# **Return of Organization Exempt From Income Tax**

Form **990** 

Department of the Treasury Internal Revenue Service

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.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

20 19

Open to Public Inspection

A F	or th	e 201	9 calen	dar year, or tax year begin	ning 07/01, <b>201</b>	9, and endin	ıg		06	/30 <b>,20</b>	20	
B c	heck if ap	nlicable:		•	CATIONAL SOCIETY OF C	OLORADO		D Employer ide	entific	ation numl	oer	
	Addre		COL	LEGE								
	chang			Business As		Room/suite		84-6029 E Telephone n				
	Name	change		er and street (or P.O. box if mail is	•							
	Initial	return										
	Termi		1	r town, state or province, country, a							000	165
	return			ORADO SPGS, CO 8090 and address of principal officer:	LYRAE WILLIAMS			G Gross receip				, 465. X No
	pendi				RE STREET, COLORADO SI	DDINGS C	10	subordinates	?		ŀ	$\overline{}$
_	Toy ov	empt st		X   501(c)(3)   501(c) (	·			H(b) Are all subord		. (see instruct	Yes [	No
				OLORADOCOLLEGE.EDU	) <b> </b>	) or   52	/				10115)	
					Association Other	I Vear of	f format	H(c) Group exemination: 1962 M			micile:	CO
	art I		mmary	22 Corporation Hust	ASSOCIATION OTHER	L Teal Of	i ioiiiiai	1011. 1702 101	State	or regar dor	mone.	
- '				e the organization's mission or	most significant activities: TO BR	RING WOME	N OF	THE COMM	UNI	TY AND	THE	<u> </u>
Ф					O GIVE ASSISTANCE THR						_====	
anc					HE COLORADO COLLEGE.							
ern	2	 Check	k this box	if the organization di	scontinued its operations or dispos			of its net asset				
Governance					body (Part VI, line 1a)				3			21.
⋖ర					he governing body (Part VI, line 1b)				4		-	17.
ţie					ndar year 2019 (Part V, line 2a)				5			0.
Activities				of volunteers (estimate if necess					6			30.
Ă	7a	Total	unrelated	d business revenue from Part VI	II, column (C), line 12				7a			0
	ı				Form 990-T, line 34				7b			0
Revenue								Prior Year		Curr	ent Ye	
				and grants (Part VIII, line 1h)		PY FOR		13,41				,390
				ce revenue (Part VIII, line 2g)	· · · · · · · · · · ·   DUBLIC	INSPECTION		3,35				,352
				come (Part VIII, column (A), line	(S 3, 4, and 70)			190,09				,406
	ı				6d, 8c, 9c, 10c, and 11e)			12,55	$\overline{}$			,908
					equal Part VIII, column (A), line 12)			219,41				,056
					ımn (A), lines 1-3)			138,63	0.		145	,152 0
					mn (A), line 4)				0.			0
ses					efits (Part IX, column (A), lines 5-10)				0.			
Expenses	Ioa	Total	ssionai ii tundroioi	undraising rees (Part IX, column	(A), line 11e) D), line 25) ▶	0			0.	0		
Ĕ					a-11d, 11f-24e)			22,80	)5.		21	,050
					Part IX, column (A), line 25)			161,43				,202
					line 12			57,98				,854
o s			140 1000	oxponiced Cabination in to treat			Begin	ning of Current \	_	End	of Year	
Net Assets or Fund Balances	20	Total	assets (P	Part X, line 16)				3,897,40	9.	4	,053	,477
Ass	21	Total	liabilities	(Part X, line 26)					0.			0
E E	22	Net as	ssets or t	fund balances. Subtract line 21	from line 20			3,897,40	9.	4	,053	,477
Pa	rt II	Si	gnature	Block								
Und	der per	alties o	of perjury,	I declare that I have examined thi	s return, including accompanying scheo officer) is based on all information of wh	dules and staten	nents, a	and to the best of	my k	nowledge	and be	lief, it is
truc	, 00110	Ct, and	complete.	. Decidiation of preparer (other than	officer) is based on all information of wi	nen preparer na	S driy Ki	lowicage.				
Sig	n		0:	t - tt				D-4-				
Hei			Signature	e of officer				Date				
			<del></del>	what a conserved data								
			,, ,	orint name and title	Dranarata aignatura	Doto				TINI		
Paic	ı			parer's name	Preparer's signature	Date		Check	"	DUUUE 0	066	
Pre	oarer		M R SI					self-employ		P00958		
Use	Only			BKD, LLP	200 got opano gpt	0040				$\frac{016026}{471-4}$		
May	the II			111 SOUTH TEJON, SUITE 8 s return with the preparer shown	300 COLORADO SPRINGS, CO 80903-	-9848		Phone no.	119			
<u> </u>					, , , , , , , , , , , , , , , , , , , ,							No (2019)
ı-OΓ	rapel	WUIK	neuuctio	on Act Notice, see the separate	ธ แเอน นบนบเเอ้.					rom	・シブリ	(∠∪19)

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Pa	Statement of Program Service Accomplishments
_	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO BRING WOMEN OF THE COMMUNITY AND THE COLORADO COLLEGE TOGETHER TO
	GIVE ASSISTANCE THROUGH SCHOLARSHIPS AND GRANTS TO THE STUDENTS OF
	THE COLORADO COLLEGE AND TO UNDERTAKE PROGRAMS AND PROJECTS OF THE
	SOCIETY'S CHOOSING THAT WILL BENEFIT THE COLORADO COLLEGE.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code: ) (Expenses \$ 152,696. including grants of \$ 145,152. ) (Revenue \$ 3,013. )
	TO PROVIDE ASSISTANCE THROUGH SCHOLARSHIPS AND GRANTS TO THE
	STUDENTS OF THE COLORADO COLLEGE.
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ▶ 152,696.

