Form **990**

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Α	For the	e 2018 calen	dar year, or tax	year beginı	ning 7/	01	, 20	18, and	ending	g	6/3	30		, 2019
В	Check if	applicable:	С								\neg	D Emplo	yer iden	tification number
	Add	lress change	Colorado H	Early Co	olleges	-					- 1	46-	-0872	2271
	Nam	ne change	Ft. Collin	ns Build	ding Co	rporatio	n				ı	E Teleph		
	\vdash	al return	4405 N. Cl	nestnut	. Suite	Ē					- 1	710	. F20	6062
	\vdash		Colorado S								-	/15	9-528	3-6062
	H	return/terminated		. ,							- 1			A second to the second to
	Ame	ended return										G Gross		
	App	lication pending	F Name and addr	ess of principal	officer:				- 1			0525 - 000		bordinates? Yes X No
			Same As C	Above						H(b) A	re all s	subordinate	es include	ed? Yes No
I	Tax-ex	xempt status:	X 501(c)(3)	501(c) () ◄ (i	insert no.)	4947(a)(1	or	527		140,	attacii a ii:	st. (see ii	istructions)
J	Web	site: ► CS	EC914.org							H(c) G	roup e	exemption i	number I	>
K		of organization:		Trust	Association	Other ►		L Year o					Description (Description	legal domicile: CO
	rt I			Trust	ASSOCIATION	Other		L rear o	or iormatic)n: Z	012	. 141	State or	legal domicile: CO
F	11 1	Summar	bo the examine	lianta maiaai										
	1 <u>E</u>	Briefly descri	be the organiza	tion's missi	on or most	significant a	activities:	See_S	Sched	lule	_Q.			
9	-													
Governance	-													
err														
8	2 (Check this bo	ox ► ☐ if the	organization	n discontinu	ued its opera	ations or d	isposed	d of mo	re tha	an 25	5% of its	net as	ssets.
9		Number of vo	oting members of	of the gover	ning body ((Part VI, line	a la)						3	4
S	4 1	Number of in	idependent votin	ig members	of the gov	erning body	(Part VI,	ine 1b)					4	4
₩	5 7	Total number	r of individuals e	employed in	calendar y	ear 2018 (P	art V, line	2a)					5	0
Activities &	6 7	rotal number	r of volunteers (estimate if i	necessary).		10							0
A	/a	rotai unrelate	ed business reve	enue from F	art VIII, co	olumn (C), lii	ne 12						7a	0.
	b i	vet unrelated	d business taxab	ole income i	rom Form	990-1, line 3	88						7b	0.
				or remain research							Pr	rior Year	r	Current Year
<u>o</u>			and grants (Pa											
Revenue			vice revenue (Pa								2	,770,		235,173.
eVe			ncome (Part VIII									15,	825.	4,048.
Œ			ie (Part VIII, coli											20,921,104.
			e – add lines 8								2	,786,	713.	21,160,325.
	13 (Grants and s	imilar amounts p	paid (Part I	X, column ((A), lines 1-3	3)							
	14 E	14 Benefits paid to or for members (Part IX, column (A), line 4)												
	15 8	5 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)												
Expenses	16a F	Professional fundraising fees (Part IX, column (A), line 11e)												
cber	b⊺	Total fundrais	sing expenses (F	Part IX, coli	umn (D), lir	ne 25) ►								
மி	17 (Other expens	ses (Part IX, col	umn (A). lir	nes 11a-11d	1. 11f-24e)				3,555,325				21,913,320.
			es. Add lines 13									,555,		21,913,320.
			s expenses. Sub											
5 8		to voride 1655	з скрепаса. Опр	tract line re	J II OITI III IC	12				_		-768,		-752,995.
		Total assets	(Part X, line 16)							Beg		g of Curre		
Assets Balan	21 T		es (Part X, line 2							_		,467,		21,132,173.
Net A										_		,945,		21,885,168.
			r fund balances.	Subtract lin	ne 21 from	line 20					-1	,478,	126.	-752,995.
-	rt II	Signatur												
Unde	er penaltie plete. Dec	es of perjury, I de claration of prepa	eclare that I have exa arer (other than officer	mined this return is based on a	rn, including ac	ccompanying sch	nedules and s	atements, wledge.	, and to t	he best	of my	/ knowledg	e and be	lief, it is true, correct, and
						500 - VVO 22200 (1400) (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					_			
Siç	ın	Signatu	ire of officer								Dat	e		
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110	10		sie Mathis							Pr	esı	dent		
_			oreparer's name		Prepare sign	nature		Date		,	Т	01 :	V	PTIN
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US	e Only	y Firm's addre				*KØ-132						Firm's EIN		5-4703316
			Aurora			/				Phone no. 303-835-6815				
			nis return with th											X Yes No
DA	A Faul	D	Paduction Act No	ation Al										

