.
2	22	Net assets or fund balances. Subtract line 21 from line 20		1,131,502,	143.	1,197,154	1,898.
	art II	Signature Block					
		ties of perjury, I declare that I have examined this return, including accompanying schedules and				knowledge and belie	f, it is
true	, correc	and complete. Declaration of preparer (other than officer) is based on all information of which	preparer l	has any knowledge  5/14/2	!. ?∩?/I		
		Lonn Scager			2024		
Sig		Signature 62 £ 52 £ 16 6 7 £ 10 5		Date			
He	re	CORIN SEAGER, VP FOR FINANCE, CFO					
		Type or print name and title				T	
		Print/Type preparer's name Preparer's signature		lif	neck	PTIN	
Pai	d	SARAH HINTZ SARAH HINTZ	0.5	5/14/24 se	lf-employe		
Pre	parer	Firm's name CLIFTONLARSONALLEN LLP		Firm's E	IN '	41-0746749	
Use	Only	Firm's address 8390 EAST CRESCENT PARKWAY, SUITE 300					
		GREENWOOD VILLAGE, CO 80111		Phone n	0.303	-779-5710	
Ма	y the IF	S discuss this return with the preparer shown above? See instructions				X Yes	No

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Pa	rt III Statement of Program Service Accomplishments		
_	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission: AT COLORADO COLLEGE OUR GOAL IS TO PROVIDE THE FINEST LIBERAL ARTS		
	EDUCATION IN THE COUNTRY. DRAWING UPON THE ADVENTUROUS SPIRIT OF THE		
	ROCKY MOUNTAIN WEST, WE CHALLENGE STUDENTS, ONE COURSE AT A TIME, TO		
	DEVELOP THOSE HABITS OF INTELLECT AND IMAGINATION THAT WILL PREPARE		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?		Yes 🗓 No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?		Yes 🗓 No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as me		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,	tne total expense	s, and
4a	revenue, if any, for each program service reported.  (Code:) (Expenses \$ 209,454,920. including grants of \$ 57,048,543. ) (Revenue service)	179	683 123. \
ти	TO PROVIDE UNDERGRADUATE AND MASTER-OF-ARTS IN TEACHING DEGREE PROGRAMS	,	, , , , , , , , , , , , , , , , , , , ,
	TO APPROXIMATELY 2,100 STUDENTS.		
	·		
4b	(Code:) (Expenses \$) (Revenue 5	S	)
4c	(Code:) (Expenses \$	S	)
4d	Other program services (Describe on Schedule O.)		
-ru	(Expenses \$ including grants of \$ ) (Revenue \$	١	
4e	Total program service expenses 209, 454, 920.	,	
	· · · · · · · · · · · · · · · · · · ·	For	m <b>990</b> (2022)

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# 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		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			
	Schedule D, Part III	8	Х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9	Х	
10	Did the organization, directly or through a related organization, hold assets in 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, VII, VII, 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	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes, " complete Schedule E	13	Х	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	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			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		х
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

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Part IV Checklist of Required Schedules (continued)

ı aı	Officerist of Required Scriedules (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	<u> </u>	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current				
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete				
	Schedule J	23	X		
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the				
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete				
	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	
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit				
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х	
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and				
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete				
	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		X	
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? If				
	"Yes," complete Schedule L, Part IV	28a		X	
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х	
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If				
	"Yes," complete Schedule L, Part IV	28c		X	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	-	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation				
	contributions? If "Yes," complete Schedule M	30	Х	<del> </del>	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х	
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete				
	Schedule N, Part II	32		X	
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		v		
0.4	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	X		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	24	Х		
25-	Part V, line 1	34	X	<del>                                     </del>	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	21	$\vdash$	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512/b)(13)2. If "Yes " complete Schoolvia B. Bert V. line 3.	35b	Х		
26	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	330			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	36		x	
37	If "Yes," complete Schedule R, Part V, line 2  Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		<del></del>	
31	and that is treated as a sectional in fact federal income to recognize the section of the sectio				
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	37		Х	
50	Note: All Form 990 filers are required to complete Schedule O	38	х		
Par	t V Statements Regarding Other IRS Filings and Tax Compliance				
	Check if Schedule O contains a response or note to any line in this Part V				
			Yes	No	
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 13780				
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming				
	(gambling) winnings to prize winners?	1c	х		
			000		

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Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V 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 **b** If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2h Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). X **5a** Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Х Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? Х 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). Х Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required Х to file Form 8282? 7c If "Yes," indicate the number of Forms 8282 filed during the year Х Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Х Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 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. Did the sponsoring organization make any taxable distributions under section 4966? 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter: 10 Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 11a Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note: See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand Х **14a** Did the organization receive any payments for indoor tanning services during the tax year? 14a If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 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? X 15 If "Yes," see the instructions and file Form 4720, Schedule N. X Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 17

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If "Yes," complete Form 6069.

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			Х
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 1a 36			
	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			
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	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Х	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
_	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	(This doctor b requests information about periods not required by the internal notation decay)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a		12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe			
	on Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filedCO,FL,MD,OR,AK,IL,KY,LA,MA,MI,NV,NH			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3):	onlv)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	cial	
	statements available to the public during the tax year.		ui	
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
_0	LORIN SEAGER - (719)389-6693			
	14 E. CACHE LA POUDRE ST., COLORADO SPRINGS, CO 80903			

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See 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		orga 	ıııza			iper	isate			(E)
(A)	(B)			ر) Posi	<b>C)</b> itior	1		( <b>D</b> ) Reportable	(E)	(F)
Name and title	Average hours per		not c					compensation	Reportable compensation from related	Estimated amount of
	week		cer an					from		other
	(list any	ctor						the	organizations	compensation
	hours for	r dire				pa		organization	(W-2/1099-MISC/	from the
	related	stee o	rustee			ensa		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	al trus	onal t		loyee	comp		1099-NEC)		and related
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) GONG PIGUAPPGON	line)	Ĕ	Ë	JO.	-Ş	훈	요			
(1) SONG RICHARDSON PRESIDENT	40.00	X		х				562,061.	0.	122 070
(2) ROBERT MOORE	40.00	Λ.		^				562,061.	0.	123,070.
SR VP FIN/ADMIN	40.00			х				647,005.	0.	32 364
(3) MICHAEL EDMONDS	40.00			^				047,003.	0.	32,364.
SR VICE PRESIDENT	40.00			х				561,471.	0.	43,160.
(4) MARY ANN SCHWARTZ	40.00			Δ.				301,471.	٠.	43,100.
VP FOR ADVANCEMENT	40.00			х				405,816.	0.	47,472.
(5) MARK HATCH	40.00							103,010.	••	17,172
VP FOR ENROLLMENT MANAGEMENT	10.00	-		х				393,078.	0.	53,281.
(6) KRIS MAYOTTE	40.00							030,070.	•	
HEAD HOCKEY COACH						x		325,705.	0.	53,974.
(7) PEDRO DE ARAUJO	40.00									, , , , , , , , , , , , , , , , , , , ,
VP & DEAN OF COLLEGE		•			х			252,387.	0.	50,541.
(8) EMILY CHAN	40.00							,		,
VP & DEAN OF FACULTY				х				254,556.	0.	42,485.
(9) MANYA WHITAKER	40.00							·		,
EXEC VP & CHIEF OF STAFF					х			258,696.	0.	26,270.
(10) LESLEY IRVINE	40.00									
VP & DIRECTOR OF ATHLETICS					х			230,454.	0.	46,558.
(11) BARBARA WILSON	40.00									
ASSOC. VP FOR ADMIN. SERVICES					х			236,405.	0.	33,566.
(12) CLAIRE GARCIA	40.00									
FORMER DEAN OF FACULTY							Х	217,293.	0.	31,057.
(13) TIMOTHY FULLER	40.00									
PROFESSOR						Х		216,633.	0.	31,443.
(14) ROCHELLE DICKEY	40.00									
DEAN OF STUDENTS				Х				204,152.	0.	34,752.
(15) LORIN SEAGER	40.00									
ASSOC. VP FOR FINANCE					Х			191,795.	0.	39,699.
(16) MICHAEL GRACE	40.00									
PROFESSOR						х		202,028.	0.	29,397.
(17) OWEN CRAMER	40.00									
PROFESSOR						Х		198,040.	0.	29,200.

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Form 990 (2022) THE COLORADO	СОППЕСЕ								04 040251	o Page <b>o</b>
Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	anc	l Hig	ghes	t Co	pmpensated Employee	s (continued)	
(A)	(B)			_ (0				(D)	(E)	(F)
Name and title	Average hours per week	box	Position (do not check more than one box, unless person is both an officer and a director/trustee)			than c s both	an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(18) JOHN RIKER	40.00	ļ								
PROFESSOR						Х		182,778.	0.	30,009.
(19) JEFF KELLER	1.00									
CHAIR		Х		Х				0.	0.	0.
(20) RYAN HAYGOOD	1.00									
VICE CHAIR		Х		Х				0.	0.	0.
(21) HEATHER CARROLL	1.00									
SECRETARY		Х		Х				0.	0.	0.
(22) SUE ALLON	1.00									
TRUSTEE		Х						0.	0.	0.
(23) ED BOWDITCH	1.00									
TRUSTEE		Х						0.	0.	0.
(24) SAM BRONFMAN	1.00									
TRUSTEE		Х						0.	0.	0.
(25) SUSAN BURGHART	1.00									
PAST CHAIR		Х						0.	0.	0.
(26) LILLY CHEN	1.00									
TRUSTEE		х			L			0.	0.	0.
1b Subtotal								5,540,353.	0.	778,298.
c Total from continuation sheets to Part VI	I, Section A							0.	0.	0.
d Total (add lines 1b and 1c)								5,540,353.	0.	778,298.

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

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			162	INO
3	Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3	Х	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization			
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Х	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services			
	rendered to the organization? If "Yes." complete Schedule J for such person	5		Х
$\overline{}$				

#### Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
BON APPETIT MANAGEMENT COMPANY		
SEATTLE UNIVERSITY, SEATTLE, WA 98112	FOOD SERVICE	9,045,335.
SODEXO INC & AFFILIATES		
PO BOX 360170, PITTSBURGH, PA 15251	CUSTODIAL SERVICES	4,049,584.
NUNN CONSTRUCTION		
925 ELDTON DR., COLORADO SPRINGS, CO 80907	CONSTRUCTION SERVICES	2,022,814.
DIS		
DEPT SH 19918, PALENTINE, IL 60055	STUDY ABROAD SERVICES	1,328,560.
WORLD LEARNING		
PO BOX 676, BRATTLEBORO, VT 05302	STUDY ABROAD SERVICES	725,662.
Total number of independent contractors (including but not limited to those lister \$100,000 of compensation from the organization 86	d above) who received more than	

SEE PART VII, SECTION A CONTINUATION SHEETS

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Form 990 THE COLORADO									84-04025	010
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 hours	(cl			ition that		lv)	Reportable compensation	Reportable compensation	Estimated 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 compensation from the organization and related organizations
(27) CAROLYN CULLEN TRUSTEE	1.00	х						0.	0.	0.
(28) JEROME DEHERRERA	1.00	Λ						0.	0.	0,
TRUSTEE	1.00	Х						0.	0.	0
(29) ERIC DURAN	1.00	Λ						٠.	0.	0,
	1.00	.,						_	0	0
TRUSTEE	1 00	Х						0.	0.	0
(30) FRIEDA EKOTTO	1.00									
TRUSTEE	1	Х						0.	0.	0.
(31) JOE ELLIS	1.00	ł						_	_	_
TRUSTEE	ļ	Х						0.	0.	0
(32) JANE FRANKE	1.00	ł						_	_	_
TRUSTEE	ļ	Х						0.	0.	0
(33) LISA HASTINGS	1.00									
TRUSTEE		Х						0.	0.	0.
(34) JENA HAUSMANN	1.00									
TRUSTEE		Х						0.	0.	0.
(35) JEN HOGLIN	1.00									
TRUSTEE	ļ	Х						0.	0.	0
(36) AMY LOUIS	1.00									
TRUSTEE		Х						0.	0.	0
(37) TAFARI LUMUMBA	1.00	ļ.								
TRUSTEE		Х						0.	0.	0
(38) LIZA MALOTT POHLE	1.00									
TRUSTEE		Х						0.	0.	0
(39) MANUEL MARTINEZ	1.00									
TRUSTEE		Х						0.	0.	0
(40) SO YONG PARK	1.00									
TRUSTEE		Х						0.	0.	0
(41) SONG RICHARDSON	1.00									
TRUSTEE		Х						0.	0.	0
(42) BOB ROSS	1.00									
TRUSTEE		Х						0.	0.	0 .
(43) KYLE SAMUEL	1.00									
TRUSTEE		Х						0.	0.	0.
(44) MIKE SLADE	1.00									
TRUSTEE		Х						0.	0.	0.
(45) ANDY STENOVEC	1.00									
TRUSTEE		х	L	L_	L	L		0.	0.	0 .
(46) BRIAN THOMSON	1.00									
		х	ı		I	ı	1	0.	0.	0.

Form 990 THE COLORADO COLLEGE 84-0402510

Form 990 THE COLORADO	COLLEGE								84-04025	10
Part VII   Section A. Officers, Directors, Tru	stees, Key En	nplo	yee	s, a	nd F	ligh	est (	Compensated Employe	es (continued)	
<b>(A)</b> Name and title	(B) Average hours	(cl		Pos	C) ition that		ly)	<b>(D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated 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 compensation from the organization and related organizations
(47) JOHN TROUBH TRUSTEE	1.00	х						0.	0.	0.
(48) THAYER TUTT JR.	1.00	.,							0	0
TRUSTEE (49) LAUREN WATEL	1.00	Х	$\vdash$			$\vdash$		0.	0.	0.
TRUSTEE	1.00	Х						0.	0.	0.
(50) CHESTER WHITE TRUSTEE	1.00	х						0.	0.	0.
(51) ALAN WOO	1.00								· ·	
TRUSTEE		х						0.	0.	0.
Total to Part VII, Section A, line 1c										

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Form 990 (2022) THE COLORA

Part VIII Statement of Revenue

Pa	Part VIII Statement of Revenue											
		Check if Schedule O contains a response o	r note to any lin	e in this Part VIII								
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514					
nts nts		Federated campaigns1a										
is a		Membership dues 1b										
ts, ( Am		Fundraising events 1c										
ig ig		Related organizations 1d	1 602 602									
ns, Sim		Government grants (contributions) 1e	1,693,602.									
er S	Ť	All other contributions, gifts, grants, and	18 342 032									
Ĕ	_		18,342,032.									
Contributions, Gifts, Grants and Other Similar Amounts	_	Noncash contributions included in lines 1a-1f	002,323.	20,035,634.								
O 6		Total. Add lines 1a-1f	Business Code	20,033,034.								
	2 a	TUITION & FEES	611310	151,950,865.	151,950,865.							
Program Service Revenue	z a b		721310	22,970,225.	22,970,225.							
Ser		ATHLETIC REVENUE	711210	1,876,248.	1,876,248.							
m S	d	HEALTH SERVICES/FEES/INSURANCE	624100	1,095,413.	1,095,413.							
gra	e	TICKET SALES	713990	908,059.	908,059.		_					
Prc	f	All other program service revenue	611710	279,999.	279,999.							
	g	Total. Add lines 2a-2f		179,080,809.								
	3	Investment income (including dividends, interes	st, and									
		other similar amounts)		49,585,038.		156,670.	49,428,368.					
	4	Income from investment of tax-exempt bond pro	oceeds									
	5	Royalties										
		(i) Real	(ii) Personal									
	6 a	Gross rents <b>6a</b> 783,265.										
	b	Less: rental expenses 6b 0.										
	С	Rental income or (loss) 6c 783,265.		E02 065		T02 065						
		Net rental income or (loss)  Gross amount from sales of (i) Securities	(ii) Other	783,265.		783,265.						
	/ a		(ii) Other									
	L-	assets other than inventory  b Less: cost or other basis										
ø	b	and sales expenses	6,360.									
Revenue		Gain or (loss) 7c 11,764,276.	-6,360.									
ev.		Net gain or (loss)	-	11,757,916.			11,757,916.					
Other F	8 a	Gross income from fundraising events (not including \$										
		contributions reported on line 1c). See										
		Part IV, line 18 8a										
		Less: direct expenses 8b										
		Net income or (loss) from fundraising events										
	9 a	Gross income from gaming activities. See										
		Part IV, line 19 9a										
		Less: direct expenses 9b										
		Net income or (loss) from gaming activities										
	10 a	Gross sales of inventory, less returns										
	h	and allowances 10a Less: cost of goods sold 10b										
		Net income or (loss) from sales of inventory										
			Business Code									
Snc	11 a		711210	832,797.		832,797.						
ine	b		611710	610,911.	602,314.	8,597.						
scellane Revenu	С	CHILDCARE CENTER	624410	571,997.		190,285.	381,712.					
Miscellaneous Revenue	d	All other revenue	900099	44,879.			44,879.					
2		Total. Add lines 11a-11d		2,060,584.								
	12	Total revenue. See instructions		263,303,246.	179,683,123.	1,971,614.	61,612,875.					

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Part IX Statement of Functional Expenses

Sect	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).						
	Check if Schedule O contains a response or note to any line in this Part IX						
	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	<b>(D)</b> Fundraising expenses		
1	Grants and other assistance to domestic organizations						
	and domestic governments. See Part IV, line 21	10,161.	10,161.				
2	Grants and other assistance to domestic						
	individuals. See Part IV, line 22	57,038,382.	57,038,382.				
3	Grants and other assistance to foreign						
	organizations, foreign governments, and foreign						
	individuals. See Part IV, lines 15 and 16						
4	Benefits paid to or for members						
5	Compensation of current officers, directors,						
	trustees, and key employees	4,987,426.	1,394,871.	2,444,349.	1,148,206.		
6	Compensation not included above to disqualified						
	persons (as defined under section 4958(f)(1)) and						
	persons described in section 4958(c)(3)(B)						
7	Other salaries and wages	64,029,223.	57,760,964.	4,027,351.	2,240,908.		
8	Pension plan accruals and contributions (include						
	section 401(k) and 403(b) employer contributions)	5,104,099.	4,581,716.	296,673.	225,710.		
9	Other employee benefits	10,664,729.	9,604,706.	698,741.	361,282.		
10	Payroll taxes	4,970,640.	4,280,925.	453,674.	236,041.		
11	Fees for services (nonemployees):						
	Management						
	Legal	313,711.	8,195.	295,048.	10,468.		
	Accounting	261,427.		261,427.			
	Lobbying	59,790.		59,790.			
е	Professional fundraising services. See Part IV, line 17	180,165.		0.500.565	180,165.		
f	Investment management fees	2,509,567.		2,509,567.			
g	Other. (If line 11g amount exceeds 10% of line 25,	10 602 000	16 762 004	1 255 220	500 500		
	column (A), amount, list line 11g expenses on Sch O.)	18,623,990.	16,763,884.	1,357,338.	502,768.		
12	Advertising and promotion	645,212.	536,600.	36,434.	72,178.		
13	Office expenses	7,857,928.	7,617,314. 1,106,747.	34,894.	205,720.		
14	Information technology	1,155,455.		41,536.	7,172.		
15	Royalties	2,747,343. 4,317,612.	2,209,006. 4,278,476.	169,521. 36,823.	368,816. 2,313.		
16	Occupancy	8,124,528.	7,812,532.	143,372.	168,624.		
17	Travel	0,124,320.	7,012,332.	143,372.	100,024.		
18	Payments of travel or entertainment expenses						
40	for any federal, state, or local public officials	1,421,962.	787,208.	469,168.	165,586.		
19 20	Conferences, conventions, and meetings	6,293,350.	5,972,780.	320,570.	105,500.		
20		5,255,550.	3,372,700.	320,370.			
21 22	Payments to affiliates  Depreciation, depletion, and amortization	11,628,036.	11,628,036.				
23	In	3,263,413.	1,647,694.	1,615,719.			
24	Other expenses, Itemize expenses not covered	-,,	=,==,==,	=,:==,:==			
24	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	FOOD SERVICE	7,080,041.	7,006,551.	73,411.	79.		
a b	REPAIRS & MAINTENANCE	2,283,537.	2,148,345.	130,390.	4,802.		
C	OFFICIAL FUNCTIONS	2,047,349.	1,607,379.	309,794.	130,176.		
d	MISCELLANEOUS	1,409,427.	1,177,625.	216,004.	15,798.		
e		3,039,471.	2,474,823.	528,800.	35,848.		
25	Total functional expenses. Add lines 1 through 24e	232,067,974.	209,454,920.	16,530,394.	6,082,660.		
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)						
			l	L	E 000 (2222		

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Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 12,690,998. 20,813,461. 1 Cash - non-interest-bearing 53,678,235. 55,560,770. 2 Savings and temporary cash investments 22,731,705. 17,795,909. 3 Pledges and grants receivable, net 3 2,185,628. 1,811,185. Accounts receivable, net Loans and other receivables from 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 5 Loans and other receivables from other disqualified persons (as defined 6 under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 135,000. 135,000. Notes and loans receivable, net 7 715,825. 760,483. Inventories for sale or use 8 Prepaid expenses and deferred charges 3,743,415. 4,497,332. 10a Land, buildings, and equipment: cost or other 520,297,143. 10a basis. Complete Part VI of Schedule D 176,133,159. 355,101,806. 344,163,984. b Less: accumulated depreciation 10b 10c 257,023,125. 358,702,596. 11 Investments - publicly traded securities 11 Investments - other securities. See Part IV, line 11 636,976,841. 593,774,938. 12 12 1,163,052. 13 820,610. Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 260,610. 248,845. Other assets. See Part IV, line 11 15 15 1,346,394,475. 1,399,096,878. 16 **Total assets.** Add lines 1 through 15 (must equal line 33) 16 13,460,215. 11,480,309. Accounts payable and accrued expenses 17 713,697. 18 360,956. 18 Grants payable 2,719,962. 3,389,376. 19 19 Deferred revenue 66,205,965. 55,052,545. 20 Tax-exempt bond liabilities 20 6,159,469. 7,101,148. Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to any current or former officer, director, Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 386,182. 967,401. 23 Secured mortgages and notes payable to unrelated third parties 23 109,613,228. 109,649,834. 24 Unsecured notes and loans payable to unrelated third parties \_\_\_\_\_ 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 15,633,614. 25 13,940,411. 214,892,332. 201,941,980. 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 367,372,646. 386,914,448. 27 Net assets without donor restrictions 27 Net assets with donor restrictions 764,129,497. 810,240,450. Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 30 30 31 Retained earnings, endowment, accumulated income, or other funds 31

1,399,096,878. Form 990 (2022)

1,197,154,898.

32

Total net assets or fund balances

Total liabilities and net assets/fund balances

1,131,502,143.

1,346,394,475.

32

33

orm	1990 (2022) THE COLORADO COLLEGE	84-0402	510	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	263	,303,	246.
2	Total expenses (must equal Part IX, column (A), line 25)	2	232	,067,	974.
3	Revenue less expenses. Subtract line 2 from line 1	3	31	,235,	272.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,131	,502,	143.
5	Net unrealized gains (losses) on investments	5	32	,275,	656.
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	2	,141,	827.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1,197	,154,	898.
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	0.			
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				
	consolidated basis, or both:	•			
	Separate basis X 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 Scho				
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)

<u>Total</u>

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization THE COLORADO COLLEGE Employer identification number 84-0402510

Pa	rt I	Reason for Public (	Charity Status. (	(All organizations must c	omplete th	nis part.) S	ee instructions.	
The	he organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)							
1	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).							
2	Х	A school described in <b>section 170(b)(1)(A)(ii).</b> (Attach Schedule E (Form 990).)						
_						/b//4// A//;;	:\	
3	H	A hospital or a cooperative						the beenitel's name
4	Ш	A medical research organiza	ation operated in cor	ijunction with a nospital	described	III Sectio	n 170(b)(1)(A)(III). Enter	the nospital's name,
_		city, and state:						
5		An organization operated for		lege or university owned	or operat	ed by a go	vernmental unit describ	ed in
		section 170(b)(1)(A)(iv). (C	Complete Part II.)					
6	Ш	A federal, state, or local gov	ernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).	
7		An organization that norma	lly receives a substar	ntial part of its support fr	om a gove	ernmental ı	unit or from the general	public described in
		section 170(b)(1)(A)(vi). (C	omplete Part II.)					
8		A community trust describe	ed in section 170(b)(	1)(A)(vi). (Complete Part	t II.)			
9		An agricultural research org	anization described	in section 170(b)(1)(A)(i	ix) operate	ed in conju	nction with a land-grant	college
		or university or a non-land-g	rant college of agricu	ulture (see instructions).	Enter the i	name, city,	and state of the college	e or
		university:					_	
10		An organization that norma	Ilv receives (1) more t	than 33 1/3% of its supp	ort from c	ontribution	s. membership fees. an	d gross receipts from
		activities related to its exem						
		income and unrelated busin		·	. ,		• •	· ·
		See section 509(a)(2). (Con		(1000 000tion of 1 tax) no	iii basiiioc	ooo aoqan	od by the organization t	and dune do, 1070.
11		An organization organized a	•	volv to tost for public sat	ioty Soo	saction FC	)O(a)(A)	
	H	•	•		•			nurnacea of ano ar
12	ш	An organization organized a	•	•	-		•	
		more publicly supported org	-					Sneck the box on
		lines 12a through 12d that	* *					
а		<b>Type I.</b> A supporting orga	· · · · · · · · · · · · · · · · · · ·		•	_		
		the supported organization	· · · · · ·		majority o	of the direc	tors or trustees of the s	upporting
		organization. You must o	omplete Part IV, Se	ections A and B.				
b		■ Type II. A supporting org.	anization supervised	or controlled in connect	ion with it	s supporte	d organization(s), by hav	/ing
		control or management o	f the supporting orga	anization vested in the sa	ame perso	ns that cor	ntrol or manage the sup	ported
		organization(s). You mus	t complete Part IV,	Sections A and C.				
С			<b>grated.</b> A supporting	g organization operated	in connect	tion with, a	and functionally integrate	ed with,
		its supported organization	n(s) (see instructions)	. You must complete F	Part IV, Se	ctions A,	D, and E.	
d		Type III non-functionally	integrated. A supp	orting organization oper	ated in co	nnection w	rith its supported organi	zation(s)
		that is not functionally int	egrated. The organiz	ation generally must sati	isfy a distr	ibution req	uirement and an attenti	veness
		requirement (see instructi	ons). You must con	nplete Part IV, Sections	A and D,	and Part	V.	
е		Check this box if the orga	·	-				
		functionally integrated, or					31 / 31 / 31	
f	Ente	er the number of supported o	* *	, 5	5 5			
		vide the following information		d organization(s).				
		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed	(v) Amount of monetary	(vi) Amount of other
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
				above (see instructions)				

THE COLORADO COLLEGE

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#### 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.)