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Part	Checklist of Required Schedules		V	Na
4	In the expenientian described in section E01(a)(2) or 4047(a)(4) (other than a private foundation)? If "Vec"		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	1	х	
2	complete Schedule A	2	- 2	X
2 3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			21
3	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
		3		21
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	4		Х
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		21
5	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	-		21
0	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,	-		21
′	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	<b>-</b>		21
0	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	-		
9	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	-		
10	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		
• •	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
u	complete Schedule D, Part VI	11a		Х
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more	- · · · ·		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
·	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
-	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII.	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
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		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		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
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			3.5
	domestic government on Part IX, column (A), line 12 If "Ves." complete Schedule I, Parts I and II	21		X

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Part	Checklist of Required Schedules (continued)		V	N <sub>a</sub>
22	Did the comparisor report more than OF 000 of greate or other assistance to or for democial individuals on		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		21	
23	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	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
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			v
00	persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
_	Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		Х
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	200		
·	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
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		X
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		X
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
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? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	20	Х	
Dort	19? Note: All Form 990 filers are required to complete Schedule O.	38	Λ	
Part				
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1 9	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		. 03	
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and			
·	reportable gaming (gambling) winnings to prize winners?	1c		
	_ , , , , , , , , , , , , ,			

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return. 2a 0.			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
-	<b>Note:</b> 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?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
<b>-</b> a	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
h	If "Yes," enter the name of the foreign country $\blacktriangleright$			
b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5.2	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
va	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
b	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
u	and services provided to the payor?	7a		Х
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
·	required to file Form 8282?	7c		Х
Ч	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<b>Note:</b> 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			
	Enter the amount of reserves on hand	1.4-		X
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule</i> O · · · · · ·	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	15		Х
	excess parachute payment(s) during the year?	13		21
16	If "Yes," see instructions and file Form 4720, Schedule N.	16		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	10		
	n 100, complete i dini 7720, concuule C.			

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 on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

Sect	ion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	21			
	If there are material differences in voting rights among members of the governing body, or					
	if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	17			
2	Did any officer, director, trustee, or key employee have a family relationship or a business re	lations	ship with			
	any other officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or ur	nder t	he direct			
	supervision of officers, directors, trustees, or key employees to a management company or other p	persor	1?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was fi	led?.		4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's	assets	?	5		X
6	Did the organization have members or stockholders?			6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to el	ect o	r appoint			
	one or more members of the governing body?			7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval	by) r	nembers,		37	
	stockholders, or persons other than the governing body?			7b	X	
8	Did the organization contemporaneously document the meetings held or written actions under	ertake	n during			
	the year by the following:				v	
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	Λ	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot	be re	ached at			Х
Cooti	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.  on B. Policies (This Section B requests information about policies not required by the Inte			9	1	Λ
Jecu	on B. Folicies (This Section B requests information about policies not required by the line	iiiai	Nevenue	Code	·) Yes	No
40-	Did the same institute have level shouters branches as affiliates?			10a		X
	Did the organization have local chapters, branches, or affiliates?			IVa		
b	If "Yes," did the organization have written policies and procedures governing the activities of		-	10b		
44-	affiliates, and branches to ensure their operations are consistent with the organization's exempt po	•		11a	X	
iia b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before find Describe in Schedule O the process, if any, used by the organization to review this Form 990.	ling th	e form? .	···		
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>			12a		Х
b	Were officers, directors, or trustees, and key employees required to disclose annually interests to					
b	rise to conflicts?	illat C	ould give	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the p	olicy?	If "Ves"			
·	describe in Schedule O how this was done	-		12c		
13	Did the organization have a written whistleblower policy?			13		Х
14	Did the organization have a written document retention and destruction policy?			14		Х
15	Did the process for determining compensation of the following persons include a review ar					
-	independent persons, comparability data, and contemporaneous substantiation of the deliberation		-			
а	The organization's CEO, Executive Director, or top management official			15a		
b	Other officers or key employees of the organization			15b		
	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	r arra	ingement			
	with a taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization					
	participation in joint venture arrangements under applicable federal tax law, and take steps to			4		
2054	organization's exempt status with respect to such arrangements?			16b		<u> </u>
	on C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed		=			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), (3)s only) available for public inspection. Indicate how you made these available. Check all that ap		and 990-T	(Sec	tion 5	U1(c)
	Own website Another's website X Upon request Other (explain on Sc		a ())			
4.0			•	c : - r		- P -
19	Describe on Schedule O whether (and if so, how) the organization made its governing document and financial statements excitable to the public during the toxy year.	nents,	conflict o	ıntei	est p	olicy,
	and financial statements available to the public during the tax year.  State the name, address, and telephone number of the person who possesses the organization's to					