			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		Χ
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If 'Yes,' complete Schedule C, Part l</i>	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If 'Yes,' complete Schedule D, Part II</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV.	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If 'Yes,' complete Schedule D, Part V.</i>	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI</i>	11 a	Х	
b	Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.	11 b		Х
c	: Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII.	11 c		Х
c	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.	11 d		Х
e	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If 'Yes,' complete Schedule D, Part X.</i>	11 f		Х
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV.	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If 'Yes,' complete Schedule F, Parts II and IV</i>	15		Х
	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? <i>If 'Yes,' complete Schedule F, Parts III and IV</i>	16		X
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		X
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		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		X
20a	Did the organization operate one or more hospital facilities? <i>If 'Yes,' complete Schedule H</i>	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

Form 990 (2018) Colorado Early Colleges Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	23		Х
24	a 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
ı	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(c 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		
25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
I	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II.	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
i	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
I	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
(c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an		X	
29	officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c 29	Λ	X
	·	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Х	
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
I	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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	Х	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			· L
1 -	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1 c		
BAA	TEEA0104L 08/03/18	Form	n 990 ((2018)

Form 990 (2018) Colorado Early Colleges Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
2 a	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			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
b	If 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule O.</i>	3 b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
	If 'Yes,' enter the name of the foreign country: ►			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Χ
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
C	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
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			37
	services provided to the payor?	7 a		X
	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		Х
d	If 'Yes,' indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
8	Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	7 h		
	organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	12a		
	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b	ıza		
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
14 a	Did the organization receive any payments for indoor tanning services during the tax year?	14 a		X
b	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
10	If 'Yes,' complete Form 4720, Schedule O.	10		21

Form 990 (2018) Colorado Early Colleges -46-0872271 Page 6 Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent . . . 4 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Χ Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Χ Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 Χ Did the organization have members or stockholders?....See.Schedule.0..... Χ 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?..... 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Χ a The governing body?..... 8 a X **b** Each committee with authority to act on behalf of the governing body?..... 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O..... 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10 a Did the organization have local chapters, branches, or affiliates?..... Χ 10 a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... X b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... **c** Did the organization regularly and consistently monitor and enforce compliance with the policy? *If 'Yes,' describe in Schedule O how this was done* ... See .Schedule .Q Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ Χ 14 Did the organization have a written document retention and destruction policy?..... 14 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? Χ a The organization's CEO, Executive Director, or top management official...... 15 a **b** Other officers or key employees of the organization..... 15 b X If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?..... Χ 16 a b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?.. 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > None 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) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule 0 whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records CFO 4405 N. Chestnut Street, Ste E Colorado Springs CO 80907 719-955

Form 990	(2018)	Colorado	Early	Colleges	_

46-0872271

age **7**

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

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

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

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

		(C)								
(A) Name and Title		Pos thar is	dire	ector/	truste/	eck moss pers and a ee)		(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other compensation
	per week (list any hours for related organiza- tions below dotted line)	Former Highest compensated employee Key employee Officer Institutional trustee		the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations				
(1) Jessie Mathis	1									
President	0	Χ		Χ				0.	0.	0.
_(2) Dan Edwards	1	Х		Х				0.	0.	0.
(3) Art Cyphers	1									
Secretary	0	Χ		Χ				0.	0.	0.
(4) Thomas Clark	1									_
Director	0	Χ						0.	0.	0.
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

Part	VII Section A. Officers, Directors, 111	(B)	ney		ipid ()		es, a	anc	a nignest con	ipensaleu Emp	loyees (continuea)
					•	•	on		(D)	(E)	/5	-
	(A) Name and title	Average hours	rs box, unless person is					n an	(D) Reportable	(E) Reportable	(F Estim	nated
		per week (list any	L-						compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount comper from	nsation
		hours for	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-WISC)	(W-2/1099-WII3C)	organi and re	zation
		related organiza - tions	ictor	ional	~	nplo	t com	×			organiz	
		below	ruste	trust		/ee	npens					
		line)	Ф	93			ated					
(15)												
			•									
(16)												
(17)												
(17)												
(18)												
(19)												
(20)												
(-0)			•									
(21)												
(22)												
(23)												
(24)												
(25)												
	ub-total							>	0.	0.		0.
	otal from continuation sheets to Part VII, Section (and lines 1b and 1c)							▶	0.	0.		0.
	otal (add lines 1b and 1c)otal number of individuals (including but not limited							ved	0. more than \$100.00	0.0 of reportable comp	ensation	0.
	om the organization ► 0				-,				,	,		
											Y	es No
3 D	old the organization list any former officer, direct in line 1a? <i>If 'Yes,' complete Schedule J for suc</i>	tor, or tru	stee,	key	em/	nploy	/ee,	or h	nighest compensa	ted employee	. 3	X
	or any individual listed on line 1a, is the sum of											A
th	ne organization and related organizations greate	er than \$1	50,00	00?	If 'Y	es,'	com	ıple	te Schedule J for	ITOTTI	4	Х
	uch individual iid any person listed on line 1a receive or accru									individual		^
fo	or services rendered to the organization? If 'Yes	s,' comple	te So	ched	lule	J fo	r suc	ch p	erson		. 5	X
	on B. Independent Contractors	sated ind	enen	dent	COL	ntrad	tors	tha	t received more t	nan \$100 000 of		
	complete this table for your five highest compen- compensation from the organization. Report compen		the c	alen	dar	year	endii	ng v	vith or within the or	ganization's tax year		
	(A) Name and business addi	ress							(B) Description (of services	(C) Compens	ation
	otal number of independent contractors (including b	out not lim	ited to	o tho	se I	ister	laho	ve)	Mho received more	than		
	100,000 of compensation from the organization				-51			-)				
											Farm 00	(2010)

