** PUBLIC DISCLOSURE 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

Intern	al Rever	ue Service GO to www.irs.gov/F	orm990 for instructions and t	me latest li	normatic	m.		Inspection			
A F	or the	2023 calendar year, or tax year beginning JU	L 1, 2023 and	ending J	UN 30,	2024					
B c	heck if oplicable	C Name of organization			D Emp	oloyer ide	entific	cation number			
	Addres change Name	UNIVERSITY OF COLORADO FOUNDATION			┨ .	81_6019	Ω11				
	Jchang∈ ⊤Initial				+	84-6049811					
	return Final return/	Number and street (or P.O. box if mail is not del 1800 GRANT STREET, SUITE 725	ivered to street address)	Room/suite	/suite E Telephone number 303-813-7935						
	termin ated	City or town, state or province, country, and	ZIP or foreign postal code		G Gross	receipts \$		342,190,499.			
	Ameno return	DENVER, CO 80203	H(a) Is this a group return								
	Application pendin	F Name and address of principal officer. Then	FINLAW		1	for subordinates? Yes X No H(b) Are all subordinates included? Yes No					
	27-076	empt status: X 501(c)(3) 501(c) ()	(insert no.) 4947(a)(1)	or 527	7 ' '			list. See instructions			
			(macreno.) +3+1(a)(1)	01 321		•					
	<u>Vebsit</u>	<u>. </u>	ossistion Other	1,				n number			
			sociation Other	L Year	of formation	on: 1967	N	A State of legal domicile: CO			
Pa	rt I	Summary									
ø		Briefly describe the organization's mission or most			OF COL	ORADO					
Governance		FOUNDATION IS THE PORTAL FOR PHILANTHE									
ern		<u>—</u>	ntinued its operations or dispos				1 1	sets. 19			
30		Number of voting members of the governing body (, , , , , , , , , , , , , , , , , , , ,				3	18			
<u>«</u>		Number of independent voting members of the gov					5	29			
ies		Total number of individuals employed in calendar y					6	18			
Activities &		Total number of volunteers (estimate if necessary)					7a	474,666.			
Ąċ		Total unrelated business revenue from Part VIII, col					7a 7b	0.			
	D	Net unrelated business taxable income from Form 9	990-1, Part 1, line 11			r Year	176	Current Year			
	0	Contributions and grants (Dort VIII line 1h)				6,188,3	55	224,143,162.			
ne						7,881,7	-	6,890,291.			
Revenue			1 7 - N			0,063,6	-	110,020,921.			
Be		Investment income (Part VIII, column (A), lines 3, 4,				0,003,0 0,446,6	-	1,136,125.			
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c,				4,580,3	_	342,190,499.			
		Total revenue - add lines 8 through 11 (must equal	· · · · · · · · · · · · · · · · · · ·			2,045,4	-	219,413,631.			
		Benefits paid to or for members (Part IX, column (A Salaries, other compensation, employee benefits (F				3,611,9	0. 59	3,976,249.			
Expenses		Professional fundraising fees (Part IX, column (A), li			1,030,508.			878,437.			
en		Total fundraising expenses (Part IX, column (D), line				1,000,0		0,70,137,			
Ĕ		Other expenses (Part IX, column (A), lines 11a-11d,		_	5	9,927,2	0.0	57,539,562.			
		Total expenses. Add lines 13-17 (must equal Part I)				6,615,1	_	281,807,879.			
		Revenue less expenses. Subtract line 18 from line				7,965,2	_	60,382,620.			
-Se		revende less expenses. Gabitaet line 10 nom line				Current Y	$\overline{}$	End of Year			
Net Assets or Fund Balances	20	Total assets (Part X, line 16)			•	8,394,0	-	3,233,557,618.			
Ass Bal	21	T				8,604,1	_	642,318,666.			
Net	22	Net assets or fund balances. Subtract line 21 from				9,789,8	_	2,591,238,952.			
Pa	rt II	Signature Block				· ·		· · ·			
Unde	er pena	ties of perjury, I declare that I have examined this return,	including accompanying schedules	s and statem	ents, and t	o the best	of my	knowledge and belief, it is			
true,	correc	t, and complete. Declaration of preparer (other than office	r) is based on all information of wh	nich preparer	has any ki	nowledge.					
Sigr	1	Signature of officer				Date					
Her	Э	JACK FINLAW, PRESIDENT & CEO									
		Type or print name and title									
		Print/Type preparer's name	Preparer's signature		Date	Che	ck	PTIN			
Paid		*	DORI J. EGGETT	þ	1/11/24	if self-	employ	P00645252			
Prep	arer	Firm's name PLANTE & MORAN, PLLC				Firm's EIN		38-1357951			
Use		Firm's address 8181 E TUFTS AVE, SUITE 60	0								
		DENVER, CO 80237				Phone no	303	-740-9400			
May	the IF	S discuss this return with the preparer shown above	/e? See instructions					X Yes No			

Pa	art 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:											
	THE UNIVERSITY OF COLORADO FOUNDATION IS THE PORTAL FOR PHILANTHROPIC											
	GIVING TO THE UNIVERSITY OF COLORADO AND IS RESPONSIBLE FOR RECEIVING,											
	MANAGING AND INVESTING THE ENDOWMENTS AND OTHER GIFT FUNDS THE											
	FOUNDATION HOLDS FOR THE BENEFIT OF CU.											
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 X No										
	If "Yes," describe these new services on Schedule O.											
3	,	Yes X No										
3	If "Yes," describe these changes on Schedule O.	res No										
	•											
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and											
		Delises, allu										
4-	revenue, if any, for each program service reported. (Code:) (Expenses \$219,413,631. including grants of \$219,413,631.) (Revenue \$)	7 551 750 \										
4a	SEE SCHEDULE O. (Code:) (Expenses \$) (Revenue \$)	7,331,730.										
	SEE SCHEDULE U.											
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)										
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$))										
4d	Other program services (Describe on Schedule O.)											
→u		1										
40	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses 219,413,631.											
46	Total program service expenses	Farra 990 (0000)										

Form 990 (2023) UNIVERSITY OF COLORADO FOUNDATION 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			
Ŭ	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	٣		
U		ء ا		x
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9	Х	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	$oxed{oxed}$
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	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
Ч	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		x
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	116		_
'	the organization's separate of 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		x
10-	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	 ' '''		
ıza	, ,	40-		x
	Schedule D, Parts XI and XII	12a		
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	40.	v	
۵.	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	-
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	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	<u> </u>
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	
	5			

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	· (continued)		Yes	No			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		162	NO_			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х			
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current						
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete						
	Schedule J	23	Х				
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the						
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete						
	Schedule K. If "No," go to line 25a	24a		Х			
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b					
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					
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d					
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		X			
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and						
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete						
	Schedule L, Part I	25b		X			
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			х			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27					
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?	28a		х			
h	"Yes," complete Schedule L, Part IV						
	A family member of any individual described in line 28a? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28b		X			
٠	"Yes," complete Schedule L, Part IV	28c		х			
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	Х				
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation						
	contributions? If "Yes," complete Schedule M	30		Х			
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х			
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>						
	Schedule N, Part II	32		Х			
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations						
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х			
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and						
	Part V, line 1	34	Х				
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х				
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity						
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Х			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			l			
	If "Yes," complete Schedule R, Part V, line 2	36		X			
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization						
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X			
38	,						
Pai	Note: All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	38	X				
ı al							
	Check if Schedule O contains a response or note to any line in this Part V			NI-			
4 -	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No			
_	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 19 Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0	-					
b	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming						
U	(gambling) winnings to prize winners?	1c	Х				
	(U U) F::						

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Form 990 (2023) UNIVERSITY OF COLORADO FOUNDATION

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

					Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,									
	filed for the calendar year ending with or within the year covered by this return	2a	29							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	•	2b	х					
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			За	Х					
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O									
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a									
	financial account in a foreign country (such as a bank account, securities account, or other financial a	accou	ınt)?	4a	Х					
b	If "Yes," enter the name of the foreign countryUNITED KINGDOM									
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ad	ccou	nts (FBAR).							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction	?	5b		Х				
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5с						
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e orç	anization solicit							
	any contributions that were not tax deductible as charitable contributions?			6a		Х				
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ions (or gifts							
	were not tax deductible?			6b						
7	Organizations that may receive deductible contributions under section 170(c).									
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	rvices	provided to the payor?	7a	Х					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Х					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as re	quired							
	to file Form 8282?			7c		Х				
d	If "Yes," indicate the number of Forms 8282 filed during the year	7 d								
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		ct?	7e		X				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f		X				
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g 7h						
_	, , , , ,									
8	,									
	sponsoring organization have excess business holdings at any time during the year?									
9	Sponsoring organizations maintaining donor advised funds.			0-		Х				
a				9a		X				
10				9b						
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12	10	.							
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	108		-						
11	Section 501(c)(12) organizations. Enter:	101	<u>' </u>	1						
	Gross income from members or shareholders	111	,							
	Gross income from other sources. (Do not net amounts due or paid to other sources against	<u> </u>	•	-						
-	amounts due or received from them.)	111	,							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		_	12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12	1							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		•							
а	Is the organization licensed to issue qualified health plans in more than one state?			13a						
	Note: See the instructions for additional information the organization must report on Schedule O.									
b	Enter the amount of reserves the organization is required to maintain by the states in which the									
	organization is licensed to issue qualified health plans	131)							
С	Enter the amount of reserves on hand	130	;							
				14a		Х				
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul	le O		14b						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner									
	excess parachute payment(s) during the year?			15		Х				
	If "Yes," see the instructions and file Form 4720, Schedule N.									
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t inco	me?	16		Х				
	If "Yes," complete Form 4720, Schedule O.									
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac									
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17						
	If "Yes," complete Form 6069.									