Sed	ction A. Public Support	,,	·	•			
	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and	(-,	(-)	(-)	(-,/ = - = -	(-,	(-)
	membership fees received. (Do not						
	include any "unusual grants.")	19,095,879.	66,547,983.	27,530,714.	42,907,761.	20,035,634.	176,117,971.
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	19,095,879.	66,547,983.	27,530,714.	42,907,761.	20,035,634.	176,117,971.
	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)						
6	Public support. Subtract line 5 from line 4.						176,117,971.
	ction B. Total Support						· · ·
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 4	19,095,879.	66,547,983.	27,530,714.	42,907,761.	20,035,634.	176,117,971.
	Gross income from interest,			, ,			
_	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	39,410,878.	27,299,744.	24,242,096.	44,210,459.	49,428,368.	184,591,545.
9	Net income from unrelated business	, ,	, ,	, ,	, ,		, ,
_	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	3,914,636.	3,035,270.	1,849,565.	1,846,043.	1,028,905.	11,674,419.
11	<b>Total support.</b> Add lines 7 through 10	, ,	, ,	, ,	, ,	, ,	372,383,935.
	Gross receipts from related activities,	etc (see instructio	I ns)			12	780,540,537.
	<b>First 5 years.</b> If the Form 990 is for th					•	
	organization, check this box and stop	_					
Sec	ction C. Computation of Publi						
	Public support percentage for 2022 (li			olumn (f))		14	47.29 %
	Public support percentage from 2021	, (,,	•	( )		15	51.34 %
	33 1/3% support test - 2022. If the o						
	stop here. The organization qualifies						
b	33 1/3% support test - 2021. If the o						
	and <b>stop here.</b> The organization qual	-					
17a							
	7a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization						
	meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization						
h	10% -facts-and-circumstances test				•	7a. and line 15 is	10% or
~	more, and if the organization meets the	-					. = , 5 5.
	organization meets the facts-and-circu				-		
18	Private foundation. If the organization		-		• • •		
	The real section is the organization	Esta fiet officer a r		., ,			(Form 990) 2022

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# 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 b	pelow, please comp	plete Part II.)				
Section A. Public Support	T	T	1		1	
Calendar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
<b>1</b> Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the						
organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge	<u> </u>					
6 Total. Add lines 1 through 5	<u> </u>	1		<del> </del>		
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons <b>b</b> Amounts included on lines 2 and 3 received	<u> </u>			+		
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						
• • • • • • • • • • • • • • • • • • • •	T (-) 0040	(1-) 0040	(-) 0000	(-1) 0004	(-) 0000	(f) T-1-1
Calendar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6						
dividends, payments received on						
securities loans, rents, royalties,						
and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses						
, , , , , , , , , , , , , , , , , , ,						
c Add lines 10a and 10b						
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.)		1		1		
14 First 5 years. If the Form 990 is for t	he organization's f	iret eacond third	fourth or fifth tax	Vear as a section F	-  -	l n
	J				. , . , .	,,,
Section C. Computation of Publ	ic Support Per					
15 Public support percentage for 2022 (			column (f))		15	%
<b>16</b> Public support percentage from 202		•			16	%
Section D. Computation of Inves					1.01	
17 Investment income percentage for 2			ne 13. column (f))		17	%
18 Investment income percentage from			, (.,,		18	%
19a 33 1/3% support tests - 2022. If the						
more than 33 1/3%, check this box a						
b 33 1/3% support tests - 2021. If the						nd
line 18 is not more than 33 1/3%, che						
20 Private foundation If the organization		· ·	-		-	

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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
_		
1		
2		
3a		
3b		
20		
3с		
4a		
4b		
4-		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
0-		
9c		
10a		
10b		
A /Farm	~ ^^^	2022

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Sche	edule A (Form 990) 2022 THE COLORADO COLLEGE	84-0402510	Pa	age <b>5</b>
Pai	rt IV   Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b		11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of	one or		
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's or			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s,			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one sup			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated amor supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	ng the		
2	Did the organization operate for the benefit of any supported organization other than the supported			
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	stion C. Type II Supporting Organizations			
	<u></u>		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		103	140
•	or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	1		
Sec	the supported organization(s). tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		163	140
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
2	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
		2		
2	the organization maintained a close and continuous working relationship with the supported organization(s).			
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's			
	·			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	3		
Sec	supported organizations played in this regard. Stion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in:	อน น <b>นเมมา</b> อ <sub>ม</sub> .		
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.		\	
C	The organization supported a governmental entity. Describe in Part VI how you supported a governmental en	ntity (see instruction	1 .	Na
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI</b> identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	, , ,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
_	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а				
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	3			
	of its supported organizations? If "Vos." describe in Part VI the role placed by the exception in this regard	3h	1	1

Sche	dule A (Form 990) 2022 THE COLORADO COLLEGE			84 - 0402510	Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organ	izations		<u> </u>
1	Check here if the organization satisfied the Integral Part Test as a qualifyi	ng trust on N	Nov. 20, 1970 ( explain i	in Part VI). See instr	ructions.
	All other Type III non-functionally integrated supporting organizations must		•	•	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current (optiona	
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3			
4	Add lines 1 through 3.	4			
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or				
	collection of gross income or for management, conservation, or				
	maintenance of property held for production of income (see instructions)	6			
7	Other expenses (see instructions)	7			
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current (optiona	
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
а	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
С	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
е	Discount claimed for blockage or other factors				
	(explain in detail in Part VI):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
_3_	Subtract line 2 from line 1d.	3			
4	Cash deemed held for exempt use. Enter 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	ion 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	

instructions).

THE COLORADO COLLEGE 84-0402510 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 Amounts paid to supported organizations to accomplish exempt purposes 1 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 Other distributions (describe in Part VI). See instructions. 6 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 10 Line 8 amount divided by line 9 amount (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 3j and 4c. 8 Breakdown of line 7: a Excess from 2018 **b** Excess from 2019 c Excess from 2020 d Excess from 2021

Schedule A (Form 990) 2022

e Excess from 2022

Schedule A (Form 990) 20	022 THE COLORADO COLLEGE	84-0402510	Page 8
Part VI Supplem Part IV, Sec line 1; Part I	ental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or tion A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1V, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part Vines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any addition	l and 2; Part IV, Section /, Section B, line 1e; Pai	C,
SCHEDULE A, PART II	I, LINE 10, EXPLANATION FOR OTHER INCOME:		
CHILDCARE CENTER			
2018 AMOUNT: \$ 54	40,081.		
2019 AMOUNT: \$ 24	47,585.		
2020 AMOUNT: \$ 11	14,086.		
2021 AMOUNT: \$ 34	46,266.		
2022 AMOUNT: \$ 38	31,712.		
OTHER REVENUE			
2018 AMOUNT: \$ 3	,374,555.		
2019 AMOUNT: \$ 2	,681,177.		
2020 AMOUNT: \$ 1	,735,479.		
2021 AMOUNT: \$ 1	,499,777.		
2022 AMOUNT: \$ 60	02,314.		
INSURANCE PROCEEDS			
2019 AMOUNT: \$ 10	06,508.		
2022 AMOUNT: \$ 44	4,879.		

### Schedule B

(Form 990)

Schedule of Contributors
Attach to Form 990 or Form 990-PF.

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 **Employer identification number** THE COLORADO COLLEGE 84-0402510 Organization type (check one): Filers of: Section: X 501(c)( 3 ) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ 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).

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

Name of organization

Employer identification number

THE COLORADO COLLEGE

84-0402510

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

THE COLORADO COLLEGE

84-0402510

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

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Schedule B (Form 990) (2022)

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

Name of organization

Employer identification number

THE COLORADO COLLEGE

84-0402510

Part II	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
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

Schedule B (Form 990) (2022)

Page 4 Name of organization **Employer identification number** THE COLORADO COLLEGE 84 - 0402510Part 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

#### SCHEDULE C (Form 990)

Department of the Treasury Internal Revenue Service

# **Political Campaign and Lobbying Activities**

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

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

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

OMB No. 1545-0047

2022

Open to Public Inspection

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

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

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

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

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

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

Name of org	•			Emp	loyer identification number
Part I-A	THE COLORA	panization is exempt und	ler section 501(c)	or is a section 527 or	84-0402510
1 Provid 2 Politica	e a description of the organiz	ation's direct and indirect politic	cal campaign activities	in Part IV.	
Part I-B	Complete if the org	janization is exempt und	ler section 501(c)(	(3).	
2 Enter t 3 If the c 4a Was a	he amount of any excise tax organization incurred a section correction made?	incurred by the organization un incurred by organization managn 4955 tax, did it file Form 4720	gers under section 4955 ) for this year?	5	0. Yes No No No
1 Enter t 2 Enter t exemp 3 Total e line 17	he amount directly expended he amount of the filing organ t function activities xempt function expenditures b	d by the filing organization for seization's funds contributed to o	ection 527 exempt func ther organizations for s and on Form 1120-POL	tion activities Section 527	\$ \$
5 Enter t made   contrib	he names, addresses and en payments. For each organiza outions received that were pr	1120-POL for this year?	IN) of all section 527 poid from the filing organias separate political org	olitical organizations to whic zation's funds. Also enter th anization, such as a separa	h 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

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	THE COLOR					0402510 Page <b>2</b>
Part II-A   Complete if the org	anization	is exer	npt under sectior	n 501(c)(3) and file	d Form 5768 (el	ection under
section 501(h)).						
A Check if the filing organization	tion belongs	to an aff	liated group (and list in	Part IV each affiliated	group member's nan	ne, address, EIN,
expenses, and shar	e of excess I	obbying	expenditures).			
B Check if the filing organiza	tion checked	box A a	nd "limited control" pro	visions apply.		
Limit	ts on Lobbyi	ina Expe	nditures		(a) Filing	(b) Affiliated group
	-		ınts paid or incurred.)		organization's totals	totals
1a Total lobbying expenditures to influ	-					
<b>b</b> Total lobbying expenditures to influ						
c Total lobbying expenditures (add lin						
d Other exempt purpose expenditure			· · · · · · · · · · · · · · · · · · ·			
e Total exempt purpose expenditures	•		·			
f Lobbying nontaxable amount. Ente						
If the amount on line 1e, column (a) o	r (b) is:		bying nontaxable am	ount is:		
Not over \$500,000			the amount on line 1e.	<b></b>		
Over \$500,000 but not over \$1,000			00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,50			00 plus 10% of the exc			
Over \$1,500,000 but not over \$17,0	000,000		00 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000		\$1,000	000.			
	t 050/ -f li-	- 15				
g Grassroots nontaxable amount (en						
h Subtract line 1g from line 1a. If zero	•					
i Subtract line 1f from line 1c. If zero	•		ling 1; did the evention			
j If there is an amount other than zer						Yes No
reporting section 4911 tax for this			eraging Period Under	Section 501(h)		Tes NO
(Some organizations th				• •	f the five columns b	nelow.
(como organización c			ate instructions for lir	•		
	Lobbyi	ing Expe	nditures During 4-Yea	ar Averaging Period		
		<u> </u>	T STATE OF THE STA			
Calendar year	(a) 20	19	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) Total
(or fiscal year beginning in)	, ,		``	`,	. ,	
2a Lobbying nontaxable amount						
<b>b</b> Lobbying ceiling amount						
(150% of line 2a, column(e))						
c Total lobbying expenditures						
, , ,						
d Grassroots nontaxable amount						
e Grassroots ceiling amount						
(150% of line 2d, column (e))						
f Grassroots lobbying expenditures						

THE COLORADO COLLEGE

84-0402510

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)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a	1)	(b)
of the lobbying activity.	Yes	No	Amount
During the year, did the filing organization attempt to influence foreign, national, state, or			
local legislation, including any attempt to influence public opinion on a legislative matter			
or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
c Media advertisements?		Х	
d Mailings to members, legislators, or the public?		Х	
e Publications, or published or broadcast statements?		Х	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	. Х		59,79
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?		X	
j Total. Add lines 1c through 1i			59,79
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	.	-\	1.
Part III-A Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6).	ion 501(c)(5	o), or sec	tion
331(3)(3).			Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?		1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from			
Part III-B Complete if the organization is exempt under section 501(c)(4), sect	ion 501(c)(5	o), or sec	tion
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	d "No" OR	(b) Part I	II-A, line 3, is
Dues, assessments and similar amounts from members		1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pol			
expenses for which the section 527(f) tax was paid).			
a Current year		2a	
<b>b</b> Carryover from last year			
c Total			
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political		
expenditures next year?		4	
5 Taxable amount of lobbying and political expenditures. See instructions		5	
Part IV Supplemental Information			
rovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated ground the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated ground the descriptions are provided the descriptions are provided to the description	up list); Part II-	A, lines 1 a	nd 2 (See
structions); and Part II-B, line 1. Also, complete this part for any additional information.			
ART II-B, LINE 1, LOBBYING ACTIVITIES:			
OLORADO COLLEGE IS ONE OF THREE MEMBERS OF INDEPENDENT HIGHER			
OLINES COLLEGE TO ONE OF THIRD MEMBERS OF THEFT HADRIE HADRIE			
DUCATION OF COLORADO. THE PRIMARY PURPOSE OF THE ORGANIZATION IS TO			
DUCATION OF COLORADO. THE PRIMARY PURPOSE OF THE ORGANIZATION IS TO  EPRESENT THE VIEWS OF THE PRIVATE HIGHER EDUCATION SECTOR AT THE STATE  APITOL AND AT THE COLORADO COMMISSION ON HIGHER EDUCATION.			

SCHEDULE D (Form 990)

epartment of the Treasury Internal Revenue Service

# Supplemental Financial Statements

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

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

OMB No. 1545-0047

Name of the organization

**Employer identification number** 84-0402510 THE COLORADO COLLEGE Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year \_\_\_\_\_ Aggregate value of contributions to (during year) 2 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last Held at the End of the Tax Year day of the tax year. Total number of conservation easements 2a 2b Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after July 25,2006, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

232051 09-01-22

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

Sche	dule D (Form 990) 2022 THE COLORAL	OO COLLEGE					84-040	2510	Page	e <b>2</b>
Pai	t III Organizations Maintaining C	ollections of Art	t, Historical Tre	asures, o	r Othe	r Simila	ar Assets	(contin		
3	Using the organization's acquisition, accession collection items (check all that apply):	on, and other records	s, check any of the f	ollowing that	make s	ignificant	use of its			
а	X Public exhibition	d	X Loan or exc	hange progra	am					
b	X Scholarly research	е								
С	X Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	how they further th	e organizatio	n's exer	npt purp	ose in Part	XIII.		
5	During the year, did the organization solicit o	r receive donations o	of art, historical treas	sures, or othe	er similar	assets				
	to be sold to raise funds rather than to be ma	aintained as part of th	ne organization's co	llection?				Yes	X	No
Pa	t IV Escrow and Custodial Arrang	gements. Comple	ete if the organizatio	n answered '	'Yes" on	Form 99	0, Part IV,	line 9, or		
	reported an amount on Form 990, Par	t X, line 21.								
1a	Is the organization an agent, trustee, custodi	an or other intermedi	ary for contributions	s or other ass	sets not	included		_		
	on Form 990, Part X?							Yes	X	٧o
b	If "Yes," explain the arrangement in Part XIII									
								Amount		
С	Beginning balance					. 1c				
d	Additions during the year					. 1d				
е	Distributions during the year					- 1				
f	Ending balance								_	
	Did the organization include an amount on Fo					ity?	<u>X</u>	Yes	=	No
Pa	If "Yes," explain the arrangement in Part XIII.								Х	—
Га	T V Endowment Funds. Complete i	the organization and (a) Current year		(c) Two year			years back	(e) Four	voore ha	
	Device in a of consultation of	826,459,899.	(b) Prior year			` ,		· ,	920,22	
	Beginning of year balance	6,351,199.	918,235,443.	779,516	3,493.		923,962. 774 040	<u> </u>		
	Contributions	87,882,324.	-69,448,760.	203,469	·		774,040. 219,897.		016,68 580,67	
	Net investment earnings, gains, and losses	11,432,995.	15,892,542.	34,800	·		585,511.		160,70	
d	1	11,432,333.	13,032,342.	34,000	,023.	12,	303,311.	12,	100,70	<u></u>
е	Other expenditures for facilities	29,047,663.	22,700,878.	38,333	3 541	24	162,903.	21	432,91	0
	and programs Administrative expenses	23,017,003.	22,700,070.	30,333	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		652,538.	21,	102,51	<u>.</u>
		880,212,764.	826,459,899.	918,235	443.		516,947.	771	923,96	2.
g 2	End of year balance Provide the estimated percentage of the curr				, •	,	,	,	,	·
	Board designated or quasi-endowment	17.0200	%	y riola ao.						
b	Permanent endowment 24.0800	%								
c	Term endowment 58.9000									
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.								
За	Are there endowment funds not in the posses	·	tion that are held ar	nd administer	ed for th	ne				
	organization by:	_							Yes N	lo
	(i) Unrelated organizations							3a(i)	Х	
	(ii) Related organizations							3a(ii)	Х	ζ
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as require	ed on Schedule R?					3b		
4	Describe in Part XIII the intended uses of the		wment funds.							
Pa	t VI Land, Buildings, and Equipm									
	Complete if the organization answered	d "Yes" on Form 990	, Part IV, line 11a. S	ee Form 990	, Part X,	line 10.				
	Description of property	(a) Cost or of basis (investment)	` '	or other (other)	٠,	ccumula preciatio	ı	(d) Book	value	
1a	Land		11	,907,618.				11,	907,61	8.
	Buildings		444	,042,285.	1	L44,176	,069.	299,	866,21	6.
	Leasehold improvements									
d	Equipment		27	,883,249.		18,759	,990.	9,	123,25	9.
	Other		36	,463,991.		13,197	,100.	23,	266,89	1.
	l. Add lines 1a through 1e. <i>(Column (d) must</i> e		X. column (B), line 1	0c.)				344,	163,98	4.

Part VII Inv	estments -	Other	Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value		
(1) Financial derivatives				
(2) Closely held equity interests				
(3) Other				
(A) BENEFICIAL INTEREST IN PERPETUAL				
(B) TRUSTS	38,958,425.	END-OF-YEAR MARKET VALUE		
(C) PRIVATE CAPITAL INVESTMENTS	213,871,166.	END-OF-YEAR MARKET VALUE		
(D) ALTERNATIVE INVESTMENTS	340,945,347.	END-OF-YEAR MARKET VALUE		
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	593,774,938.			

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	(la) Da ali cialica	(a) Mathe of of volvetions Ocat as and of very modulatively
(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. (h) must equal Form QQ0, Part Y, col. (R) line 13.)		

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(8)	
(9)	

Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)

### Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEPOSITS	37,588.
(3) ANNUITIES PAYABLE	1,134,051.
(4) OTHER LIFE INCOME FUNDS	2,886,842.
(5) ASSET RETIREMENT OBLIGATION	9,377,459.
(6) OTHER POST RETIREMENT BENEFIT PLAN PAYABLE	504,471.
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	13,940,411.

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 ... X

Sche	dule D (Form 990) 2022 THE COLORADO COLLEGE			84-04	.02510 Page	4
Pai	t XI Reconciliation of Revenue per Audited Financial Stat		Revenue per Re	turn.		
	Complete if the organization answered "Yes" on Form 990, Part IV, lin	ne 12a.		T . T	220 170 140	_
1				1	238,179,140	<u> </u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 - 1	22 275 656			
a	Net unrealized gains (losses) on investments		32,275,656.			
b	Donated services and use of facilities					
C	Recoveries of prior year grants		2,148,187.			
d	Other (Describe in Part XIII.)			0.	34,423,843	2
e	Add lines 2a through 2d			2e 3	203,755,297	_
3	Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part VIII, line 12, but not on line 1:			3	203,733,237	<u>.</u>
4	Investment expenses not included on Form 990, Part VIII, line 7b	4a	2,509,567.			
a			57,038,382.	-		
b	Other (Describe in Part XIII.) Add lines <b>4a</b> and <b>4b</b>			40	59,547,949	9
5	Add lines <b>4a</b> and <b>4b</b> Total revenue. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12.)			4c 5	263,303,246	_
	t XII   Reconciliation of Expenses per Audited Financial Sta	atements With	Expenses per F			Ť
	Complete if the organization answered "Yes" on Form 990, Part IV, lin					
1	Total expenses and losses per audited financial statements			1	172,526,385	— 5.
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			1		
c	Other losses			1		
d	Other (Describe in Part XIII.)		6,360.	•		
e	Add lines 2a through 2d		,	2e	6,360	ο.
3	Subtract line 2e from line 1			3	172,520,025	
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	2,509,567.			
b	Other (Describe in Part XIII.)		57,038,382.	•		
	Add lines 4a and 4b	<u></u>		4c	59,547,949	9.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18			5	232,067,974	_
	rt XIII Supplemental Information.	o.)		<u>,                                    </u>		Ť
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide an			; Part X,	line 2; Part XI,	
PART	PIII, LINE 4:					_
COLI	ECTIONS OF WORKS OF ART, HISTORICAL TREASURES AND SIMILAR	R ASSETS ARE				_
NOT	CAPITALIZED BECAUSE THE ITEMS ARE PRESERVED AND CARED FOR	R				_
CONT	INUOUSLY, PURCHASES OF COLLECTION ITEMS ARE REPORTED IN T	THE YEAR OF				
ACQU	ISITION AS DECREASES IN UNRESTRICTED NET ASSETS AND AS NE	T ASSETS				
RELE	ASED FROM RESTRICTION IF THE ASSETS USED TO PURCHASE THE	ITEMS WERE				
חסים	DETAMED NO MUNICIPED V DONOR COURT ANTON COMMUNICATIONS OF	COLLECTION				
KEST	RICTED TO THAT USE BY DONOR STIPULATION. CONTRIBUTIONS OF	COLLECTION				_
ITEN	IS ARE NOT REPORTED IN THE FINANCIAL STATEMENTS. PROCEEDS	FROM DISPOSAL				
OF A	AND INSURANCE RECOVERIES RELATED TO COLLECTION ITEMS ARE R	REPORTED AS				
INCF	EASES IN THE APPROPRIATE NET ASSET CLASSES.					

THE COLLEGE MAINTAINS AN ART COLLECTION FOR STUDENT RESEARCH AND STUDY, A

Schedule D (Form 990) 2022 THE COLORADO COLLEGE  Part XIII Supplemental Information (continued)	84-0402510	Page 5
Part XIII   Supplemental Information (continued)		
COLLEGE ARCHIVE OF INSTITUTIONALLY SIGNIFICANT TREASURES, AND LIBRARY		
COLLECTIONS TO ENHANCE THE INSTITUTIONAL CATALOG. THE FINE ARTS CENTER'S		
MUSEUM INCLUDES A PERMANENT COLLECTION OF OVER 20,000 OBJECTS THAT		
SHOWCASE THE HISTORY AND CULTURES OF THE SOUTHWEST AND AMERICAS. THE		
COLLECTION CONTAINS WORKS OF ART FROM NATIVE AMERICAN, HISPANIC AND		
SPANISH COLONIAL PERIODS AS WELL AS 20TH CENTURY AMERICAN ART, ALL USED TO		
ENHANCE CLASSROOM AND COMMUNITY EXPERIENCES.		
PART IV, LINE 2B:		
THE COLLEGE HOLDS VARIOUS FUNDS IN A FIDUCIARY CAPACITY FOR ORGANIZATIONS		
OF THE COLLEGE, SUCH AS CLASSES AND CLUBS. THESE ORGANIZATIONS RAISE FUNDS		
IN THEIR OWN CAPACITIES AND EXPEND THE FUNDS ON THEIR ORGANIZATION'S		
BEHALF. THE REVENUES AND EXPENSES OF THESE ORGANIZATIONS ARE NOT INCLUDED		
IN THE ORGANIZATION'S FINANCIAL STATEMENTS.		
PART V, LINE 4:		
COLORADO COLLEGE'S ENDOWMENT IS ADMINISTERED IN A MANNER CONSISTENT WITH		
DONOR RESTRICTIONS AND WITH THE GOAL OF MEETING THE EDUCATIONAL MISSION OF		
TODAY AS WELL AS IN PERPETUITY. THE COLLEGE HAS ADOPTED INVESTMENT AND		
SPENDING POLICIES FOR ENDOWMENT ASSETS THAT ATTEMPT TO PROVIDE A		
PREDICTABLE STREAM OF FUNDING FOR CURRENT PROGRAMS AND OPERATIONS WHILE		
SEEKING TO MAINTAIN THE PURCHASING POWER.		
PART X, LINE 2:		
THE COLLEGE QUALIFIES AS A TAX-EXEMPT NONPROFIT ORGANIZATION UNDER SECTION		
501(C)(3)OF THE INTERNAL REVENUE CODE. THE COLLEGE IS SUBJECT TO FEDERAL		
INCOME TAX ONLY ON NET UNRELATED BUSINESS INCOME UNDER THE PROVISIONS OF		
SECTION 501(C)(3)OF INTERNAL REVENUE CODE.		
	Schedule D (Form	990) 2022

Schedule D (Form 990) 2022 THE COLORADO COLLEGE		84-0402510	Page <b>5</b>
Part XIII Supplemental Information (continued)			
THE COLLEGE HAS ADOPTED THE REQUIREMENTS RELATED TO ACCOUNT	ING FOR		
UNCERTAIN TAX POSITIONS. THE COLLEGE EVALUATED ITS TAX POSI	TIONS AND		
DETERMINED IT HAS NO UNCERTAIN TAX POSITIONS AS OF JUNE 30,	2023 AND 2022.		
PART XI, LINE 2D - OTHER ADJUSTMENTS:			
CHANGE IN VALUE OF SPLIT INTEREST AGREEMENT	2,141,827.		
LOSS ON SALE OF EQUIPMENT NETTED AGAINST REVENUE	6,360.		
TOTAL TO SCHEDULE D, PART XI, LINE 2D	2,148,187.		
PART XI, LINE 4B - OTHER ADJUSTMENTS:			
SCHOLARSHIPS RECLASSIFIED FROM REVENUE TO EXPENSE	57,038,382.		
PART XII, LINE 2D - OTHER ADJUSTMENTS:			
LOSS ON SALE OF EQUIPMENT NETTED AGAINST REVENUE	6,360.		
PART XII, LINE 4B - OTHER ADJUSTMENTS:			
SCHOLARSHIPS RECLASSIFIED FROM REVENUE TO EXPENSE	57,038,382.		