		Check if Schedule O contains a response or note	to any	/ line in this Part V			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nue Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Federated campaigns					
Program Service Revenue	b c d e f	Facitlity Rental 531120 All other program service revenue Total. Add lines 2a-2f	>	235,173.	235,173.		
	3 4 5	Investment income (including dividends, interest an other similar amounts)	► eds►	4,048.	4,048.		
	b c d 7a	Gross rents					
	c d	and sales expenses	>				
Other Revenue		Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18					
Othe	С	Less: direct expenses	►				
		Gross income from gaming activities. See Part IV, line 19					
	С	Net income or (loss) from gaming activities	►				
	b	Gross sales of inventory, less returns and allowances					
	11 a b	Transfers-Network Schools 531120	ode	20,921,104.	20,921,104.		
	-	All other revenue	>	20,921,104.			
		Total revenue. See instructions	-		21,160,325.	0.	0.

Form 990 (2018) Colorado Early Colleges Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4)	organizations must comple	te all columns. All other organization:	s must complete column (A).
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Do i	Check if Schedule O contains a re	esponse or note to any (A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	Grants and other assistance to domestic organizations and domestic governments.		expenses	general expenses	expenses
2	See Part IV, line 21				
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	0.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	0.	0.	0.	•
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
a	Management				
	Legal				
	: Accounting				
	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
_	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.) Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	235,168.	235,168.		
21	Payments to affiliates	·	·		
22	Depreciation, depletion, and amortization	738,752.	738,752.		
23 24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.).				
a	Debt Proceeds to Other Schools	20,512,894.	20,512,894.		
b	Bond Issuance Cost	422,011.	422,011.		
c	Purchased Services	4,495.	4,495.		
c		,,	, == 3,		
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	21,913,320.	21,913,320.	0.	0.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)	,			

		Check if Schedule O contains a response or note to	any lir	ne in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing			398,315.	1	949,821.
	2	Savings and temporary cash investments			3,165,369.	2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and former trustees, key employees, and highest compensated er Part II of Schedule L	officers mployee	, directors, es. Complete		5	
	6	Loans and other receivables from other disqualified posection 4958(f)(1)), persons described in section 4958(c)(3) employers and sponsoring organizations of section 501(c) beneficiary organizations (see instructions). Complete	ersons ((as defined under		6	
2	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use		_		8	
As	9	Prepaid expenses and deferred charges				9	
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	1	23,005,967.			
		Less: accumulated depreciation		2,823,615.	39,903,340.	10 c	20,182,352.
	11	Investments – publicly traded securities			33,303,340.	11	20,102,332.
	12	Investments – other securities. See Part IV, line 11			12		
	13	Investments – program-related. See Part IV, line 11.		L		13	
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equal line	34)		43,467,024.	16	21,132,173.
	17	Accounts payable and accrued expenses	10/10//021	17	21/102/1701		
	18	Grants payable		18			
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities		20			
es	21	Escrow or custodial account liability. Complete Part I	V of Sc	hedule D		21	
Liabilities	22	Loans and other payables to current and former office key employees, highest compensated employees, and Complete Part II of Schedule L	disqua	alified nersons		22	
	23	Secured mortgages and notes payable to unrelated th	ird part	ies	43,925,000.	23	21,650,000.
	24	Unsecured notes and loans payable to unrelated third	•	_	-,,	24	, ,
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	s to rela	ated third parties, art X of Schedule D.	1,020,150.	25	235,168.
	26	Total liabilities. Add lines 17 through 25			44,945,150.	26	21,885,168.
ces		Organizations that follow SFAS 117 (ASC 958), check he lines 27 through 29, and lines 33 and 34.					
aŭ	27	Unrestricted net assets		<u>L</u>	-1,478,126.	27	-752,995.
Bal	28	Temporarily restricted net assets				28	
힏	29	Permanently restricted net assets				29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), ch and complete lines 30 through 34.	eck her	e ► ∐			
9	30	Capital stock or trust principal, or current funds			30		
Set	31	Paid-in or capital surplus, or land, building, or equipm				31	
As	32	Retained earnings, endowment, accumulated income,				32	
let	33	Total net assets or fund balances			-1,478,126.	33	-752,995.
_	34	Total liabilities and net assets/fund balances	<u> </u>	<u>.</u>	43,467,024.	34	21,132,173.