UNIVERSITY OF COLORADO FOUNDATION 84 - 6049811Page 6 Form 990 (2023) 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

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	9								
	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 0.									
b	Enter the number of voting members included on line 1a, above, who are independent 1b 18									
2										
	officer, director, trustee, or key employee?	2		Х						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			,,						
_	of officers, directors, trustees, or key employees to a management company or other person?	3		X						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X						
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X						
6	Did the organization have members or stockholders?	6		Х						
7a		_		_v						
	more members of the governing body?	7a		X						
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			x						
_	persons other than the governing body?	7b								
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	0-	х							
a		8a	X							
ь	Each committee with authority to act on behalf of the governing body?	8b	Λ							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	9		x						
Sec	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9								
	(This Section B requests information about policies not required by the internal Revenue Code.)		Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	10a	103	Х						
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100								
_	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										
12a		12a	х							
b		12b	Х							
С										
	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									
800	exempt status with respect to such arrangements?	16b	<u> </u>	<u> </u>						
	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS	10. 0 m l. 1	ove!!e!	ala						
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	s only)	avallal	oie						
	for public inspection. Indicate how you made these available. Check all that apply.									
40	X Own website Another's website X Upon request Other (explain on Schedule O)	d fire = -	oi ol							
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, are	u tinan	ciai							
20	statements available to the public during the tax year.									
20	State the name, address, and telephone number of the person who possesses the organization's books and records CHARLENE TAUS - 303-813-7905									

1800 GRANT STREET, SUITE 725, DENVER, CO 80203

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.

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

- List all of the organization's former 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.

(A) Name and title	(B) Average	(4)0	(C) Position (do not check more than one		(D) Reportable	(E) Reportable	(F) Estimated			
	hours per	box	, unle: cer ar	ss pei	rson i	s both	n an	compensation	compensation	amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer	Key employee	Highest compensated Employee		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) JACK FINLAW	40.00									
PRESIDENT & CEO		Х		Х				504,807.	0.	35,097.
(2) A. KELLER YOUNG, ESQ.	40.00									
SVP, GENERAL COUNSEL, CAO				Х				310,105.	0.	40,196.
(3) CHARLENE LAUS	40.00									
VP & CFO				Х				291,465.	0.	26,216.
(4) LYNNEA HUTTON	40.00									
VP, PEOPLE & CULTURE				Х				197,461.	0.	32,095.
(5) ELIZABETH SAYER	40.00	1								
CONTROLLER					Х			185,404.	0.	19,627.
(6) SASKIA SAWYER	40.00	1								
AVP GIFT SERVICES						Х		174,183.	0.	31,933.
(7) ANNIE BACCARY	1.00	1								
VP FOR ADVANCEMENT OPERATIONS		Х						0.	0.	0.
(8) BRIAN DOLAN	1.00	1								
DIRECTOR		Х						0.	0.	0.
(9) MICHAEL DONNELLY	1.00	1								
DIRECTOR		Х						0.	0.	0.
(10) ILANA DUBIN-SPIEGEL	1.00	1								
UNVERSITY REGENT		Х						0.	0.	0.
(11) NAN EKLUND	1.00	1								
DIRECTOR		Х						0.	0.	0.
(12) WILLIAM K. FISHER	1.00	l								
DIRECTOR	1 00	Х						0.	0.	0.
(13) TODD FREDRICKSON	1.00	ł								
DIRECTOR	1 00	Х						0.	0.	0.
(14) TANYA KELLY-BOWRY	1.00	ł								
DIRECTOR	1 00	Х	_					0.	0.	0.
(15) LISA KETTERING	1.00	٠,,								
DIRECTOR (16) GCOUNT KINGDOM	1 00	Х	-			-		0.	0.	0.
(16) SCOTT KINGDOM DIRECTOR	1.00	х						0.	0.	_
(17) KEVIN KRATT	1.00	<u> </u>	\vdash			\vdash	 	1	0.	0.
DIRECTOR	1.00	x						0.	0.	_
DIRECTOR		Λ					<u> </u>	<u> </u>	ı	0.

Form 990 (2023) 332007 12-21-23

Form 990 (2023) UNIVERSITY O	r COLORADO	FOU.	NDA.	TTO	N				84-604981	1 Page 8	
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
(A)	(B)		(D)	(E)	(F)						
Name and title	Average	(do	Position (do not check more than one				nne	Reportable	Reportable	Estimated	
	hours per	box	, unles	ss per	son i	s both	n an	compensation	compensation	amount of	
	week (list any		l an		Tecto	i/ii us	(66)	from	from related	other	
	hours for	lirecto						the organization	organizations (W-2/1099-MISC/	compensation from the	
	related	e or (stee			ısatec		(W-2/1099-MISC/	1099-NEC)	organization	
	organizations	ndividual trustee or director	Institutional trustee		yee	эшы		1099-NEC)	,	and related	
	below	ridual	tution	Ja.	Key employee	est co loyee	ıer	·		organizations	
	line)	Indiv	Insti	Officer	Key 6	Highest compensated employee	Former				
(18) PATTY IMHOFF	1.00										
DIRECTOR		Х						0.	0.	0.	
(19) JEREMY O. MAY	1.00										
DIRECTOR		Х						0.	0.	0.	
(20) BECKY L. MEDVED	1.00										
DIRECTOR		Х						0.	0.	0.	
(21) GARY MEGGISON	1.00										
DIRECTOR		Х						0.	0.	0.	
(22) WILLIAM NELSON	1.00										
DIRECTOR		Х						0.	0.	0.	
(23) TODD SALIMAN	1.00										
UNIVERSITY PRESIDENT		Х						0.	0.	0.	
(24) HEIDI WAGNER	1.00										
DIRECTOR		Х						0.	0.	0.	
(25) BARBARA WINTER	1.00										
DIRECTOR		Х						0.	0.	0.	
(26) CAROLE YALEY	1.00										
DIRECTOR		Х						0.	0.	0.	
1b Subtotal								1,663,425.	0.	185,164.	
c Total from continuation sheets to Part VI	,							0.	0.	0.	
d Total (add lines 1b and 1c)								1,663,425.	0.	185,164.	

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

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

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

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 X

Section B. Independent Contractors

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

	(D)	(0)
(A)	(B)	(C)
Name and business address	Description of services	Compensation
CERITY PARTNERS OCIO, 7979 E TUFTS AVE,		
SUITE 700, DENVER, CO 80237	INVESTMENT MANAGER	5,120,891.
CHARLESBANK, 200 CLARENDON ST, 54TH FLOOR,		
BOSTON, MA 02116	INVESTMENT MANAGER	1,173,141.
VISION RIDGE PARTNERS, 1011 WALNUT ST,		
SUITE 400, BOULDER, CO 80302	INVESTMENT MANAGER	1,159,524.
AQUA CAPITAL, AV. CIDADE JARDIM 803, 6TH		
FLOOR, SAO PAULO, BRAZIL 01453-00	INVESTMENT MANAGER	1,118,385.
TEMBO CAPITAL MANAGEMENT, 7-9 SWALLOW ST,		
LONDON, UNITED KINGDOM W1B 4DE	INVESTMENT MANAGER	973,325.
2 Total number of independent contractors (including but not limited to t	hose listed above) who received more than	
\$100,000 of compensation from the organization	39	
	•	200

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2023)

6

Form 990 UNIVERSITY OF COLORADO FOUNDATION 84-6049811												
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
(A) Name and title	(B) Average hours	(cl	(C) (D) Position Reportable compensation						(E) Reportable compensation	(F) 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) MELINDA H. YEE	1.00											
DIRECTOR		Х						0.	0.	0		
otal to Part VII, Section A, line 1c												