#### **SCHEDULE E**

Department of the Treasury Internal Revenue Service

(Form 990)

Schools

mplete if the organization answered "Yes" on Form 9

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

THE COLORADO COLLEGE

Employer identification number

84-0402510

Pa	rt I		VEC	NO
_			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter,	,	х	
2	bylaws, other governing instrument, or in a resolution of its governing body?  Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,	1		
_	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	х	
3	Has the organization publicized its racially nondiscriminatory policy 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			
	community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II	3	х	
	THE COLLEGE'S NON-DISCRIMINATION POLICY IS PUBLISHED AT THE			
	BOTTOM OF THE COLLEGE'S MAIN WEBPAGE IN COMPLIANCE WITH			
	REQUIREMENTS.			
ļ	Does the organization maintain the following?			
а	7, 7,	4a	X	
b	, , , , , , , , , , , , , , , , , , , ,	4b	Х	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	4c	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions?  If you answered "No" to any of the above, please explain. If you need more space, use Part II.	4d	Х	
5	Does the organization discriminate by race in any way with respect to:			
а		5a		Х
	Admissions policies?	5b		Х
	Employment of faculty or administrative staff?	5c		X
	Scholarships or other financial assistance?	5d		X
	Educational policies?	5e		X
	Use of facilities?	5f		X
	Athletic programs?	5g		X
n	Other extracurricular activities?  If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	5h		Α
зa	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Х	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		Х
	If you answered "Yes" on either line 6a or line 6b, explain on Part II.			
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through			
	4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, covering			
	racial nondiscrimination? If "No," explain on Part II	7	Х	

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

Schedule E (Form 990) 2022

Schedule E	E (Form 990) 2022 THE COLORADO COLLEGE	84-0402510	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 6 -	EXPLANATION OF GOVERNMENT FINANCIAL AID:		
COLORADO	COLLEGE RECEIVES GOVERNMENT FUNDING FOR FINANCIAL AID FOR THEIR		
CULLULANIAC	. IN ADDITION THE COLLEGE RECEIVES FEDERAL AND STATE FUNDING FOR		
BIODENIO	, IN ADDITION THE CORRECT RECEIVED TEDERAL TAND STATE TONDERS TON		
DECENDOU	I TH THE BODM OF CHANTE		
RESEARCH	I IN THE FORM OF GRANTS.		
-			
-			

Schedule E (Form 990) 2022

#### 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

Inspection

Name of the organization **Employer identification number** THE COLORADO COLLEGE 84-0402510

<u> </u>		ctivities Out	side the United States. Compl	ete if the organization answered '	"Yes" on
Form 990, Part IV					
1 For grantmakers. Does	the organization	n maintain recor	ds to substantiate the amount of its gra	ants and other assistance,	
the grantees' eligibility for	or the grants or a	assistance, and t	the selection criteria used to award the	grants or assistance?	Yes No
2 For grantmakers. Desc	ribe in Part V the	e organization's	procedures for monitoring the use of its	s grants and other assistance out	side the
United States.		3	3	3	
3 Activities per Region. (TI	he following Part	I. line 3 table ca	an be duplicated if additional space is r	needed.)	
(a) Region	(b) Number of	(c) Number of		(e) If activity listed in (d)	(f) Total
	offices	employees, agents, and	(by type) (such as, fundraising, pro-	is a program service,	expenditures
	in the region	independent	gram services, investments, grants to		for and investments
		contractors in the region	recipients located in the region)	of service(s) in the region	in the region
		<u> </u>			
EUROPE (INCLUDING					
ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	UNDERGRADUATE CLASSES	1,105,332.
NORTH AMERICA	0	0	PROGRAM SERVICES	UNDERGRADUATE CLASSES	27,270.
SOUTH AMERICA	0	0	PROGRAM SERVICES	UNDERGRADUATE CLASSES	196,307.
SOUTH ASIA	0	0	PROGRAM SERVICES	UNDERGRADUATE CLASSES	66,903.
EAST ASIA AND THE					
PACIFIC	0	0	PROGRAM SERVICES	UNDERGRADUATE CLASSES	231,166.
RUSSIA AND					
NEIGHBORING STATES	0	0	PROGRAM SERVICES	UNDERGRADUATE CLASSES	57,978.
MIDDLE EAST AND					
NORTH AFRICA	0	0	PROGRAM SERVICES	UNDERGRADUATE CLASSES	1,978.
CENTRAL AMERICA AND					
THE CARIBBEAN	0	0	INVESTMENTS		399,494,499.
3 a Subtotal	0	0			401,181,433.
<b>b</b> Total from continuation					
sheets to Part I	0	0			27,344,832.
c Totals (add lines 3a					
and 3h)	0	l 0			428 526 265.

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

Schedule F (Form 990) 2022

THE COLORADO COLLEGE 84-0402510 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 EUROPE (INCLUDING ICELAND & GREENLAND) 0 0 INVESTMENTS 14,762,127. NORTH AMERICA 0 0 INVESTMENTS 5,938,573. CENTRAL AMERICA AND THE CARIBBEAN -ANTIGUA & BARBUDA, ARUBA, BAHAMAS, 0 0 INVESTMENTS - EXPENSES 6,416,113. EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM 0 0 INVESTMENTS - EXPENSES 177,541. NORTH AMERICA CANADA AND MEXICO, BUT NOT THE UNITED 0 STATES 0 INVESTMENTS - EXPENSES 50,478. 27,344,832. **Totals** 

Schedule F (Form 990) 2022 THE COLORADO COLLEGE 84-0402510 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>(b)</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)
	nization by the IRS, o	or for which the grantee o	ecognized as charities by the for counsel has provided a sect			<b>.</b>		

Schedule F (Form 990) 2022

Schedule F (Form 990) 2022 THE COLORADO COLLEGE 84-0402510 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. (h) Method of valuation (book, FMV, appraisal, other) (c) Number of (d) Amount of (e) Manner of (f) Amount of (g) Description of (a) Type of grant or assistance (b) Region cash disbursement recipients cash grant noncash noncash assistance assistance

Schedule F (Form 990) 2022 THE COLORADO COLLEGE 84-0402510

Part IV Foreign Forms

	To cign to this		
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	X Yes	
	Certain Foreign Corporations (see Instructions for Form 5471)	X Yes	∟ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a		
	qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621,		
	Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing	X Yes	□ No
	Fund (see Instructions for Form 8621)	res	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)	Yes	LX No

Schedule F (Form 990) 2022

Page 4

Schedule F (Form 990) 2022 THE COLORADO COLLEGE	84-0402510	Page 5
Part V Supplemental Information		
Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (account	ing method; amounts of	
investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method	d); and Part III, column (c)	
(estimated number of recipients), as applicable. Also complete this part to provide any additional inform	ation. See instructions.	
DADM T ITNE 2		
PART I, LINE 2:		
THE COLLEGE AWARDED NO GRANT FUNDS OUTSIDE OF THE U.S. IN THE CURRENT		
REPORTING PERIOD.		
PART I, LINE 3:		
MUE COLLEGE HERE MUE ACCRIAL MEMUOD MO DEDODM EVDENDIMIDES ON SCHEDULE E		
THE COLLEGE USES THE ACCRUAL METHOD TO REPORT EXPENDITURES ON SCHEDULE F.		

Schedule F (Form 990) 2022

# SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

### **Supplemental Information Regarding Fundraising or Gaming Activities**

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Employer identification number

THE COLORA	DO COLLEGE				84-040251	0
Part I Fundraising Activities. required to complete this par	Complete if the organization answ	ered "Y	es" or	n Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not
1 Indicate whether the organization rais		ng activ	rities. (	Check all that apply.		
a X Mail solicitations	e X Solicita	ation of	non-g	overnment grants		
<b>b</b> X Internet and email solicitations	f X Solicita	ation of	gover	nment grants		
c X Phone solicitations	g X Specia	l fundra	ising	events		
d X In-person solicitations			_			
<b>2 a</b> Did the organization have a written of	or oral agreement with any individua	l (incluc	lina of	ficers, directors, trus	tees, or	
key employees listed in Form 990, P					X Yes	No
<b>b</b> If "Yes," list the 10 highest paid indi-					ne fundraiser is to be	<del></del>
compensated at least \$5,000 by the						
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
WASHBURN & MCGOLDRICK - 24	CONSULTING SERVICES FOR	Yes	No			
NORTH BRYN MAWR AVE., #252,	FUNDRAISING		х	0.	7,500.	0.
RUFFALO NOEL LEVITZ (RNL) -						
5249 NORTH PARK PLACE NE	CONSULTING SERVICES		х	0.	172,665.	0.
_						
					180,165.	
3 List all states in which the organization or licensing.	n is registered or licensed to solicit	contrib	utions	or has been notified	it is exempt from req	gistration
AK,AL,AR,CA,CO,CT,DC,FL,GA,HI,I	L, KS, KY, LA, MA, MD, ME, MI, MN,	MO,MS	NC,N	D,NH,NJ		
NM,NV,NY,OH,OK,OR,PA,RI,SC,TN,U				•		

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

Schedule G (Form 990) 2022

SEE PART IV FOR CONTINUATIONS 232081 10-27-22

		e G (Form 990) 2022 THE COLORA				-0402510 Page <b>2</b>
Pa	rt I					
		of fundraising event contributions and gro				ts greater than \$5,000.
			(a) Event #1	<b>(b)</b> Event #2	(c) Other events	(d) Total events (add col. (a) through
e			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts				
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
ű	5	Noncash prizes				
bense	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
Ģ	8	Entertainment				
	9	Other direct expenses				
	10	Direct expense summary. Add lines 4 through	9 in column (d)			
	11	Net income summary. Subtract line 10 from li	ne 3, column (d)			
Pa	rt I	<b>II Gaming.</b> Complete if the organization a	answered "Yes" on Form	990, Part IV, line 19, or	reported more than	
		\$15,000 on Form 990-EZ, line 6a.				_
Ф			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue			(4, 29	bingo/progressive bingo	(c) care garming	col. (a) through col. (c)
Š						
_	1	Gross revenue				
	2	Cash prizes				
Expenses						
ect Exp	3	Noncash prizes				
Dire	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes % No	Yes % No	
	7	Direct expense summary. Add lines 2 through	5 in column (d)		•	
	8	Net gaming income summary. Subtract line 7	trom line 1, column (d)			
_	Г1					
		er the state(s) in which the organization condu he organization licensed to conduct gaming ac				Yes No
		No," explain:				1es . 140
		re any of the organization's gaming licenses re				Yes No
b	If "`	Yes," explain:				
	_					
2220	2 10	-27-22			Sah	edule G (Form 990) 2022
_0208	ال ے				JUIN	, water of the OHILL 2007 2024

Sch	nedule G (Form 990) 2022 THE COLORADO COLLEGE	84-04	102510	Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:			
á	a The organization's facility		13a	%
	<b>b</b> An outside facility		13b	%
	Enter the name and address of the person who prepares the organization's gaming/special events books and reco		•	
	Name			
	Address			
15	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	No
ı	<b>b</b> If "Yes," enter the amount of gaming revenue received by the organization \$ and the an	mount		
	of gaming revenue retained by the third party \$			
(	c If "Yes," enter name and address of the third party:			
	Name			
	Address			
	Address			
40				
16	Gaming manager information:			
	Nama			
	Name			
	Gaming manager compensation \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
á	a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	L No
ı	<b>b</b> Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent	in the		
_	organization's own exempt activities during the tax year \$			
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v	); and Part	III, lines 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			
SCI	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:			
( T )	) NAME OF FUNDRAISER: WASHBURN & MCGOLDRICK			
(1)	NAME OF FONDRATOER. WASHDORN & MCGOEDRICK			
(I)	) ADDRESS OF FUNDRAISER:			
<u> </u>				
24	NORTH BRYN MAWR AVE., #252, BRYN MAWR, PA 19010			
(I)	) NAME OF FUNDRAISER: RUFFALO NOEL LEVITZ (RNL)			
	ADDRESS OF FUNDRAISER:			
524	49 NORTH PARK PLACE NE #1061, CEDAR RAPIDS, IA 52402			

47

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Schedule G (F	Form 990)	THE COLORADO COLLEGE	84-0402510	Page 4
Part IV S	orm 990) Supplemental Infor	mation (continued)		
-				
_				

#### 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

2022

Open to Public

Inspection

Schedule I (Form 990) 2022

Name of the organization THE COLORADO	COLLEGE						Employer identification	
Part I General Information on Grants a	and Assistance							
Does the organization maintain records criteria used to award the grants or assi     Describe in Part IV the organization's pro-	stance?ocedures for monit	oring the use of grant	funds in the United	d States.			Yes Yes	☐ No
Part II Grants and Other Assistance to recipient that received more than					anization answered "\	es" on Form 990, Par	t IV, line 21, for any	
Name and address of organization or government	(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 or assistance	
2 Enter total number of section 501(c)(3) a	nd government or	 ganizations listed in th	le line 1 table					
3 Enter total number of other organization	-							

232101 10-31-22

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

THE COLORADO COLLEGE 84-0402510 Schedule I (Form 990) 2022 Page 2 Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III Part III can be duplicated if additional space is needed. (e) Method of valuation (book, FMV, appraisal, other) (a) Type of grant or assistance (b) Number of (c) Amount of (d) Amount of non-(f) Description of noncash assistance recipients cash grant cash assistance FINANCIAL AID TO STUDENTS 0.N/A 1136 57,038,382. N/A Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. PART I, LINE 2: THE COLLEGE GRANTS SCHOLARSHIPS TO STUDENTS ENROLLED IN THE COLLEGE'S DEGREE-GRANTING PROGRAM. THE COLLEGE DETERMINES STUDENT ELIGIBILITY BASED UPON THE STUDENT'S NEED. SOME SCHOLARSHIPS OR GRANTS ARE AWARDED BASED UPON ACADEMIC ACHIEVEMENT. THE COLLEGE OFFICE OF FINANCIAL AID ACCUMULATES ALL REQUIRED INFORMATION FROM THE STUDENTS TO DETERMINE SCHOLARSHIP ELIGIBILITY. THE OFFICE AWARDS SCHOLARSHIPS BASED UPON CRITERIA ESTABLISHED BY THE COLLEGE.

# SCHEDULE J (Form 990)

**Compensation Information** 

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

OMB No. 1545-0047 **2022** 

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.

THE COLORADO COLLEGE

Employer identification number 84-0402510

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel  X Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  X Health or social club dues or initiation fees			
	Discretionary spending account  X 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.			
	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 person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b	Х	
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7	Х	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		l

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

Schedule J (Form 990) 2022

Schedule J (Form 990) 2022

THE COLORADO COLLEGE

84-0402510

Page 2

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

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

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

		(B) Breakdown of W	I-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) SONG RICHARDSON	(i)	511,531.	0.	50,530.	30,500.	92,570.	685,131.	0.	
PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) ROBERT MOORE	(i)	382,392.	5,000.	259,613.	30,500.	1,864.	679,369.	237,653.	
SR VP FIN/ADMIN	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) MICHAEL EDMONDS	(i)	388,968.	3,000.	169,503.	30,500.	12,660.	604,631.	141,223.	
SR VICE PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) MARY ANN SCHWARTZ	(i)	374,189.	4,000.	27,627.	30,500.	16,972.	453,288.	0.	
VP FOR ADVANCEMENT	(ii)	0.	0.	0.	0.	0.	0.	0.	
(5) MARK HATCH	(i)	224,872.	5,000.	163,206.	25,353.	27,928.	446,359.	140,685.	
VP FOR ENROLLMENT MANAGEMENT	(ii)	0.	0.	0.	0.	0.	0.	0.	
(6) KRIS MAYOTTE	(i)	301,999.	1,000.	22,706.	30,500.	23,474.	379,679.	0.	
HEAD HOCKEY COACH	(ii)	0.	0.	0.	0.	0.	0.	0.	
(7) PEDRO DE ARAUJO	(i)	246,571.	5,000.	816.	25,250.	25,291.	302,928.	0.	
VP & DEAN OF COLLEGE	(ii)	0.	0.	0.	0.	0.	0.	0.	
(8) EMILY CHAN	(i)	239,240.	2,500.	12,816.	25,250.	17,235.	297,041.	0.	
VP & DEAN OF FACULTY	(ii)	0.	0.	0.	0.	0.	0.	0.	
(9) MANYA WHITAKER	(i)	248,964.	2,500.	7,232.	16,913.	9,357.	284,966.	0.	
EXEC VP & CHIEF OF STAFF	(ii)	0.	0.	0.	0.	0.	0.	0.	
(10) LESLEY IRVINE	(i)	213,954.	5,000.	11,500.	21,634.	24,924.	277,012.	0.	
VP & DIRECTOR OF ATHLETICS	(ii)	0.	0.	0.	0.	0.	0.	0.	
(11) BARBARA WILSON	(i)	183,962.	5,000.	47,443.	22,967.	10,599.	269,971.	0.	
ASSOC. VP FOR ADMIN. SERVICES	(ii)	0.	0.	0.	0.	0.	0.	0.	
(12) CLAIRE GARCIA	(i)	216,592.	0.	701.	21,497.	9,560.	248,350.	0.	
FORMER DEAN OF FACULTY	(ii)	0.	0.	0.	0.	0.	0.	0.	
(13) TIMOTHY FULLER	(i)	209,944.	0.	6,689.	21,337.	10,106.	248,076.	0.	
PROFESSOR	(ii)	0.	0.	0.	0.	0.	0.	0.	
(14) ROCHELLE DICKEY	(i)	189,780.	3,000.	11,372.	20,200.	14,552.	238,904.	0.	
DEAN OF STUDENTS	(ii)	0.	0.	0.	0.	0.	0.	0.	
(15) LORIN SEAGER	(i)	178,489.	5,000.	8,306.	19,210.	20,489.	231,494.	0.	
ASSOC. VP FOR FINANCE	(ii)	0.	0.	0.	0.	0.	0.	0.	
(16) MICHAEL GRACE	(i)	201,386.	0.	642.	19,741.	9,656.	231,425.	0.	
PROFESSOR	(ii)	0.	0.	0.	0.	0.	0.	0.	

Schedule J (Form 990) 2022

THE COLORADO COLLEGE

84-0402510

Page 2

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

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

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

		(B) Breakdown of W	/-2 and/or 1099-MISo compensation	C and/or 1099-NEC	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) OWEN CRAMER	(i)	197,408.	0.	632.	19,878.	9,322.	227,240.	0.	
PROFESSOR	(ii)	0.	0.	0.	0.	0.	0,	0.	
(18) JOHN RIKER	(i)	182,188.	0.	590.	17,953.	12,056.	212,787.	0.	
PROFESSOR	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
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	(ii)								

Schedule J (Form 990) 2022 THE COLORADO COLLEGE 84-0402510 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 PRESIDENT OF THE COLLEGE. IN ORDER TO FULFILL THEIR RESPONSIBILITIES.

IS REQUIRED TO LIVE ON CAMPUS AND IS PROVIDED HOUSING. THE PRESIDENT IS

ALSO PROVIDED JANITORIAL SERVICES. THEY ARE CONSIDERED TO BE ON CAMPUS FOR

THE BENEFIT OF THE COLLEGE AND THE VALUE IS CONSIDERED NON-TAXABLE

COMPENSATION.

CLUB DUES: CLUB MEMBERSHIP IS PROVIDED TO CERTAIN MEMBERS OF SENIOR

LEADERSHIP TO CULTIVATE AND MAINTAIN RELATIONSHIPS WITH BUSINESS AND

INDIVIDUALS WHO ARE IN A POSITION TO ADVANCE THE COLLEGE. THE VALUE OF THE

DUES IS CONSIDERED AS TAXABLE COMPENSATION FOR THESE INDIVIDUALS AND

INCLUDED IN W-2.

PART I LINE 4B:

NAME: ROBERT MOORE, CURRENT YEAR PAYMENT AMOUNT: \$237,653, PLAN

DESCRIPTION: 457(F)

NAME: MIKE EDMONDS CURRENT YEAR PAYMENT AMOUNT: \$141 223. PLAN

DESCRIPTION: 457(F)

NAME: MARK HATCH, CURRENT YEAR PAYMENT AMOUNT: \$140,685. PLAN DESCRIPTION:

Schedule J (Form 990) 2022

Schedule J (Form 990) 2022 THE COLORADO COLLEGE	84-0402510	Page <b>3</b>
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 cor	nplete this part for any additional information	า.
457(F)		
PART I, LINE 7:		
NONFIXED PAYMENTS CONSISTED OF BONUS PAYMENTS.		

#### SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Supplemental Information on Tax-Exempt Bonds**

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

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022
Open to Public Inspection

**Employer identification number** 

THE COLORADO COLLEGE 84-0402510 Part I **Bond Issues** (c) CUSIP # (g) Defeased (h) On behalf (i) Pooled (a) Issuer name (b) Issuer EIN (d) Date issued (e) Issue price (f) Description of purpose of issuer financing Yes No Yes No Yes No REFUND SERIES 2010 -A EL PASO COUNTY. COLORADO 84-6000764 NONE 04/30/15 16,325,000.2015B Х Х Х CAPITAL IMPROVEMENTS & B EL PASO COUNTY. COLORADO 84-6000764 NONE 10/09/19 20,745,000, COST OF BONDS X X Х REFUND SERIES 2010 -C EL PASO COUNTY, COLORADO 84-6000764 NONE 12/17/20 15,585,000,2015A X Х Х D **Proceeds** Part II C D Α R 11 370 000 2 520 000 4 530 000 Amount of bonds retired Amount of bonds legally defeased 16,325,000 20,745,000 15,585,000 Total proceeds of issue Gross proceeds in reserve funds 164,979 Capitalized interest from proceeds Proceeds in refunding escrows 150,843 245,000 Issuance costs from proceeds 8 Credit enhancement from proceeds Working capital expenditures from proceeds 20 500 000 Capital expenditures from proceeds 16,009,178 15,585,000 Other spent proceeds Other unspent proceeds 2015 2019 2021 Year of substantial completion Yes No Yes No Yes No Yes No 14 Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, Х Х Х if issued prior to 2018, a current refunding issue)? 15 Were the bonds issued as part of a refunding issue of taxable bonds (or, if Х Х Х issued prior to 2018, an advance refunding issue)?

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

Does the organization maintain adequate books and records to support the

Has the final allocation of proceeds been made?

final allocation of proceeds?

Schedule K (Form 990) 2022

X

Х

X

Х

Х

Х

 Schedule K (Form 990) 2022
 THE COLORADO COLLEGE
 84-0402510
 Page 2

Part	: III Private Business Use								
		Α		Е	3		С		כ
1	Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No
	which owned property financed by tax-exempt bonds?		Х		Х		Х		
2	Are there any lease arrangements that may result in private business use of								
	bond-financed property?		Х		Х		Х		
За	Are there any management or service contracts that may result in private								
	business use of bond-financed property?		Х		Х		Х		
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside								
	counsel to review any management or service contracts relating to the financed property?								
С	Are there any research agreements that may result in private business use of								
	bond-financed property?		Х		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?								
4	Enter the percentage of financed property used in a private business use by entities						ŀ		
	other than a section 501(c)(3) organization or a state or local government		%		%		%		%
5	Enter the percentage of financed property used in a private business use as a						ŀ		
	result of unrelated trade or business activity carried on by your organization,						ŀ		
	another section 501(c)(3) organization, or a state or local government		%		%		%		%
_6	Total of lines 4 and 5		%		%		%		%
7	Does the bond issue meet the private security or payment test?		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		Х		Х		
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or						ŀ		
	disposed of		%		%		%		<u>%</u>
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations								
	sections 1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all								
	nonqualified bonds of the issue are remediated in accordance with the								
	requirements under Regulations sections 1.141-12 and 1.145-2?	Х		X		X			
Part	IV Arbitrage								
		A		E	3	(	Ç		<u> </u>
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
	Penalty in Lieu of Arbitrage Rebate?		Х		х		Х		
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?		Х	Х		Х			
b	Exception to rebate?		Х		Х		Х		
	No rebate due?	Х			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		

Schedule K (Form 990) 2022 THE COLORADO COLLEGE			84-0	402510				Page 3
Part IV Arbitrage (continued)								
	1	A		В			D	<u> </u>
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?		Х		Х		х		
<b>b</b> Name of provider				•				,
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		Х		х		
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
Were any gross proceeds invested beyond an available temporary period?		Х		Х		Х		
7 Has the organization established written procedures to monitor the								
requirements of section 148?	x		x		x	1		
Part V Procedures To Undertake Corrective Action			A			<u> </u>		
Fill V Flocedules to office take confective Action		Α	Τ .	 В	Τ ,			
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No
of federal tax requirements are timely identified and corrected through the	res	NO	res	NO	res	NO	res	NO
· · · · · · · · · · · · · · · · · · ·						1		
voluntary closing agreement program if self-remediation isn't available under					.,	1		
applicable regulations?	X	14.0 1 1	Х		Х	<u> </u>		
Part VI Supplemental Information. Provide additional information for responses to questions	on Schedule	e K. See instr	uctions.					
SCHEDULE K, PART IV, ARBITRAGE, LINE 2C:								
(A) ISSUER NAME: EL PASO COUNTY, COLORADO								
DATE THE REBATE COMPUTATION WAS PERFORMED: 02/01/2020								

Schedule K (Form 990) 2022

#### **SCHEDULE L**

Department of the Treasury

Internal Revenue Service

(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

Inspection

Que To Public

Name of the organization

Employer identification number

<u> </u>	THE COLORADO									2510					
					ion 501(c)(4), and sec										
		swered "Yes" on Relationship bet			art IV, line 25a or 25b	o, or	Form 990-EZ, Pa	art V, I	ine 40	)b	(4)	Corro	otod2		
(a) Name of disqualified	d person	person and o			illed (d	c) De	escription of tran	ansaction			(d) Correct		No		
		1									1	25	NO		
												+			
2 Enter the amount of ta section 4958	•	-	-		· ·	-	-		Φ.						
3 Enter the amount of ta					ganization										
	•														
	nd/or From In				D 11/1: 00 F	_	000 5 104 1	00							
•	e organization ans nount on Form 99				, Part V, line 38a or F	-orm	1990, Part IV, lin	e 26; d	or if th	ie orga	ınızatıc	n			
(a) Name of	(b) Relationship		(d) Loan to or		(e) Original	(f) Balance due (g) In			) Original (f) Balance due (g) I		In	(h) Ap	proved ard or	(i) W	/ritten
interested person	with organizatio	n of loan		n the ization?	principal amount	`			ult?	comn	nittee?	ttee? agreeme			
			То	From				Yes	No	Yes	No	Yes	No		
			+							<u> </u>					
				1											
			-												
otal				1	<u> </u> \$										
	Assistance Be	nefiting Inter	este	d Per											
•	e organization ans	swered "Yes" on	Form 9	990, Pa	art IV, line 27.		T								
(a) Name of interester	d person	(b) Relationship interested personal the organization	son an		(c) Amount of assistance			e) Purpose of assistance		f					
			ation		66.0	70	SCHOLARSHIPS		+						
					50,0	, , ,	CHOMMONIES		$\dashv$						
									+						
									-+						

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

Schedule L (Form 990) 2022

SEE PART V FOR CONTINUATIONS

Schedule L	_ (Form 990) 2022 THE COL	ORADO COLLEGE		84-040251	L 0	Page 2
Part IV	Business Transactions Invol	ving Interested Persons.				
		ed "Yes" on Form 990, Part IV, line 28a, 28	b or 28c			
	(a) Name of interested person	(b) Relationship between interested	(c) Amount of	(d) Description of	(e) Sh	aring of
'	a) Name of interested person	person and the organization	transaction	transaction	organi	zation's
		porcer and the organization	tranoaotion	l anodolion		nues?
					Yes	No
		+		+	1	
				+		
Part V	Supplemental Information.			1		
i dit v		and a second sec	- 4 4 A			
	Provide additional information for res	ponses to questions on Schedule L (see in	istructions).			
SCH L, P	ART III, GRANTS OR ASSISTANCE	BENEFITTING INTERESTED PERSONS	:			
(C) AMOU	NT OF GRANT \$ 66,070.					
, , , , , , , , , , , , , , , , , , , ,	, , , , , ,					
(D) WWDE	OF AGGIGMANCE, GOUOLARGUIRG	/ MILLETON ACCTOMANCE				
(D) TYPE	OF ASSISTANCE: SCHOLARSHIPS	/ TUITION ASSISTANCE				

### **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.

THE COLORADO COLLEGE

Employer identification number 84-0402510

	THE COLORADO COLLE	GE				84-04	102510		
Pai	rt I Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	ı	(d) Method of de noncash contribu		•	S
1	Art - Works of art	Х	7	3,153.	FAIR	MKT VALUE			
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications	Х		1,242.	FAIR	MKT VALUE			
5	Clothing and household goods	Х		17,680.	FAIR	MKT VALUE			
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded	Х	38	299,433.	FAIR	MKT VALUE			
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial		1	360,000	DATE	MIZE TATTIE			
17	Real estate - Other	X	1 6	,	_	MKT VALUE			
18	Collectibles		6	1,415.	FAIR	MKT VALUE			
19	Food inventory								
20	Drugs and medical supplies								
21 22	Taxidermy								
23	Historical artifacts								
23 24	Scientific specimens Archeological artifacts								
25	Other ( )								
26	Other ()								
27	Other ( )								
28	Other (								
29	Number of Forms 8283 received by the organia	zation during	the tax vear for c	ontributions					
	for which the organization completed Form 82	•						2	
		oo,. a, _					,	Yes	No
30a	During the year, did the organization receive by	v contributio	n anv property rep	orted in Part I. lines 1 throug	h 28.	that it			
	must hold for at least 3 years from the date of								
	exempt purposes for the entire holding period						30a		х
b	If "Yes," describe the arrangement in Part II.								
31	Does the organization have a gift acceptance	oolicy that re	equires the review of	of any nonstandard contribut	ions?		31	х	
32a		•	•	•					
	contributions?		•				32a	х	
b	If "Yes," describe in Part II.								
33	If the organization didn't report an amount in c	olumn (c) fo	r a type of property	for which column (a) is chec	cked,				
	describe in Part II.								
1114	For Panerwork Poduction Act Notice see	Ala a I lua a Aure e a A	Hana fan Fann 000	`		Schodulo M	/F	2001	2000

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2022

Schedule M (Form 990) 2022 THE COLORADO COLLEGE	84-0402510	Page 2
Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 3 is reporting in Part I, column (b), the number of contributions, the number of items received, or a corthis part for any additional information.	3, and whether the organiz mbination of both. Also con	ation
SCHEDULE M, PART I, COLUMN (B):		
COLUMN B INDICATED THE NUMBER OF CONTRIBUTORS.		
GOURDINE W. LINE 20D		
SCHEDULE M, LINE 32B:  COLORADO COLLEGE USES A THIRD PARTY TO ASSIST WITH THE PROCESS OF		
VEHICLE DONATIONS. FOR FISCAL YEAR 2023, NO VEHICLES WERE DONATED TO		
THE COLLEGE.		