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI.				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	21,1	60,3	325.
2	Total expenses (must equal Part IX, column (A), line 25).	2	21,9	13,3	320.
3	Revenue less expenses. Subtract line 2 from line 1	3	-7	52,9	95.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	-1,4	78,1	26.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8	1,4	78 , 1	26.
9	Other changes in net assets or fund balances (explain in Schedule O).	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	-7	52,9	95.
Pa	rt XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response or note to any line in this Part XII				. 🔲
-				Yes	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Χ
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviews separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	ed on a			
	b Were the organization's financial statements audited by an independent accountant?		2b	Χ	l
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separa basis, consolidated basis, or both:	ite			
	Separate basis Consolidated basis X Both consolidated and separate basis				
,	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2с		Х
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.				
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		За		Х
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits				
BAA	TEEA0112L 08/03/18		Form	990 ((2018)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number Colorado Early Colleges -Ft. Collins Building Corporation 46-0872271 **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). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 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: 5 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). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 10 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 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in 12 lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g X 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 **q** Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (described on lines 1-10 above (see instructions)) (v) Amount of monetary (iv) Is the organization listed (vi) Amount of other support (see instructions) support (see instructions) in your governing document? No Colorado Springs Early Colleges 20-5470086 (A) school 235,173. (B) (C) (D) (E) Total 235,173.

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

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year nning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Gifts, grants, contributions, and 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.						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
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.).						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activ	ities, etc. (see ins	structions)			12	
13	First five years. If the Form 990 is organization, check this box and	for the organization	n's first, second, th	nird, fourth, or fifth t	ax year as a section	on 501(c)(3)	▶ □
Sec	tion C. Computation of Pul	olic Support P	ercentage				_
	Public support percentage for 20						%
15	Public support percentage from 2	2017 Schedule A,	Part II, line 14.			15	%
16a	33-1/3% support test—2018. If the and stop here. The organization	ne organization di qualifies as a pul	id not check the bolicly supported o	oox on line 13, and organization	d line 14 is 33-1/3	3% or more, check	this box ►
b	33-1/3% support test—2017. If th and stop here. The organization	e organization did qualifies as a pu	d not check a box blicly supported o	on line 13 or 16a or 16a or 16a or 16a	a, and line 15 is 3	3-1/3% or more, ch	neck this box
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstance	s' test, check this	box and stop her	re. Explain in Part	VI how
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-ad-circumstances'	and-circumstance test. The organiz	s' test, check this ation qualifies as	box and stop her a publicly support	re. Explain in Part ed organization.	VI how the►
18	Private foundation. If the organiz	zation did not che	ck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see inst	ructions ►

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.)

Sec	tion A. Public Support	osts fisted selett,	prodes semprete :	u. (11.)			
Calend	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any unusual grants.)	.,					7
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						•
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the organization'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						
	Total. Add lines 1 through 5 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.						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	tion B. Total Support				1		
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 6						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						
	Total support. (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 organization, check this box and	stop here	· · · · · · · · · · · · · · · · · · ·				
	tion C. Computation of Pul					, ,	
	Public support percentage for 20	•			•		%
	Public support percentage from 2					16	0/0
	tion D. Computation of Inv					1 1	
17	Investment income percentage for	•	• • •	-			0,0
18	Investment income percentage fi						%
	33-1/3% support tests—2018. If t is not more than 33-1/3%, check	this box and sto	p here. The organ	ization qualifies	as a publicly supp	orted organization	▶ ∐
	33-1/3% support tests—2017. If t line 18 is not more than 33-1/3% Private foundation. If the organization	, check this box	and stop here. The	e organization qu	ialifies as a public	ly supported organ	nization ►

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

			Yes	No
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.	1	Х	
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).	2		Х
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.	3a		X
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.	3b		
С	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.	3с		
4a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		Х
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.	4b		
С	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.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organization's organization document authorizing such action; and (iv) how the action was accomplished (such as by	5a		Х
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the			21
c	organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?	5b 5c		
	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? <i>If 'Yes,' provide detail in Part VI.</i>	6		X
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	7		Х
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	8		X
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 .	9a		Х
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI .	9b		X
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI .	9с		Х
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations), and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below.	10a		X
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.)	10b		
BAA	TEEA0404L 06/07/18 Schedule A (Form 990	0 or 9	90-EZ	2018