THE ORGANIZATION 14 EAST CACHE LA POUDRE STREET COLORADO SPRINGS, CO 80903 (719)632-7926

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	not che unless er and	a dir	tion more son is	s both	an	(D)  Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
				+	+	ьф				
(1)JUDY DEGROOT	1.00									
CO-PRESIDENT	1.00	Х		х				0.	0.	0.
(2)KAREN RUBIN	1.00									
FIRST VICE PRESIDENT	0.	Х		х				0.	0.	0.
(3) PATRICIA ARONSTEIN	1.00									
SECOND VICE PRESIDENT	0.	Х		Х				0.	0.	0.
(4) SHARON GRADY	1.00									
RECORDING SECRETARY	0.	X		Х				0.	0.	0.
(5)JUDITH LIGHT	1.00									
CORRESPONDING SECRETARY	0.	X		Х				0.	0.	0.
(6)LYRAE WILLIAMS	1.00									
TREASURER	40.00	X		Х				0.	0.	0.
(7) MONIQUE MICHAUD	1.00									
ASSISTANT TREASURER	1.00	X		Х				0.	0.	0.
(8) BRITTANY ALMEIDA	1.00									
TRUSTEE	0.	X						0.	0.	0.
(9)LISA BONWELL	1.00									
TRUSTEE	0.	X						0.	0.	0.
(10) CAROLYN DICKERSON	1.00									
TRUSTEE	0.	X						0.	0.	0.
(11) AMY DOUNAY	1.00									
TRUSTEE	40.00	X						0.	0.	0.
(12) PAMELA FICKES-MILLER	1.00									
TRUSTEE	0.	X						0.	0.	0.
(13) KAREN HENDERSON	1.00									
TRUSTEE	0.	Х						0.	0.	0.
(14) JERI PETERSON	1.00									
TRUSTEE	0.	X						0.	0.	0.

Form **990** (2019)

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R ang Form 990 (2019)

Part VII Section A. Officers, Directors, Tru	ustees, Ke	y En	plo	ye	es,	and H	lig	hest Compensat	ed Employees (d	ontinue	ed)	
(A) Name and title	(B) Average hours per week (list any hours for	box,	unles	Pos heck ss pe	erson	e than o is both tor/trust	an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	am	(F) timated nount of other pensation	
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	orga and	om the anization d related anization	t
15) TESS POWERS TRUSTEE	1.00	X						0	0.			0
16) KELLEY RIGGS	1.00								·			
TRUSTEE	0.	X						0	0.			0
17) DEBRA WYNN	1.00											
TRUSTEE	0.	X						0	0.			0
18) JUDY SONDERMANN	1.00											
TRUSTEE	0.	X						0	0.			0
19) CINDI ZENKERT-STRANGE	1.00											
TRUSTEE	0.	X						0	0.			C
20) NADIA HUNTER	1.00											
TRUSTEE	0.	X						0	0.			0
21) EILEEN MARTIN	1.00											
TRUSTEE	0.	X						0	0.			C
		-										
1b Sub-total							$\blacktriangleright$	0.	0.			0.
c Total from continuation sheets to Part VII, S	ection A						$\blacktriangleright$	0.	0.			0.
d Total (add lines 1b and 1c)							<b>&gt;</b>	0.	0.			0.
Total number of individuals (including but not reportable compensation from the organization)		hose 0.		d al	bov	e) who	o re	eceived more than	\$100,000 of			
	··· •										Yes	No
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched										3		Х
4 For any individual listed on line 1a, is the organization and related organizations graindividual	eater than	\$15	0,0	00?	. It	"Yes	5, "	complete Schedu	le J for such	4		X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Y	accrue co	mpen	sati	on 1	fron	n any	un	related organization	on or individual	5		X
Section B. Independent Contractors	os, comple	10 301	ı <del>c</del> ut	ii <del>c</del> J	, 101	SUUII	ρει	SUII		J		
Complete this table for your five highest compensation from the organization. Report of year.												

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization  $\triangleright$  0.

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# Part VIII Statement of Revenue

		Check if Schedule O contains a respo	nse or note to any				<u> </u>
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ıts	1a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b	3,230.				
֓֞֝֝֝֓֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	С	Fundraising events 1c					
25 =	d	Related organizations 1d					
ا≝ٍرَّ	е	Government grants (contributions) 1e					
Siz I	f	All other contributions, gifts, grants,					
5 to	•	and similar amounts not included above . 1f	9,160.				
호	g	Noncash contributions included in	3,1001				
	9	lines 1a-1f 1g	e l				
a c	<b>h</b>	· · · · · · · · · · · · · · · · · · ·		12,390.			
	h	Total. Add lines 1a-1f	Business Code	12,390.			
<sub>10</sub>				0.050	0.050		
Revenue	2a	MEETING FEES	900099	2,352.	2,352.		
re g	b						
e .	С						
<u>ē</u> <u>ē</u>	d						
ე	е						
ב	f	All other program service revenue					
	g	Total. Add lines 2a-2f	<u> ▶  </u>	2,352.			
	3	Investment income (including dividends,					
		other similar amounts)		64,873.			64,873
	4	Income from investment of tax-exempt bond		0.			
	5	Royalties	· ·	0.			
		(i) Real	(ii) Personal				
	6a	Gross rents 6a					
	_						
	b	Less: rental expenses 6b	+				
	С	Rental income or (loss) 6c		_			
	d	Net rental income or (loss)		0.			
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets					
		other than inventory <b>7a</b> 907,147.					
ē.	b	Less: cost or other basis					
evenue		and sales expenses 7b 776,614.					
	С	Gain or (loss) 7c 130,533.					
<u>-</u>	d	Net gain or (loss)		127,533.			127,533
Other R	8a	Gross income from fundraising					
ō	ou	events (not including \$					
		of contributions reported on line					
		1c). See Part IV, line 18 8a	8,042.				
			795.				
	b			7,247.			7,247
	С	Net income or (loss) from fundraising events		/,24/.			7,247
	9a	Gross income from gaming					
		activities. See Part IV, line 19 9a	0.				
	b	Less: direct expenses 9b	0.				
		Net income or (loss) from gaming activities		0.			
	С						
	с 10а	Gross sales of inventory, less	1				
		Gross sales of inventory, less returns and allowances 10a	0.				
	10a	returns and allowances	0.				
	10a	• •	0.	0.			
	10a b	returns and allowances	0.	0.			
	10a b c	returns and allowances	0.	0.	661.		
	10a b c	returns and allowances	0.  Business Code		661.		
	10a b c	returns and allowances	0.  Business Code		661.		
	10a b c	returns and allowances 10a  Less: cost of goods sold 10b  Net income or (loss) from sales of inventory.  MISCELLANEOUS REVENUE	0.  Business Code		661.		
Revenue	10a b c	returns and allowances	0.  Business Code 900099		661.		

# Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a resp	onse or note to any lin	ne in this Part IX		
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	0.			
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	145,152.	145,152.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	0.			
4	Benefits paid to or for members	0.			
5	Compensation of current officers, directors,				
	trustees, and key employees	0.			
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and	0			
	persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	0.			
8	Pension plan accruals and contributions (include	_			
	section 401(k) and 403(b) employer contributions)	0.			
9	' '	0.			
10	,	0.			
	Fees for services (nonemployees):	0.			
	a Management	0.			
	Legal	3,250.		3,250.	
	Accounting	0.		3,230.	
	Lobbying	0.			
	Professional fundraising services. See Part IV, line 17.	8,442.		8,442.	
	f Investment management fees	7,111		5,7-1-1	
٤	Other. (If line 11g amount exceeds 10% of line 25, column	147.		147.	
12	(A) amount, list line 11g expenses on Schedule O.).  Advertising and promotion	190.	190.		
	Office expenses	229.	229.		
	Information technology	0.			
	Royalties	0.			
	Occupancy	0.			
	Travel	0.			
	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0.			
19	Conferences, conventions, and meetings	0.			
	Interest	0.			
21		0.			
22	Depreciation, depletion, and amortization	0.			
23	Insurance	1,667.		1,667.	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)	919.	919.		
_	COMMITTEE EXPENSES	4,360.			
_	PROGRAM EXPENSES PRINTING & PUBLICATIONS	4,360. 563.	4,360. 563.		
	MISCELLANEOUS	1,283.	1,283.		
_	·	1,203.	1,203.		
	All other expenses Add lines 1 through 34s	166,202.	152,696.	13,506.	
	Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the	100,202.	132,000.	15,500.	
-	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)	0.			

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# Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	art X		
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	82,260.	1	66,952.
	2	Savings and temporary cash investments	0.	2	0.
	3	Pledges and grants receivable, net	0.	3	0.
	4	Accounts receivable, net	0.	4	0.
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	0.	5	0.
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0.	6	0.
ts	7	Notes and loans receivable, net	0.	7	0.
Assets	8	Inventories for sale or use	0.	8	0.
Ä	9	Prepaid expenses and deferred charges	0.	9	0.
	10 a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation	0.	10c	0.
	11	Investments - publicly traded securities	3,777,658.	11	3,932,986.
	12	Investments - other securities. See Part IV, line 11	0.	12	0.
	13	Investments - program-related. See Part IV, line 11.	0.	13	0.
	14	Intangible assets	0.	14	0.
	15	Other assets. See Part IV, line 11	37,491.	15	53,539.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	3,897,409.	16	4,053,477.
	17	Accounts payable and accrued expenses	0.	17	0.
	18	Grants payable	0.	18	0.
	19	Deferred revenue.	0.	19	0.
	20	Tax-exempt bond liabilities.	0.	20	0.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0.	21	0.
w	22	Loans and other payables to any current or former officer, director,			
ţ		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons	0.	22	0.
Ë	23	Secured mortgages and notes payable to unrelated third parties	0.	23	0.
	24	Unsecured notes and loans payable to unrelated third parties	0.	24	0.
	25	Other liabilities (including federal income tax, payables to related third	<u> </u>	24	
	23	parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	0.	25	0.
	26	Total liabilities. Add lines 17 through 25	0.		0.
_	20	Organizations that follow FASB ASC 958, check here ► X	<u> </u>	20	0.
Ses		and complete lines 27, 28, 32, and 33.			
au	27	Net assets without donor restrictions	1,101,529.	27	1,082,406.
Bal	28	Net assets with donor restrictions.	2,795,880.	28	2,971,071.
ē	20	Organizations that do not follow FASB ASC 958, check here ▶	2,755,000.	20	2,7/1,0/1.
Fund Balances		and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds		29	
Assets or	30	Paid-in or capital surplus, or land, building, or equipment fund.		30	
SS	31	Retained earnings, endowment, accumulated income, or other funds		31	
ř	32	Total net assets or fund balances	3,897,409.	32	4,053,477.
Net	33	Total liabilities and net assets/fund balances	3,897,409.	33	4,053,477.
	55	Total liabilities and fiet assets/fully balaffees, , , , , , , , , , , , , , , , , , ,	3,001,400.	<u> </u>	Form <b>990</b> (2019)