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. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Inspection Employer identification number

Name of the organization  THE COLORADO COLLEGE	Employer identification number 84-0402510
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:	
THROUGH THE ACADEMICALLY RIGOROUS, IMMERSIVE, AND FLEXIBLE BLOCK PLAN.	
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:	
THEM FOR LEARNING AND LEADERSHIP THROUGHOUT THEIR LIVES.	
COLORADO COLLEGE SUCCEEDS IN ITS MISSION OF EDUCATING FOR OUR TIME WHEN	
IT GRADUATES WOMEN AND MEN WITH MENTAL AGILITY AND THE SKILLS OF	
CRITICAL JUDGMENT, PERSONS WHO HAVE LEARNED HOW TO LEARN.	
TAKING ADVANTAGE OF SMALL CLASSES AND THE UNIQUE LEARNING OPPORTUNITIES	
OF THE BLOCK PLAN, COLORADO COLLEGE PROVIDES A VARIETY OF STIMULATING	
ENVIRONMENTS FOR INTELLECTUAL DEVELOPMENT, CREATIVE EXPRESSION, AND	
PERSONAL GROWTH. IN THE STUDIO AND ON THE STAGE, IN CLASSROOM AND	
LIBRARY AND LABORATORY, IN RESIDENCE HALLS AND ON PLAYING FIELDS, IN	
THE LOCAL COMMUNITY AND IN FOREIGN COUNTRIES, THE COLLEGE CONFRONTS	
STUDENTS WITH UNFAMILIAR PERSPECTIVES AND NEW POSSIBILITIES OF THOUGHT	
AND ACTION.	
WE EXPLORE WITH THEM THE COMPLEXITIES OF THE NATURAL WORLD, THE	
ACHIEVEMENTS OF THE HUMAN PAST, AND THE URGENT SOCIAL AND MORAL ISSUES	
OF THE PRESENT. WE TEACH THEM HOW TO RECOGNIZE RELEVANT EVIDENCE IN	
VARIOUS FIELDS OF INQUIRY AND HOW TO WEIGH THAT EVIDENCE. WE PRESS THEM	
TO READ CAREFULLY, THINK CRITICALLY, REFLECT THOUGHTFULLY, AND EXPRESS	
THEIR IDEAS EFFECTIVELY, WITH PRECISION AND GRACE. WE ENCOURAGE THEIR	
PERSONAL QUEST FOR A WORTHY VISION THAT CAN	

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

Schedule O (Form 990) 2022

Schedule O (Form 990) 2022	Page
Name of the organization  THE COLORADO COLLEGE	Employer identification number 84-0402510
INSPIRE BOTH ACTION AND HOPE AND WILL ENABLE THEM TO HELP CREATE A MORE	
HUMANE WORLD.	
COLORADO COLLEGE IS DISTINCTIVE IN ITS CONVICTION THAT ACTIVE LEARNING	
HAPPENS BEST WHEN STUDENTS PURSUE A SINGLE SUBJECT OF STUDY FOR SEVERAL	
WEEKS IN SMALL CLASSES IN WHICH NO TICKING CLOCK CAN INTERRUPT THE	
ANIMATED EXCHANGE OF IDEAS. WE ARE CONFIDENT THAT THE LEARNING	
OPPORTUNITIES MADE POSSIBLE BY OUR DISTINCTIVE CURRICULAR SYSTEM FOSTER	
A KIND OF INTELLECTUAL ENGAGEMENT THAT WILL CONTINUE TO ENRICH THE	
LIVES OF COLORADO COLLEGE GRADUATES AS THEY BECOME LEADERS IN THEIR	
PROFESSIONS AND COMMUNITIES.	
FORM 990, PART VI, SECTION A, LINE 1A:	
THE EXECUTIVE COMMITTEE CONSISTS OF THE CHAIR, THE PAST CHAIR, THE VICE	
CHAIR, AND THE SECRETARY OF THE BOARD, PLUS THE CHAIRPERSON OF EACH OTHER	
STANDING COMMITTEE.	
THE EXECUTIVE COMMITTEE SHALL GOVERN THE COLLEGE DURING ANY PERIOD BETWEEN	
MEETINGS OF THE BOARD OF TRUSTEES, BUT ONLY WHEN URGENT CIRCUMSTANCES	
REQUIRE PROMPT ACTION AND IT IS NOT FEASIBLE TO CONVENE A MEETING OF THE	
FULL BOARD BY ACCEPTABLE MEANS AS PROVIDED IN THESE BYLAWS. IT SHALL MEET	
ON CALL BY THE CHAIR OF THE BOARD OR BY THE PRESIDENT. SUBJECT TO SUCH	
FURTHER INSTRUCTIONS AND LIMITATION AS THE BOARD, FROM TIME TO TIME, MAY	
IMPOSE, THE EXECUTIVE COMMITTEE MAY EXERCISE ALL THE POWERS OF THE BOARD,	
EXCEPT THAT SUCH COMMITTEE SHALL NOT ELECT THE PRESIDENT OF THE COLLEGE OR	
REMOVE HIM OR HER FROM OFFICE; CHANGE THE FIXED POLICY OF THE BOARD; AMEND	
OR SUSPEND THE BYLAWS; APPROVE THE ANNUAL BUDGET; APPROVE THE ANNUAL AUDIT;	
SELL, MORTGAGE OR OTHERWISE HYPOTHECATE THE ASSETS OF THE COLLEGE EXCEPT IN	Schodulo O (Form 990) 202

Schedule O (Form 990) 2022	Page 2
Name of the organization THE COLORADO COLLEGE	Employer identification number 84-0402510
THE NORMAL COURSE OF BUSINESS WHICH IS DEFINED AS:	
(I) IN ACCORDANCE WITH THE PREVIOUSLY APPROVED ANNUAL OPERATING BUDGET,	
(II) ANY CAPITAL PROJECTS WHICH HAVE BEEN AUTHORIZED AND APPROVED BY THE	
BOARD OR	
(III) WHICH HAVE VALUE OF \$50,000.00 OR LESS); OR OVERRULE ANY ACTION OF	
THE BOARD WITHOUT THE EXPRESS APPROVAL OF THE BOARD.	
THE EXECUTIVE COMMITTEE SHALL ALSO BE RESPONSIBLE FOR PERIODIC REVIEW OF	
THE PRESIDENT'S PERFORMANCE OF HIS OR HER RESPONSIBILITIES. A MAJORITY OF	
THE MEMBERS OF THE EXECUTIVE COMMITTEE SHALL CONSTITUTE A QUORUM FOR THE	
TRANSACTION OF SUCH BUSINESS AS THE EXECUTIVE COMMITTEE IS AUTHORIZED TO	
TRANSACT, AND THE VOTE OF A MAJORITY OF THE MEMBERS PRESENT SHALL BE THE	
ACT OF THE EXECUTIVE COMMITTEE. THE EXECUTIVE COMMITTEE SHALL KEEP AND	
MAINTAIN MINUTES OF ITS MEETINGS WHEN THE COMMITTEE TAKES ACTION ON BEHALF	
OF THE BOARD, SHOWING ALL SUCH ACTION TAKEN BY THE COMMITTEE AND SHALL	
PROVIDE COPIES OF ITS MINUTES TO EACH MEMBER OF THE BOARD PRIOR TO THE NEXT	
MEETING OF THE BOARD. THE EXECUTIVE COMMITTEE SHALL ALSO PROVIDE A REPORT	
TO EACH MEMBER OF THE BOARD OF ALL ACTIONS TAKEN BY THE EXECUTIVE COMMITTEE	
AT SUCH A MEETING WITHIN FIVE BUSINESS DAYS AFTER SUCH MEETING AND PRESENT	
SUCH ACTIONS TO THE BOARD AT THE BOARD'S NEXT MEETING.	
FORM 990, PART VI, SECTION A, LINE 3:	
PUBLIC BROADCASTING OF COLORADO (CPR) AND THE COLLEGE COLLABORATED OVER	
MANAGEMENT OF THE KRCC RADIO STATION. MANAGEMENT OVERSIGHT HAS BEEN	
DELEGATED TO CPR, AND THE BOARD AND COLLEGE SENIOR VP FOR FINANCE AND	
ADMINISTRATION ROBERT G. MOORE (WHO IS A MEMBER OF THE CPR BOARD) MEET	
REGULARLY TO DISCUSS RELEVANT MANAGEMENT TOPICS.	

Schedule O (Form 990) 2022

Schedule O (Form 990) 2022	Page <b>2</b>
Name of the organization  THE COLORADO COLLEGE	Employer identification number 84-0402510
FORM 990, PART VI, SECTION A, LINE 4:	
THE ORGANIZATION'S BYLAWS WERE UPDATED TO MORE ACCURATELY REFLECT THE	
COLLEGE'S UPDATED GOVERNANCE STRUCTURE.	
FORM 990, PART VI, SECTION A, LINE 7A:	
ALUMNI TRUSTEES ARE ELECTED BY ALUMNI AT LARGE AND APPROVED BY THE BOARD OF	
TRUSTEES FOR NON-RENEWABLE TERMS OF SIX YEARS FROM AMONG THOSE ALUMNI OF	
THE COLLEGE NOMINATED BY THE ALUMNI ASSOCIATION BOARD (AAB).	
THE PRESIDENT OF THE COLLEGE AND THE PRESIDENT OF THE AAB SERVE AS VOTING	
MEMBERS OF THE BOARD DURING THEIR TERMS IN OFFICE. THE IMMEDIATE PAST	
PRESIDENT OF THE AAB SERVES AS A VOTING MEMBER OF THE BOARD FOR A TERM OF	
TWO YEARS.	
IN THE CASE OF A VACANCY IN AN ALUMNI TRUSTEE POSITION, THE AAB MAY SELECT	
A SUCCESSOR FOR THE UNEXPIRED PORTION OF THE TERM OF THE ALUMNI TRUSTEE	
WHOSE POSITION IS VACANT, SUBJECT TO APPROVAL BY THE BOARD OF TRUSTEES.	
FORM 990, PART VI, SECTION B, LINE 11B:	
THE FORM 990 IS PREPARED BY A THIRD PARTY PREPARER, WITH A DETAIL REVIEW	
PERFORMED BY THE ASSOC VICE PRESIDENT FOR FINANCE AND THE SR VP OF FINANCE	
AND ADMINISTRATION. THE FORM 990 IS THEN PRESENTED TO THE AUDIT COMMITTEE,	
WHO APPROVES THE DRAFT TO BE FILED WITH THE IRS. ONCE APPROVED BY THE AUDIT	
COMMITTEE, THE FINAL FORM 990 IS MADE AVAILABLE TO THE ENTIRE BOARD FOR	
COMMENT, BEFORE FILING THE RETURN WITH THE IRS.	
FORM 990, PART VI, SECTION B, LINE 12C:	
THE ASSOCIATE VICE PRESIDENT FOR INSTITUTIONAL PLANNING & EFFECTIVENESS IS	

Schedule O (Form 990) 2022  Name of the organization	Page 2  Employer identification number
THE COLORADO COLLEGE	84-0402510
CHARGED WITH PRIMARY RESPONSIBILITY FOR MONITORING AND ENFORCING THE	
CONFLICT OF INTEREST POLICY, AND IS ASSISTED BY THE PRESIDENT, AND THE	
SENIOR VICE PRESIDENT FOR FINANCE AND ADMINISTRATION. THE CURRENT POLICY,	
ADOPTED BY THE BOARD OF TRUSTEES IN MAY OF 2013 AND AMENDED IN JANUARY	
2021, REQUIRES THAT A DETAILED ANNUAL DISCLOSURE FORM BE SIGNED AND	
SUBMITTED BY ALL MEMBERS OF THE TRUSTEES, THE PRESIDENT, ALL OFFICERS OF	
THE COLLEGE, MEMBERS OF THE PRESIDENT'S CABINET (PERSONS REPORTING TO THE	
PRESIDENT), ALL PERSONS REPORTING TO A MEMBER OF THE PRESIDENT'S CABINET,	
AND ANY OTHER PERSON AT THE COLLEGE WHOSE RESPONSIBILITIES INCLUDE	
SIGNIFICANT PURCHASING DECISIONS OR THE SELECTION OF VENDORS AT COLORADO	
COLLEGE.	
ALL DISCLOSURES ARE REVIEWED BY THE AVP OF INSTITUTIONAL PLANNING &	
EFFECTIVENESS FOR MATERIALITY. ANY DISCLOSURE THAT RAISES A MATERIAL	
CONFLICT OF INTEREST, OR THE APPEARANCE OF SUCH, IS REVIEWED BY THE AVP OF	
INSTITUTIONAL PLANNING & EFFECTIVENESS, AND/OR THE PRESIDENT, THE CHAIR OF	
THE BOARD, OR THE AUDIT COMMITTEE, DEPENDING ON THE ROLE OF THE PERSON	
INVOLVED AND THE NATURE OF THE POTENTIAL CONFLICT. IF A CONFLICT OF	
INTEREST IS DETERMINED TO EXIST, THE PERSON IS REQUIRED TO RECUSE	
THEMSELVES FROM ANY DELIBERATIONS AND ANY DECISIONS REGARDING THE AFFECTED	
TRANSACTION. ALL DELIBERATIONS ARE DOCUMENTED WITHIN THE BOARD MINUTES.	
FORM 990, PART VI, SECTION B, LINE 15:	
THE OFFICE OF HUMAN RESOURCES CONDUCTS AN ANNUAL REVIEW OF SALARY DATA	
BASED ON COMPARABLE POSITIONS IN THE MARKET, WITH SPECIAL EMPHASIS ON	
HIGHER EDUCATION AND PEER INSTITUTIONS. THIS DATA IS SHARED WITH THE BOARD	
OF TRUSTEES VIA THE SENIOR VP FOR FINANCE AND ADMINISTRATION.	
WHEN THE PRESIDENT WAS INITIALLY HIRED, THE BOARD OF TRUSTEES ENGAGED AN	
232212 10-28-22	Schedule O (Form 990) 202

Schedule O (Form 990) 2022	Page 2
Name of the organization  THE COLORADO COLLEGE	Employer identification number 84-0402510
OUTSIDE CONSULTANT TO CONDUCT A SALARY REVIEW. ANNUALLY, AN E-MAIL IS SENT	
BY THE BOARD PRESIDENT TO THE SENIOR VICE PRESIDENT OF FINANCE &	
ADMINISTRATION WHO IMPLEMENTS THE AGREED UPON SALARY ADJUSTMENTS AND OR	
BONUS. THE LAST YEAR THIS PROCESS WAS PERFORMED WAS 2023.	
THE OFFICE OF HUMAN RESOURCES CONDUCTS AN ANNUAL REVIEW OF SALARY DATA OF	
COMPARABLE POSITIONS IN THE MARKET THAT INCLUDES ATTENTION ON HIGHER	
EDUCATION AND PEER INSTITUTIONS. THESE RESULTS ARE REVIEWED WITH CABINET	
MEMBERS TO ENSURE THE ACCURACY IN MARKET MATCHES AND THEN USED TO DEVELOP A	
RECOMMENDATION AND PRESENTED TO THE PRESIDENT OF THE COLLEGE AND THE SENIOR	
VICE PRESIDENT FOR FINANCE AND ADMINISTRATION FOR APPROVAL. THE LAST YEAR	
THIS PROCESS WAS PERFORMED WAS 2023.	
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:	
CO,FL,MD,OR,AK,IL,KY,LA,MA,MI,NV,NH,NY,ND,OH,OK,PA,SC,WA,WI,AL,AR,CA,CT,DC	
GA, HI, KS, ME, MO, MS, NJ, NM, NC, RI, TN, UT, VA, WV, MN	
FORM 990, PART VI, SECTION C, LINE 19:	
COLORADO COLLEGE MAKES ITS GOVERNING DOCUMENTS AVAILABLE TO THE PUBLIC UPON	
REQUEST FOR A VALID BUSINESS PURPOSE. OTHER GOVERNING DOCUMENTS ARE ALSO	
AVAILABLE ON THE COLLEGE'S WEBSITE.	
FORM 990, PART VI, LINE 13	
COLORADO COLLEGE HAS A CODE OF ETHICAL CONDUCT AND CONFLICT OF	
INTEREST. CONTAINED WITHIN THAT POLICY IS INFORMATION ON REPORTING	
CONCERNS. ANYONE AWARE OF A VIOLATION OF THE COLLEGE'S CODE OF ETHICAL	
CONDUCT AND/OR CONFLICTS OF INTEREST SHOULD REPORT THE MATTER TO THE	
COLLEGE'S DIRECTOR OF EMPLOYEE RELATIONS FOR CONFIDENTIAL HANDLING.	
232212 10-28-22	Schedule O (Form 990) 2022

Schedule O (Form 990) 2022	Page 2
Name of the organization  THE COLORADO COLLEGE	Employer identification number 84-0402510
FOR REPORTERS WHO WANT TO REMAIN ANONYMOUS, THE COLLEGE PARTNERED WITH	
AN OUTSIDE PROVIDER TO DEVELOP SPEAK UP COLORADO COLLEGE, AN ANONYMOUS	
REPORTING PLATFORM. SPEAK UP COLORADO COLLEGE IS A 24-HOUR REPORTING	
SYSTEM WHERE USERS CAN ANONYMOUSLY SUBMIT CONCERNS OR ASK QUESTIONS.	
THE COLLEGE STRIVES TO PROVIDE A SECURE AND HEALTHY ATMOSPHERE FOR	
STUDENTS, STAFF, FACULTY, VENDORS, AND VISITORS ALIKE.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
CHANGE IN VALUE OF SPLIT INTEREST AGREEMENT 2,141,827.	
FORM 990, PART XII, LINE 2C:	
THE PROCESS FOR OVERSIGHT AND SELECTION OF AN INDEPENDENT ACCOUNTANT	
HAS NOT CHANGED FROM THE PRIOR YEAR.	
	_

#### **SCHEDULE R** (Form 990)

Related Organizations and Unrelated Partnerships
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization THE COLORADO COLLEGE								ımber
Part I Identification of Disregarded Entities. Comp	lete if the organization answered "	Yes" on Form 990, Part IV, line 3	3.					
(a)  Name, address, and EIN (if applicable)  of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state of	(d) Total inco		(e) End-of-year asset		(f) controlling entity	
or disregarded entity		foreign country)					itity	
DALE STREET PROPERTIES, LLC - 20-2018989								
116 EAST DALE STREET								
COLORADO SPRINGS, CO 80903	REAL ESTATE	COLORADO		0.	0	. COLORADO COI	LLEGE	
Part II Identification of Related Tax-Exempt Organi organizations during the tax year.	zations. Complete if the organiza	tion answered "Yes" on Form 990	), Part IV, line 34,	pecause it had one	or mor	re related tax-exer	mpt	
(a)	(b)	(c)	(d)	(e)		(f)	(	g)
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Dir	ect controlling	(g) Section 512(b)(13) controlled	
of related organization		foreign country)	section	status (if section		entity		ity?
				501(c)(3))			Yes	No
A BARNEY TRUST - 84-6217136								
14 EAST CACHE LA POUDRE STREET								
COLORADO SPRINGS, CO 80903	PERP. TRUST	COLORADO	501(C)(3)	PF	COLOR	RADO COLLEGE	Х	
CARLTON TRUST - 84-6331869								
14 EAST CACHE LA POUDRE STREET								
COLORADO SPRINGS, CO 80903	PERP. TRUST	COLORADO	501(C)(3)	PF	COLOR	RADO COLLEGE	х	
FACULTY SALARY FUND - HAWLEY - 84-6049390								
14 EAST CACHE LA POUDRE STREET								
COLORADO SPRINGS, CO 80903	PERP. TRUST	COLORADO	501(C)(3)	PF	COLOR	RADO COLLEGE	х	
JACKSON TRUST - 84-6150097								
14 EAST CACHE LA POUDRE STREET								

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

PERP. TRUST

Schedule R (Form 990) 2022

COLORADO COLLEGE

COLORADO SPRINGS, CO 80903

COLORADO

501(C)(3)

PF

Part II Continuation of Identification of Related Tax-Exempt Organizations

Schedule R (Form 990)

THE COLORADO COLLEGE 84-0402510

(a)  Name, address, and EIN  of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	<b>(f)</b> Direct controlling entity	conti	(g) 512(b)(13) trolled lization?	
				501(c)(3))		Yes	No	
MARGARET BARNES 1992 IRREV 84-6268287	_							
14 EAST CACHE LA POUDRE STREET								
COLORADO SPRINGS, CO 80903	PERP. TRUST	COLORADO	501(C)(3)	PF	COLORADO COLLEGE	Х		
OTIS & MARGARET BARNES TRUST - 84-6023466								
14 EAST CACHE LA POUDRE STREET								
COLORADO SPRINGS, CO 80903	PERP. TRUST	COLORADO	501(C)(3)	PF	COLORADO COLLEGE	Х		
WOMEN'S EDUCATIONAL SOCIETY OF COLORADO								
COLLEGE - 84-6029599, 14 EAST CACHE LA	1			LINE 12C,				
POUDRE STREET, COLORADO SPRINGS, CO 80903	SUPPORT ORG	COLORADO	501(C)(3)	III-FI	N/A		Х	
WOMEN'S EDUCATIONAL SOCIETY OF COLORADO								
COLLEGE TRUST - 84-6035651, 14 EAST CACHE LA	1			LINE 12C,				
POUDRE STREET, COLORADO SPRINGS, CO 80903	SUPPORT ORG	COLORADO	501(C)(3)		N/A		х	
,								
	1							
-	1							
	1							
-	1							
							<del> </del>	
	1							
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	1							
	_							
	_							
	_							

Schedule R (Form 990) 2022 THE COLORADO COLLEGE 84-0402510

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

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes No		 (j) General emanaging partner	(k) Percentage ownership

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(	i)	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	ent	Section 512(b)(13) controlled entity?	
		country)		·				Yes	No	
CASCADE AVENUE MEDIAL BUILDING - 84-6209636										
809 N. CASCADE AVENUE			COLORADO							
COLORADO SPRINGS, CO 80903	INACTIVE	со	COLLEGE	C CORP			100%	х		
	_									
			COLORADO							
CHARITABLE REMAINDER ANNUITY TRUST (1)	CRAT	СО	COLLEGE	TRUST				Х	<b>_</b>	
			COLORADO							
CHARITABLE REMAINDER UNITRUST (15)	CRUT	CO	COLLEGE	TRUST				Х	<u> </u>	
	_									
									<u> </u>	
	_									

Page 2

Schedule R (Form 990) 2022 THE COLORADO COLLEGE

84-0402510

Page 3

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х
<b>b</b> Gift, grant, or capital contribution to related organization(s)			X
c Gift, grant, or capital contribution from related organization(s)			X
d Loans or loan guarantees to or for related organization(s)			Х
e Loans or loan guarantees by related organization(s)			X
f Dividends from related organization(s)	1f		Х
g Sale of assets to related organization(s)	1g		Х
h Purchase of assets from related organization(s)			Х
i Exchange of assets with related organization(s)	1i		Х
j Lease of facilities, equipment, or other assets to related organization(s)			Х
k Lease of facilities, equipment, or other assets from related organization(s)	1k		Х
l Performance of services or membership or fundraising solicitations for related organization(s)	11	Х	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		Х
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Х	
Sharing of paid employees with related organization(s)	10		Х
p Reimbursement paid to related organization(s) for expenses	1p		Х
q Reimbursement paid by related organization(s) for expenses			Х
r Other transfer of cash or property to related organization(s)	1r	Х	
s Other transfer of cash or property from related organization(s)		Х	
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction	thresholds.		

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.					
(a) Name of related organization	(b) Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved		
(1) WOMEN'S EDUCATIONAL SOCIETY OF COLORADO COLLEGE	S	197,409.	CASH TRANSFERRED		
(2) WOMEN'S EDUCATIONAL SOCIETY OF COLORADO COLLEGE TRUST	S	26,506.	CASH TRANSFERRED		
(3) FACULTY SALARY FUND - HAWLEY	S	9,224.	CASH TRANSFERRED		
(4) A BARNEY TRUST	S	36,000.	CASH TRANSFERRED		
(5) OTIS & MARGARET BARNES TRUST	S	1,045,036.	CASH TRANSFERRED		
(6) MARGARET BARNES 1992 IRREV.	s	608,858.	CASH TRANSFERRED		

Schedule R (Form 990)

THE COLORADO COLLEGE

84-0402510

(a) Name of other organization	(b) Transaction type (a-s)	<b>(c)</b> Amount involved	(d)  Method of determining amount involved
(7) JACKSON TRUST	s	16,000.	CASH TRANSFERRED
(8) CARLTON TRUST	s	159,723.	CASH TRANSFERRED
(9)			
10)			
1)			
(2)			
13)			
4)			
15)			
16)			
17)			
18)			
19)			
20)			
21)			
2)			
3)			
24)			

Schedule R (Form 990) 2022 THE COLORADO COLLEGE 84-0402510

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>(b)</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	Disprition allocat	opor- late tions?	General manage partner	(k) Percentage ownership
									000) 0000

Page 4

Schedule R	(Form 990) 2022 THE COLORADO COLLEGE	84-0402510	Page <b>5</b>
Part VII	(Form 990) 2022 THE COLORADO COLLEGE  Supplemental Information		
	Provide additional information for responses to questions on Schedule R. See instructions.		
	Flovide additional information for responses to questions on scriedule n. See instructions.		