Pa	rt IV	Supporting Organizations (continued)			
11	∐ac t	the organization accepted a gift or contribution from any of the following persons?		Yes	No
		son who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
		rning body of a supported organization?	11a		Х
	b A fan	nily member of a person described in (a) above?	11b		X
		% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		X
Se	ction l	B. Type I Supporting Organizations			
1	Did th	and disperses trustees or membership of one or more supported examinations have the newer to regularly experient		Yes	No
1	or ele Part If the direct	ne directors, trustees, or membership of one or more supported organizations have the power to regularly appoint not at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in III how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. For organization had more than one supported organization, describe how the powers to appoint and/or remove to tors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, and to such powers during the tax year.	1	Х	
2		ne organization operate for the benefit of any supported organization other than the supported organization(s)	Ė	71	
_	that o	operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the orting organization.	2		Х
Sec		C. Type II Supporting Organizations			
				Yes	No
1	of ea	a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees ch of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the orting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec		D. All Type III Supporting Organizations			
-	-	D. All Type III Supporting Siguinzations	 ,	Yes	No
1	Did the organ	ne organization provide to each of its supported organizations, by the last day of the fifth month of the nization'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 nization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
	orgai	inzation's governing documents in effect on the date of notification, to the extent not previously provided:	Ė		
2	Were	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported nization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how			
	the o	rganization maintained a close and continuous working relationship with the supported organization(s).	2		
3	voice	eason of the relationship described in (2), did the organization's supported organizations have a significant in the organization's investment policies and in directing the use of the organization's income or assets at			
		nes during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played is regard.	3		
Se	ction I	E. Type III Functionally Integrated Supporting Organizations			•
1	Checl	k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
	_	The organization satisfied the Activities Test. Complete line 2 below.			
	믐	The organization satisfied the Activities rest. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below.			
	금	The organization is the parent of each of its supported organizations. <i>Complete line's below.</i> The organization supported a governmental entity. <i>Describe in Part VI how you supported a government entity (see in the organization supported a government entity (see in the organization supported a government entity (see in the organization supported and supported and supported supported in the organization supported in the organization supported and supported in the organization supported in the organization</i>	netrue	tions)	
	с 📙 I	The organization supported a governmental entity. Describe in Fait VI now you supported a government entity (see in	istruc	110115).	•
2	Activi	ities Test. Answer (a) and (b) below.		Yes	No
	suppo orgai respo	ubstantially all of the organization's activities during the tax year directly further the exempt purposes of the orted organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported nizations and explain how these activities directly furthered their exempt purposes, how the organization was possive to those supported organizations, and how the organization determined that these activities constituted	2-		
	subst	tantially all of its activities.	2a		
	the o	ne activities described in (a) constitute activities that, but for the organization's involvement, one or more of rganization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for rganization's position that its supported organization(s) would have engaged in these activities but for the			
		nization's involvement.	2b		
3	Parer	nt of Supported Organizations. Answer (a) and (b) below.			
	a Did the each	ne organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? <i>Provide details in Part VI</i> .	3a		
		ne organization exercise a substantial degree of direction over the policies, programs, and activities of each of its orted organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard.	3b		

Sche	edule A (Form 990 or 990-EZ) 2018 Colorado Early Colleges -		46-08	72271	Page
Pa	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	aniza	tions		
1	Check here if the organization satisfied the Integral Part Test as a qualifying tru instructions. All other Type III non-functionally integrated supporting organization	st on N ons mu	ov. 20, 1970 (explain in st complete Sections A	Part VI). See through E.	:
Sec	tion A — Adjusted Net Income		(A) Prior Year	(B) Currei (option	
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			
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Currei (option	
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	t			
	Average monthly value of securities	1a			
	Average monthly cash balances	1b			
	Fair market value of other non-exempt-use assets	1c			
	d Total (add lines 1a, 1b, and 1c)	1d			
•	e Discount claimed for blockage or other factors (explain in detail in Part VI):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d.	3			
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by .035.	6			
_ 7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sec	tion C — Distributable Amount			Current	Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1			
2	Enter 85% of line 1.	2			
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3			
4	Enter greater of line 2 or line 3.	4			
5	Income tax imposed in prior year	5			

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). 7 BAA Schedule A (Form 990 or 990-EZ) 2018

Distributable Amount. Subtract line 5 from line 4, unless subject to emergency

temporary reduction (see instructions).

Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)	
Sec	tion D - Distributions	Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions.	
7	Total annual distributions. Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9	Distributable amount for 2018 from Section C, line 6	
10	Line 8 amount divided by line 9 amount	

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			

BAA

Schedule A (Form 990 or 990-EZ) 2018

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

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Colorado Early Colleges -Ft. Collins Building Corporation 46-0872271 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered 'Yes' on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year..... 1 Aggregate value of contributions to (during year). Aggregate value of grants from (during year)...... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?... No Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring No impermissible private benefit?.... Yes **Conservation Easements.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements..... 2 a **b** Total acreage restricted by conservation easements. 2 b c Number of conservation easements on a certified historic structure included in (a)..... 2 c d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register..... Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, No and enforcement of the conservation easements it holds?..... Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?..... In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 8. 1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide,

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the

a Revenue included on Form 990, Part VIII, line 1.

following amounts relating to these items:

in Part XIII, the text of the footnote to its financial statements that describes these items.