Form 990 (2023) UNIVERSITY
Part VIII Statement of Revenue

	Check if Schedule O contains a response or note to any line in this Part VIII										
		·	_	(A)	(B)	(C)	(D)				
				Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under				
					function revenue	business revenue	sections 512 - 514				
S G	1 2	Federated campaigns 1a									
art											
9		Membership dues 1b 1c 1c									
Contributions, Gifts, Grants and Other Similar Amounts		Related organizations 1d									
ig ig											
Sir		ÿ \ / 									
e Hi	1	All other contributions, gifts, grants, and	224,143,162.								
ë	_	similar amounts not included above 1f	21,236,537.								
out	_	Noncash contributions included in lines 1a-1f	21,230,337.	224 142 162							
<u>0</u> 8	n	Total. Add lines 1a-1f	Bt Ot-	224,143,162.							
		ADV. GUDD. GUGDDTAL. EDG	Business Code	6 000 001	6 000 001						
<u>e</u>	2 a	ADV SUPP CUSTODIAL FDS	611710	6,890,291.	6,890,291.						
ē Š	b										
Sch	С	•									
ev ev	d	l									
Program Service Revenue	е										
₫	f	All other program service revenue									
	g	Total. Add lines 2a-2f		6,890,291.							
	3	Investment income (including dividends, inter-	est, and								
		other similar amounts)		30,087,549.			30,087,549.				
	4	Income from investment of tax-exempt bond;	oroceeds								
	5	Royalties									
		(i) Real	(ii) Personal								
	6 a	Gross rents 6a									
		Less: rental expenses 6b									
	c	Rental income or (loss) 6c									
		Net rental income or (loss)									
		Gross amount from sales of (i) Securities	(ii) Other								
		assets other than inventory 7a 79,933,372.									
	b	Less: cost or other basis									
<u>o</u>		and sales expenses 7b 0	.								
en.	c	Gain or (loss) 7c 79,933,372									
ther Revenue		Net gain or (loss)		79,933,372.			79,933,372.				
ē		Gross income from fundraising events (not					. ,				
ŧ	0 4	including \$ of									
		contributions reported on line 1c). See									
		Part IV, line 18	,								
	h	Less: direct expenses									
		Net income or (loss) from fundraising events									
		Gross income from gaming activities. See									
	Ja	Part IV, line 19 9a	,								
	h	Less: direct expenses 9t									
		Net income or (loss) from gaming activities	, i								
	10 a	Gross sales of inventory, less returns									
		and allowances 10									
		Less: cost of goods sold 10	<u> </u>								
\dashv	<u> </u>	Net income or (loss) from sales of inventory	Business Code								
S _D	44 -	UBIT REVENUE	523000	474,666.		474,666.					
je ne			900099	335,962.	335,962.	±/±,000.					
Miscellaneous Revenue	b	DUES REVENUE	611710	325,497.	325,497.						
Sce Be	_		011/10	323,437.	323,497.						
Ĕ		All other revenue		1 126 125							
		Total. Add lines 11a-11d		1,136,125.	7 551 750	174 666	110 020 021				
	12	Total revenue. See instructions		342,190,499.	7,551,750.	4/4,000.	110,020,921.				

332009 12-21-23

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 respons	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	219,413,631.	219,413,631.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
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	1,848,589.		1,848,589.	
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	1,427,319.		1,427,319.	
8	Pension plan accruals and contributions (include			•	
	section 401(k) and 403(b) employer contributions)	306,761.		306,761.	
9	Other employee benefits	172,621.		172,621.	
0	Payroll taxes	220,959.		220,959.	
1	Fees for services (nonemployees):	·		·	
a	Management				
b	Legal	15,831.		15,831.	
c	Accounting	215,571.		215,571.	
d	Lobbying	,		,	
e	Professional fundraising services. See Part IV, line 17	878,437.			878,43
f	Investment management fees	19,480,156.		19,480,156.	,
g	Other. (If line 11g amount exceeds 10% of line 25,	, ,		, ,	
9	column (A), amount, list line 11g expenses on Sch O.)	36,267,341.		224,562.	36,042,779
12	Advertising and promotion	, ,		,	, ,
13	Office expenses	433,997.		433,997.	
14	Information technology	294,049.		294,049.	
5	Royalties	,		,	
16	Occupancy	147,394.		147,394.	
7	Travel	31,684.		31,684.	
8	Payments of travel or entertainment expenses	·			
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	204,602.		204,602.	
20	Interest	,		,	
.o 21	Payments to affiliates				
22	Depreciation, depletion, and amortization	72,865.		72,865.	
:3	Insurance	209,001.		209,001.	
4	Other expenses. Itemize expenses not covered	·			
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	PROFESSIONAL DEVELOPMEN	143,198.		143,198.	
b	DUES/MEMBERSHIPS/SUBSCR	20,107.		20,107.	
С	MISCELLANEOUS OPERATING	3,766.		3,766.	
d					
е	All other expenses				
5	Total functional expenses. Add lines 1 through 24e	281,807,879.	219,413,631.	25,473,032.	36,921,216
6	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2023) Part X | Balance Sheet

Par	t X	Balance Sheet					
		Check if Schedule O contains a response or no	te to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				1	3
	2	Savings and temporary cash investments	23,507,623.	2	84,071,999		
	3	Pledges and grants receivable, net	162,887,196.	3	142,374,488		
	4	Accounts receivable, net			701,146.	4	231,03
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, subs	stantial c	contributor, or 35%			
		controlled entity or family member of any of the	ese pers	onsL		5	
	6	Loans and other receivables from other disqua	lified per	sons (as defined			
		under section 4958(f)(1)), and persons describe	ed in sec	tion 4958(c)(3)(B)		6	
ပ္ပ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
¥	9	Description of the second state of the second			86,785.	9	928,34
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	5,570,216.			
	b	Less: accumulated depreciation	10b	4,506,871.	1,129,227.	10c	1,063,34
	11	Investments - publicly traded securities			582,597,537.	11	751,625,63
	12	Investments - other securities. See Part IV, line			2,234,136,553.	12	2,210,366,35
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11	43,347,944.	15	42,896,42		
	16	Total assets. Add lines 1 through 15 (must eq			3,048,394,011.	16	3,233,557,61
	17	Accounts payable and accrued expenses			10,716,227.	17	13,506,08
	18	Grants payable				18	
	19	Deferred revenue			227,289.	19	193,02
	20				20		
	21	Escrow or custodial account liability. Complete			588,228,246.	21	608,911,35
္ပ	22	Loans and other payables to any current or for	mer offic	er, director,			
≘		trustee, key employee, creator or founder, subs	stantial c	contributor, or 35%			
Liabilities		controlled entity or family member of any of the	ese pers	ons		22	
5	23	Secured mortgages and notes payable to unre	lated thi	rd parties		23	
	24	Unsecured notes and loans payable to unrelate	ed third p	oarties		24	
	25	Other liabilities (including federal income tax, p	ayables	to related third			
		parties, and other liabilities not included on line	s 17-24)	. Complete Part X			
		of Schedule D			19,432,364.	25	19,708,19
	26	Total liabilities. Add lines 17 through 25			618,604,126.	26	642,318,66
		Organizations that follow FASB ASC 958, ch	eck her	e X			
Ses		and complete lines 27, 28, 32, and 33.					
ă	27	Net assets without donor restrictions			51,550,496.	27	58,053,67
g	28	Net assets with donor restrictions		<u></u>	2,378,239,389.	28	2,533,185,278
밀		Organizations that do not follow FASB ASC	958, che	eck here			
된		and complete lines 29 through 33.					
ଟ୍ରା	29	Capital stock or trust principal, or current funds	3			29	
set	30	Paid-in or capital surplus, or land, building, or e	quipme	nt fund		30	
As	31	Retained earnings, endowment, accumulated i	ncome,	or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances			2,429,789,885.	32	2,591,238,952
	33				3,048,394,011.	33	3,233,557,618

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				Х
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3	42,19	0,499.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2	81,80	7,879.
3	Revenue less expenses. Subtract line 2 from line 1	3		60,38	2,620.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,4	29,78	9,885.
5	Net unrealized gains (losses) on investments	5	1	04,34	5,277.
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		-3,27	8,830.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	2,5	91,23	8,952.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u> </u>
			_	Ye	s No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a	Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2	b X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	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?		2	c X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O			
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?			Ba	Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audi	t		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3	b	
			_	\sim	n (2222)

SCHEDULE A

(Form 990)

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.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization **Employer identification number** UNIVERSITY OF COLORADO FOUNDATION 84-6049811 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: X An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from 10 activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions)) Total

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.)

Calendar year (or fiscal year beginning in) 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 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,	(f) Total 1179265546.							
membership fees received. (Do not include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 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,								
include any "unusual grants.") 193,433,008. 262,612,492. 192,888,529. 306,188,355. 224,143,162. Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 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,								
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3								
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	1179265546.							
or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 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,	1179265546.							
The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 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,	1179265546.							
furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3	1179265546.							
the organization without charge 4 Total. Add lines 1 through 3	1179265546.							
Total. Add lines 1 through 3	1179265546.							
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11,	1179265546.							
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11,								
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,								
governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11,								
on line 1 that exceeds 2% of the amount shown on line 11,								
on line 1 that exceeds 2% of the amount shown on line 11,								
column (f)	121,625,781.							
6 Public support, Subtract line 5 from line 4.	1057639765.							
Section B. Total Support								
Calendar year (or fiscal year beginning in) (a) 2019 (b) 2020 (c) 2021 (d) 2022 (e) 2023	(f) Total							
7 Amounts from line 4 193,433,008. 262,612,492. 192,888,529. 306,188,355. 224,143,162.	1179265546.							
8 Gross income from interest,								
dividends, payments received on								
securities loans, rents, royalties,								
	174,844,369.							
9 Net income from unrelated business								
activities, whether or not the								
business is regularly carried on								
10 Other income. Do not include gain								
or loss from the sale of capital								
assets (Explain in Part VI.) 2,170,920. 477,799. 232,625. 1,926,092. 661,459.	5,468,895.							
11 Total support. Add lines 7 through 10	1359578810.							
12 Gross receipts from related activities, etc. (see instructions)	18,529,229.							
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)								
Section C. Computation of Public Support Percentage								
14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))	77.79 %							
15 Public support percentage from 2022 Schedule A, Part II, line 14	79.06 %							
16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box								
stop here. The organization qualifies as a publicly supported organization								
b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this								
and stop here. The organization qualifies as a publicly supported organization								
17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or								
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								
b 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 1	U70 UI							
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								
Schedule A (Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions							