Schedule R (Form 990) 2022 232165 09-14-22

#### \*\* PUBLIC INSPECTION COPY \*\*

Form	990-T	E	n	OMB No. 1545-0047	
		l <u>.</u> .	(and proxy tax under section 6033(e))		2022
		For cal	Go to www.irs.gov/Form990T for instructions and the latest information.	—·	ZUZZ
	epartment of the Treasury ternal Revenue Service  Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).				Open to Public Inspection for 501(c)(3) Organizations Only
A	Check box if address changed.		Name of organization ( Check box if name changed and see instructions.)		loyer identification number
<b>B</b> Ex	xempt under section	Print	THE COLORADO COLLEGE		84-0402510
	501(c)(3) 408(e) 220(e)	or Type	Number, street, and room or suite no. If a P.O. box, see instructions.  14 E. CACHE LA POUDRE		p exemption number instructions)
	408A 530(a) 529(a) 529A		City or town, state or province, country, and ZIP or foreign postal code COLORADO SPRINGS, CO 80903	F	Check box if
		С Во	ok value of all assets at end of year		an amended return.
G (	Check organization	type	X 501(c) corporation 501(c) trust 401(a) trust Other trust	State	college/university
<u>H</u> (	Check if filing only to	0	Claim credit from Form 8941 Claim a refund shown on Form 2439		
<u>l (</u>	Check if a 501(c)(3)	organiz	ation filing a consolidated return with a 501(c)(2) titleholding corporation		
J E	Enter the number of	attach	ed Schedules A (Form 990-T)		6
			e corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? didentifying number of the parent corporation.		Yes X No
	The books are in car		1 die prieste Hannie di	(719)3	389-6693
Pa	rt I   Total Unr	elate	d Business Taxable Income		
1			ss taxable income computed from all unrelated trades or businesses (see		
	instructions)			1	84,768.
2	Reserved			2	
3	Add lines 1 and 2			3	84,768.
4			see instructions for limitation rules) STMT 1 STMT 2	4	0.
5	Total unrelated bu	siness	taxable income before net operating losses. Subtract line 4 from line 3	5	84,768.
6	Deduction for net	operati	ng loss. See instructions STATEMENT 3	6	84,768.
7	Total of unrelated	busines	ss taxable income before specific deduction and section 199A deduction.		
	Subtract line 6 fro			7	
8	Specific deduction	n (genei	ally \$1,000, but see instructions for exceptions)	8	1,000.
9	Trusts. Section 19	99A ded	duction. See instructions	9	
10	Total deductions	. Add lii	nes 8 and 9	10	1,000.
11	Unrelated busine	ss taxa	<b>ble income.</b> Subtract line 10 from line 7. If line 10 is greater than line 7,		
	enter zero			11	0.
Pa	rt II Tax Com				T
1			s corporations. Multiply Part I, line 11 by 21% (0.21)	1	0.
2			ates. See instructions for tax computation. Income tax on the amount on		
	Part I, line 11 from		Tax rate schedule or Schedule D (Form 1041)		
3	Proxy tax. See ins			3	
4	Other tax amounts			4	<del>                                     </del>
5	Alternative minimu			5	<del>                                     </del>
6			cility income. See instructions	6	
7			n 6 to line 1 or 2, whichever applies	7	0.
LHA	For Paperwork F	Reduct	on Act Notice, see instructions.		Form <b>990-T</b> (2022)

Form 990-T (2022) Page 2 Part III **Tax and Payments** Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) Other credits (see instructions) 1b b General business credit. Attach Form 3800 (see instructions) Credit for prior year minimum tax (attach Form 8801 or 8827) Total credits. Add lines 1a through 1d 0. Subtract line 1e from Part II, line 7 2 Other amounts due. Check if from: Form 4255 3 Other (attach statement) 3 Check if includes tax previously deferred under Total tax. Add lines 2 and 3 (see instructions). section 1294. Enter tax amount here 5 Current net 965 tax liability paid from Form 965-A, Part II, column (k) 5 Payments: A 2021 overpayment credited to 2022 2022 estimated tax payments. Check if section 643(g) election applies 6b Tax deposited with Form 8868 Foreign organizations: Tax paid or withheld at source (see instructions) 6d Backup withholding (see instructions) Credit for small employer health insurance premiums (attach Form 8941) Other credits, adjustments, and payments: Form 2439 Form 4136 7 Total payments. Add lines 6a through 6g 7 Estimated tax penalty (see instructions). Check if Form 2220 is attached 8 8 Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed 9 9 Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid 10 Enter the amount of line 10 you want: Credited to 2023 estimated tax Part IV | Statements Regarding Certain Activities and Other Information (see instructions) At any time during the 2022 calendar year, did the organization have an interest in or a signature or other authority No Yes over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country X During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a X If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year 3 4,303,861. Do not include any post-2017 NOL carryover Enter available pre-2018 NOL carryovers here shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6. Post-2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions Available post-2017 NOL carryover **Business Activity Code** SEE STATEMENT 6 \$ \$ Did the organization change its method of accounting? (see instructions) If 6a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No," explain in Part V Supplemental Information Provide the explanation required by Part IV, line 6b. Also, provide any other additional information. See instructions. Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, perreductive penalties of perjury. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Sign May the IBS discuss this return with Here 5/14/2024 onin Seager VP FOR FINANCE, CFO the preparer shown below (see ignatumo estasticanos. Date instructions)? X Yes if PTIN Print/Type preparer's name Preparer's signature Date Check self- employed **Paid** SARAH HINTZ SARAH HINTZ 05/14/24 P00492291 **Preparer** CLIFTONLARSONALLEN LLP 41-0746749 Firm's name Firm's EIN Use Only 8390 EAST CRESCENT PARKWAY, SUITE 300 Firm's address GREENWOOD VILLAGE, CO 80111 303-779-5710

Form **990-T** (2022)

223711 01-16-23

84-0402510

## THE COLORADO COLLEGE

FORM 990-T	CONTRIBUTIONS	STATEMENT	1
DESCRIPTION/KIND OF PROPERTY	METHOD USED TO DETERMINE FMV	AMOUNT	
CHARITABLE CONTRIBUTIONS - CD&R FUND X WATERWORKS B, LP	N/A		147.
CHARITABLE CONTRIBUTIONS - CD&R FUND X ORANGE A, LP	N/A		103.
CHARITABLE CONTRIBUTIONS - CD&R FUND X ENERGY A, LP	N/A		425.
TOTAL TO FORM 990-T, PART I, LI	NE 4		675.

## THE COLORADO COLLEGE

FORM 990-T	CONTRIBUTIONS SUM	MARY	STATEMENT	2
	CONTRIBUTIONS SUBJECT TO 100% LIM			
CARRYOVER C FOR TAX Y FOR TAX Y FOR TAX Y FOR TAX Y	TEAR 2018 TEAR 2019 TEAR 2020	NS		
TOTAL CARRY	OVER ONT YEAR 10% CONTRIBUTIONS	675		
	RIBUTIONS AVAILABLE COME LIMITATION AS ADJUSTED	675 0	_	
	RIBUTIONS CONTRIBUTIONS S CONTRIBUTIONS	675 0 675		
ALLOWABLE C	CONTRIBUTIONS DEDUCTION			0
TOTAL CONTR	RIBUTION DEDUCTION			0

FORM 990-T	PRE 2018 NOL SCHEDULE	STATEMENT 3
PRE-2018 NOL CARRY FOR PRE-2018 NOL DEDUCTION	WARD FROM PRIOR YEAR INCLUDED IN PART I, LINE 6	4,303,861. 84,768.
SCHEDULE A PORTION OF I	PRE-2018 NOL SCHEDULE A SHARE	
1	0.	
2	0.	
3	0.	
4	0.	
6	0.	
7	0.	
TOTAL SCHEDULE A SHARE	OF PRE-2018 NOT	0.
NET OPERATING DEDUCTION		84,768.
BALANCE AFTER PRE-2018		0.
EXPIRING NET OPERATING		0.
CARRY FORWARD OF NET O	PERATING LOSS	4,219,093.
	FOOTNOTES	STATEMENT 4

THE COLORADO COLLEGE IS A PRIVATE, LIBERAL ARTS COLLEGE LOCATED IN COLORADO SPRINGS, COLORADO AND EXEMPT FROM TAX UNDER IRC SECTION 501(C)(3). THE COLLEGE IS A NON-UNITARY LIMITED PARTNER IN VARIOUS PARTNERSHIPS. THE PARTNERSHIP ACTIVITY HAS BEEN APPORTIONED BY THE RESPECTIVE PARTNERSHIPS PURSUANT TO THE REQUIREMENTS FOR PASS THROUGH ENTITIES. THE COLLEGE IS A PASSIVE INVESTOR AND THE ACTIVITY APPORTIONED TO THE STATE BY EACH INVESTMENT PARTNERSHIP IS BEING DIRECTLY ALLOCATED BY THE COLLEGE TO YOUR STATE AS NON-BUSINESS INCOME.

THE FOLLOWING ARE THE PARTNERSHIPS THAT THE COLORADO COLLEGE INVESTED IN, AS WELL AS THE UNRELATED TRADE OR BUSINESS INCOME ALLOCATED TO YOUR STATE BY THAT PARTNERSHIP IN THE STATEMENTS ATTACHED TO ITS RESPECTIVE K-1.

CD&R FUND X ENERGY A, LP	-10,335.
CD&R FUND X WATERWORKS B, LP	9,762.
DEERFIELD RCA HOLDINGS, L.P.	-1,441.
CD&R FUND X ORANGE A, LP	3,231.
NET UNRELATED BUSINESS TAXABLE INCOME	1,217.

## THE COLORADO COLLEGE

FORM 990-T	PRE-201	.8 NET OPERATING	LOSS DEDUCTION	STATEMENT 5
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/09	325,246.	325,246.	0.	0.
06/30/10	938,901.	655,832.	283,069.	283,069.
06/30/11	348,868.	0.	348,868.	348,868.
06/30/12	183,888.	0.	183,888.	183,888.
06/30/13	60,807.	0.	60,807.	60,807.
06/30/14	312,871.	0.	312,871.	312,871.
06/30/15	432,658.	0.	432,658.	432,658.
06/30/17	1,805,303.	0.	1,805,303.	1,805,303.
06/30/18	876,397.	0.	876,397.	876,397.
NOL CARRYOV	VER AVAILABLE THIS	YEAR	4,303,861.	4,303,861.

FORM 990T, PART IV	AVAILABLE POST-2017 NOL	STATEMENT 6
BUSINESS CODE	AVAILABLE POST	-2017 NOL
531190	13	38,038.
711210	19	90,194.
624410	55	57,843.
713940	27	76,122.
453200	11	11,056.
901101	3,19	99,484.

# SCHEDULE A (Form 990-T)

# **Unrelated Business Taxable Income From an Unrelated Trade or Business**

OMB No. 1545-0047

2022

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990T for instructions and the latest information.

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

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

A Name of the organization THE COLORADO COLLEGE			B Employer identification number 84-0402510		
C Unrelated business activity code (see instructions) 531190			<b>D</b> Sequence	: 1	of 6
E Describe the unrelated trade or business CAMPUS CONFERENCES	5 / EVE	NTS			
Part I Unrelated Trade or Business Income		(A) Income	(B) Expense	s	(C) Net
1a Gross receipts or sales 783, 265.					
<b>b</b> Less returns and allowances <b>c</b> Balance	1c	783,265.			
2 Cost of goods sold (Part III, line 8)	2				
3 Gross profit. Subtract line 2 from line 1c	3	783,265.			783,265.
<b>4a</b> Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions	4a				
<b>b</b> Net gain (loss) (Form 4797) (attach Form 4797). See instructions)	4b				
c Capital loss deduction for trusts	4c				
5 Income (loss) from a partnership or an S corporation (attach					
statement)	5				
6 Rent income (Part IV)	6				
7 Unrelated debt-financed income (Part V)	7				
8 Interest, annuities, royalties, and rents from a controlled					
organization (Part VI)	8				
9 Investment income of section 501(c)(7), (9), or (17)					
organizations (Part VII)	9				
10 Exploited exempt activity income (Part VIII)	10				
11 Advertising income (Part IX)	11				
12 Other income (see instructions; attach statement)	12				
13 Total. Combine lines 3 through 12	13	783,265.			783,265.
Part II Deductions Not Taken Elsewhere See instruction directly connected with the unrelated business in Compensation of officers, directors, and trustees (Part X)	come			ctions r	nust be
2 Salaries and wages				2	198,510.
3 Repairs and maintenance				3	1,616.
4 Bad debts				4	
5 1				5	
6 Taxes and licenses				6	
7 Depreciation (attach Form 4562). See instructions		_			
8 Less depreciation claimed in Part III and elsewhere on return				8b	
9 Depletion				9	
10 Contributions to deferred compensation plans				10	14,463.
11 Employee benefit programs				11	34,561.
12 Excess exempt expenses (Part VIII)				12	
13 Excess readership costs (Part IX)				13	
14 Other deductions (attach statement)		SEE STATEMENT	7	14	449,347.
15 Total deductions. Add lines 1 through 14				15	698,497.
16 Unrelated business income before net operating loss deduction. S	ubtract li	ne 15 from Part I, line 1	3,		
column (C)				16	84,768.
17 Deduction for net operating loss. See instructions				17	0.
Unrelated business taxable income. Subtract line 17 from line 16	3			18	84,768. 4 (Form 990-T) 2022

# SCHEDULE A (Form 990-T)

# **Unrelated Business Taxable Income From an Unrelated Trade or Business**

0000

2022

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990T for instructions and the latest information.

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

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

Describe the unrelated trade or business   B0880N ARENA	A N	Name of the organization THE COLORADO COLLEGE			B Employer identification number 84-0402510		
Part     Unrelated Trade or Business Income	<u>C</u> (	Inrelated business activity code (see instructions) 711210			<b>D</b> Sequence: 2	of 6	
Part I   Unrelated Trade or Business Income	E D	Describe the unrelated trade or business ROBSON ARENA					
Description   Control				(A) Income	(B) Expenses	(C) Net	
Countries and allowances	1 a	Gross receipts or sales 80,000.					
2 Cost of goods sold    Part III,    Ine    8   2   3   80 ,000 .   3 Gross profits. Subtract line 2 from line 1c   3   80 ,000 .   4a Capital gain net income (lattach Schedule D (Form 1041 or Form 1120)). See instructions   b Net gain (loss) (Form 4797) (statch Form 4797). See instructions)   c Capital loss deduction for trusts   5 Income (loss) from a partnership or an S corporation (lattach statement)   6 Rent income (Part IV)   7 Unrelated debt-financed income (Part V)   8 Interest, annuities, royalties, and rents from a controlled organization (Part VI)   9 Investment income of section 501(c)(7), (9), or (17)   9 Investment income of section 501(c)(7), (9), or (17)   10 Exploited exempt activity income (Part IX)   11 Advertising income (Part IX)   12 Other income (see instructions, attach statement)   STMT 9   13 Total. Combine lines 3 through 12   13 Total. Combine lines 3 through 12   14 Compensation of officers, directors, and trustees (Part X)   1 Compensation of officers, directors, and trustees (Part X)   2 Salaries and wages   2   3 Repairs and maintenance   3   5   6 Taxes and licenses   6   7 Depreciation (lattach Form 4562). See instructions   1 Compensation of officers, directors, and trustees (Part X)   2 Is alaries and wages   2   3 Repairs and maintenance   3   5   6 Taxes and licenses   7   7   8   9 Depletion   10   10   11   12   13 Excess exempt expenses (Part VIII)   14   15   16   17   17   18   18   19   19   10 Contributions to deferred compensation plans   10   11   12   13 Excess exempt expenses (Part VIII)   14   15   16   17   18   18   19   19   10 Contributions (attach statement)   10   11   12   13   14   15   16   17   17   18   18   19   19   19   10   10   10   11   11   12   13   14   15   16   17   17   18   18   19   19   19   10   10   10   10   10   10   10   10			1c	80,000.			
3   80,000   80,000			2				
4 a	3		3	80,000.		80,000.	
120]). See instructions   4a   4b   4c   4c   4c   4c   4c   4c   4c	4 a						
b Net gain (loss) (Form 4797) (attach Form 4797). See instructions) c Capital loss deduction for trusts 5 Income (loss) from a partnership or an S corporation (attach statement) 6 Rent income (Part IV) 7 Unrelated debt-financed income (Part V) 7 Interest, annuities, royalties, and rents from a controlled organization (Part VI) 9 Investment income of section 501(c)(7), (9), or (17) organization (Part VII) 10 Exploited exempt activity income (Part VIII) 11 Advertising income (Part IX) 11 Attack combine lines 3 through 12 12 Other income (see instructions, attach statement) STMT 9 12 11,524, 11			4a				
5   Income (loss) from a partnership or an S corporation (attach statement)   5   6   151, 448.   83.   151, 365.     6   Rent income (Part IV)   6   151, 448.   83.   151, 365.     7   Unrelated debt-financed income (Part V)   7   8   Interest, annuities, royalties, and rents from a controlled organization (Part VI)   8   Investment income of section 501(c)(7), (9), or (17)   9   Investment income of section 501(c)(7), (9), or (17)   9   10   589, 825.   179, 016.   410, 809.     10   Exploited exempt activity income (Part IX)   11   11   12   11,524.   11,524.   11,524.     11   12   11,524.   179, 016.   410, 809.     12   Other income (see instructions; attach statement)   5797 9   12   11,524.   179, 019.   653, 698.     11   Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income   1   Compensation of officers, directors, and trustees (Part X)   1   2   2   2   2   2   2   2   2   2	b		4b				
5   Income (loss) from a partnership or an S corporation (attach statement)   5   6   151, 448.   83.   151, 365.     6   Rent income (Part IV)   6   151, 448.   83.   151, 365.     7   Unrelated debt-financed income (Part V)   7   8   Interest, annuities, royalties, and rents from a controlled organization (Part VI)   8   Investment income of section 501(c)(7), (9), or (17)   9   Investment income of section 501(c)(7), (9), or (17)   9   10   589, 825.   179, 016.   410, 809.     10   Exploited exempt activity income (Part IX)   11   11   12   11,524.   11,524.   11,524.     11   12   11,524.   179, 016.   410, 809.     12   Other income (see instructions; attach statement)   5797 9   12   11,524.   179, 019.   653, 698.     11   Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income   1   Compensation of officers, directors, and trustees (Part X)   1   2   2   2   2   2   2   2   2   2	С	Capital loss deduction for trusts	4c				
6 Rent income (Part IV)         6         1.51,448.         83.         151,365.           7 Unrelated debt financed income (Part V)         7							
6 Rent income (Part IV)         6         1.51,448.         83.         151,365.           7 Unrelated debt financed income (Part V)         7		statement)	5				
Tourelated debt-financed income (Part V)	6		6	151,448.	83.	151,365.	
B	7		7				
Part II	8						
Part II		organization (Part VI)	8				
10       Exploited exempt activity income (Part VIII)       10       589,825       179,016       410,809         11       Advertising income (Part IX)       11           2       Other income (see instructions; attach statement)       STMT 9       12       11 1,524        179,099       653,698         Part II Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income         1       Compensation of officers, directors, and trustees (Part X)       1	9						
10       Exploited exempt activity income (Part VIII)       10       589,825       179,016       410,809         11       Advertising income (Part IX)       11           2       Other income (see instructions; attach statement)       STMT 9       12       11 1,524        179,099       653,698         Part II Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income         1       Compensation of officers, directors, and trustees (Part X)       1		organizations (Part VII)	9				
1	10		10	589,825.	179,016.	410,809.	
2	11		11				
13         Total. Combine lines 3 through 12         13         832,797.         179,099.         653,698.           Part II         Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income           1         Compensation of officers, directors, and trustees (Part X)         1           2         Salaries and wages         2         254,620.           3         Repairs and maintenance         3         59,321.           4         Bad debts         4         4           5         Interest (attach statement). See instructions         5         6           6         Taxes and licenses         6	12		12	11,524.		11,524.	
Part II Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income       1 Compensation of officers, directors, and trustees (Part X)     1       2 Salaries and wages     2       3 Repairs and maintenance     3       4 Bad debts     4       5 Interest (attach statement). See instructions     5       6 Taxes and licenses     6       7 Depreciation (attach Form 4562). See instructions     7       8 Less depreciation claimed in Part III and elsewhere on return     8a       9 Depletion     9       10 Contributions to deferred compensation plans     10     10,723.       11 Employee benefit programs     10     10,723.       12 Excess exempt expenses (Part VIII)     12       13 Excess readership costs (Part IX)     13       14 Other deductions (attach statement)     SEE STATEMENT 10     14     524,128.       15 Total deductions. Add lines 1 through 14     15     882,363.       16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)     16     -228,665.       17 Deduction for net operating loss. See instructions     17     0.       18 Unrelated business taxable income. Subtract line 17 from line 16     18     -228,665.	13		13	832,797.	179,099.	653,698.	
2       254,620.         3       Repairs and maintenance       3       59,321.         4       Bad debts       4       4         5       Interest (attach statement). See instructions       5       5         6       Taxes and licenses       6       5         7       Depreciation (attach Form 4562). See instructions       7       8         8       Less depreciation claimed in Part III and elsewhere on return       8a       8b         9       Depletion       9         10       Contributions to deferred compensation plans       10       10,723.         11       Employee benefit programs       11       33,571.         12       Excess exempt expenses (Part VIII)       12         12       Excess readership costs (Part IX)       13         14       Other deductions (attach statement)       SEE STATEMENT 10       14       524,128.         15       Total deductions. Add lines 1 through 14       15       882,363.         16       Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)       16       -228,665.         17       Deduction for net operating loss. See instructions       17       0       0         18       Unre		directly connected with the unrelated business in	come			must be	
3       59,321.         4       Bad debts       4         5       Interest (attach statement). See instructions       5         6       Taxes and licenses       6         7       Depreciation (attach Form 4562). See instructions       7         8       Less depreciation claimed in Part III and elsewhere on return       8a       8b         9       Depletion       9         10       Contributions to deferred compensation plans       10       10,723.         11       Employee benefit programs       11       33,571.         12       Excess exempt expenses (Part VIII)       12         13       Excess readership costs (Part IX)       13         14       Other deductions (attach statement)       SEE STATEMENT 10       14       524,128.         15       Total deductions. Add lines 1 through 14       15       882,363.         16       Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)       16       -228,665.         17       Deduction for net operating loss. See instructions       17       0.         18       Unrelated business taxable income. Subtract line 17 from line 16       18       -228,665.						254 620	
4       Bad debts       4         5       Interest (attach statement). See instructions       5         6       Taxes and licenses       6         7       Depreciation (attach Form 4562). See instructions       7         8       Less depreciation claimed in Part III and elsewhere on return       8a       8b         9       Depletion       9         10       Contributions to deferred compensation plans       10       10,723.         11       Employee benefit programs       11       33,571.         12       Excess exempt expenses (Part VIII)       12         13       Excess readership costs (Part IX)       13         14       Other deductions (attach statement)       SEE STATEMENT 10       14       524,128.         15       Total deductions. Add lines 1 through 14       15       882,363.         16       Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)       16       -228,665.         17       Deduction for net operating loss. See instructions       17       0.         18       Unrelated business taxable income. Subtract line 17 from line 16       18       -228,665.							
5         Interest (attach statement). See instructions         5           6         Taxes and licenses         6           7         Depreciation (attach Form 4562). See instructions         7           8         Less depreciation claimed in Part III and elsewhere on return         8a         8b           9         Depletion         9           10         Contributions to deferred compensation plans         10         10,723.           11         Employee benefit programs         11         33,571.           12         Excess exempt expenses (Part VIII)         12           13         Excess readership costs (Part IX)         13           14         Other deductions (attach statement)         SEE STATEMENT 10         14         524,128.           15         Total deductions. Add lines 1 through 14         15         882,363.           16         Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)         16         -228,665.           17         Deduction for net operating loss. See instructions         17         0.           18         Unrelated business taxable income. Subtract line 17 from line 16         18         -228,665.						37,321.	
6       Taxes and licenses       6         7       Depreciation (attach Form 4562). See instructions       7         8       Less depreciation claimed in Part III and elsewhere on return       8a       8b         9       Depletion       9         10       Contributions to deferred compensation plans       10       10,723.         11       Employee benefit programs       11       33,571.         12       Excess exempt expenses (Part VIII)       12         13       Excess readership costs (Part IX)       13         14       Other deductions (attach statement)       SEE STATEMENT 10       14       524,128.         15       Total deductions. Add lines 1 through 14       15       882,363.         16       Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)       16       -228,665.         17       Deduction for net operating loss. See instructions       17       0.         18       Unrelated business taxable income. Subtract line 17 from line 16       18       -228,665.	-						
7         Depreciation (attach Form 4562). See instructions         7         8           8         Less depreciation claimed in Part III and elsewhere on return         8a         8b           9         Depletion         9           10         10,723.         10         10,723.           11         33,571.         11         33,571.           12         Excess exempt expenses (Part VIII)         12           13         13         14         Other deductions (attach statement)         SEE STATEMENT 10         14         524,128.           15         Total deductions. Add lines 1 through 14         15         882,363.           16         Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)         16         -228,665.           17         Deduction for net operating loss. See instructions         17         0.           18         Unrelated business taxable income. Subtract line 17 from line 16         18         -228,665.							
Less depreciation claimed in Part III and elsewhere on return  9 Depletion  10 Contributions to deferred compensation plans  11 Indicated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)  12 Less depreciation claimed in Part III and elsewhere on return  9 Depletion  10 10,723.  11 33,571.  12 Excess exempt expenses (Part VIII)  13 Excess readership costs (Part IX)  14 Other deductions (attach statement)  15 SEE STATEMENT 10  16 -228,665.  17 Deduction for net operating loss. See instructions  18 Unrelated business taxable income. Subtract line 17 from line 16  18 Unrelated business taxable income. Subtract line 17 from line 16  18 Unrelated business taxable income. Subtract line 17 from line 16  18 -228,665.	9						
9         Depletion         9           10         Contributions to deferred compensation plans         10         10,723.           11         Employee benefit programs         11         33,571.           12         Excess exempt expenses (Part VIII)         12           13         Excess readership costs (Part IX)         13           14         Other deductions (attach statement)         SEE STATEMENT 10         14         524,128.           15         Total deductions. Add lines 1 through 14         15         882,363.           16         Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)         16         -228,665.           17         Deduction for net operating loss. See instructions         17         0.           18         Unrelated business taxable income. Subtract line 17 from line 16         18         -228,665.	,	, , , , , , , , , , , , , , , , , , , ,			Oh		
Contributions to deferred compensation plans  10 10,723.  11 Employee benefit programs  11 33,571.  12 Excess exempt expenses (Part VIII)  13 Excess readership costs (Part IX)  14 Other deductions (attach statement)  15 Total deductions. Add lines 1 through 14  16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)  17 Deduction for net operating loss. See instructions  18 Unrelated business taxable income. Subtract line 17 from line 16  10 10,723.  11 33,571.  12							
Employee benefit programs 11 33,571.  Excess exempt expenses (Part VIII) 12 13 Excess readership costs (Part IX) 13 Excess readership costs (Part IX) 14 Other deductions (attach statement) SEE STATEMENT 10 14 524,128.  Total deductions. Add lines 1 through 14 15 882,363.  Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C) 16 -228,665.  Deduction for net operating loss. See instructions 17 0.  Unrelated business taxable income. Subtract line 17 from line 16 18 -228,665.		Contributions to deformed compensation plans			10	10 723	
Excess exempt expenses (Part VIII)  Excess readership costs (Part IX)  Other deductions (attach statement)  Total deductions. Add lines 1 through 14  Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)  Deduction for net operating loss. See instructions  Unrelated business taxable income. Subtract line 17 from line 16  Deduction for net operating loss. See instructions 18							
13Excess readership costs (Part IX)1314Other deductions (attach statement)SEE STATEMENT 1014524,128.15Total deductions. Add lines 1 through 1415882,363.16Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)16-228,665.17Deduction for net operating loss. See instructions170.18Unrelated business taxable income. Subtract line 17 from line 1618-228,665.						33,371.	
Other deductions (attach statement)  Total deductions. Add lines 1 through 14  Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)  Deduction for net operating loss. See instructions  Unrelated business taxable income. Subtract line 17 from line 16  14  524,128.  15  882,363.  16  -228,665.  17  Deduction for net operating loss. See instructions  17  0.  18  -228,665.							
Total deductions. Add lines 1 through 14  Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)  Deduction for net operating loss. See instructions  17  Unrelated business taxable income. Subtract line 17 from line 16  18  18  18  18  18  18  18  18  18						524 128	
Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)  16 -228,665.  17 Deduction for net operating loss. See instructions  18 Unrelated business taxable income. Subtract line 17 from line 16  18 -228,665.							
column (C) 16 -228,665.  17 Deduction for net operating loss. See instructions 17 0.  18 Unrelated business taxable income. Subtract line 17 from line 16 18 -228,665.						002,303.	
17Deduction for net operating loss. See instructions170.18Unrelated business taxable income. Subtract line 17 from line 1618-228,665.	10					-228 665	
18 Unrelated business taxable income. Subtract line 17 from line 16 18 -228,665.	17						
	LHA	For Paperwork Reduction Act Notice, see instructions.	<u> </u>			,	

## **SCHEDULE A** (Form 990-T)

## **Unrelated Business Taxable Income** From an Unrelated Trade or Business

Go to www.irs.gov/Form990T for instructions and the latest information.