Part III Organizations Maintai	ning Colle	ctions of Art, H	istoricai i re	asures, or C	Other Similar Ass	ets (continu	iea)
3 Using the organization's acquisition, items (check all that apply):	accession, a	nd other records, che	eck any of the fol	lowing that are	a significant use of its	collection	
a Public exhibition		d Lo	oan or exchange	e programs			
b Scholarly research		e 0	ther				
c Preservation for future genera	ations						
4 Provide a description of the organiza Part XIII.	ation's collecti	ons and explain how	they further the	organization's e	exempt purpose in		
5 During the year, did the organizat to be sold to raise funds rather the	an to be mai	ntained as part of t	he organization	's collection?.		Yes	No
Part IV Escrow and Custodial line 9, or reported an a	Arrangen amount on	Form 990, Part	X, line 21.	ization ansv	wered 'Yes' on Foi	rm 990, Pai	1 IV,
1 a Is the organization an agent, trus on Form 990, Part X?	tee, custodia	n or other intermed	iary for contribu	utions or other	assets not included	Yes	No
b If 'Yes,' explain the arrangement	in Part XIII a	nd complete the fol	llowing table:		<u>.</u>		_
						Amount	
c Beginning balance							
d Additions during the year							
e Distributions during the year							
f Ending balance							_
2a Did the organization include an a						Yes	No
b If 'Yes,' explain the arrangement	in Part XIII.	Check here if the ex	kplanation has b	been provided	on Part XIII		
D IV E I O	1 1 '6				000 D 1 N / 1	10	
Part V Endowment Funds. Co							
1 - Deginning of year belongs	(a) Current	year (b) Prio	r year (c)	Two years back	(d) Three years back	(e) Four year	's back
1 a Beginning of year balance							
b Contributions							
c Net investment earnings, gains,							
and losses							
` <u> </u>							
e Other expenditures for facilities and programs							
f Administrative expenses							
g End of year balance							
2 Provide the estimated percentage	of the curre	nt year end balance	e (line 1g, colun	nn (a)) held as	S:		
a Board designated or quasi-endowme	ent ►	%					
b Permanent endowment ►	ଖ						
c Temporarily restricted endowmen	t -	%					
The percentages on lines 2a, 2b, an	id 2c should e	qual 100%.					
3a Are there endowment funds not in the	ne possession	of the organization t	hat are held and	administered for	or the		
organization by:	·	-				Yes	No
(i) unrelated organizations						3a(i)	<u> </u>
(ii) related organizations						3a(ii)	
b If 'Yes' on line 3a(ii), are the rela	-	· ·		e R?		3b	
4 Describe in Part XIII the intended			wment funds.				
Part VI Land, Buildings, and I Complete if the organization			Form 990, Pa	art IV, line 1	l 1a. See Form 99	0, Part X, li	ne 10.
Description of property		(a) Cost or other ba (investment)		or other (other)	(c) Accumulated depreciation	(d) Book va	alue
1 a Land							
b Buildings			22,1	62,553.	1,980,201.	20,182	,352.
c Leasehold improvements				,	,	, :=	
d Equipment							
e Other	<u>.</u>		8	43,414.	843,414.		0.
Total. Add lines 1a through 1e. (Column	n (d) must ed	qual Form 990, Part	X, column (B),	line 10c.)	-	20,182	,352.
BAA	<u> </u>				Schedi	ule D (Form 99	

Schedule D (Form 990) 2018 Colorado Early Col	leges -		46-0872271	Page 3
Part VII Investments – Other Securities.		N/A		-
Complete if the organization answered	'Yes' on Form 990), Part IV, line 11b. Se	ee Form 990, Part X	, line 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation	n: Cost or end-of-year market va	lue
1) Financial derivatives				
2) Closely-held equity interests				
3) Other				
A)				
B)				
 C)				
D)				
E)				
-)				
G)				
 				
l) 				
otal. (Column (b) must equal Form 990, Part X, column (B) line 12.) 🕨				
Part VIII Investments — Program Related.	'Voc' on Form 000	N/A N Bart IV line 11e Sc	oo Form 000 Port V	lino 13
Complete if the organization answered (a) Description of investment	(b) Book value		Cost or end-of-year mark	
• • • • • • • • • • • • • • • • • • • •	(b) book value	(c) Wethou of Valuation.	Cost of end-of-year mair	tet value
(1)				
(2) (3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
otal. (Column (b) must equal Form 990, Part X, column (B) line 13.) •				
Other Assets. Complete if the organization answered				
Complete if the organization answered	'Yes' on Form 990), Part IV, line 11d. Se	ee Form 990, Part X	, line 15
, ,	scription		(b) Book	value
(1) (2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
otal. (Column (b) must equal Form 990, Part X, column (E	3) line 15.)			
Other Liabilities. Complete if the organization answered 'Yes' on F		le or 11f. See Form 990, Pa	rt X, line 25.	
(a) Description of liability	(b) Book value			
(1) Federal income taxes	005.16			
(2) Accrued Interest Payable (3)	235,16	8.		
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
/11)	i			

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

235,168

Total. (Column (b) must equal Form 990, Part X, column (B) line 25.).

Part XI Reconciliation of Revenue per Audited Financial Statement	s With Revenue per Re	turn. N/A
Complete if the organization answered 'Yes' on Form 990, P	art IV, line 12a.	
1 Total revenue, gains, and other support per audited financial statements		1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments	2 a	
b Donated services and use of facilities	2 b	
c Recoveries of prior year grants	2 c	
d Other (Describe in Part XIII.)	2 d	
e Add lines 2a through 2d.		2 e
3 Subtract line 2e from line 1		3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a	
b Other (Describe in Part XIII.)	4 b	
c Add lines 4a and 4b		4 c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).		5
Doub VII Decembilistics of Expenses way Audited Einemais Chatemen		37./3
		Return. N/A
Complete if the organization answered 'Yes' on Form 990, P		Return. N/A
	art IV, line 12a.	Return. N/A
Complete if the organization answered 'Yes' on Form 990, P	art IV, line 12a.	
Complete if the organization answered 'Yes' on Form 990, P 1 Total expenses and losses per audited financial statements	art IV, line 12a.	
Complete if the organization answered 'Yes' on Form 990, P 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	art IV, line 12a.	
Complete if the organization answered 'Yes' on Form 990, P 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities	2a 2b	
 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments 	2a 2b 2c	
Complete if the organization answered 'Yes' on Form 990, P 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses.	2a	
Complete if the organization answered 'Yes' on Form 990, P 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.)	2a	1
Complete if the organization answered 'Yes' on Form 990, P 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d.	2a	1 2 e
Complete if the organization answered 'Yes' on Form 990, P 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1.	2a	1 2 e
Complete if the organization answered 'Yes' on Form 990, P 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. b Other (Describe in Part XIII.)	2a	1 2 e
Complete if the organization answered 'Yes' on Form 990, P 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. b Other (Describe in Part XIII.) c Add lines 4a and 4b.	2a	1 2e 3
Complete if the organization answered 'Yes' on Form 990, P 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. b Other (Describe in Part XIII.)	2a	2e 3