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					age 12
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		215,	
2	Total expenses (must equal Part IX, column (A), line 25)	2		166,	
3	Revenue less expenses. Subtract line 2 from line 1	3			854.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3	,897,	409.
5	Net unrealized gains (losses) on investments	5		107,	214.
6	Donated services and use of facilities	6			0.
7	Investment expenses	7			0.
8	Prior period adjustments	8			0.
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10	4	,053,	477.
Part					
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>		
			_	Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplain	in		
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?.		2	а	X
	If "Yes," check a box below to indicate whether the financial statements for the year were cor	npiled	or		
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2	b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were aud				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov	ersight	of		
	the audit, review, or compilation of its financial statements and selection of an independent accounts	ant?	2	C	
	If the organization changed either its oversight process or selection process during the tax year, e				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	rth in t	the		
	Single Audit Act and OMB Circular A-133?		3	a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	dergo 1	the		
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a			b	

#### **SCHEDULE A** (Form 990 or 990-EZ)

# **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

Internal Revenue Service Name of the organization

Department of the Treasury

WOMANS EDUCATIONAL SOCIETY OF COLORADO

Employer identification number 84-6029599

COI	LLEGE					84-602959	99	
Pai	rt I Reason for Public	Charity Status (All	organizations must o	omplet	e this pa	art.) See instructions		
The	ne organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)							
1	A church, convention	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 99	90 or 990	)-EZ).)		
3		ative hospital service of		-				
4		ganization operated in	•				(iii). Enter the	
	hospital's name, city, a	=	,				, , , , , , , , , , , , , , , , , , , ,	
5		ated for the benefit of	a college or universit	v owne	d or ope	rated by a governme	ntal unit described in	
	section 170(b)(1)(A)(i		a conego or annoco.	.,	. О. ОРО	.a.ca 2, a goroc		
6		al government or gove	ernmental unit describe	d in sect	ion 170(	b)(1)(A)(v)		
7		normally receives a su			•	,,,,,,,	om the general nublic	
•		70(b)(1)(A)(vi). (Comp	•	ipport in	om a go	vormional and or ne	on the general public	
8		scribed in section 170(		Part II \				
9		ch organization describ				Lin conjunction with a	land-grant college	
•		land-grant college of a			-			
	university:	iana grant conege or a	grioditare (dee moti de		11101 1110 1	name, only, and state of	the conege of	
10		ormally receives: (1) m	ore than 331/3 % of its	sunnort	from co	ntributions membersh	nin fees, and aross	
	receipts from activities	s related to its exempt	functions - subject to	certain e	exception	s, and (2) no more tha	n 331/3% of its	
	support from gross inv	restment income and ι	ınrelated business tax	able inco	ome (les:	s section 511 tax) from	businesses	
11	acquired by the organi	ization after June 30, i		. , . , .		,		
	X An organization organ	·	•	•			earny out the nurnoses	
12		ly supported organizat						
	-	12a through 12d that o						
_		<del>-</del>	7.7		_	· ·	=	
а		g organization operated	•	•		• , , ,		
	· · · · · · · · · · · · · · · · · · ·	ization(s) the power to			ajority of	the directors of truste	es or the	
b		tion. <b>You must comple</b> g organization supervis			with ite	supported organization	on(e) by baying	
b		ent of the supporting						
				ine sam	e persor	is that control of man	age the supported	
•		must complete Part IV integrated. A support		stad in a	onnoctio	n with and functional	ly intograted with	
С		zation(s) (see instruction					iy integrated with,	
d		nally integrated. A sup	· ·				tod organization(s)	
u		ly integrated. The orga					= ::	
		structions). <b>You must c</b>	<del>-</del> -	-		· ·	an allentiveness	
е		organization received					I. Type III	
е		ed, or Type III non-func					і, туре ііі	
f	Enter the number of supp			porting t	nyanizai	IOTI.		
	Provide the following infor	<del>-</del>						
	(i) Name of supported organization		(iii) Type of organization	(iv) Is the	organization	(v) Amount of monetary	(vi) Amount of	
	(,)	(,	(described on lines 1-10	listed in yo	ur governing	support (see	other support (see	
Α	ATTACHMENT 1		above (see instructions))		ment?	instructions)	instructions)	
				Yes	No			
(A)								
<b></b>								
(B)								
(C)								
(D)								
(E)								
Tota	al					1/15 152		
						1/lb   L')		

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

Page 2 Schedule A (Form 990 or 990-EZ) 2019

Par	Complete only if you checke Part III. If the organization fai	d the box on	line 5, 7, or 8	of Part I or if t	he organization	on failed to qua	
Sect	tion A. Public Support					,	
	ndar year (or fiscal year beginning in)	<b>(a)</b> 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5 6	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) Public support. Subtract line 5 from line 4						
	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(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 activities, etc. (s	ee instructions)				12	
13	<b>First five years.</b> If the Form 990 is forganization, check this box and <b>stop here</b>						
Sect	tion C. Computation of Public Sup	port Percenta	ige				
14	Public support percentage for 2019 (li	ne 6, column (f	) divided by line	11, column (f))		14	%
15	Public support percentage from 2018						<u>%</u>
16a	331/3% support test - 2019. If the org						
	box and <b>stop here.</b> The organization quantum of the stop here.	•		•			
b	<b>b</b> 331/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
4		-		-			
1 / a	10%-facts-and-circumstances test - 2		=				
	10% or more, and if the organization mosts t					-	•
	Part VI how the organization meets toganization			_			
h	10%-facts-and-circumstances test - 2						
D	15 is 10% or more, and if the organic		-				
	Explain in Part VI how the organization						-
	supported organization				_	-	
18	Private foundation. If the organization						
	instructions						