OMB No. 1545-0047

	ment of the Treasury							ic Inspection for anizations Only
<b>A</b> N	Name of the organization THE COLORADO COLLEGE	B Employer ider 84-04025					ntification number 10	
<u>c</u> ւ	Unrelated business activity code (see instructions) 624410				<b>D</b> Sequence:	3	of	6
<b>E</b> [	Describe the unrelated trade or business CHILDCARE							
	rt I Unrelated Trade or Business Income		(A) Incom	ne	(B) Expenses	,	(C	) Net
1 a	Gross receipts or sales 190,285.							
	Less returns and allowances c Balance	1c	19	0,285.				
2	Cost of goods sold (Part III, line 8)	2						
3	Gross profit. Subtract line 2 from line 1c	3	19	0,285.				190,285.
4 a	Capital gain net income (attach Schedule D (Form 1041 or Form							
	1120)). See instructions	4a						
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions)	4b						
С		4c						
5	Income (loss) from a partnership or an S corporation (attach							
	statement)	5						
6	Rent income (Part IV)	6						
7	Unrelated debt-financed income (Part V)	7						
8	Interest, annuities, royalties, and rents from a controlled							
	organization (Part VI)	8						
9	Investment income of section 501(c)(7), (9), or (17)							
	organizations (Part VII)	9						
10	Exploited exempt activity income (Part VIII)	10						
11	Advertising income (Part IX)	11						
12	Other income (see instructions; attach statement)	12						
13	Total. Combine lines 3 through 12	13	19	0,285.				190,285.
					-P D-d			,
Pa	rt II Deductions Not Taken Elsewhere See instruct directly connected with the unrelated business in			on deal	ictions. Deduc	Juons	must b	е
1	Compensation of officers, directors, and trustees (Part X)					1		
2	Salaries and wages					2		226,070.
3	Repairs and maintenance					3		822.
4	Bad debts					4		
5	Interest (attach statement). See instructions					5		
6	Taxes and licenses					6		
7	Depreciation (attach Form 4562). See instructions							
8	Less depreciation claimed in Part III and elsewhere on return					8b		
9	Depletion			_		9		
10	Contributions to deferred compensation plans					10		17,586.
11	Employee benefit programs					11		55,691.
12	Excess exempt expenses (Part VIII)					12		•
13	Excess readership costs (Part IX)					13		
14	Other deductions (attach statement)		SEE S'	PATEMENT.	14	14		27,636.
15	Total deductions. Add lines 1 through 14					15		327,805.

For Paperwork Reduction Act Notice, see instructions.

Unrelated business taxable income. Subtract line 17 from line 16

Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13,

column (C) Deduction for net operating loss. See instructions

Schedule A (Form 990-T) 2022

16

17

18

16

17

-137,520.

# **Unrelated Business Taxable Income From an Unrelated Trade or Business**

OMB No. 1545-0047

2022

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

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990T for instructions and the latest information.

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

Name of the organization
THE COLORADO COLLEGE

B Employer identification number
84-0402510

C Unrelated business activity code (see instructions)

713940

D Sequence: 4 of 6

ADAM PRESS FITNESS CENTER Describe the unrelated trade or business Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1a Gross receipts or sales 8,597 **b** Less returns and allowances Cost of goods sold (Part III, line 8) 2 2 8,597 Gross profit. Subtract line 2 from line 1c 8,597. 3 4a Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions 4a Net gain (loss) (Form 4797) (attach Form 4797). See instructions) 4b Capital loss deduction for trusts 4c Income (loss) from a partnership or an S corporation (attach statement) Rent income (Part IV) 6 Unrelated debt-financed income (Part V) 7 7 8 Interest, annuities, royalties, and rents from a controlled organization (Part VI) 8 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII) Exploited exempt activity income (Part VIII) 10 10 Advertising income (Part IX) 11 11 Other income (see instructions; attach statement) 12 12 13 8,597. 8,597. **Total.** Combine lines 3 through 12

Part II Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income

1	Compensation of officers, directors, and trustees (Part X)			1	
2	Salaries and wages			2	83,491.
3	Repairs and maintenance			3	3,968.
4	Bad debts			4	
5	Interest (attach statement). See instructions			5	
6	Taxes and licenses			6	
7	Depreciation (attach Form 4562). See instructions				
8	Less depreciation claimed in Part III and elsewhere on return			8b	
9	Depletion			9	
10	Contributions to deferred compensation plans			10	5,730.
11	Employee benefit programs			11	14,006.
12	Excess exempt expenses (Part VIII)			12	
13	Excess readership costs (Part IX)			13	
14	Other deductions (attach statement)	SEE ST	ATEMENT 16	14	11,723.
15	Total deductions. Add lines 1 through 14			15	118,918.
16	Unrelated business income before net operating loss deduction. Subtract line 15 from	om Par	t I, line 13,		
	column (C)			16	-110,321.
17	Deduction for net operating loss. See instructions			17	0.
18	Unrelated business taxable income. Subtract line 17 from line 16			18	-110,321.
	- B				4 (F 000 T) 0000

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2022

# SCHEDULE A (Form 990-T)

# **Unrelated Business Taxable Income From an Unrelated Trade or Business**

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2022

	Go to www.irs.gov/Form990T for ment of the Treasury I Revenue Service  Do not enter SSN numbers on this form as it	Open to Public Inspection for 501(c)(3) Organizations Only			
<b>A</b> N	lame of the organization THE COLORADO COLLEGE			B Employer ident 84-040251	
<u>c</u> ს	Unrelated business activity code (see instructions) 453200			<b>D</b> Sequence:	5 of 6
<b>E</b> [	Describe the unrelated trade or business FINE ARTS CENTER	GIFT SH	OP		
Pai	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a	Gross receipts or sales				
b	Less returns and allowances c Balance	1c			
2	Cost of goods sold (Part III, line 8)	2			
3	Gross profit. Subtract line 2 from line 1c				
4 a	Capital gain net income (attach Schedule D (Form 1041 or Form				
	1120)). See instructions	4a			
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions)	4b			
С	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach				
	statement)	5			
6	Rent income (Part IV)				
7	Unrelated debt-financed income (Part V)				
8	Interest, annuities, royalties, and rents from a controlled				
	organization (Part VI)	8			
9	Investment income of section 501(c)(7), (9), or (17)				
•	organizations (Part VII)	9			
10	Exploited exempt activity income (Part VIII)				
11	Advertising income (Part IX)				
12	Other income (see instructions; attach statement)				
13	Total. Combine lines 3 through 12		0.		
Pai	Deductions Not Taken Elsewhere See instructions directly connected with the unrelated business in the connected with the co	tions for ncome			
1	Compensation of officers, directors, and trustees (Part X)				
2 3	Salaries and wages				
4	Repairs and maintenance				
	Bad debts				
5					
6	Taxes and licenses		1 _ 1		
7	Depreciation (attach Form 4562). See instructions			Oh	
8	Less depreciation claimed in Part III and elsewhere on return			8b	
9	Depletion On the transfer of the state of th				
10					
11	Employee benefit programs				
12	Excess exempt expenses (Part VIII)				
13	Excess readership costs (Part IX)		CDD CM3 MDWD	10	2 100
14	Other deductions (attach statement)				2 100
15					3,129
16	Unrelated business income before net operating loss deduction.	Subtract li	ne 15 from Part I, line 13	,	_3 120

LHA For Paperwork Reduction Act Notice, see instructions.

Unrelated business taxable income. Subtract line 17 from line 16

Schedule A (Form 990-T) 2022

18

17

Deduction for net operating loss. See instructions

-3,129.

# SCHEDULE A (Form 990-T)

# **Unrelated Business Taxable Income From an Unrelated Trade or Business**

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2022

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990T for instructions and the latest information.

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

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

<b>A</b> N	Name of the organization THE COLORADO COLLEGE			B Employer identification number 84-0402510		
<u>c</u> .	Inrelated business activity code (see instructions) 901101			<b>D</b> Sequence:	6 of 6	
<b>E</b> 0	Describe the unrelated trade or business QUALIFYING PARTNER	RSHIP	INTERESTS			
Par	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net	
1 a	Gross receipts or sales					
b	Less returns and allowances c Balance	1c				
2	Cost of goods sold (Part III, line 8)	2				
3	Gross profit. Subtract line 2 from line 1c	3				
4 a	Capital gain net income (attach Schedule D (Form 1041 or Form					
	1120)). See instructions	4a	3,720.		3,720.	
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions)	4b	-190,010.		-190,010.	
С	Capital loss deduction for trusts	4c				
5	Income (loss) from a partnership or an S corporation (attach					
_	statement) STATEMENT 20	5	154,515.		154,515.	
6	Rent income (Part IV)	6	,		<u> </u>	
7	Unrelated debt-financed income (Part V)	7				
8	Interest, annuities, royalties, and rents from a controlled	<b>-</b>				
Ü		8				
9	organization (Part VI)  Investment income of section 501(c)(7), (9), or (17)					
9		9				
40	organizations (Part VII)	10				
10	Exploited exempt activity income (Part VIII)	11				
11	Advertising income (Part IX)		10,676.		10,676.	
12	Other income (see instructions; attach statement) STMT 21	12	-21,099.		-21,099.	
13	Total. Combine lines 3 through 12		· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	
Pai	Deductions Not Taken Elsewhere See instruction directly connected with the unrelated business in		r limitations on dedu	uctions. Deductior	is must be	
1	Compensation of officers, directors, and trustees (Part X)			1		
2	Salaries and wages					
3	Repairs and maintenance					
4	Bad debts			_		
5	Interest (attach statement). See instructions					
6	Taxes and licenses				4,212.	
7	Depreciation (attach Form 4562). See instructions		7			
8	Less depreciation claimed in Part III and elsewhere on return			8b		
9	Depletion		•	9		
10	Contributions to deferred compensation plans					
11	Employee benefit programs					
12	Excess exempt expenses (Part VIII)					
13	Excess readership costs (Part IX)					
14	Other deductions (attach statement)		SEE STATEMENT	122	71,844.	
15					76,056.	
16	Unrelated business income before net operating loss deduction. S		line 15 from Part I, line 19		† · · · · · · · · · · · · · · · · · · ·	
10	• • •				-97,155.	
17	column (C)  Deduction for net operating loss. See instructions				0.	
17 10	Unrelated business taxable income. Subtract line 17 from line 1				-97,155.	
18 LHA	For Paperwork Reduction Act Notice, see instructions.	·			ule A (Form 990-T) 2022	
	i oi i apei work neudolion Act Nolice, see liisii doliolisi			Juleu	ale A (LUIII 330-1) 2022	

	ule A (Form 990-T) 2022				Page :
Part	III Cost of Goods Sold Enter metho	d of inventory valuatio	n		
1	Inventory at beginning of year			1	
2	Purchases			2	
3	Cost of labor				
4	Additional section 263A costs (attach statement)			4	
5	Other costs (attach statement)			5	
6	Total. Add lines 1 through 5			6	
7	Inventory at end of year			7	
8	Cost of goods sold. Subtract line 7 from line 6. Enter he	re and in Part I, line 2		8	
9	Do the rules of section 263A (with respect to property pro				Yes No
Part	IV Rent Income (From Real Property and I	Personal Property	/ Leased with Re	al Property)	
1	Description of property (property street address, city, sta	te, ZIP code). Check if	a dual-use. See instru	ctions.	
	A				
	В				
	c				
	D				
	_	Α	В	С	D
2	Rent received or accrued				
а	From personal property (if the percentage of				
	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the				
	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income)				
С	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				
5	Total deductions. Add line 4 columns A through D. Ente	er here and on Part I. li	ne 6. column (B)		0.
Part					
1	Description of debt-financed property (street address, cit		eck if a dual-use. See	instructions.	
	A	,, ,			
	В				
	c 🗆				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt-financed				
	property				
3	Deductions directly connected with or allocable				
	to debt-financed property				
а	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b,				
	columns A through D)				
4	Amount of average acquisition debt on or allocable				
	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
	financed property (attach statement)				
6	Divide line 4 by line 5	%	%	%	9
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income (add line 7, columns A through D). E	Enter here and on Part	I, line 7, column (A)	<u> </u>	0.
	_			——————————————————————————————————————	
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A throu				
_11	Total dividends-received deductions included in line 1	0	<u></u>		0.

	ule A (Form 990-T) 2022				Page 2
<u>Part</u>	III Cost of Goods Sold Enter metho	d of inventory valuatio	n	Г	
1	Inventory at beginning of year				
2	Purchases				
3	Cost of labor				
4	Additional section 263A costs (attach statement)				
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5			6	
7	Inventory at end of year			7	
8	Cost of goods sold. Subtract line 7 from line 6. Enter he	re and in Part I, line 2		8	
9	Do the rules of section 263A (with respect to property pro				Yes No
<u>Part</u>					
1	Description of property (property street address, city, sta			ictions.	
	A ROBSON ARENA 849 N TEJON ST, COLORAD	O SPRINGS, CO 8	0903		
	В				
	c				
	D				
		Α	В	С	D
2	Rent received or accrued				
а	From personal property (if the percentage of				
	rent for personal property is more than 10%				
	but not more than 50%)	0.			
b	From real and personal property (if the				
	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income)	151,448.			
С	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D	151,448.			
5 Part	Total deductions. Add line 4 columns A through D. Ente V Unrelated Debt-Financed Income (see Description of debt-financed property (street address, cit-	instructions)			83.
-	A	<b>,</b> ,,,			
	В				
	c $\square$				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt-financed				
	property				
3	Deductions directly connected with or allocable				
	to debt-financed property				
а	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b,				
	columns A through D)				
4	Amount of average acquisition debt on or allocable				
	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
	financed property (attach statement)				
6	Divide line 4 by line 5	%	%	%	%
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income (add line 7, columns A through D). E	Enter here and on Part	I, line 7, column (A)		0.
		<u> </u>			
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A throu				
11	Total dividends-received deductions included in line 10	O			0.

	ule A (Form 990-T) 2022				Page 2
Part	Enter metr	od of inventory valuati	on		Τ
1	Inventory at beginning of year			1	
2	Purchases				
3	Cost of labor				
4	Additional section 263A costs (attach statement)				
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5			6	
7	Inventory at end of year			7	
8	Cost of goods sold. Subtract line 7 from line 6. Enter he	ere and in Part I, line 2		8	<u> </u>
9	Do the rules of section 263A (with respect to property p				Yes No
<u>Part</u>	, , ,		_		
1	Description of property (property street address, city, sta	ate, ZIP code). Check i	if a dual-use. See instru	uctions.	
	A				
	В				
	c				
	D	T	T		
	<u></u>	Α	В	С	D
2	Rent received or accrued				
а	From personal property (if the percentage of				
	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the				
	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income)				
С	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				
5 Part 1	Total deductions. Add line 4 columns A through D. Ent  V Unrelated Debt-Financed Income (se  Description of debt-financed property (street address, ci  A	e instructions)			0.
	В				
	c 🗆				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt-financed				
	property				
3	Deductions directly connected with or allocable				
	to debt-financed property				
а	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b,				
	columns A through D)				
4	Amount of average acquisition debt on or allocable				
	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
	financed property (attach statement)				
6	Divide line 4 by line 5	%	%		% %
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income (add line 7, columns A through D).	Enter here and on Par	t I, line 7, column (A)	<u> </u>	0.
	-				
9	Allocable deductions. Multiply line 3c by line 6				
10	<b>Total allocable deductions.</b> Add line 9, columns A thro				
11	Total dividends-received deductions included in line	10			0.

Part Part	ule A (Form 990-T) 2022  III Cost of Goods Sold Enter meth				Page 2
		nod of inventory valu			
1					
2	Purchases				
3	Cost of labor			3	
4	Additional section 263A costs (attach statement)				
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5				
7	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6. Enter h			· · · · · · · · · · · · · · · · · · ·	
9	Do the rules of section 263A (with respect to property p				
Part	, , , ,				
1	Description of property (property street address, city, st	tate, ZIP code). Ched	ck if a dual-use. See instru	ictions.	
	A				
	В				
	c <u> </u>				
	D				
		Α	В	С	D
2	Rent received or accrued				
а	From personal property (if the percentage of				
	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the				
	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income)				
С	Total rents received or accrued by property.				
_	Add lines 2a and 2b, columns A through D				
5 Part	1	ter here and on Part ee instructions)			0.
1	Description of debt-financed property (street address, c	ity, state, ZIP code).	Check if a dual-use. See	instructions.	
	В				
	С				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt-financed				
•	property Pad vistage directly compacted with as allegeble				
3	Deductions directly connected with or allocable				
	to debt-financed property				
a	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b,				
	columns A through D)				
4	Amount of average acquisition debt on or allocable				
	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
	financed property (attach statement)				
6	Divide line 4 by line 5		% %	%	%
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income (add line 7, columns A through D).	Enter here and on F	Part I, line 7, column (A)	<u> </u>	0.
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A thre	ough D. Enter here a	nd on Part I, line 7, colum	nn (B)	0.
11	Total dividends-received deductions included in line				0.

	ule A (Form 990-T) 2022				Page 2
Part	III Cost of Goods Sold Enter meth	nod of inventory valuati	on		
1	Inventory at beginning of year			1	
2	Purchases			2	
3	Cost of labor				
4	Additional section 263A costs (attach statement)			4	
5	Other costs (attach statement)			5	
6	Total. Add lines 1 through 5			6	
7	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6. Enter h	ere and in Part I, line 2		8	
9	Do the rules of section 263A (with respect to property p				Yes No
Part	IV Rent Income (From Real Property and	Personal Proper	ty Leased with R	eal Property)	
1	Description of property (property street address, city, st	tate, ZIP code). Check	if a dual-use. See instr	uctions.	
	A				
	В 🔲				
	c 🗆				
	D				
		Α	В	С	D
2	Rent received or accrued				
а	From personal property (if the percentage of				
	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the				
	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income)				
С	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				
5 Part	Total deductions. Add line 4 columns A through D. En  V Unrelated Debt-Financed Income (see  Description of debt-financed property (street address, columns)	ee instructions)			0.
'	A	ity, state, ZIP codej. Oi	ileck ii a dual-use. See	HISTUCTIONS.	
	В				
	c 🗆				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt-financed				
	property				
3	Deductions directly connected with or allocable				
	to debt-financed property				
а	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b,				
_	columns A through D)				
4	Amount of average acquisition debt on or allocable				
-	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
Ū	financed property (attach statement)				
6	Divide line 4 by line 5	%	%	%	%
7	Gross income reportable. Multiply line 2 by line 6	70	70	70	70
8	<b>Total gross income</b> (add line 7, columns A through D).	Enter here and on Par	t L line 7 column (A)		0.
-	g. 222 g. add mio 1, doldinio 1 tinough b).			·····	<u> </u>
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A three	ough D. Enter here and	on Part I, line 7, colur	mn (B)	0.
11	Total dividends-received deductions included in line				0.

	ule A (Form 990-T) 2022				Page 2
<u>Part</u>	III Cost of Goods Sold Enter meth	nod of inventory valuati	on		
1	Inventory at beginning of year			1	
2	Purchases			2	
3	Cost of labor			3	
4	Additional section 263A costs (attach statement)				
5	Other costs (attach statement)			5	
6	Total. Add lines 1 through 5			6	
7	Inventory at end of year			7	
8	Cost of goods sold. Subtract line 7 from line 6. Enter h	nere and in Part I, line 2		8	
9	Do the rules of section 263A (with respect to property p				Yes No
Part	IV Rent Income (From Real Property and	Personal Proper	ty Leased with Re	eal Property)	
1	Description of property (property street address, city, s	tate, ZIP code). Check	if a dual-use. See instru	uctions.	
	A				
	В				
	c				
	D				
		Α	В	С	D
2	Rent received or accrued				
а	From personal property (if the percentage of				
	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the				
	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income)				
С	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				
4 <u>5</u>	in lines 2(a) and 2(b) (attach statement)  Total deductions. Add line 4 columns A through D. En		ine 6, column (B)		0.
Part	V Unrelated Debt-Financed Income (see	ee instructions)			
1	Description of debt-financed property (street address, of	city, state, ZIP code). C	neck if a dual-use. See	instructions.	
	A				
	В 🗌				
	c				
	D				
		Α	В	С	<u>D</u>
2	Gross income from or allocable to debt-financed				
	property				
3	Deductions directly connected with or allocable				
	to debt-financed property				
а	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b,				
	columns A through D)				
4	Amount of average acquisition debt on or allocable				
	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
	financed property (attach statement)				
6	Divide line 4 by line 5	%	%	%	<u>%</u>
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income (add line 7, columns A through D).	. Enter here and on Par	t I, line 7, column (A)		0.
-	<u>,,, ,, , , , , ,, ,, , , , , , , , , ,</u>	Г	Т	Т	
9	Allocable deductions. Multiply line 3c by line 6	and D. Fat	Law Bart III 7	(D)	0.
10	Total dividends, received deductions included in line				0.
<u>11</u>	Total dividends-received deductions included in line	10			٠.

Schedule A (Form 990-T) 2022 Page 3 Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions) **Exempt Controlled Organizations** 1. Name of controlled 2. Employer 3. Net unrelated 4. Total of specified 5. Part of column 4 6. Deductions directly that is included in the identification organization income (loss) payments made connected with controlling organizanumber (see instructions) income in column 5 tion's gross income (1) (2)(3)(4)Nonexempt Controlled Organizations 7. Taxable Income 8. Net unrelated 9. Total of specified 10. Part of column 9 11. Deductions directly that is included in the payments made connected with income (loss) controlling organization's (see instructions) income in column 10 gross income (1) (2) (3)(4)Add columns 5 and 10. Add columns 6 and 11. Enter here and on Part I, Enter here and on Part I, line 8, column (A) line 8, column (B) Totals 0. Investment Income of a Section 501(c)(7), (9), or (17) Organization Part VII (see instructions) 1. Description of income 5. Total deductions 2. Amount of 3. Deductions 4. Set-asides and set-asides income directly connected (attach statement) (attach statement) (add cols 3 and 4) (1) (2)(3)(4)Add amounts in Add amounts in column 2. Enter column 5. Enter here and on Part I, here and on Part I, line 9, column (B) line 9, column (A) Totals Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions) Description of exploited activity: 2 Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A) 3 Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B) Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7 4 Gross income from activity that is not unrelated business income 5 Expenses attributable to income entered on line 5 6 6 Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12

Schedule A (Form 990-T) 2022

Schedule A (Form 990-T) 2022 Page 3 Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions) **Exempt Controlled Organizations** 1. Name of controlled 2. Employer 3. Net unrelated 4. Total of specified 5. Part of column 4 6. Deductions directly that is included in the identification organization income (loss) payments made connected with controlling organizanumber (see instructions) income in column 5 tion's gross income (1) (2)(3)(4)Nonexempt Controlled Organizations 7. Taxable Income 8. Net unrelated 9. Total of specified 10. Part of column 9 11. Deductions directly that is included in the payments made connected with income (loss) controlling organization's (see instructions) income in column 10 gross income (1) (2) (3)(4)Add columns 5 and 10. Add columns 6 and 11. Enter here and on Part I, Enter here and on Part I, line 8, column (A) line 8, column (B) Totals 0. Investment Income of a Section 501(c)(7), (9), or (17) Organization Part VII (see instructions) 1. Description of income 5. Total deductions 2. Amount of 3. Deductions 4. Set-asides and set-asides income directly connected (attach statement) (attach statement) (add cols 3 and 4) (1) (2)(3)(4)Add amounts in Add amounts in column 2. Enter column 5. Enter here and on Part I, here and on Part I, line 9, column (A) line 9, column (B) **Totals** Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions) Description of exploited activity: ADVERTISING 2 Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A) 589,825. 3 Expenses directly connected with production of unrelated business income. Enter here and on Part I, 179,016. Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete 410,809. lines 5 through 7 Gross income from activity that is not unrelated business income 5

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6

6

Expenses attributable to income entered on line 5

Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line

4. Enter here and on Part II, line 12

0.