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 XI, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

BAA Schedule D (Form 990) 2018

SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047 2018

Open To Public Inspection

1 (a) Name of disqualified person organization organization (c) Description of transaction Yes (1) (2) (3) (4) (5) (6) 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958. 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization. S Part II Loans to and/or From Interested Persons. Complete if the organization answered 'Yes' on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22. (a) Name of interested person (b) Relationship (c) Purpose of (d) Loan to or (e) Original (f) Balance due (g) In default? (h) Approved (i) Verson to or (ii) Part III (b) Approved (iii) Part III (b) Approved (iii) Part III (b) Approved (iii) Part III (c) Purpose of (d) Loan to or (e) Original (f) Balance due (g) In default? (h) Approved (iii) Part III (h) Approved (iii) Part III (h) Approved (iiii) Part III (h) Approved (iiii) Part III (h) Approved (iiii) Part III (h) Approved (iiiii) Part III (h) Approved (iiiiiii) Part III (h) Approved (iiiiiiiiii) Part III (h) Approved (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. 1 (a) Name of disqualified person (b) Relationship between disqualified person and organization (c) Description of transaction (d) CC Yes (1) (2) (3) (4) (5) (6) 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958. 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Complete if the organization answered 'Yes' on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22. (a) Name of interested person (b) Relationship between disqualified person and (c) Description of transaction (b) Relationship between disqualified person and (c) Description of transaction (c) Description of transaction (d) CC Yes (a) Name of interested person (b) Relationship with organization answered 'Yes' on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22. (a) Name of interested person (b) Relationship with organization amount on Form 990, Part X, line 5, 6, or 22. (b) Relationship in the principal amount of tax incurred by the organization? (c) Pripose of long in the principal amount of tax incurred by the organization? (b) Relationship in the principal amount of tax incurred by the organization? (b) Relationship in the principal amount of tax incurred by beard or tax incurred by t	
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To From Yes No Yes No Yes (1)	/ritten ement?
(1)	
	No
	-
(3)	
(4)	
(5)	
(6)	-
(9)	-
Part III Grants or Assistance Benefiting Interested Persons.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 27.	
(a) Name of interested person (b) Relationship between interested person and the organization (c) Amount of assistance (d) Type of assistance (e) Purpose of as	istanc
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
7)	
(8)	
(9)	
(10)	

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz rever	aring of zation's nues?
				Yes	No
(1) CSEC-Ft Collins	Common BOD	235,173.	Bldg Lease Revenue		Х
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information.

Provide additional information for responses to questions on Schedule L (see instructions).

Supplemental Information

Two of the board of directors are also on the Board of Directors of the Colorado

Springs Early Colleges, which paid facility rent to the Colorado Early Colleges - Fort

Collins Building Corporation.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

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

2018

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Colorado Early Colleges - Ft. Collins Building Corporation

Employer identification number 46-0872271

Reporting Change

During FYE 6/30/2019, the CSEC-Ft. Collins Building Corporation, was split up between three other building Corporations: CSEC Building Corporation; Douglas County School Building Corporation & Aurora Charter School Building Corporation. As a result, the beginning net assets of the CSEC Building Corporation were restated as the beginning balance was transferred to CSEC Building Corporation.

Form 990, Part I, Line 1 - Organization Mission or Significant Activities

To provide high quality education facilities to students of charter schools in Colorado through the acquisition and management of property in order to make said property available to the schools, other nonprofit organizations and for profit entities. It may also engage in promoting high quality charter school education generally as a secondary and infrequent activity.

Form 990, Part III, Line 1 - Organization Mission

To provide high quality education facilities to students of charter schools in Colorado through the acquisition and management of property in order to make said property available to the schools, other nonprofit organizations and for profit entities. It may also engage in promoting high quality charter school education generally as a secondary and infrequent activity.

Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder

As defined in the bylaws the CEC-Fort Collins Building Corporation shall have a single member, Colorado Springs Early Colleges, a Colorado public charter school and nonprofit organization.

Form 990, Part VI, Line 11b - Form 990 Review Process

The Form 990 was reviewed and compared to the audited financial statements before being filed.

Name of the organization Colorado Early Colleges -	Employer identification number
	46-0872271

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

The Board adopted a conflict of interest policy that is included in the by-laws of the organizations.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Documents are available to the public upon request.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Part I Identification of Disregarded Entities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 33.