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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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support	Т	T	T	1	T	1
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b,						
	whether or not the business is						
10	regularly carried on Other income. Do not include gain						
12	or loss from the sale of capital						
40	assets (Explain in Part VI.)				-		
	Total support. (Add lines 9, 10c, 11, and 12.)				<u> </u>	04(-)(0) - : ::	
14	First 5 years. If the Form 990 is for the	•		•	•		
Se	check this box and stop here ction C. Computation of Publi						
	Public support percentage for 2023 (I			column (fl)		15	%
	Public support percentage from 2022	, (,,	,			16	<u>%</u> %
	ction D. Computation of Inves					, 10	70
	Investment income percentage for 20			ne 13. column (f))		17	%
	Investment income percentage from					18	<u> </u>
	33 1/3% support tests - 2023. If the						
	more than 33 1/3%, check this box ar						
b	33 1/3% support tests - 2022. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation If the organization						

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Schedule A (Form 990) 2023

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Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
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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	A family member of a person described on line 11a above?	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		163	140
•	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	1		
2	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	•		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
Sec	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2		
000	Tion 6. Type it Supporting Organizations		· ·	
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
800	the supported organization(s). tion D. All Type III Supporting Organizations	_1		
360	tion b. All Type III Supporting Organizations		1	
_			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described 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			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see inst	truction	s).	
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 Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b				
	of its supported organizations? If "Ves " describe in Part VI the role played by the organization in this regard	3b		

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Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organi	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on N	Nov. 20, 1970 (explain in I	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must	st complete	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
_3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 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 Year
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-functional	ally integrate	d Type III supporting orga	nization (see
	instructions).			

Schedule A (Form 990) 2023

Current Year
(iii) Distributable nount for 2023

Schedule A (Form 990) 2023

e Excess from 2023

Schedule A (Form 990) 2023 UNIVERSITY OF COLORADO FOUNDATION	84-6049811	Page 8
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Pa Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional (See instructions.)	es 1 and 2; Part IV, Section art V, Section B, line 1e; Pa	n C,
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:		
OTHER INCOME		
2019 AMOUNT: \$ 2,170,920.		
2020 AMOUNT: \$ 477,799.		
2021 AMOUNT: \$ 232,625.		
2022 AMOUNT: \$ 1,926,092.		
2023 AMOUNT: \$ 661,459.		

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No. 1545-0047

2023

Employer identification number

UN	IVERSITY OF COLORADO FOUNDATION	84-6049811						
Organization type (check	one):							
Filers of:	Section:							
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization							
	4947(a)(1) nonexempt charitable trust not treated as a private foundation							
	527 political organization							
Form 990-PF	501(c)(3) exempt private foundation	501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
	is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	le. See instructions.						
General Rule								
-	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling yone contributor. Complete Parts I and II. See instructions for determining a contributor?	•						
Special Rules								
sections 509(a)(1) contributor, durin	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support of and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and g the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) IZ, line 1. Complete Parts I and II.	d that received from any one						
contributor, durin literary, or educat	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a general than \$1,000 exclusively for religious, charitable, so ional purposes, or for the prevention of cruelty to children or animals. Complete Parts I (eb) instead of the contributor name and address), II, and III.	cientific,						
For an organization year, contribution is checked, enter purpose. Don't contribution is contribution is checked, enter purpose.	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a section section so exclusively for religious, charitable, etc., purposes, but no such contributions totaled make the total contributions that were received during the year for an exclusively religious complete any of the parts unless the General Rule applies to this organization because it let, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000. If this box s, charitable, etc., received <i>nonexclusively</i>						
answer "No" on Part IV, lin	hat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fore 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, and requirements of Schedule B (Form 990).	•						
For Paperwork Reduction Ac	t Notice, see the instructions for Form 990, 990-EZ, or 990-PF.	Schedule B (Form 990) (2023)						

Schedule B (Form 990) (2023) Page **2**

Name of organization

Employer identification number

UNIVERSITY OF COLORADO FOUNDATION

84-6049811

Part I	Contributors (see instructions). Use duplicate copies of Part I if ad	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribut	tion
1		Person X Payroll Noncash (Complete Part II for noncash contribution	
(a)	(b)	(c) (d)	
No. 2	Name, address, and ZIP + 4	Total contributions Person X Payroll Noncash (Complete Part II for noncash contribution)	
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribut	tion
3		Person X Payroll Noncash (Complete Part II for noncash contribution	
(a)	(b)	(c) (d)	
No. 4	Name, address, and ZIP + 4	Total contributions Type of contribut Person X Payroll Noncash (Complete Part II for noncash contribution	
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribut	tion
5	Thing don't built 1. T	Person X Payroll Noncash (Complete Part II for noncash contribution	
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribut	tion
6	nume, audi 655, unu Eli TT	Person X Payroll Noncash (Complete Part II for noncash contribution	

Schedule B (Form 990) (2023)

Name of organization

Employer identification number

UNIVERSITY OF COLORADO FOUNDATION

84-6049811

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

Schedule B (Form 990) (2023) Page **3**

Name of organization

Employer identification number

UNIVERSITY OF COLORADO FOUNDATION

84-6049811

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) (2023)

Name of organization **Employer identification number** UNIVERSITY OF COLORADO FOUNDATION 84 - 6049811Part 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

Page 4

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

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

2023

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

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:

		<u> </u>			
1	Provide a description of the organiz				
2	Political campaign activity expendit	ures		\$	
3	Volunteer hours for political campai				
Pa	rt I-B Complete if the org	janization is exempt und	er section 501(c)(3).	
1	Enter the amount of any excise tax	incurred by the organization und	der section 4955	\$	
	Enter the amount of any excise tax		ers under section 4955	\$	
	If the organization incurred a section				
4a	Was a correction made?				Yes No
b	If "Yes." describe in Part IV.				
Pa	rt I-C Complete if the org	janization is exempt und	er section 501(c),	except section 501(c))(3).
1	Enter the amount directly expended	d by the filing organization for se	ction 527 exempt funct	tion activities\$	
2	Enter the amount of the filing organ	ization's funds contributed to ot	ther organizations for se	ection 527	
	exempt function activities			\$	
3	Total exempt function expenditures	s. Add lines 1 and 2. Enter here a	and on Form 1120-POL,	,	
	line 17b				
4	Did the filing organization file Form				
5	Enter the names, addresses, and en	· ·	•	_	
	made payments. For each organiza				
	contributions received that were propolitical action committee (PAC). If				e segregated fund or a
	. ,	1 71			T
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds. If none, enter -0	promptly and directly
					delivered to a separate
					political organization. If none, enter -0
					il florie, effici -o

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

Schedule C (Form 990) 2023

	rt II-A Complete if the org			npt under section	501(c)(3) and file	ed Form 5768 (ele	ction under
	Check if the filing organiza expenses, and shar	e of excess lobby	ing e	iated group (and list in expenditures). nd "limited control" pro		group member's name	e, address, EIN,
	Limit	ts on Lobbying E	xper		······································	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influ	uence public opini	on (g	grassroots lobbying)			
b	Total lobbying expenditures to influ	uence a legislative	bod	y (direct lobbying)			
c	Total lobbying expenditures (add lin	nes 1a and 1b)					
	Other exempt purpose expenditure					225,406,507.	
e	Total exempt purpose expenditures	s (add lines 1c an	d 1d)		225,406,507.	
f	Lobbying nontaxable amount. Ente	er the amount fror	n the	following table in both	columns.	1,000,000.	
	If the amount on line 1e, column (a) o	r (b) is: The	lob	bying nontaxable amo	ount is:		
	not over \$500,000,	209	6 of 1	the amount on line 1e.			
	over \$500,000 but not over \$1,000	,000, \$10	0,00	00 plus 15% of the exce	ess over \$500,000.		
	over \$1,000,000 but not over \$1,50	00,000, \$17	'5,0C	00 plus 10% of the exce	ess over \$1,000,000.		
	over \$1,500,000 but not over \$17,0	000,000, \$22	25,00	00 plus 5% of the exces	s over \$1,500,000.		
	over \$17,000,000,	\$1,	000,0	000.			
ç	Grassroots nontaxable amount (en	ter 25% of line 1f)				250,000.	
h	h Subtract line 1g from line 1a. If zero or less, enter -0-				0.		
i	i Subtract line 15 from line 1c. If zero or less, enter -0-			0.			
j	If there is an amount other than zer	ro on either line 1	n or I	ine 1i, did the organiza	tion file Form 4720	_	
	reporting section 4911 tax for this	year?					Yes No
	(Some organizations th	nat made a secti	on 50	eraging Period Under 01(h) election do not h ate instructions for lin	nave to complete all c	of the five columns be	elow.
		Lobbying E	xper	nditures During 4-Yea	r Averaging Period		
	Calendar year (or fiscal year beginning in)	(a) 2020		(b) 2021	(c) 2022	(d) 2023	(e) Total
_2a	Lobbying nontaxable amount	1,000,0	00.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b	Lobbying ceiling amount (150% of line 2a, column(e))						6,000,000.
	: Total lobbying expenditures						
	Grassroots nontaxable amount	250,0	00.	250,000.	250,000.	250,000.	1,000,000.
— e	Grassroots ceiling amount (150% of line 2d, column (e))						1,500,000.

Schedule C (Form 990) 2023

f Grassroots lobbying expenditures

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)).