Schedule A (Form 990 or 990-EZ) 2019 Page 3

#### Part III

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support					<u>,                                      </u>	
Caler	ndar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total
1	Gifts, grants, contributions, and membership fees	<del></del>					
	received. (Do not include any "unusual grants.")						
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					<u>                                       </u>	
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total
	Amounts from line 6						
	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	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						
14	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
-	and 12.)						
14	First five years. If the Form 990 is for	or the organiza	tion's first, seco	nd, third. fourth	or fifth tax v	ear as a section	501(c)(3)
	organization, check this box and <b>stop here</b> .	· ·	•		•		` ^ ` /
Sec	tion C. Computation of Public Supp						
<u> 15</u>	Public support percentage for 2019 (line 8,		<u> </u>	mn (f))		15	%
16	Public support percentage from 2018 Sche					16	%
	tion D. Computation of Investment						,0
<u> 17</u>	Investment income percentage for 2019 (lin			13. column (f))		17	%
18	Investment income percentage for 2013 (in					18	
	331/3% support tests - 2019. If the org						
134	17 is not more than 331/3%, check this	_					
h	331/3% support tests - 2018. If the orga	-	_	•			
D	line 18 is not more than 331/3%, check				•		· . —
20	<b>Private foundation.</b> If the organization d		•	•			
				,,,			

Schedule A (Form 990 or 990-EZ) 2019 Page 4

#### 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

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

		Yes	No
ig Dy			
	1	Х	
ıs ed	2		X
	2		21
er	3a		Х
nd ne	21-		
	3b		
3)	3с		
If			
	4a		X
jn on	4b		
on e <i>d</i> 3)			
	4c		
s," 'N n; on			
	5a		Х
	Ja		
ly	5b		
	5c		
o d or			
	6		X
or ty			
	7		X
?	8		X
·e			
ed	9a		X
h			
11	9b		Х
fit			
	9с		X
n ed			
	10a		X
to	10b		
			7) 2040

Part	Supporting Organizations (continued)			- 3
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		Х
b	A family member of a person described in (a) above?	11b		Х
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI.</b>	11c		Х
	on B. Type I Supporting Organizations			•
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
-	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations		\ <u>'</u>	
			Yes	NO
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control			
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	_		
Socti	on D. All Type III Supporting Organizations	1		
Jecu	on b. All Type in Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		163	140
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior			
	tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	1	Х	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	-		
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		Х
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3	Х	
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	structi	ons).	
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru		
2	Activities Test. Answer (a) and (b) below.		Yes	NO
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	2-	Х	
	that these activities constituted substantially all of its activities.	2a	Λ.	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the			
	reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	26	Х	
_	-	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i> Did the expenientian base the power to regularly expenient or elect a majority of the efficiency directors or			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
D	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		
				•

Page **6** Schedule A (Form 990 or 990-EZ) 2019

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	ization	s	
1 Check here if the organization satisfied the Integral Part Test as a qualifying			in in Part VI). <b>See</b>
instructions. All other Type III non-functionally integrated supporting organization			
Section A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in <b>Part VI</b> ):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
<b>4</b> 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		
Section 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		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionally	y integra	ated Type III supporting	g organization (see
instructions).	=	• • •	•

Schedule A (Form 990 or 990-EZ) 2019

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Sect	Section D - Distributions						
1	Amounts paid to supported organizations to accomplish ex	kempt purposes					
2	Amounts paid to perform activity that directly furthers exer	npt purposes of support	ed				
	organizations, in excess of income from activity						
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organiz	zations				
4	Amounts paid to acquire exempt-use assets						
5	Qualified set-aside amounts (prior IRS approval required)						
6	Other distributions (describe in <b>Part VI</b> ). See instructions.						
7	<b>Total annual distributions.</b> Add lines 1 through 6.						
8	Distributions to attentive supported organizations to which	the organization is resp	onsive				
	(provide details in <b>Part VI</b> ). See instructions.						
9	Distributable amount for 2019 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-2019	(iii) Distributable Amount for 2019			
1	Distributable amount for 2019 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2019						
	(reasonable cause required - explain in Part VI). See						
	instructions.						
3	Excess distributions carryover, if any, to 2019						
а	From 2014						
b	From 2015						
С	From 2016						
d	From 2017						
е	From 2018						
f	Total of lines 3a through e						
g	Applied to underdistributions of prior years						
h	Applied to 2019 distributable amount						
<u>i</u>	Carryover from 2014 not applied (see instructions)						
j_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.						
4	Distributions for 2019 from						
	Section D, line 7: \$						
<u>a</u>	Applied to underdistributions of prior years						
b	Applied to 2019 distributable amount						
C	Remainder. Subtract lines 4a and 4b from 4.						
5	Remaining underdistributions for years prior to 2019, if						
	any. Subtract lines 3g and 4a from line 2. For result						
_	greater than zero, explain in <b>Part VI.</b> See instructions.						
6	Remaining underdistributions for 2019. Subtract lines 3h						
	and 4b from line 1. For result greater than zero, explain in <b>Part VI.</b> See instructions.						
7	Excess distributions carryover to 2020. Add lines 3j and 4c.						
8	Breakdown of line 7:						
o a	Excess from 2015						
a b	Excess from 2016						
C	Excess from 2017						
d	Excess from 2018						
e	Excess from 2019						

Schedule A (Form 990 or 990-EZ) 2019

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 A, PART IV, SECTION D, LINE 2

CONTINUOUS WORKING RELATIONSHIP WITH THE SUPPORTED ORGANIZATION

THE BOARD OF DIRECTORS CONSISTS OF MANY CURRENT AND RETIRED EMPLOYEES OF

COLORADO COLLEGE. TESS POWERS, LYRAE WILLIAMS, AND AMY DOUNAY CURRENTLY

WORK FOR COLORADO COLLEGE.