(b) Primary activity

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990.

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

2018

(f) Direct controlling entity

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

(1)

Colorado Early Colleges - Ft. Collins Building Corporation

(a)
Name, address, and EIN (if applicable) of disregarded entity

Employer identification number 46-0872271

(c)
Legal domicile (state or foreign country)

(d) Total income

(e) End-of-year assets

<u>(2)</u>									
(2)									
(3)									
Part II Identification of Related Tax-Exempt On had one or more related tax-exempt org	r ganizations. Complete anizations during the ta	if the organization ax year.	answered '	Yes' on Form 99	90, Par	t IV, line 34,	becau	se it	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Coo section	le Public charity (if section 50	(e) Public charity status (if section 501(c)(3))		olling	(g) Sec 512(b)(1 controlled ent	
(1) Colonado Camingo Esalu Collogoo Et								Yes	No
(1) Colorado Springs Early Colleges-Ft 4435 N Chestnut Street Colorado Springs, CO 80907 20-5470086	Lease education facilities from CEC-FCBC	СО	501 (c)(school-1 3) (1)(1		N/A			Х
(2)	010 1 050	00	301 (0) ((1) (1	.1/	14, 21			21
(3)									
<u>(4)</u>									

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

(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections	Share of total income	(g) Share of end-of-year assets	ear I tior		(h) Disproportionate allocations?		amount in box 20 of Schedule K-1 (Form	General or managing partner?		(k) Percentage ownership
	country)		512-514)			Yes	No	1065)	Yes	No			
	Primary activity	Primary activity Legal domicile (state or foreign country)	domicile controlling (state or entity	domicile controlling (related, unrelated, (state or entity excluded from tax	Primary activity	Primary activity Legal domicile controlling (related, unrelated, excluded from tax Share of total share of end-of-year assets	domicile controlling (related, unrelated, income end-of-year alloca foreign under sections	domicile controlling (related, unrelated, income end-of-year tionate allocations? foreign under sections	domicile controlling (related, unrelated, excluded from tax foreign under sections (related, unrelated, excluded from tax under sections under sections) end-of-year assets allocations? 20 of Schedule K-1 (Form	domicile controlling (related, unrelated, state or entity excluded from tax under sections (state or foreign under sections) (related, unrelated, excluded from tax under sections) end-of-year assets allocations? 20 of Schedule part	domicile controlling (related, unrelated, state or entity excluded from tax under sections (state or foreign controlling excluded from tax under sections entity excluded from tax under sections entitle end-of-year allocations? 20 of Schedule partner? Excluded from tax under sections entity excluded from tax under sections end-of-year allocations? 20 of Schedule partner?		

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	Sec 512 controlled) (b)(13) d entity?
		country)	Critity	or trusty				Yes	No
(1)									
	Ī								
	Ī								
(2)									-
=======================================	†								
	†								
(3)									
<u></u>	†								
	†								
	†								
							<u> </u>		

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

Χ

Yes No

1 a

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

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

b Gift, grant, or capital contribution to related organization(s)			1b		X
c Gift, grant, or capital contribution from related organization(s).			1 с		X
d Loans or loan guarantees to or for related organization(s)			1 d		X
e Loans or loan guarantees by related organization(s)			1е		Χ
f Dividends from related organization(s)			1f		Х
g Sale of assets to related organization(s)			1g		Χ
h 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	Χ	
k Lease of facilities, equipment, or other assets from related organization(s)			1k		Х
I Performance of services or membership or fundraising solicitations for related organization(s)					Х
m Performance of services or membership or fundraising solicitations by related organization(s)					Х
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)					X
o Sharing of paid employees with related organization(s)					X
G					71
p Reimbursement paid to related organization(s) for expenses			1р		Х
q Reimbursement paid by related organization(s) for expenses.					X
Trainibulation on paid by rolated organization (5) for expenses.			19		Λ
r Other transfer of cash or property to related organization(s)			1r		Х
s Other transfer of cash or property from related organization(s)					X
2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including cove			13		Λ
<u> </u>	· · · · · · · · · · · · · · · · · · ·		((h	
(a) Name of related organization	(b) Transaction	(c) Amount involved	ر) Method of و		
	type (a-s)		amount	invoiv	ea
1) Colorado Springs Early Colleges-Ft Colli	j	235,173.	payment	s re	ec'd
2)					
3)					
·					
4)					
<u>v</u>					
5)					
6)					
TEEA5003L 06/07/18		Schedul	e R (Forn	1 990)	2018

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unre- lated, excluded from tax under	(e) Are all partners section 501(c)(3) organizations?		Share of total income	al income I end-of-vear I		h) ropor- nate itions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing		(k) Percentage ownership
			from tax under sections 512-514)	Yes	No			Yes	No	(1 01111 1 0 0 0)	Yes	No	•
<u>(1)</u>	-												
<u>(2)</u>	-												
<u>(3)</u>													
<u>(4)</u>													
<u>(5)</u>	-												
<u>(6)</u>													
<u>(7)</u>	-												
<u>(8)</u>													
DAA					05/07/1					Cabadul	a D /		201.2019

Part VII Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.