1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), 501(c)(6).	1(c)(5), or se	r section Yes 1	mount
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? 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 filling organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), 501(c)(6).	1 2	Yes	
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? 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 filling organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), 501(c)(6).	1 2	Yes	
or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? 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 filling organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), 501(c)(6).	1 2	Yes	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), 501(c)(6).	1 2	Yes	
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d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), 501(c)(6).	1 2	Yes	
d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), 501(c)(6).	1 2	Yes	
f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), 501(c)(6).	1 2	Yes	
g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), 501(c)(6).	1 2	Yes	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), 501(c)(6).	1 2	Yes	
i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), 501(c)(6).	1 2	Yes	
j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), 501(c)(6).	1 2	Yes	
Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), 501(c)(6). 1 Were substantially all (90% or more) dues received nondeductible by members?	1 2	Yes	
b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), 501(c)(6).	1 2	Yes	
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? eart III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), 501(c)(6).	1 2	Yes	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Eart III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), 501(c)(6). 1 Were substantially all (90% or more) dues received nondeductible by members?	1 2	Yes	
Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), 501(c)(6). 1 Were substantially all (90% or more) dues received nondeductible by members?	1 2	Yes	
501(c)(6). 1 Were substantially all (90% or more) dues received nondeductible by members?	1 2	Yes	
Were substantially all (90% or more) dues received nondeductible by members?	2	1	
	2		T N
	2		+-
			+
B Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	r vear? 3	3	+
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5),			
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) answered "Yes." 1 Dues, assessments and similar amounts from members			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political			
expenses for which the section 527(f) tax was paid).			
a Current year			
<i>f</i>	2a	2 a	
	2b	2b	
b Carryover from last year c Total	2b 2c	2b 2c	
b Carryover from last year c Total	2b 2c 3	2b 2c	
b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	2b 2c 3	2b 2c	
 b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year? 	2b 2c 3	2b 2c 3	
 b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year? 5 Taxable amount of lobbying and political expenditures. See instructions 	2b 2c 3	2b 2c 3 4	
 b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year? 	2b 2c 3	2b 2c 3 4	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Inspection

Name of the organization

UNIVERSITY OF COLORADO FOUNDATION

Employer identification number 84 - 6049811

Par		ds or Other S	imilar Funds o	r Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line 6.			
		(a) Donor advise	d funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writing t	hat the assets he	ld in donor advised	funds
	are the organization's property, subject to the organization's exclusive	e legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor advisors	in writing that gra	ant funds can be us	ed only
	for charitable purposes and not for the benefit of the donor or donor	advisor, or for an	y other purpose co	nferring
	impermissible private benefit?			
Par	Complete water Cigarina		s" on Form 990, Pa	rt IV, line 7.
1	Purpose(s) of conservation easements held by the organization (chec		-	
	Preservation of land for public use (for example, recreation or example).	education)	Preservation of a	historically important land area
	Protection of natural habitat		Preservation of a	certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified con	servation contrib	ution in the form of	
	day of the tax year.			Held at the End of the Tax Year
_	Total number of conservation easements			
b				
С.	Number of conservation easements on a certified historic structure in			2c
d	Number of conservation easements included on line 2c acquired after			
•	on a historic structure listed in the National Register			
3	Number of conservation easements modified, transferred, released,	extinguisnea, or t	erminated by the or	ganization during the tax
4	Number of states where preparts subject to concernation accomment	ia lagatad		
4 5	Number of states where property subject to conservation easement Does the organization have a written policy regarding the periodic m		ion bandling of	
3	violations, and enforcement of the conservation easements it holds?		_	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handlin		d enforcing conser	
Ū	Ctan and volunteer risars develou to mornioring, inspecting, narraini	g or violations, ar	a criteroning correct	valien easements daring the year
7	Amount of expenses incurred in monitoring, inspecting, handling of	violations, and en	forcing conservation	n easements during the year
-	, and an experience in carried in the intering, interesting, that taking ex		.o. og comes rane	caccinente aaning and year
8	Does each conservation easement reported on line 2d above satisfy	the requirements	of section 170(h)(4))(B)(i)
	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservation ease			
	balance sheet, and include, if applicable, the text of the footnote to t	he organization's	financial statement	ts that describes the
	organization's accounting for conservation easements.			
Par	t III Organizations Maintaining Collections of Art, I	distorical Tre	asures, or Othe	er Similar Assets.
	Complete if the organization answered "Yes" on Form 990, P.	art IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 958, not to	o report in its reve	enue statement and	balance sheet works
	of art, historical treasures, or other similar assets held for public exhi	bition, education,	or research in furth	nerance of public
	service, provide in Part XIII the text of the footnote to its financial sta	tements that des	cribes these items.	
b	If the organization elected, as permitted under FASB ASC 958, to re	port in its revenue	statement and bal	ance sheet works of
	art, historical treasures, or other similar assets held for public exhibit	ion, education, o	research in further	ance 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			
2	If the organization received or held works of art, historical treasures, $% \left(1\right) =\left(1\right) \left(1\right) \left$	or other similar a	ssets for financial g	ain, provide
	the following amounts required to be reported under FASB ASC 958	-		
а	Revenue included on Form 990, Part VIII, line 1			
	Assets included in Form 990, Part X			
LHA	For Paperwork Reduction Act Notice, see the Instructions for Fo	rm 990.		Schedule D (Form 990) 202

	t III Organizations Maintaining C	ollections of Ar		easures, or	Other 9	Similar Ass	ets (contin		age Z
3	Using the organization's acquisition, accessi						100	idea)	
Ū	collection items (check all that apply).	on, and out of 100014	o, oncon any or me	ronowning triat	mano oigi	inioani acc or i	.0		
а	Public exhibition	c	I Dan or exc	change prograi	m				
b	Scholarly research	6		riange prograi					
c	Preservation for future generations	•	, outer						
4	Provide a description of the organization's co	ollections and explain	n how they further th	ne organization	n's exemr	nt nurnose in P	art XIII		
5	During the year, did the organization solicit o						art Am.		
Ū	to be sold to raise funds rather than to be ma						Yes		No
Pai	t IV Escrow and Custodial Arran								
	reported an amount on Form 990, Pa		g			,	,,		
1a	Is the organization an agent, trustee, custodi	an, or other intermed	diary for contribution	ns or other ass	ets not in	ncluded			
	on Form 990, Part X?						Yes	X	No
b	If "Yes," explain the arrangement in Part XIII								
	-	•	-				Amount	:	
С	Beginning balance					1c			
d	Additions during the year					1d			
e Distributions during the year 1e									
f									
2a	2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?								No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation has been	provided in Pa	art XIII			X	
Pai	T V Endowment Funds Complete if	the organization ans	swered "Yes" on Fo	rm 990, Part I\	V, line 10.				
		(a) Current year	(b) Prior year	(c) Two years		d) Three years ba			
1a	Beginning of year balance	1,841,974,375.			,600. 1	,317,135,83	6. 1,240,	504,	416.
	Contributions	67,913,606.	61,438,723.	80,029	,082.	103,907,70	9. 76,	383,	080.
	Net investment earnings, gains, and losses							398,	753.
d	Grants or scholarships								
	Other expenditures for facilities								
	and programs	1,504,592.	159,049.	73,969	,950.	56,712,89	4. 54,	150,	413.
f	Administrative expenses								
g	End of year balance	1,986,863,145.	1,841,974,375.	1,727,979	,591. 1	,849,671,60	0. 1,317,	135,	836.
2	Provide the estimated percentage of the curr	rent year end balanc	e (line 1g, column (a)) held as:					
а	Board designated or quasi-endowment	1.1250	%						
b	Permanent endowment 50.0720	%							
С	Term endowment 48.8020	. %							
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.							
За	Are there endowment funds not in the posse	ssion of the organiza	ation that are held a	nd administere	ed for the		-		
	organization by:							Yes	No
	(i) Unrelated organizations?						3a(i)	Х	
	(ii) Related organizations?						3a(ii)		Х
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requir	red on Schedule R?				3b		<u> </u>
4	Describe in Part XIII the intended uses of the		wment funds.						
Pai	t VI Land, Buildings, and Equipm								
	Complete if the organization answere								
	Description of property	(a) Cost or obasis (investr	` ,	t or other (other)	` '	cumulated reciation	(d) Bool	k valu	ie
1a	Land			32,078.				32,	078.
	Buildings		1	,878,300.		903,940.		974,	360.
	Leasehold improvements			379,063.		379,063.			0.
	Equipment			690,054.		633,147.		56,	907.
	Other		2	,590,721.		2,590,721.			0.
	l. Add lines 1a through 1e. <i>(Column (d) must e</i>		X. line 10c. column	(B))			1,	063,	345.
							ule D (Form	990	2023

Part VII Investments - Other Securities

Complete if the	organization	answered "Yes"	on Form 990	Dart IV	line 11h	Saa Form 990	Dart Y line 12
Complete ii tile	Ol gallization	answered res	0111 01111 330,	ι αιιιν,	mie i ib.		, I all A, III 6 12.

UNIVERSITY OF COLORADO FOUNDATION

(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) DOMESTIC EQUITIES	40,800,000.	END-OF-YEAR MARKET VALUE
(B) FIXED INCOME	250,679,972.	END-OF-YEAR MARKET VALUE
(C) REAL ESTATE	119,079,896.	END-OF-YEAR MARKET VALUE
(D) PRIVATE EQUITY	584,072,937.	END-OF-YEAR MARKET VALUE
(E) ABSOLUTE RETURNS FUNDS	286,654,725.	END-OF-YEAR MARKET VALUE
(F) VENTURE CAPITAL	305,679,051.	END-OF-YEAR MARKET VALUE
(G) COMMODITIES	40,111,111.	END-OF-YEAR MARKET VALUE
(H) OTHER	2,660,174.	END-OF-YEAR MARKET VALUE
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	2,210,366,350.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total (Col. (b) must equal Form 000, Part V, line 12, col. (P.)		

Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B)) 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, line 15, col. (B))

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)	FUNDS HELD IN TRUST FOR OTHERS	2,712,816.
(3)	LIABILITIES UNDER SPLIT INTEREST	16,995,383.
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, line 25, col. (B))	19,708,199.

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

Schedule D (Form 990) 2023

Sche	dule D (Form 990) 2023 UNIVERSITY OF COLORADO FOUNDATION			84-60	49811	Page 4		
Par	XI Reconciliation of Revenue per Audited Financial Statemer	nts With	Revenue per Re	turn				
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.							
1	Total revenue, gains, and other support per audited financial statements			1	427,2	254,349.		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:							
а	Net unrealized gains (losses) on investments	2a	104,345,277.					
	Donated services and use of facilities							
	Recoveries of prior year grants	2c						
	Other (Describe in Part XIII.)	2d	673,395.					
е	Add lines 2a through 2d	,		2e	105,0	18,672.		
3	Subtract line 2e from line 1			3	322,2	235,677.		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:							
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	19,480,156.					
b	Other (Describe in Part XIII.)		474,666.					
	Add lines 4a and 4b			4c	19,9	954,822.		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	342,1	190,499.		
Par	t XII Reconciliation of Expenses per Audited Financial Stateme	nts With	Expenses per F	Return				
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.							
1	Total expenses and losses per audited financial statements			1	262,3	327,723.		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:							
	Donated services and use of facilities	2a						
	Prior year adjustments	2b						
c	Other losses	2c						
d	Other (Describe in Part XIII.)							
	Add lines 2a through 2d			2e		0.		
	Subtract line 2e from line 1			3	262.3	327,723.		
	Amounts included on Form 990, Part IX, line 25, but not on line 1:							
	Investment expenses not included on Form 990, Part VIII, line 7b	4a	19,480,156.					
	Other (Describe in Part XIII.)							
				40	19 4	180,156.		
				4c 5		307,879.		
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) t XIII Supplemental Information			3	201,	,075.		
		V lines 1h	and 2h: Part V line 4	· Dart V I	ino 2: Part			
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.								
111165	ed and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any addit	lional imon	nation.					
РАВТ	IV, LINE 2B:							
	17, 1181 25.							
THE FOIINDATION HOLDS AND INVESTS CERTAIN PNIDOWMENT AND OTHER RINDS IN A								
THE FOUNDATION HOLDS AND INVESTS CERTAIN ENDOWMENT AND OTHER FUNDS IN A								
LONG	TERM INVESTMENT POOL UNDER THE TERMS OF AN INVESTMENT MANAGEM	ENT						
AGREEMENT WITH UNIVERSITY OF COLORADO.								
TOTAL TITLE ONLY DINGITE OF CONCINCO.								
PART	V, LINE 4:							
THE	FOUNDATION'S ENDOWMENT FUNDS INCLUDE DONOR RESTRICTED PURE AND							
QUASI-ENDOWMENT FUNDS, AND BOARD-DESIGNATED ENDOWMENT FUNDS. THESE								
<u> </u>								
ENDOWMENTS ARE MANAGED IN ACCORDANCE WITH THE FOUNDATION BOARD APPROVED								
SPENDING POLICY, AND DISTRIBUTIONS FROM THESE ENDOWMENTS ARE MADE IN								
ACCO	RDANCE WITH SUCH POLICY AND ARE AVAILABLE TO THE UNIVERSITY OF							
COLORADO TO SUPPORT ITS PROGRAMS AND OPERATIONS, IN ACCORDANCE WITH THE								
	•			Calaadud	- D /F	000) 0000		

Part XIII Supplemental Information (continued)

Part VII Investments - Other Securities. 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					
COMINGLED EQUITY SECURITIES	579,012,171.	EOY MARKET VALUE					
	373,012,171.	Del imikal viner					
INTERNATIONAL EQUITIES	1,616,313.	EOY MARKET VALUE					
•	_, _ ,						

Schedule D (Form 990)

SCHEDULE F (Form 990)

Department of the Treasury

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

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

Inspection

OMB No. 1545-0047

Name of the organization **Employer identification number** UNIVERSITY OF COLORADO FOUNDATION 84-6049811 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (e) If activity listed in (d) (b) Number of (c) Number of (d) Activities conducted in the region (f) Total (a) Region employees, agents, and expenditures offices (by type) (such as, fundraising, prois a program service, for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region CENTRAL AMERICA AND THE CARIBBEAN -INVESTMENTS 303,088,243. WESTERN EUROPE -INVESTMENTS 57,228,043. NORTH AMERICA -CANADA AND MEXICO. BUT NOT THE UNITED STATES INVESTMENTS 233,602,294. 0 0 \$93,918,580. 3 a Subtotal **b** Total from continuation 0 0. sheets to Part I c Totals (add lines 3a **5**93,918,580. and 3b)

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

Schedule F (Form 990) 2023

UNIVERSITY OF COLORADO FOUNDATION

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States.	Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any
recipient who received more than \$5,000. Part II can be duplicated if additional space is n	eeded.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a	ax
	exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2023

Schedule F (Form 990) 2023	UNIVERSITY OF COLOR	RADO FOUNDATI	ON		84-6049811		Page :
Part III Grants and Other Assistan	nce to Individuals Outsid	le the United Sta	ites. Complete i	f the organization answered "Yes"	on Form 990, Part	IV, line 16.	
Part III can be duplicated if	additional space is neede	ed.					
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Page 4

Schedule F (Form 990) 2023 Teach Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If</i> "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the 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 the Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)	X Yes	☐ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see the Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the 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 the Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2023

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

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

2023

Open to Public Inspection

Name of the organization **Employer identification number** UNIVERSITY OF COLORADO FOUNDATION 84-6049811 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. X Mail solicitations X Solicitation of non-government grants е X Internet and email solicitations Solicitation of government grants X Phone solicitations Special fundraising events In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or X Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) RUFFALO NOEL LEVITZ - 65 MANAGE A TELEPHONE Yes No KIRKWOOD NORTH ROAD SW, CEDAR SOLICITATION PROGRAM Х 159,316 878,437 -719,121. 159 316 878,437, -719 121 Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NV, NC, NH, NJ NY, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV

LHA 332081 09-13-23

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

SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990) 2023

			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
			(event type)	(event type)	(total number)	Coi. (C)
פאפוומפ						
ב ב	1	Gross receipts				
	2	Less: Contributions				
	_	Less. Continuations				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
DI ect Experises	7	Food and beverages				
5	c	Entortoinment				
	8 9	Entertainment Other direct expenses				
.	10	Direct expense summary. Add lines 4 through		L		
- 1	11	Net income summary. Subtract line 10 from li	()			
_	t II					1
		\$15,000 on Form 990-EZ, line 6a.		, , ,	·	
Т				(b) Pull tabs/instant		1
			(a) Diama	(b) I ull tabo/illotalit	(-) Other and and in an	(d) Total gaming (ad
			(a) Bingo	bingo/progressive bingo	(c) Other gaming	
200			(a) Bingo		(c) Other gaming	
- ומימוממ	1	Gross revenue	(a) Bingo		(c) Other gaming	
מאמנוממ			(a) Bingo		(c) Other gaming	(d) Total gaming (adcol. (a) through col. (d
	2	Cash prizes	(a) Bingo		(c) Other gaming	
	2		(a) Bingo		(c) Other gaming	
	2	Cash prizes			(c) Other gaming	
	2 3 4	Cash prizes Noncash prizes Rent/facility costs			(c) Other gaming	
	2 3 4	Cash prizes Noncash prizes		bingo/progressive bingo		col. (a) through col. (d
	2 3 4 5	Cash prizes Noncash prizes Rent/facility costs		bingo/progressive bingo		col. (a) through col. (
	2 3 4 5	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor	Yes %	bingo/progressive bingo Yes% No	Yes%	col. (a) through col. (
	2 3 4 5	Cash prizes Noncash prizes Rent/facility costs Other direct expenses	Yes %	bingo/progressive bingo	Yes%	col. (a) through col. (
	2 3 4 5 6 7	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor	Yes % No 5 in column (d)	bingo/progressive bingo Yes% No	Yes%	col. (a) through col. (
רוופנו באספוזספס	2 3 4 5 6 7 8	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through	Yes % No 15 in column (d) from line 1, column (d)	bingo/progressive bingo Yes% No	Yes%	col. (a) through col. (
Direct Experises	2 3 4 5 6 7 8	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 er the state(s) in which the organization condu	Yes% No 15 in column (d) from line 1, column (d) cots gaming activities:	bingo/progressive bingo Yes% No	Yes%	col. (a) through col. (
a	2 3 4 5 6 7 8 Ent	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 eer the state(s) in which the organization conducte organization licensed to conduct gaming acceptable.	Yes% No 15 in column (d) from line 1, column (d) acts gaming activities:ctivities in each of these	bingo/progressive bingo Yes% No states?	Yes%	col. (a) through col. (
a	2 3 4 5 6 7 8 Ent	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 er the state(s) in which the organization condu	Yes% No 15 in column (d) from line 1, column (d) acts gaming activities:ctivities in each of these	bingo/progressive bingo Yes% No states?	Yes%	col. (a) through col. (
a	2 3 4 5 6 7 8 Ent	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 eer the state(s) in which the organization conducte organization licensed to conduct gaming acceptable.	Yes% No 15 in column (d) from line 1, column (d) acts gaming activities:ctivities in each of these	bingo/progressive bingo Yes% No states?	Yes%	col. (a) through col. (
a b	2 3 4 5 6 7 8 Ent	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 eer the state(s) in which the organization conduct he organization licensed to conduct gaming action, " explain:	Yes % No 15 in column (d) from line 1, column (d) acts gaming activities:ctivities in each of these	bingo/progressive bingo Yes% No states?	Yes% No	col. (a) through col. (
a b	2 3 4 5 6 7 8 Ent	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 er the state(s) in which the organization conduct organization licensed to conduct gaming act No," explain: Tree any of the organization's gaming licenses recommended.	Yes % No 15 in column (d) from line 1, column (d) cts gaming activities:ctivities in each of these evoked, suspended, or te	bingo/progressive bingo Yes% No states?	Yes% No	col. (a) through col. (
a b	2 3 4 5 6 7 8 Ent	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 eer the state(s) in which the organization conduct he organization licensed to conduct gaming action, " explain:	Yes % No 15 in column (d) from line 1, column (d) cts gaming activities:ctivities in each of these evoked, suspended, or te	bingo/progressive bingo Yes% No states?	Yes% No	col. (a) through col. (