	ule A (Form 990-T) 2022		<del> =</del>									Page 3
Part	VI Interest, Annu	uties, Roy	alties, and Re	ents fror	n Control			<u> </u>	ee instruct			
						E	xempt Contro	lled Or	ganizatior	ns		
	1. Name of controlled	d	2. Employer	<b>3.</b> Net	unrelated	4. Tota	al of specified		art of colu		<b>6.</b> [	Deductions directly
	organization		identification	incon	ne (loss)	payn	nents made		included olling orga			connected with
			number	(see ins	structions)				gross inc		ind	come in column 5
(1)												
(2)												
(3)												
(4)												
		•	No	nexempt C	Controlled O	rganizati	ions	•				
7	7. Taxable Income	<b>8.</b> Ne	t unrelated	<b>9.</b> To	otal of specif	ied	<b>10.</b> Part o	of colu	mn 9	11.	Dec	ductions directly
		inco	ome (loss)	pa	yments mad	е	that is inc				cor	nnected with
		(see ir	nstructions)				controlling	organi incom		in	com	e in column 10
(1)							J. 555					
(2)												
(3)												
(4)												
1-7							Add colum	ns 5 a	nd 10	Ado	d co	lumns 6 and 11.
							Enter here					ere and on Part I,
							line 8, c	column	(A)		line	8, column (B)
Totals									0.			0.
Part		Income of	f a Section 50	1(c)(7). (	9). or (17)	Organ	nization (s	aa inet	ructions)			
		cription of inc		-(-)(-), (	2. Amou		3. Deduction			asides	ŀ	5. Total deductions
					incon		directly conne		(attach s			and set-asides
							(attach stater	ment)				(add cols 3 and 4)
(1)												
(2)												
(3)												
(4)											_	
( ' /					Add amou	unts in						Add amounts in
					column 2							column 5. Enter
					here and o line 9, colu							here and on Part I, line 9, column (B)
Totals					11116 9, COIL	0 .						0.
Part		xemnt Δc	tivity Income,	Other 1	∟ Than Δdve	- •	g Income /	soo in	structions)	\		
1	Description of exploite		tivity income,	Other I	Hall Adv	<i>-</i> 1 (10)11 (	g moonie (	SEC 1118	Structions,	, 		
2		, <u> </u>	fram trada ar busi	acca Fata	* boro and a	n Dort I	line 10 celum	n /A\		ا ۾ ا		
_	Gross unrelated busine						•	. ,		2		
3	Expenses directly con		•					,				
	line 10, column (B)									3		
4	Net income (loss) from						• .					
_	lines 5 through 7									4		
5	Gross income from ac									5		
6	Expenses attributable									6		
7	Excess exempt expens			i, but do no	ot enter mor	e than th	ne amount on l	ine				
	4. Enter here and on P	Part II. line 12								7		

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Part	VI Interest, Annu	uities, R	oyalties, and Re	ents fror	n Control	led Or	ganizations	<b>S</b> (see	instruct	ions)	Page 3
		-					Exempt Contro	,			
	Name of controlle organization	d	2. Employer identification number	incon	unrelated ne (loss) structions)	4. Tota	al of specified ments made	5. Part that is in controlli tion's g	of colur cluded ng orga	nn 4 in the iniza-	Deductions directly connected with income in column 5
(1)											
(2)											
(3)											
<u>(4)</u>											
				1	Controlled O	-	1				
1	7. Taxable Income	ir	Net unrelated ncome (loss) e instructions)		otal of specif yments mad		that is inc		he	С	Deductions directly onnected with one in column 10
(1)											
(2)											
(3)											_
(4)											
							Add colum Enter here line 8, c		art I,	Enter	columns 6 and 11. here and on Part I, le 8, column (B)
Totals									0.		0.
Part	VII Investment	Income	of a Section 50	1(c)(7), (	9), or (17)	Orgai	nization (s	ee instruc	ctions)		
	<b>1.</b> Desc	cription of	income		2. Amou incor		3. Deduction directly connected (attach states	ected (a	<b>4.</b> Setattach st	asides atement)	5. Total deductions and set-asides (add cols 3 and 4)
(1)											
(2)											
(3)											
(4)					Add amou	ınte in		_			Add amounts in
					column 2	. Enter					column 5. Enter
Totals					line 9, colu	ımn (A) 0 .					line 9, column (B)
Part	VIII Exploited E	xempt A	Activity Income	, Other 1	Than Adve	ertisin	g Income	(see instru	uctions)		
1	Description of exploite	ed activity:									
2	Gross unrelated busin	ess incom	e from trade or busi	ness. Ente	r here and o	n Part I,	line 10, colum	n (A)		2	_
3	Expenses directly con	nected wit	h production of unre	elated busi	iness income	e. Enter l	here and on Pa	art I,			
	line 10, column (B)									3	
4	Net income (loss) from						J , I				
	lines 5 through 7									4	
5	Gross income from ac									5	
6	Expenses attributable									6	
7	Excess exempt expen 4. Enter here and on F			o, but do no	ot enter mor	e tnan tr	ne amount on I	ine		7	
	4. Enter here and on F	art II, III)e	14							<i>'</i>	

Schedule A (Form 990-T) 2022

Schedule A (Form 990-T) 2022 Page 3 Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions) **Exempt Controlled Organizations** 1. Name of controlled 2. Employer 3. Net unrelated 4. Total of specified 5. Part of column 4 6. Deductions directly that is included in the identification organization income (loss) payments made connected with controlling organizanumber (see instructions) income in column 5 tion's gross income (1) (2)(3)(4)Nonexempt Controlled Organizations 7. Taxable Income 8. Net unrelated 9. Total of specified 10. Part of column 9 11. Deductions directly that is included in the payments made connected with income (loss) controlling organization's (see instructions) income in column 10 gross income (1) (2) (3)(4)Add columns 5 and 10. Add columns 6 and 11. Enter here and on Part I, Enter here and on Part I, line 8, column (A) line 8, column (B) Totals 0. Investment Income of a Section 501(c)(7), (9), or (17) Organization Part VII (see instructions) 1. Description of income 5. Total deductions 2. Amount of 3. Deductions 4. Set-asides and set-asides income directly connected (attach statement) (attach statement) (add cols 3 and 4) (1) (2)(3)(4)Add amounts in Add amounts in column 2. Enter column 5. Enter here and on Part I, here and on Part I, line 9, column (A) line 9, column (B) Totals Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions) Description of exploited activity: 2 Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A) 3 Expenses directly connected with production of unrelated business income. Enter here and on Part I, Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7 4 Gross income from activity that is not unrelated business income 5 Expenses attributable to income entered on line 5 6 6 Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line

Schedule A (Form 990-T) 2022

4. Enter here and on Part II, line 12

Schedule A (Form 990-T) 2022 Page 3 Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions) **Exempt Controlled Organizations** 1. Name of controlled 2. Employer 3. Net unrelated 4. Total of specified 5. Part of column 4 6. Deductions directly that is included in the identification organization income (loss) payments made connected with controlling organizanumber (see instructions) income in column 5 tion's gross income (1) (2)(3)(4)Nonexempt Controlled Organizations 7. Taxable Income 8. Net unrelated 9. Total of specified 10. Part of column 9 11. Deductions directly that is included in the payments made connected with income (loss) controlling organization's (see instructions) income in column 10 gross income (1) (2)(3)(4)Add columns 5 and 10. Add columns 6 and 11. Enter here and on Part I, Enter here and on Part I, line 8, column (A) line 8, column (B) Totals 0. Investment Income of a Section 501(c)(7), (9), or (17) Organization Part VII (see instructions) 1. Description of income 5. Total deductions 2. Amount of 3. Deductions 4. Set-asides and set-asides income directly connected (attach statement) (attach statement) (add cols 3 and 4) (1) (2)(3)(4)Add amounts in Add amounts in column 2. Enter column 5. Enter here and on Part I, here and on Part I, line 9, column (A) line 9, column (B) Totals Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions) Description of exploited activity: 2 Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A) 3 Expenses directly connected with production of unrelated business income. Enter here and on Part I, Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7 4 Gross income from activity that is not unrelated business income 5 Expenses attributable to income entered on line 5 6 6 Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12

Schedule A (Form 990-T) 2022

	dule A (Form 990-T) 2022					Page 4
Part	IX Advertising Income					
1	Name(s) of periodical(s). Check box if reporti	ng two or more pe	eriodicals on a	a consolidated basis	S.	
	A					
	В					
	c					
	D					
Enter	amounts for each periodical listed above in the	corresponding co	olumn.	1		
			Α	В	С	D
2	Gross advertising income					
	Add columns A through D. Enter here and or	n Part I, line 11, co	olumn (A)			0.
а				1		
3	Direct advertising costs by periodical					
а	Add columns A through D. Enter here and or	n Part I, line 11, co	olumn (B)			0.
				1		
4	Advertising gain (loss). Subtract line 3 from li	ine				
	2. For any column in line 4 showing a gain,					
	complete lines 5 through 8. For any column					
	line 4 showing a loss or zero, do not complet					
_	lines 5 through 7, and enter zero on line 8					
5	Readership costs					
6	Circulation income					
7	Excess readership costs. If line 6 is less than	l				
	line 5, subtract line 6 from line 5. If line 5 is le					
	than line 6, enter zero					
8	Excess readership costs allowed as a					
	deduction. For each column showing a gain					
	line 4, enter the lesser of line 4 or line 7			<u> </u>		
а	Add line 8, columns A through D. Enter the g	greater of the line	Ba, columns t			0.
Part	X Compensation of Officers, Di	rectors and	Trustees			••
	,			(SCC IIISTI GCTIONS)	3. Percentage	4. Compensation
	1. Name		2. Title		of time devoted	attributable to
					to business	unrelated business
(1)					%	
(2)					%	
(3)					%	
(4)					%	
Tota	I. Enter here and on Part II, line 1					0.
Part	XI Supplemental Information (s	ee instructions)				

- 2

	dule A (Form 990-T) 2022					Page 4
Part	IX Advertising Income					
1	Name(s) of periodical(s). Check box if reporti	ng two or more pe	eriodicals on a	a consolidated basis	S.	
	A					
	В					
	c					
	D					
Enter	amounts for each periodical listed above in the	corresponding co	olumn.	1		
			Α	В	С	D
2	Gross advertising income					
	Add columns A through D. Enter here and or	n Part I, line 11, co	olumn (A)			0.
а				1		
3	Direct advertising costs by periodical					
а	Add columns A through D. Enter here and or	n Part I, line 11, co	olumn (B)			0.
				1		
4	Advertising gain (loss). Subtract line 3 from li	ine				
	2. For any column in line 4 showing a gain,					
	complete lines 5 through 8. For any column					
	line 4 showing a loss or zero, do not complete					
_	lines 5 through 7, and enter zero on line 8					
5	Readership costs					
6	Circulation income					
7	Excess readership costs. If line 6 is less than	l				
	line 5, subtract line 6 from line 5. If line 5 is le					
	than line 6, enter zero					
8	Excess readership costs allowed as a					
	deduction. For each column showing a gain					
	line 4, enter the lesser of line 4 or line 7			<u> </u>		
а	Add line 8, columns A through D. Enter the g	greater of the line a	Ba, columns t			0.
Part	X Compensation of Officers, Di	rectors and	Trustees			••
	,			(SCC IIISTI GCTIONS)	3. Percentage	4. Compensation
	1. Name		2. Title		of time devoted	attributable to
					to business	unrelated business
(1)					%	
(2)					%	
(3)					%	
(4)					%	
Tota	I. Enter here and on Part II, line 1					0.
Part	XI Supplemental Information (s	ee instructions)				

	lule A (Form 990-T) 2022					Page 4
Part	IX Advertising Income					
1	Name(s) of periodical(s). Check box if reporti	ng two or more period	dicals on a	consolidated basis	<b>3.</b>	
	A					
	В 🔲					
	С					
	D					
Enter	amounts for each periodical listed above in the	corresponding colum	n			
	announce for each pensulation notice above in the		<u></u>	В	С	D
2	Gross advertising income		•			
_	Add columns A through D. Enter here and or		ın /Λ\	1		0.
_	Add Columns A through D. Enter here and or	reart i, line 11, coluir	III (A)			
а	Discrete describitions and become dealers.			I		
3	Direct advertising costs by periodical		<b>(D)</b>			0.
а	Add columns A through D. Enter here and or	n Part I, line 11, colum	ın (B)			
				1	<u> </u>	
4	Advertising gain (loss). Subtract line 3 from li	ne				
	2. For any column in line 4 showing a gain,					
	complete lines 5 through 8. For any column i					
	line 4 showing a loss or zero, do not complet	te				
	lines 5 through 7, and enter zero on line 8					
5	Readership costs					
6	Circulation income					
7	Excess readership costs. If line 6 is less than					
	line 5, subtract line 6 from line 5. If line 5 is le	ess				
	than line 6, enter zero					
8	Excess readership costs allowed as a					
	deduction. For each column showing a gain	on				
	line 4, enter the lesser of line 4 or line 7					
а	Add line 8, columns A through D. Enter the g		columns to	ntal or zero here and	d on	
_	Part II, line 13	roator or the inte oa,	Joidinino to			0.
Part		rectors. and Tru	stees (			
		<u> </u>	,		3. Percentage	4. Compensation
	1. Name		2. Title		of time devoted	attributable to
	ii Namo		2. 1100		to business	unrelated business
(1)					%	difference business
(2)					%	
					%	
(3)					90	
(4)					90	
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	I. Enter here and on Part II, line 1					0.
Part	XI Supplemental Information (s	ee instructions)				

	lule A (Form 990-T) 2022					Page 4
Part	IX Advertising Income					
1	Name(s) of periodical(s). Check box if reporti	ng two or more period	dicals on a	consolidated basis	<b>3.</b>	
	A					
	В 🔲					
	С					
	D					
Enter	amounts for each periodical listed above in the	corresponding colum	n			
	announce for each pensulation notice above in the		<u></u>	В	С	D
2	Gross advertising income		•			
_	Add columns A through D. Enter here and or		ın /Λ\	1		0.
_	Add Columns A through D. Enter here and or	reart i, line 11, coluir	III (A)			
а	Discrete describitions and become dealers.			I		
3	Direct advertising costs by periodical		(D)			0.
а	Add columns A through D. Enter here and or	n Part I, line 11, colum	ın (B)			
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4	Advertising gain (loss). Subtract line 3 from li	ne				
	2. For any column in line 4 showing a gain,					
	complete lines 5 through 8. For any column i					
	line 4 showing a loss or zero, do not complet	te				
	lines 5 through 7, and enter zero on line 8					
5	Readership costs					
6	Circulation income					
7	Excess readership costs. If line 6 is less than					
	line 5, subtract line 6 from line 5. If line 5 is le	ess				
	than line 6, enter zero					
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	deduction. For each column showing a gain	on				
	line 4, enter the lesser of line 4 or line 7					
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_	Part II, line 13	roator or the inte oa,	Joidinino to			0.
Part		rectors. and Tru	stees (			
		<u> </u>	,		3. Percentage	4. Compensation
	1. Name		2. Title		of time devoted	attributable to
	ii Namo		2. 1100		to business	unrelated business
(1)					%	difference business
(2)					%	
					%	
(3)					90	
(4)					90	
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	I. Enter here and on Part II, line 1					0.
Part	XI Supplemental Information (s	ee instructions)				

	ule A (Form 990-T) 2022				Page
Part	IX Advertising Income				
1	Name(s) of periodical(s). Check box if reporting	g two or more periodicals on a	consolidated basis	S.	
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Entor	amounts for each periodical listed above in the	oorroopending column			
Enter	amounts for each periodical listed above in the				
_		Α	В	С	D
2	Gross advertising income				
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3	Direct advertising costs by periodical				
а	Add columns A through D. Enter here and on	Part I, line 11, column (B)			0
4	Advertising gain (loss). Subtract line 3 from lin	ne			
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	complete lines 5 through 8. For any column ir	n			
	line 4 showing a loss or zero, do not complete				
	lines 5 through 7, and enter zero on line 8				
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6	Circulation income				
7	Excess readership costs. If line 6 is less than				
	line 5, subtract line 6 from line 5. If line 5 is les				
	than line 6, enter zero				
8	Excess readership costs allowed as a				
	deduction. For each column showing a gain of	n			
	line 4, enter the lesser of line 4 or line 7				
а	Add line 8, columns A through D. Enter the gr	•	tal or zero here an	d on	
	Part II, line 13				0
Part	X Compensation of Officers, Dir		see instructions)		
		,	,	3. Percentage	4. Compensation
	1. Name	2. Title		of time devoted	attributable to
	1. INDITIO	Z. Title		to business	unrelated business
/4\					uniterated business
(1)				%	
(2)				%	
(3)				%	
(4)				%	
	Enter here and on Part II, line 1				0
Part	XI Supplemental Information (se	e instructions)			

	lule A (Form 990-T) 2022				Page 4
Part	IX Advertising Income				
1	Name(s) of periodical(s). Check box if reporting	ng two or more periodica	ls on a consolidated basi	S.	
	A				
	B				
	<u>c</u>				
Ft					
Enter	amounts for each periodical listed above in the	_	В	С	D
2	Gross advertising income	A			
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3	Direct advertising costs by periodical				
а	Add columns A through D. Enter here and or		3)	<b>'</b>	0.
		(-	-/		
4	Advertising gain (loss). Subtract line 3 from li	ne			
	2. For any column in line 4 showing a gain,				
	complete lines 5 through 8. For any column i	n			
	line 4 showing a loss or zero, do not complet	e			
	lines 5 through 7, and enter zero on line 8				
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7	Excess readership costs. If line 6 is less than				
	line 5, subtract line 6 from line 5. If line 5 is le				
_	than line 6, enter zero				
8	Excess readership costs allowed as a				
	deduction. For each column showing a gain line 4, enter the lesser of line 4 or line 7				
а	Add line 8, columns A through D. Enter the g		mne total or zero here an	nd on	
u	Part II, line 13	reater of the line oa, cold			0.
Part		rectors, and Truste	es (see instructions)		
			,	3. Percentage	4. Compensation
	1. Name	2.	Title	of time devoted	attributable to
				to business	unrelated business
<u>(1)</u>				%	
(2)				%	
(3)				%	
<u>(4)</u>				%	
					0
Part					0.
Fait	Supplemental information (Si	ee instructions)			
PAGE	1, LINE BOX C: NAICS CODE WAS UPDA	TED FROM 523000 TO	901101 ТО		
ALIGN	WITH THE 990-T INSTRUCTIONS FOR R	EPORTING QUALIFYIN	G PARTNERSHIP		
INTER	RESTS.				

## THE COLORADO COLLEGE

FORM 990-T	(A)	OTHER	DEDUCT	IONS		STATEMENT 7
DESCRIPTION						AMOUNT
DUES & SUBSO FOOD SERVICE OTHER MISCEI PURCHASED SE	ES LLANEOUS EXPENSE					852 240,895 8,258 667
SUPPLIES TRAVEL EDUCATION RENT EXPENSE ADVERTISING	3					193,661 2,111 1,706 2 1,195
TOTAL TO SCI	HEDULE A, PART II,	LINE 14				449,347
990-T SCH A	POST-201	7 NET OP	ERATING	LOSS D	EDUCTION	STATEMENT 8
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOU APPL	JSLY		OSS AINING	AVAILABLE THIS YEAR
06/30/20 06/30/21	61,883. 76,155.		0.		61,883. 76,155.	61,883. 76,155.
NOL CARRYOVE	ER AVAILABLE THIS	YEAR			138,038.	138,038.

## THE COLORADO COLLEGE

	A)	OTHER	INCOME	· · · · · · · · · · · · · · · · · · ·	STATEMENT 9
DESCRIPTION					AMOUNT
MISCELLANEOU	S				11,524
FOTAL TO SCH	EDULE A, PART I,	LINE 12			11,524
FORM 990-T (2	A)	OTHER	DEDUCTIO	ons	STATEMENT 10
DESCRIPTION					AMOUNT
DUES & SUBSC					2,940
FOOD SERVICE					15,902
INOR EQUIPM					37,309
	LANEOUS EXPENSE				25,091
PURCHASED SE SUPPLIES	RVICES				163,714 16,128
RAVEL					7,100
TILITIES					216,519
DVERTISING					16,127
	NSES				23,298
PAXES & LICE					
	EDULE A, PART II	, LINE 14			524,128
			CRATING I	OSS DEDUCTION	524,128 STATEMENT 11
FOTAL TO SCH			JSLY	LOSS REMAINING	
POTAL TO SCH	POST-203	17 NET OPE LOSS PREVIOU	JSLY	LOSS	STATEMENT 11 AVAILABLE
OTAL TO SCH	POST-201	17 NET OPE LOSS PREVIOU	S JSLY ED	LOSS REMAINING	STATEMENT 11  AVAILABLE THIS YEAR
POTAL TO SCH	POST-201 LOSS SUSTAINED 22,541.	17 NET OPE LOSS PREVIOU	JSLY EED	LOSS REMAINING	STATEMENT 11  AVAILABLE THIS YEAR  22,541.

FORM 990-T (A) DEDUCTION	ONS CONNECTED WI	TH RENTAL	INCOME	STATEMENT	12
DESCRIPTION		ACTIVITY NUMBER	AMOUNT	TOTAL	
RENT EXPENSE	- SUBTOTAL -	- 1	83.		83
TOTAL TO FORM 990-T, SCH	EDULE A, PART IV	, LINE 4			83
	I - EXPENSES DIF TION OF UNRELATE			STATEMENT	13
· ·				STATEMENT	13
PRODUC		ED BUSINESS ACTIVITY	SINCOME		13
PRODUCTOR PRODUC		ACTIVITY NUMBER	AMOUNT 64,166. 20,885.	TOTAL	,016

FORM 990-T	(A)	OTHER DEDUCT	IONS	STATEMENT 14
DESCRIPTIO	N			AMOUNT
EDUCATION	_			425.
FOOD SERVI	CES			20,754.
SUPPLIES				4,034.
MINOR EQUI				578.
OTHER MISC TAXES & LI	ELLANEOUS EXPENSE			402. 1,443.
TOTAL TO S	CHEDULE A, PART II,	, LINE 14		27,636.
990-T SCH	A POST-201	L7 NET OPERATING	LOSS DEDUCTION	STATEMENT 15
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/20	215,901.	0.	215,901.	215,901.
06/30/21	229,278.	0.	229,278.	229,278.
06/30/22	112,664.	0.	112,664.	112,664.
NOL CARRYO	VER AVAILABLE THIS	YEAR	557,843.	557,843.

	. (A)	OTHER DEDUCT	IONS	STATEMENT 16
DESCRIPTIO	DN			AMOUNT
SUPPLIES				671.
TRAVEL				19.
MINOR EQUI	PMENT			9,766.
OTHER MISC	CELLANEOUS EXPENSE			258.
EDUCATION				174.
FOOD SERVI				822.
PURCHASED	SERVICES			13.
TOTAL TO S	SCHEDULE A, PART II,	, LINE 14		11,723.
TOTAL TO S		, LINE 14  17 NET OPERATING	LOSS DEDUCTION	11,723. STATEMENT 17
		·	LOSS DEDUCTION  LOSS REMAINING	
990-T SCH	A POST-201	LOSS PREVIOUSLY	LOSS	STATEMENT 17  AVAILABLE
990-т SCH	A POST-201  LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	STATEMENT 17  AVAILABLE THIS YEAR
990-T SCH  TAX YEAR  06/30/19	A POST-201  LOSS SUSTAINED  77,219.	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	STATEMENT 17  AVAILABLE THIS YEAR  77,219.

FORM 990-T (A)	OTHER DEDUCTIONS			
DESCRIPTION				AMOUNT
FOOD SERVICES				61.
SUPPLIES				1,645.
OTHER MISCELLAI MINOR EQUIPMEN'				517. 906.
TOTAL TO SCHED	· · · · · · · · · · · · · · · · · · ·	, DINE 14  17 NET OPERATING	LOSS DEDUCTION	3,129.  STATEMENT 19
	1051 20			
TAX YEAR LO	SS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/20	111,056.	0.	111,056.	111,056.

FORM 990-T (A) INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 20
DESCRIPTION	NET INCOME OR (LOSS)
CD&R FUND X ENERGY A, LP - ORDINARY BUSINESS INCOME (LOSS) CD&R FUND X WATERWORKS B, LP - ORDINARY BUSINESS INCOME	-79,405.
(LOSS) DEERFIELD HEALTHCARE INNOVATIONS FUND, LP - ORDINARY BUSINESS INCOME (LOSS)	307,716. 8,864.
DEERFIELD PH HOLDINGS IV, LP - ORDINARY BUSINESS INCOME (LOSS)	-273,3 <b>4</b> 5.
DEERFIELD PRIVATE DESIGN FUND III, LP - ORDINARY BUSINESS INCOME (LOSS)	-11,065.
DEERFIELD PRIVATE DESIGN FUND IV, LP - ORDINARY BUSINESS INCOME (LOSS) DEERFIELD RCA HOLDINGS, LP - ORDINARY BUSINESS INCOME	-84,857.
(LOSS) DEERFIELD RE HOLDINGS IV, LP - NET RENTAL REAL ESTATE	-44,538.
INCOME EIG ENERGY FUND XIV-A, LP - ORDINARY BUSINESS INCOME	738.
(LOSS) EIG ENERGY FUND XV-A, LP - ORDINARY BUSINESS INCOME (LOSS) EIG ENERGY FUND XV-A, LP - OTHER INCOME (LOSS)	101. 135,576. -73,612.
YORKTOWN ENERGY PARTNERS X, LP - ORDINARY BUSINESS INCOME (LOSS)	285,821.
YORKTOWN ENERGY PARTNERS X, LP - NET RENTAL REAL ESTATE INCOME	44.
YORKTOWN ENERGY PARTNERS X, LP - OTHER INCOME (LOSS) YORKTOWN ENERGY PARTNERS XI, LP - INTEREST INCOME YORKTOWN ENERGY PARTNERS XI, LP - OTHER INCOME (LOSS)	-6,055. 583,932. -528,927.
CD&R FUND X ORANGE A, LP - ORDINARY BUSINESS INCOME (LOSS) CD&R FUND X ORANGE A, LP - INTEREST INCOME	50,964. 3,965.
AUDAX PRIVATE EQUITY ORIGINS FUND I, LP - OTHER INCOME (LOSS) CD&R FUND XI AIV B, L.P INTEREST INCOME	-126,381. 4,825.
CLAYTON, DUBILIER & RICE FUND XI, L.P ORDINARY BUSINESS INCOME (LOSS)	-74.
PRIME FINANCE SPECIAL SITUATIONS 2020 FUND, L.P ORDINARY BUSINESS INCOME	228.
TOTAL INCLUDED ON SCHEDULE A, PART I, LINE 5	154,515.
FORM 990-T (A) OTHER INCOME	STATEMENT 21
DESCRIPTION	AMOUNT
CANCELLATION OF DEBT - CD&R FUND X ENERGY A, LP	10,676.
TOTAL TO SCHEDULE A, PART I, LINE 12	10,676.

FORM 990-T (A)	OTHER DEDUCT	IONS	STATEMENT 22
DESCRIPTION			AMOUNT
ACCOUNTING FEES			5,731.
OTHER DEDUCTIONS - PORTF OTHER DEDUCTIONS - PORTF			8,077.
ORIGINS FUND I, LP		~ *	23,796.
OTHER DEDUCTIONS - PORTF OTHER DEDUCTIONS - PORTF			6,919.
FUND XI, L.P.			27,321.
TOTAL TO SCHEDULE A, PAR	T II, LINE 14		71,844.
	T II, LINE 14 T-2017 NET OPERATING	LOSS DEDUCTION	STATEMENT 23
	T-2017 NET OPERATING LOSS PREVIOUSLY	LOSS DEDUCTION  LOSS REMAINING	
990-T SCH A POS	LOSS PREVIOUSLY ED APPLIED	LOSS	STATEMENT 23 AVAILABLE
990-T SCH A POS  TAX YEAR LOSS SUSTAIN	LOSS PREVIOUSLY APPLIED 0.	LOSS REMAINING	STATEMENT 23  AVAILABLE THIS YEAR

## **SCHEDULE D** (Form 1120)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.

Go to www.irs.gov/Form1120 for instructions and the latest information.