Sch	edule G (Form 990) 2023 UNIVERSITY OF COLORADO FOUNDATION 8	34-60	4981	1	Page 3
11	Does the organization conduct gaming activities with nonmembers?			Yes	No No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed				
	to administer charitable gaming?			Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:			ı	
a	The organization's facility		13a		<u>%</u>
k	o An outside facility	L	13b		<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:				
	Name				
	Address				
15:	Does the organization have a contract with a third party from whom the organization receives gaming revenue?			Yes	
100	boos the diganization have a contract with a time party from whom the diganization receives gaming revenue:				
b	o If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount	t			
	of gaming revenue retained by the third party \$				
c	If "Yes," enter name and address of the third party:				
	Name				
	Address				
16	Gaming manager information:				
	Name				
	Gaming manager compensation \$				
	Description of services provided				
	Director/officer Employee Independent contractor				
17	Mandatory distributions:				
	I Is the organization required under state law to make charitable distributions from the gaming proceeds to				
٠			<u> </u>	Yes	☐ No
ŀ	retain the state gaming license? Description Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	е			
	organization's own exempt activities during the tax year \$	_			
Pa	IT IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and	Part	III, lin	es 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.				
SCH	EDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:				
/ T \	NAME OF FUNDRAISER: RUFFALO NOEL LEVITZ				
(1)	NAME OF FUNDATISER: RUFFALO NOEL LEVIIZ				
(I)	ADDRESS OF FUNDRAISER:				
65	KIRKWOOD NORTH ROAD SW, CEDAR RAPIDS, IA 52404				
PAR	T I, LINE 2B, COLUMN (V):				
	* OF GROSS RECEIPTS FROM ACTIVITY, OR COLUMN IV, ARE TRANSFERRED TO				
THE	UNIVERSITY AS PHILANTHROPIC SUPPORT. THE AMOUNT PAID TO RUFFALO NOEL				

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

3	COLORADO FOUN	NDATION					84-6049811
criteria used to award the grants or assis 2 Describe in Part IV the organization's pro Part II Grants and Other Assistance to I	tance? cedures for monit	oring the use of grant	funds in the United	States. omplete if the orga			X Yes No
1 (a) 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 grant or assistance
UNIVERSITY OF COLORADO 1800 GRANT ST., SUITE 800 DENVER, CO 80203	84-6000555	501(C)(3)	210338756	0.			SEE PART IV
UNIVERSITY OF COLORADO HOSPITAL FOUNDATION - 2400 S. PEORIA ST. STE 100 - AURORA, CO 80014	20-8575263	501(C)(3)	8,518,387.	0.			PUBLIC SERVICE, MEDICAL OUTREACH
UNIVERSITY OF NORTHERN COLORADO PO BOX 10 GREELEY, CO 80639	84-6044833	501(C)(3)	15,000.	0.			SCHOLARHSIPS
METROPOLITAN STATE UNIVERSITY OF DENVER - PO BOX 173362 - DENVER, CO 80217	84-0576459	501(C)(3)	15,000.	0.			SCHOLARSHIPS
UNIVERSITY OF DENVER 2199 S. UNIVERSITY BOULEVARD DENVER, CO 80210	84-0404231	501(C)(3)	12,632.	0.			SCHOLARSHIPS
Control Cont							
2 Enter total number of section 501(c)(3) at3 Enter total number of other organizations	•	•					

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

Schedule I (Form 990) 2023

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) 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 non-cash assistance	(h) Purpose of grant or assistance	
TARTUP COLORADO								
51 20TH ST UNIT 2194							GENERAL SUPPORT	
ENVER, CO 80201	88-3487860	501(C)(3)	253,489.	0.			ENTREPRENEURIAL	
·			,					

Schedule I (Form 990) 2023 UNIVERSITY OF COLORADO	O FOUNDATION				84-6049811	Page
Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	s. Complete if the	e organization answe	ered "Yes" on Form 9	90, Part IV, line 22.		
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncas	h assistance
Part IV Supplemental Information. Provide the information red	quired in Part I, lir	ne 2; Part III, column	(b); and any other ac	Iditional information.		
PART I, LINE 2:						
THE USE OF GRANTS MADE BY THE UNIVERSITY OF COLORA	ADO FOUNDATION	N ARE				
MONITORED BY THE UNIVERSITY OF COLORADO.						
PART II, LINE 1: UNIVERSITY OF COLORADO - GRANTS F	PAID					
GIFTS AND INCOME DISTRIBUTED TO THE UNIVERSITY OF	COLORADO WERE	E APPLIED				
AS FOLLOWS:						
ACADEMICS - \$87,659,788						
ATHLETICS - \$3 239 199						

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.

UNIVERSITY OF COLORADO FOUNDATION

Attach to Form 990.

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

Internal Revenue Service

Name of the organization

Department of the Treasury

Inspection
Employer identification number

84-6049811

OMB No. 1545-0047

Open to Public

X

Х

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Х

Х

4b

4c

5a

6a

6b

7

8

Pa	art I Questions Regarding Compensation				
				Yes	No
1 a	Check the appropriate box(es) if the organization provided any	of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any rele	evant information regarding these items.			
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization	n follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described at	pove? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing	or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, re	egarding the items checked on line 1a?	2		
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 an	y boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but exp	plain in Part III.			
	X Compensation committee	Written employment contract			
	X Independent compensation consultant	X Compensation survey or study			
	X Form 990 of other organizations	X Approval by the board or compensation committee			

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.
 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:
 The organization?

During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

b Any related organization?

If "Yes" on line 5a or 5b, describe in Part III.

a Receive a severance payment or change-of-control payment?

b Participate in or receive payment from a supplemental nonqualified retirement plan?

c Participate in or receive payment from an equity-based compensation arrangement?

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

b Any related organization?

If "Yes" on line 6a or 6b, describe in Part III.

organization or a related organization:

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

Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

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

Schedule J (Form 990) 2023

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

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.

(A) Name and Title		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(1) JACK FINLAW	(i)	421,811.	82,996.	0.	19,800.	15,297.	539,904.	0.	
PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) A. KELLER YOUNG, ESQ.	(i)	282,019.	28,086.	0.	19,003.	21,193.	350,301.	0,	
SVP, GENERAL COUNSEL, CAO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) CHARLENE LAUS	(i)	266,025.	25,440.	0.	17,499.	8,717.	317,681.	0.	
VP & CFO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) LYNNEA HUTTON	(i)	178,961.	18,500.	0.	12,625.	19,470.	229,556.	0.	
VP, PEOPLE & CULTURE	(ii)	0.	0.	0.	0.	0.	0.	0.	
(5) ELIZABETH SAYER	(i)	148,685.	36,719.	0.	11,260.	8,367.	205,031.	0.	
CONTROLLER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(6) SASKIA SAWYER	(i)	160,506.	13,677.	0.	10,968.	20,965.	206,116.	0,	
AVP GIFT SERVICES	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
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	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

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.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

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.

Open to Public Inspection

Employer identification number

	UNIVERSITY OF COLO	RADO FOUN	NDATION				84-60498	11	
Par	t 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	r		(d) d of determ ontribution	_	s
1	Art - Works of art								
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded	Х	366	21,236,537.	AVG	HIGH/LOV	V PRICE		
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 \dots								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other ()								
26	Other ()								
27	Other ()								
28	Other ()			<u> </u>					
29	Number of Forms 8283 received by the organization			1 1					
	for which the organization completed Form 82	83, Part V, D	Oonee Acknowledg	ement 29					
								Yes	No
30a	During the year, did the organization receive by					that it			
	must hold for at least 3 years from the date of								
	exempt purposes for the entire holding period?	?					30a	1	Х
b	If "Yes," describe the arrangement in Part II.								
31	Does the organization have a gift acceptance p	-	•	•	ions?		31	Х	
32a	Does the organization hire or use third parties	or related or	ganizations to solid	cit, process, or sell noncash					
	contributions?						32a	X	
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.								