Name				Emplo	oyer identification number		
THE COLORADO COLLEGE				84-	0402510		
Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year?							
If "Yes," attach Form 8949 and see its instruct	tions for additional require	ments for reporting your	gain or loss.				
Part I Short-Term Capital Gain	s and Losses - Ass	ets Held One Year	or Less				
See instructions for how to figure the amounts to enter on the lines below.	(d) Proceeds	(e) Cost	(g) Adjustments to ga		(h) Gain or (loss) Subtract column (e) from		
This form may be easier to complete if you round off cents to whole dollars.	(sales price)	(or other basis)	Part I, line 2, column		column (d) and combine the result with column (g)		
Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b							
<b>1b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked							
2 Totals for all transactions reported on							
Form(s) 8949 with <b>Box B</b> checked							
3 Totals for all transactions reported on							
Form(s) 8949 with <b>Box C</b> checked							
4 Short-term capital gain from installment sales fi	rom Form 6252, line 26 or 37	7	•	4			
5 Short-term capital gain or (loss) from like-kind				5			
6 Unused capital loss carryover (attach computati				6	( )		
7 Net short-term capital gain or (loss). Combine				7			
Part II Long-Term Capital Gain	s and Losses - Ass	ets Held More Tha	n One Year				
Part II Long-Term Capital Gain: See instructions for how to figure the amounts to enter on the lines below.	s and Losses - Asso (d) Proceeds	ets Held More Tha (e) Cost	(g) Adjustments to ga or loss from Form(s) 89	949,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the		
Part II Long-Term Capital Gain See instructions for how to figure the amounts	s and Losses - Asse	ets Held More Tha	(g) Adjustments to ga	949,			
Part II Long-Term Capital Gain: See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you	s and Losses - Asso (d) Proceeds	ets Held More Tha (e) Cost	(g) Adjustments to ga or loss from Form(s) 89	949,	Subtract column (e) from column (d) and combine the		
Part II Long-Term Capital Gain See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars.  8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b  8b Totals for all transactions reported on	s and Losses - Asso (d) Proceeds	ets Held More Tha (e) Cost	(g) Adjustments to ga or loss from Form(s) 89	949,	Subtract column (e) from column (d) and combine the		
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Part II Long-Term Capital Gain  See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars.  8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b  8b Totals for all transactions reported on Form(s) 8949 with Box D checked  9 Totals for all transactions reported on	s and Losses - Asso (d) Proceeds	ets Held More Tha (e) Cost	(g) Adjustments to ga or loss from Form(s) 89	949,	Subtract column (e) from column (d) and combine the		
Part II Long-Term Capital Gain  See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars.  8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b  8b Totals for all transactions reported on Form(s) 8949 with Box D checked  9 Totals for all transactions reported on Form(s) 8949 with Box E checked	s and Losses - Asso (d) Proceeds	ets Held More Tha (e) Cost	(g) Adjustments to ga or loss from Form(s) 89	949,	Subtract column (e) from column (d) and combine the		
Part II Long-Term Capital Gain  See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars.  8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b  8b Totals for all transactions reported on Form(s) 8949 with Box D checked  9 Totals for all transactions reported on Form(s) 8949 with Box E checked  10 Totals for all transactions reported on	s and Losses - Asso (d) Proceeds	ets Held More Tha (e) Cost	(g) Adjustments to ga or loss from Form(s) 89	949,	Subtract column (e) from column (d) and combine the result with column (g)		
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Part II Long-Term Capital Gain  See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars.  8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b  8b Totals for all transactions reported on Form(s) 8949 with Box D checked  9 Totals for all transactions reported on Form(s) 8949 with Box E checked  10 Totals for all transactions reported on Form(s) 8949 with Box F checked  11 Enter gain from Form 4797, line 7 or 9	s and Losses - Asse (d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gor loss from Form(s) 89 Part II, line 2, column	949, (g)	Subtract column (e) from column (d) and combine the result with column (g)		
Part II Long-Term Capital Gain  See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars.  8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b  8b Totals for all transactions reported on Form(s) 8949 with Box D checked  9 Totals for all transactions reported on Form(s) 8949 with Box E checked  10 Totals for all transactions reported on Form(s) 8949 with Box F checked  11 Enter gain from Form 4797, line 7 or 9  12 Long-term capital gain from installment sales for	s and Losses - Asse (d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gror loss from Form(s) 89 Part II, line 2, column	11 12	Subtract column (e) from column (d) and combine the result with column (g)		
Part II Long-Term Capital Gain  See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars.  8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b  8b Totals for all transactions reported on Form(s) 8949 with Box D checked  9 Totals for all transactions reported on Form(s) 8949 with Box E checked  10 Totals for all transactions reported on Form(s) 8949 with Box F checked  11 Enter gain from Form 4797, line 7 or 9  12 Long-term capital gain from installment sales for 13 Long-term capital gain or (loss) from like-kind	s and Losses - Asso (d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gor loss from Form(s) 89 Part II, line 2, column	11 12 13	Subtract column (e) from column (d) and combine the result with column (g)		
Part II Long-Term Capital Gain  See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars.  8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b  8b Totals for all transactions reported on Form(s) 8949 with Box D checked  9 Totals for all transactions reported on Form(s) 8949 with Box E checked  10 Totals for all transactions reported on Form(s) 8949 with Box F checked  11 Enter gain from Form 4797, line 7 or 9  12 Long-term capital gain from installment sales fit 13 Long-term capital gain or (loss) from like-kind 14 Capital gain distributions	s and Losses - Asse (d) Proceeds (sales price)  rom Form 6252, line 26 or 37 exchanges from Form 8824	(e) (cost (or other basis)	(g) Adjustments to gror loss from Form(s) 89 Part II, line 2, column	11 12 13 14	Subtract column (e) from column (d) and combine the result with column (g)		
Part II Long-Term Capital Gain  See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars.  8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b  8b Totals for all transactions reported on Form(s) 8949 with Box D checked  9 Totals for all transactions reported on Form(s) 8949 with Box E checked  10 Totals for all transactions reported on Form(s) 8949 with Box F checked  11 Enter gain from Form 4797, line 7 or 9  12 Long-term capital gain from installment sales for 13 Long-term capital gain or (loss) from like-kind	s and Losses - Asse (d) Proceeds (sales price)  rom Form 6252, line 26 or 37 exchanges from Form 8824  lines 8a through 14 in column	(e) (cost (or other basis)	(g) Adjustments to gror loss from Form(s) 89 Part II, line 2, column	11 12 13	Subtract column (e) from column (d) and combine the result with column (g)		
Part II Long-Term Capital Gain  See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars.  8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b  8b Totals for all transactions reported on Form(s) 8949 with Box D checked  9 Totals for all transactions reported on Form(s) 8949 with Box E checked  10 Totals for all transactions reported on Form(s) 8949 with Box F checked  11 Enter gain from Form 4797, line 7 or 9  12 Long-term capital gain from installment sales fir 13 Long-term capital gain or (loss) from like-kind 14 Capital gain distributions  15 Net long-term capital gain or (loss). Combine I	s and Losses - Asso (d) Proceeds (sales price)	ets Held More Than (e) Cost (or other basis)	(g) Adjustments to gor loss from Form(s) 89 Part II, line 2, column	11 12 13 14	Subtract column (e) from column (d) and combine the result with column (g)  3,720.		
See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars.  8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b  8b Totals for all transactions reported on Form(s) 8949 with Box D checked  9 Totals for all transactions reported on Form(s) 8949 with Box E checked  10 Totals for all transactions reported on Form(s) 8949 with Box F checked  11 Enter gain from Form 4797, line 7 or 9  12 Long-term capital gain from installment sales find Long-term capital gain or (loss) from like-kind to Capital gain distributions  15 Net long-term capital gain or (loss). Combine I Part III Summary of Parts I and  16 Enter excess of net short-term capital gain (line 17 Net capital gain. Enter excess of net long-term capital gain.	s and Losses - Asso (d) Proceeds (sales price)  rom Form 6252, line 26 or 37 exchanges from Form 8824  lines 8a through 14 in column 11  17) over net long-term capita capital gain (line 15) over net	(e) Cost (or other basis)  1 loss (line 15) short-term capital loss (line	(g) Adjustments to gror loss from Form(s) 85 Part II, line 2, column	11 12 13 14	Subtract column (e) from column (d) and combine the result with column (g)  3,720.		
Part II Long-Term Capital Gain  See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars.  8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b  8b Totals for all transactions reported on Form(s) 8949 with Box D checked  9 Totals for all transactions reported on Form(s) 8949 with Box E checked  10 Totals for all transactions reported on Form(s) 8949 with Box F checked  11 Enter gain from Form 4797, line 7 or 9  12 Long-term capital gain from installment sales find Long-term capital gain or (loss) from like-kind to Capital gain distributions  15 Net long-term capital gain or (loss). Combine I Part III Summary of Parts I and	s and Losses - Asso (d) Proceeds (sales price)  rom Form 6252, line 26 or 37 exchanges from Form 8824  lines 8a through 14 in column 11  17) over net long-term capita capital gain (line 15) over net	(e) Cost (or other basis)  1 loss (line 15) short-term capital loss (line	(g) Adjustments to gror loss from Form(s) 85 Part II, line 2, column	11 12 13 14 15	Subtract column (e) from column (d) and combine the result with column (g)  3,720.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 1120. Schedule D (Form 1120) 2022

**SCHEDULE D** (Form 1120)

Department of the Treasury

Capital Gains and Losses

Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-RIC, 1120-RIC, 1120-SF, or certain Forms 990-T.

OMB No. 1545-0123

Internal Revenue Service	Go	to www.irs.gov/Form1120	for instructions and the la	test information.		LULL
Name					Empl	oyer identification number
THE COLORADO (	COLLEGE				84-	-0402510
Did the corporation dispos	•					Yes X No
If "Yes," attach Form 8949						
		s and Losses - Ass	ets Held One Yea	r or Less		1 (1) (2)
See instructions for how to fit to enter on the lines below.  This form may be easier to co	mplete if you	(d) Proceeds (sales price)	<b>(e)</b> Cost (or other basis)	(g) Adjustments to or loss from Form(s) & Part I, line 2, colum	3949,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the
round off cents to whole dolla			,	, ,		result with column (g)
1a Totals for all short-term t reported on Form 1099-B was reported to the IRS a have no adjustments (see However, if you choose to transactions on Form 894 blank and go to line 1b	for which basis and for which you sinstructions). To report all these					
<b>1b</b> Totals for all transactions	·					
Form(s) 8949 with <b>Box A</b>						
2 Totals for all transactions Form(s) 8949 with <b>Box B</b>	·					
3 Totals for all transactions						
Form(s) 8949 with <b>Box C</b>						
4 Short-term capital gain fr	om installment sales fro	om Form 6252, line 26 or 3	7		4	
5 Short-term capital gain or					5	
6 Unused capital loss carry					6	( )
					7	
Part II Long-Ter	m Capital Gains	and Losses - Ass	ets Held More Tha	n One Year		
See instructions for how to fit to enter on the lines below.	gure the amounts	(d) Proceeds	(e) Cost	(g) Adjustments to or loss from Form(s) (		(h) Gain or (loss) Subtract column (e) from
This form may be easier to co round off cents to whole dolla	mplete if you rs.	(sales price)	(or other basis)	Part II, line 2, colum		column (d) and combine the result with column (g)
8a Totals for all long-term tron Form 1099-B for whice reported to the IRS and for no adjustments (see instrifyou choose to report all on Form 8949, leave this line 8b	h basis was or which you have ructions). However, I these transactions					
8b Totals for all transactions	reported on					
Form(s) 8949 with <b>Box D</b>						
9 Totals for all transactions						
Form(s) 8949 with <b>Box E</b>						
10 Totals for all transactions	· ·					
Form(s) 8949 with <b>Box F</b>					1	3,720.
11 Enter gain from Form 479					11	
12 Long-term capital gain fr					12	
13 Long-term capital gain or	, ,	xchanges from Form 8824			13	
14 Capital gain distributions					14	2 700
15 Net long-term capital gai	n or (loss).  Combine lir v <b>of Parts I and I</b>		n h		15	3,720.
			al lane (line 45)		T 40	1
16 Enter excess of net short					16	2 720
17 Net capital gain. Enter exc					17	3,720. 3,720.
18 Add lines 16 and 17. Ente			plicable lille off other return	15	18	3,720.
Note: If losses exceed ga	nis, see Capital Losse	S III LIIE IIISLI UCTIONS.				

For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Schedule D (Form 1120) 2022

LHA

Form 8949 (2022)				Attachn	nent Sequen	ce No. 12A	Page 2
Name(s) shown on return. Name and	d SSN or taxpaye	er identification n	o. not required if	shown on page 1			rity number or entification no.
THE COLORADO COLLEGE						84-0	402510
Before you check Box D, E, or F below statement will have the same informations broker and may even tell you which it	ation as Form 103	ou received any 99-B. Either will s	r Form(s) 1099-B o show whether you	or substitute statem Ir basis (usually you	ent(s) from y r cost) was r	our broker. A sureported to the IF	bstitute RS by your
Part II Long-Term. Transacti see page 1.		al assets you held r	more than 1 year are	generally long-term (s	ee instruction	s). For short-term t	ransactions,
<b>Note:</b> You may aggregate all codes are required. Enter the							
You must check Box D, E, or F below. ( If you have more long-term transactions than will	Check only one bo	x. If more than one b	ox applies for your long	-term transactions, compl	ete a separate Fo	orm 8949, page 2, for	
(D) Long-term transactions rei					•		
(E) Long-term transactions rep		,	J		Note abov	0)	
(F) Long-term transactions no	•		•				
1 (a)	(b)	(c)	(d)	(e)		if any, to gain or	(h)
Description of property (Example: 100 sh. XYZ Co.)	Date acquired (Mo., day, yr.)	Date sold or disposed of	Proceeds (sales price)	Cost or other basis. See the	in column (g	enter an amount g), enter a code in See instructions.	Gain or (loss). Subtract column (e)
,		(Mo., day, yr.)		Note below and	(f)	(g)	from column (d) & combine the result
				see Column (e) in the instructions	Code(s)	Amount of adjustment	with column (g)
CD&R FUND X ENERGY A, LP						adjustificit	3,720.
,							,
					<del>                                     </del>		
2 Totals. Add the amounts in colu	mns (d), (e), (g), a	nd (h) (subtract					
negative amounts). Enter each to							
Schedule D, line 8b (if Box D abo	ove is checked),	line 9 (if Box E					
above is checked), or line 10 (if I		•					3,720.
Note: If you checked Box D above b	out the basis repo	orted to the IRS	was incorrect, ent	er in column (e) the	basis as rep	ported to the IRS	S, and enter an

Form **8949** (2022)

adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

С

Form **4797** 

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

Attach to your tax return.

Go to www.irs.gov/Form4797 for instructions and the latest information.

OMB No. 1545-0184

Identifying number THE COLORADO COLLEGE 84-0402510 1a Enter the gross proceeds from sales or exchanges reported to you for 2022 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 1a b Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of 1b c Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft-Most Property Held More Than 1 Year (see instructions) (f) Cost or other (e) Depreciation (g) Gain or (loss) (b) Date acquired (C) Date sold (a) Description (d) Gross sales basis, plus allowed or Subtract (f) from the of property (mo., day, yr.) (mo., day, yr.) price allowable since improvements and sum of (d) and (e) SEE STATEMENT 24 acquisition expense of sale Gain, if any, from Form 4684, line 39 3 Section 1231 gain from installment sales from Form 6252, line 26 or 37 4 Section 1231 gain or (loss) from like-kind exchanges from Form 8824 5 5 Gain, if any, from line 32, from other than casualty or theft 6 6 -259 894. 7 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows 7 Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below. Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below. 8 Nonrecaptured net section 1231 losses from prior years. See instructions 9 Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return. See instructions Part II Ordinary Gains and Losses (see instructions) Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less): CD&R FUND X WATERWORKS B, LP 69,884. 259,894. Loss, if any, from line 7 11 Gain, if any, from line 7 or amount from line 8, if applicable 12 12 Gain, if any, from line 31 13 13 Net gain or (loss) from Form 4684, lines 31 and 38a 14 14 Ordinary gain from installment sales from Form 6252, line 25 or 36 15 Ordinary gain or (loss) from like-kind exchanges from Form 8824 16 16 -190,010. 17 Combine lines 10 through 16 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines 18 a and b below. For individual returns, complete lines a and b below. If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions 18a b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 (Form 1040), Part I, line 4 18b

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 4797 (2022) THE COLORADO COLLEGE

Part III Gain From Disposition of Propert	ty Und	er Sections 1245,	1250, 1252	, 12	54, and 1255 (se	ee instructions)
<b>19</b> (a) Description of section 1245, 1250, 1252, 1254, o	or 1255 p	property:			(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)
A						
В						
С						
D						
These columns relate to the properties on lines 19A through 19D.		Property A	Property I	В	Property C	Property D
<b>20</b> Gross sales price ( <b>Note:</b> See line 1a before completing.)	20					
Cost or other basis plus expense of sale	21					
Depreciation (or depletion) allowed or allowable	22					
Adjusted basis. Subtract line 22 from line 21	23					
24 Total gain. Subtract line 23 from line 20	24					
25 If section 1245 property:						
a Depreciation allowed or allowable from line 22	25a					
<b>b</b> Enter the <b>smaller</b> of line 24 or 25a	25b					
<b>If section 1250 property:</b> If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.						
<b>a</b> Additional depreciation after 1975. See instructions	26a					
<b>b</b> Applicable percentage multiplied by the <b>smaller</b> of line 24 or line 26a. See instructions	26b					
c Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e	26c					
<b>d</b> Additional depreciation after 1969 and before 1976	26d					
e Enter the smaller of line 26c or 26d	26e					
f Section 291 amount (corporations only)	26f					
<b>g</b> Add lines 26b, 26e, and 26f	26g					
27 If section 1252 property: Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership.						
a Soil, water, and land clearing expenses	27a					
<b>b</b> Line 27a multiplied by applicable percentage	27b					
c Enter the smaller of line 24 or 27b	27c					
28 If section 1254 property:  a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions	28a					
<b>b</b> Enter the <b>smaller</b> of line 24 or 28a	28b					
<ul> <li>If section 1255 property:</li> <li>a Applicable percentage of payments excluded from income under section 126. See instructions</li> </ul>	29a					
<b>b</b> Enter the <b>smaller</b> of line 24 or 29a. See instructions	29b					
Summary of Part III Gains. Complete property of	a a lumana	A through D through li	as OOb bafara a	a o i o o	to line 20	
Complete property C	Joiuitiis	A tillough b tillough iil	ie zap belore (	Joing	to line 30.	
Total gains for all properties. Add property columns	A throu	gh D, line 24			30	)
Add property columns A through D, lines 25b, 26g,					3	1
32 Subtract line 31 from line 30. Enter the portion from		y or theft on Form 4684	4, line 33. Ente	r the	·	
from other than casualty or theft on Form 4797, line  Part IV Recapture Amounts Under Section	e 6 ons 179	9 and 280F(b)(2) W	/hen Busine	ess l	Use Drops to 50	2    % or Less
(see instructions)					T	
					(a) Section 179	(b) Section 280F(b)(2)
33 Section 179 expense deduction or depreciation allo	wable in	n prior years		33		
O4 December 1 december 1 december 2 december				34		
35 Recapture amount. Subtract line 34 from line 33. So				35		

FORM 4797	PRO	PERTY HELD	MORE THAN	ONE YEAR	ST.	ATEMENT 24
DESCRIPTION	DATE ACQUIRED	DATE SOLD	SALES PRICE	DEPR.	COST OR BASIS	GAIN OR LOSS
CD&R FUND X ENERGY A, LP						1,941.
CD&R FUND X WATERWORKS B, LP						170.
EIG ENERGY FUND XIV-A, LP						-18,662.
EIG ENERGY FUND XV-A, LP YORKTOWN ENERGY						-55,178.
PARTNERS X, LP YORKTOWN ENERGY						1,199.
PARTNERS XI, LP		_				-189,364.
TOTAL TO 4797, PA	RT I, LINE	2 =				-259,894.

A5084591

Form 8949 (2022)				Attachn	nent Sequen	ice No. 12A	Page 4
Name(s) shown on return. Name and	SSN or taxpaye	er identification n	o. not required if s	shown on page 1			ity number or ntification no.
THE COLORADO COLLEGE							102510
Before you check Box D, E, or F belo statement will have the same informa broker and mav even tell vou which k	ow, see whether y ation as Form 109 aox to check	ou received any 99-B. Either will s	Form(s) 1099-B o show whether you	r substitute statem r basis (usually you	ent(s) from y r cost) was r	our broker. A sul reported to the IR	ostitute S by your
Part II Long-Term. Transaction		al assets you held r	nore than 1 year are	generally long-term (s	ee instruction	s). For short-term tr	ansactions,
see page 1.  Note: You may aggregate all codes are required. Enter the	long-term transact	ions reported on F	orm(s) 1099-B showi	ng basis was reported	d to the IRS a	nd for which no adj	ustments or
You must check Box D, E, or F below. C	check only one bo	x. If more than one b	ox applies for your long-	term transactions, compl	ete a separate F	orm 8949, page 2, for 6	
If you have more long-term transactions than will  (D) Long-term transactions rep	, ,				•		
(E) Long-term transactions rep	•	,		,	Note abov	<i>(e)</i>	
(F) Long-term transactions not			•	ported to the mo			
1 (a)	(b)	(c)	(d)	(e)	Adjustment,	, if any, to gain or	(h)
Description of property	Date acquired	Date sold or	Proceeds	Cost or other	loss. If you	enter an amount g), enter a code in	Gain or (loss).
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of	(sales price)	basis. See the <b>Note</b> below and	column (f).	See instructions.	Subtract column (e) from column (d) &
		(Mo., day, yr.)		see Column (e) in	(f)	<b>(g)</b> Amount of	combine the result
				the instructions	Code(s)	adjustment	with column (g)
CD&R FUND X ENERGY A, LP							3,720.
					<del>                                     </del>		
2 Totals Add the amounts in salum	ans (d) (a) (a) a	nd (h) (subtract					
2 Totals. Add the amounts in colur negative amounts). Enter each to							
Schedule D, <b>line 8b</b> (if <b>Box D</b> abo		•					
above is checked), or <b>line 10</b> (if <b>E</b>	**	•					3,720.
,, == =================================		,		•			

**Note:** If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

Form **8949** (2022)

10130514 131839 A508459

Form **4797** 

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

Attach to your tax return.

Go to www.irs.gov/Form4797 for instructions and the latest information.

OMB No. 1545-0184

Attachment 2

Identifying number

THE COLORADO COLLEGE 84-0402510 1a Enter the gross proceeds from sales or exchanges reported to you for 2022 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 1a b Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of 1b c Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft-Most Property Held More Than 1 Year (see instructions) (f) Cost or other (e) Depreciation (g) Gain or (loss) (b) Date acquired (C) Date sold (a) Description (d) Gross sales basis, plus allowed or Subtract (f) from the of property (mo., day, yr.) (mo., day, yr.) price allowable since improvements and sum of (d) and (e) SEE STATEMENT 25 acquisition expense of sale Gain, if any, from Form 4684, line 39 3 Section 1231 gain from installment sales from Form 6252, line 26 or 37 4 Section 1231 gain or (loss) from like-kind exchanges from Form 8824 5 5 Gain, if any, from line 32, from other than casualty or theft 6 6 -259 894. 7 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows 7 Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below. Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below. 8 Nonrecaptured net section 1231 losses from prior years. See instructions 9 Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return. See instructions Part II Ordinary Gains and Losses (see instructions) Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less): CD&R FUND X WATERWORKS B, LP 69,884. 259,894. Loss, if any, from line 7 11 Gain, if any, from line 7 or amount from line 8, if applicable 12 12 Gain, if any, from line 31 13 13 14 14 Net gain or (loss) from Form 4684, lines 31 and 38a Ordinary gain from installment sales from Form 6252, line 25 or 36 15 Ordinary gain or (loss) from like-kind exchanges from Form 8824 16 16 -190,010. 17 Combine lines 10 through 16 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines 18 a and b below. For individual returns, complete lines a and b below. If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions 18a b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 (Form 1040), Part I, line 4 18b

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 4797 (2022) THE COLORADO COLLEGE

Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255 (see instructions)									
<b>19</b> (a) Description of section 1245, 1250, 1252, 1254, o	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)							
Α									
В									
С									
D									
These columns relate to the properties on lines 19A through 19D.		Property A	Property I	В	Property C	Property D			
<b>20</b> Gross sales price ( <b>Note:</b> See line 1a before completing.)	20								
Cost or other basis plus expense of sale	21								
Depreciation (or depletion) allowed or allowable	22								
Adjusted basis. Subtract line 22 from line 21	23								
24 Total gain. Subtract line 23 from line 20	24								
25 If section 1245 property:									
a Depreciation allowed or allowable from line 22	25a								
<b>b</b> Enter the <b>smaller</b> of line 24 or 25a	25b								
<b>If section 1250 property:</b> If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.									
<b>a</b> Additional depreciation after 1975. See instructions	26a								
<b>b</b> Applicable percentage multiplied by the <b>smaller</b> of line 24 or line 26a. See instructions	26b								
c Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e	26c								
<b>d</b> Additional depreciation after 1969 and before 1976	26d								
e Enter the smaller of line 26c or 26d	26e								
f Section 291 amount (corporations only)	26f								
<b>g</b> Add lines 26b, 26e, and 26f	26g								
27 If section 1252 property: Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership.									
a Soil, water, and land clearing expenses	27a								
<b>b</b> Line 27a multiplied by applicable percentage	27b								
c Enter the smaller of line 24 or 27b	27c								
28 If section 1254 property:  a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions	28a								
<b>b</b> Enter the <b>smaller</b> of line 24 or 28a	28b								
<ul> <li>If section 1255 property:</li> <li>a Applicable percentage of payments excluded from income under section 126. See instructions</li> </ul>	29a								
<b>b</b> Enter the <b>smaller</b> of line 24 or 29a. See instructions	29b								
Summary of Part III Gains. Complete property of	a a lumana	A through D through li	as OOb bafara a	a o i o o	to line 20				
Complete property C	Joiuitiis	A through b through in	ie zap belore (	Joing	to line 30.				
Total gains for all properties. Add property columns		30	)						
Add property columns A through D, lines 25b, 26g,		3	1						
32 Subtract line 31 from line 30. Enter the portion from	r the	·							
from other than casualty or theft on Form 4797, line  Part IV Recapture Amounts Under Section	e 6 ons 179	9 and 280F(b)(2) W	/hen Busine	ess l	Use Drops to 50	2    % or Less			
(see instructions)					T				
					(a) Section 179	(b) Section 280F(b)(2)			
3 Section 179 expense deduction or depreciation allowable in prior years									
4 Recomputed depreciation. See instructions 34									
5 Recapture amount. Subtract line 34 from line 33. See the instructions for where to report 38				35					

FORM 4797	PRO	PERTY HELI	MORE THAN	ONE YEAR	ST	ATEMENT 25
DESCRIPTION	DATE ACQUIRED	DATE SOLD	SALES PRICE	DEPR.	COST OR BASIS	GAIN OR LOSS
CD&R FUND X ENERGY A, LP CD&R FUND X						1,941.
WATERWORKS B, LP EIG ENERGY FUND						170.
XIV-A, LP EIG ENERGY FUND						-18,662.
XV-A, LP YORKTOWN ENERGY PARTNERS X, LP						-55,178. 1,199.
YORKTOWN ENERGY PARTNERS XI, LP						-189,364.
TOTAL TO 4797, PA	RT I, LINE	2				-259,894.