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

Schedule M (Form 990) 2023

332142 09-11-23 Schedule M (Form 990) 2023

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

Name of the organization

UNIVERSITY OF COLORADO FOUNDATION

Inspection **Employer identification number**

84-6049811 PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: OF COLORADO AND IS RESPONSIBLE FOR RECEIVING. MANAGING AND INVESTING THE ENDOWMENTS AND OTHER GIFT FUNDS THE FOUNDATION HOLDS FOR THE BENEFIT OF CU. FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: UNIVERSITY OF COLORADO FOUNDATION'S CHARITABLE MISSION IS TO RECEIVE AND MANAGE PRIVATE GIFTS TO BENEFIT THE UNIVERSITY OF COLORADO. IN ACCORDANCE WITH THIS MISSION, THE FOUNDATION RECEIPTED \$224,143,162 IN DIRECT PUBLIC SUPPORT OF THE UNIVERSITY FOR THE FISCAL YEAR ENDED JUNE 2024. IN ADDITION, AS OF JUNE 30, 2024 THE FOUNDATION INVESTED ACCOUNTED FOR, AND MANAGED \$2,245,565,675 IN NET ASSETS FOR THE BENEFIT OF THE UNIVERSITY. THE FOUNDATION DIRECTLY APPLIED AND DISTRIBUTED MONIES TO UNIVERSITY OF COLORADO IN THE AMOUNT OF \$219,283,389. THESE APPLIED AND DISTRIBUTED MONIES WERE USED BY THE UNIVERSITY TO PROVIDE SCHOLARSHIPS, FELLOWSHIPS, FUND LECTURESHIPS AND PROFESSORSHIPS CONSTRUCT FACILITIES, PURCHASE EQUIPMENT, PROVIDE LOANS, PURCHASE EDUCATIONAL AND RESEARCH MATERIALS AND TO FUND A MYRIAD OF OTHER PROJECTS AND ITEMS TO HELP THE UNIVERSITY PROVIDE EDUCATION TO THE GENERAL PUBLIC. FORM 990, PART VI, SECTION B, LINE 11B: THE FOUNDATION'S INDEPENDENT ACCOUNTING FIRM WILL REVIEW THE 990 WITH THE AUDIT COMMITTEE. THE AUDIT COMMITTEE CHAIR WILL PROVIDE A SUMMARY OF THIS REVIEW TO THE FULL BOARD ALONG WITH A COPY OF THE FORM 990.

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

Schedule O (Form 990) 2023

<u>Schedule O (Form 990) 2023</u> Page **2**

Employer identification number Name of the organization UNIVERSITY OF COLORADO FOUNDATION 84-6049811 FORM 990, PART VI, SECTION B, LINE 12C: THE CONFLICT OF INTEREST POLICY IS PROVIDED TO KEY EMPLOYEES, DIRECTORS AND COMMITTEE MEMBERS WHO ARE NOT DIRECTORS. EACH RECIPIENT IS ASKED TO COMPLETE A DISCLOSURE CERTIFICATION. THESE DOCUMENTS ARE COLLECTED AND THE INFORMATION COMPILED IN THE FOUNDATION'S LEGAL DEPARTMENT. WHEN THE FOUNDATION IS CONSIDERING ENTERING INTO MAJOR TRANSACTIONS AND/OR CONTRACTS WITH OUTSIDE PARTIES. POTENTIAL CONFLICTS OF INTEREST ARE RESEARCHED. IF THERE IS AN IDENTIFIED CONFLICT, THE FOUNDATION FOLLOWS THE POLICY TO RESOLVE THE CONFLICT. FORM 990, PART VI, SECTION B, LINE 15: THE UNIVERSITY OF COLORADO FOUNDATION HAS A COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS. THIS COMMITTEE REVIEWS AND APPROVES SALARY ADJUSTMENTS AND ANY ADDITIONAL COMPENSATION FOR THE FOUNDATION'S OFFICERS. THE COMMITTEE RELIES ON MARKET COMPENSATION STUDIES FOR EACH APPLICABLE POSITION, WHICH ARE PERFORMED BY AN OUTSIDE COMPENSATION CONSULTANT AND UPDATED EVERY THREE YEARS. THE COMMITTEE'S DELIBERATION AND SALARY APPROVALS ARE DOCUMENTED IN THE MINUTES MAINTAINED BY THE COMPENSATION COMMITTEE. FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NV, NC, NH, NJ NY,OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WI,WV,AZ FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND AUDITED FINANCIAL STATEMENTS ARE MADE AVAILABLE UPON REQUEST. AUDITED FINANCIALS ARE ALSO AVAILABLE ON THE CUF WEBSITE WWW.CUFUND.ORG.

Schedule O (Form 990) 2023

Schedule O (Form 990) 2023 Page 2 Name of the organization **Employer identification number** UNIVERSITY OF COLORADO FOUNDATION 84-6049811 FORM 990, PART IX, LINE 11G, OTHER FEES: CU SUPPORT FEE: PROGRAM SERVICE EXPENSES MANAGEMENT AND GENERAL EXPENSES 224,562. FUNDRAISING EXPENSES 36,042,779. TOTAL EXPENSES 36,267,341. TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 36,267,341. FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS 673,395. UNRELATED BUSINESS (INCOME)/LOSS -474,666. WRITE-OFF OF UNCOLLECTIBLE CONTRIBUTIONS RECEIVABLE -3,477,559. TOTAL TO FORM 990, PART XI, LINE 9 -3,278,830.

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.

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990.

Open to Public Inspection

Employer identification number

OMB No. 1545-0047

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

UNIVERSITY OF COLOR	ADO FOUNDATION					84-6049811		
Part I Identification of Disregarded Entities. Complete	ete if the organization answered "Y	es" on Form 990, Part IV, line 3	3.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state of foreign country)	(d) or Total inco	me End-of-yea		Direct c	(f) ontrolling itity)
	_							
Part II Identification of Related Tax-Exempt Organizations during the tax year.	zations. Complete if the organizati	on answered "Yes" on Form 990), Part IV, line 34, I	pecause it had one	or more r	related tax-exer	npt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section		(f) t controlling entity	Section 5 contr	olled
THE UNIVERSITY OF COLORADO UK FOUNDATION		, , , , , , , , , , , , , , , , , , ,		501(c)(3))			Yes	No
LIMITED, 1800 GRANT STREET, SUITE 725, DENVER, CO 80203	REAL ESTATE	COLORADO	501(C)(3)	509(A)(3)	CU FOUN	NDATION	x	

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

Schedule R (Form 990) 2023

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

(a) Name, address, and EIN of related organization	(b) Primary activity	Legal domicile (state or foreign	(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	Disprop alloca	h) ortionate ations?	(i) Code V-UBI amount in box 20 of Schedule	(j) General managir partner	(k) Percentage ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	0

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 country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	1	tion b)(13) rolled tity?
		Country)						Yes	No
	_								
CHARITABLE REMAINDER TRUSTS (47)	CRAT/CRUT	CO	CU FOUNDATION	TRUST					Х
	_								
	_								
	-								
	-								
-									
	-								
	-								

Part V	Transactions With Related Organizations.	Complete if the organization answered	"Yes" o	on Form 990,	Part IV, line 3	34, 35b, or 36.
--------	--	---------------------------------------	---------	--------------	-----------------	-----------------

Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No	
1	During the tax year, did the organization engage in any of the following transactions	s with one or more re	elated organizations listed i	n Parts II-IV?				
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	<i>'</i>			1a		Х	
					1b		Х	
С	Gift, grant, or capital contribution from related organization(s)				1c		Х	
	Loans or loan guarantees to or for related organization(s)				1d		Х	
	Loans or loan guarantees by related organization(s)				1e		Х	
f	Dividends from related organization(s)				1f		Х	
g	Sale of assets to related organization(s)				1g		Х	
	Purchase of assets from related organization(s)				1h		Х	
i	Exchange of assets with related organization(s)				1i		Х	
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		Х	
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		Х	
- 1	Performance of services or membership or fundraising solicitations for related organ				11		Х	
m	m Performance of services or membership or fundraising solicitations by related organization(s)							
	Sharing of facilities, equipment, mailing lists, or other assets with related organization				1n	Х		
					10	Х		
р	Reimbursement paid to related organization(s) for expenses				1p		Х	
	Reimbursement paid by related organization(s) for expenses				1q		Х	
•					•			
r	Other transfer of cash or property to related organization(s)				1r		х	
					1s		Х	
	If the answer to any of the above is "Yes," see the instructions for information on whether the answer to any of the above is "Yes," see the instructions for information on whether the answer to any of the above is "Yes," see the instructions for information on whether the answer to any of the above is "Yes," see the instructions for information on whether the answer to any of the above is "Yes," see the instructions for information on whether the answer to any of the above is "Yes," see the instructions for information on whether the answer to any of the above is "Yes," see the instructions for information on whether the answer to any of the above is "Yes," see the instructions for information on whether the answer to any of the above is "Yes," see the instructions for information on whether the answer to any of the above is "Yes," see the instructions for information on which it is the answer than the answer that the answer th							
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount inv	olved			
(1)								
(2)								
(3)								
(4)								
(5)								

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Dispretion allocat	opor- late tions?	General manage partner	(k) Percentage ownership
								000) 0000

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