SCHEDULE A, PART IV, SECTION D, LINE 3

SCHEDULE A, PART IV, SECTION E, LINES 2A & 2B

SUPPORTED ORGANIZATION'S OVERSIGHT OF INVESTMENT DECISIONS

THE COLORADO COLLEGE ASSISTS IN THE MANAGEMENT OF THE INVESTMENTS ON

BEHALF OF THE WOMAN'S EDUCATIONAL SOCIETY. THE COLORADO COLLEGE MAINTAINS

THE INFORMATION REGARDING THE TEMPORARILY AND PERMANENTLY RESTRICTED

ASSETS. THE FINANCE DEPARTMENT TRACKS THE SCHOLARSHIPS AND OTHER

FINANCIAL INFORMATION FOR THE WOMAN'S EDUCATIONAL SOCIETY.

FUNCTIONALLY-INTEGRATED SUPPORTING ORGANIZATIONS

THE WOMAN'S EDUCATIONAL SOCIETY WAS FOUNDED IN 1889 TO GIVE ASSISTANCE TO THE STUDENTS OF COLORADO COLLEGE. THE FIRST PROJECT WES COMPLETED WAS BUILDING MONTGOMERY HALL, COLORADO COLLEGE'S FIRST RESIDENCE HALL FOR WOMEN. SINCE ITS FOUNDATION WES HAS FURNISHED MANY RESIDENCE HALLS AND BUILDINGS, ASSISTED WITH PROVIDING MEDICAL CARE, AND PROVIDED SCHOLARSHIPS TO STUDENTS. WES TRIES TO PROVIDE SCHOLARSHIPS FOR 10% OF THE COST OF COLORADO COLLEGE TO MANY STUDENTS. AS A PRIVATE COLLEGE, IT IS IMPORTANT FOR COLORADO COLLEGE TO PROVIDE FINANCIAL AID TO STUDENTS IN

ORDER TO RECRUIT AND RETAIN STUDENTS. WES HELPS PROVIDE A PORTION OF THIS

Schedule A (Form 990 or 990-EZ) 2019 Page **8** 

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.)

FINANCIAL AID. ATTACHMENT 1 SCHEDULE A, PART I - INFORMATION ABOUT SUPPORTED ORGANIZATIONS (III) TYPE OF (V) AMOUNT OF (VI) OTHER ORGANIZATION SUPPORT AMOUNT (I) NAME OF SUPPORTED ORGANIZATION (II) EIN YES NO SUPPORT 84-0402510 2 THE COLORADO COLLEGE 145,152. 0. TOTAL AMOUNT OF SUPPORT 145,152.

# SCHEDULE D (Form 990)

Department of the Treasury

## 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.

OMB No. 1545-0047
2019
Open to Public Inspection

► Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service Name of the organization WOMANS EDUCATIONAL SOCIETY OF COLORADO Employer identification number COLLEGE 84-6029599 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 1 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? Yes Nο 6 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 No Yes Conservation Easements. Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space

2	Complete lines za through zo il the organization nelo a qualified conservation contribution in	the it	orm of a conservation
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
С	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a		
	historic structure listed in the National Register	2d	
3	Number of conservation easements modified, transferred, released, extinguished, or termitax year ▶	nated	by the organization during the
4	Number of states where property subject to conservation easement is located ▶		
5	Does the organization have a written policy regarding the periodic monitoring, inspectiviolations, and enforcement of the conservation easements it holds?		9
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing	conse	rvation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing co	onserv	vation easements during the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation easements in its revenue and		
	balance sheet, and include, if applicable, the text of the footnote to the organization's financi organization's accounting for conservation easements.	al sta	tements that describes the
Pa	rt III Organizations Maintaining Collections of Art, Historical Treasures, or Other	Sim	ilar Assets.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.		

If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

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

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

following amounts required to be reported under FASB ASC 958 relating to these items:

provide the following amounts relating to these items:

Schedule D (Form 990) 2019

▶ \$

▶ \$

Part III   Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)		rt    Organizations Maintaini	ng Collections of	Art Historical Tre	asures or Other	Similar Assets (	continue	Page Z
collection items (chock all that apply): a								
Public exhibition    A   Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.    Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.   During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	•			Anor 1000140, 011001	carry or the relieve	mg that make eigh	illiourit ut	70 OI 110
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.	а		.37.	d loan	or exchange prograi	m		
Leging Preservation for future generations A Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.  5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?					or oxoriarigo prograi			
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.  5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold for arise funds rather than to be maintained as part of the organization's collection?			rations					
Suring the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?				and explain how t	they further the ord	nanization's exemp	t nurnose	in Part
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	•	· · · · · · · · · · · · · · · · · · ·		and explain new	and runand and on	gamzanon o oxomp	r puipood	iii i ait
assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	5		on solicit or receive d	lonations of art, histo	orical treasures, or o	other similar		
Secrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not include on Form 990, Part X?   Yes   No							Yes	No
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	Pa				9			
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?    Ves    No    Yes    No    No				s" on Form 990, F	Part IV, line 9, or re	eported an amour	nt on For	m
included on Form 990, Part X?		990, Part X, line 21.						
b If "Yes," explain the arrangement in Part XIII and complete the following table:  c Beginning balance	1a	Is the organization an agent, truste	ee, custodian or othe	er intermediary for c	ontributions or othe	r assets not		
C   Beginning balance   1c   C   C   C   C   C   C   C   C   C		included on Form 990, Part X?				[	Yes	No
C   Beginning balance   1c   d   d   d   d   d   d   d   d   d	b	If "Yes," explain the arrangement i	n Part XIII and comp	lete the following tak	ole:			
d Additions during the year.						Amount		
Ending balance   Endowment Funds.   Endowment Funds	С	Beginning balance			1c			
Femological balance	d	Additions during the year			1d			
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	е	Distributions during the year			1e			
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII	f	Ending balance			1f			
Part V   Endowment Funds.   Complete if the organization answered "Yes" on Form 990, Part IV, line 10.	2a	Did the organization include an am	ount on Form 990, I	Part X, line 21, for e	scrow or custodial	account liability?	Yes	No
Complete if the organization answered "Yes" on Form 990, Part IV, line 10.   1a   Beginning of year balance   (2), 795, 880.   (2), 795, 795, 795.   (2), 795, 880.   (2), 795, 880.   (2), 795, 880.   (2), 795, 880.   (2), 795, 795.   (2), 79	b	If "Yes," explain the arrangement i	n Part XIII. Check he	ere if the explanation	has been provided	on Part XIII		
(a) Current year   (b) Prior year   (c) Two years back   (d) Three years back   (e) Four years back   (d) Three years back   (e) Four years back   (d) Three years back   (e) Four years   (e) Four year	Pa							
1a Beginning of year balance       2,795,880       2,574,528       2,363,913       2,252,656       2,301,768         b Contributions       c Net investment earnings, gains, and losses       279,741       333,470       322,879       210,952       51,949         d Grants or scholarships       95,964       103,705       103,920       92,571       94,528         e Other expenditures for facilities and programs       8,586       8,413       8,344       7,124       6,533         g End of year balance       2,971,071       2,795,880       2,574,528       2,363,913       2,252,656         2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:         a Board designated or quasi-endowment       63.2100 %         b Permanent endowment       63.7900 %         Term endowment       63.7900 %         The percentages on lines 2a, 2b, and 2c should equal 100%.         3a       3a(i)       x         (i) Unrelated organizations.       3a(i)       x         (ii) Related organizations.       3a(i)       x         b If "Yes" on line 3a(ii), are the related organizations isted as required on Schedule R?       3b       x         4 Describe in Part XIII the intended uses of the organization's endowment funds.       (b) Cost or other basis (other basis (other)		Complete if the organiza	ation answered "Ye	s" on Form 990, F	Part IV, line 10.			
b Contributions			(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four y	ears back
b Contributions	1 a	Beginning of year balance	2,795,880.	2,574,528.	2,363,913.	2,252,656.	2,3	01,768.
c Net investment earnings, gains, and losses								
d Grants or scholarships								
d Grants or scholarships		and losses						
e Other expenditures for facilities and programs	d		95,964.	103,705.	103,920.	92,571.	!	94,528.
and programs								
f Administrative expenses		-						
g End of year balance	f	-						
a Board designated or quasi-endowment ▶	g	-	2,971,071.	2,795,880.	2,574,528.	2,363,913.	2,2	52,656.
b Permanent endowment ▶ 36.2100 %  The percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) Unrelated organizations.  (ii) Related organizations.  3a(ii) X  (iii) Related organizations.  3a(ii) X  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI  Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation  1a Land.  b Buildings  c Leasehold improvements.  d Equipment.  c Other  Other  Other	2	Provide the estimated percentage	of the current year e	end balance (line 1g,	column (a)) held as	:		
the percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) Unrelated organizations.  (ii) Related organizations.  b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation  1a Land.  b Buildings  c Leasehold improvements.  d Equipment.  e Other				_%				
The percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) Unrelated organizations.  (ii) Related organizations.  (iii) Related organizations.  (iii) Related organizations.  (iv) Unrelated organizations.  (iv) Related organizations	b							
Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) Unrelated organizations.  (ii) Related organizations.  (iii) Related organizations.  (iii) Related organizations.  (iii) Related organizations.  (iiii) Related organizations.  (iiii) Related organizations listed as required on Schedule R?.  (iv) Unrelated organizations.  (iv) Related organizations.  (iv) Schedule R?.  (iv) Schedule R.  (iv) Schedule R.	С		•					
organization by:  (i) Unrelated organizations.  (ii) Related organizations  b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI  Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation depreciation depreciation (investment)  Buildings  C Leasehold improvements  d Equipment  e Other  Other								
(i) Unrelated organizations.  (ii) Related organizations.  (iii) Related organizations.  (ii) If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?.  (iv) Describe in Part XIII the intended uses of the organization's endowment funds.    Part VI	3a		the possession of th	e organization that	are held and admir	nistered for the	-	
(ii) Related organizations  b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI  Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other) (investment) (investment) (c) Accumulated depreciation (d) Book value  1a Land  b Buildings  c Leasehold improvements  d Equipment  e Other		· ·					-	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI  Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation  depreciation  b Buildings  c Leasehold improvements.  d Equipment. e Other							<u> </u>	
Describe in Part XIII the intended uses of the organization's endowment funds.  Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (b) Cost or other basis (other)  (a) Cost or other basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  (d) Book value  (d) Equipment.								X
Part VI  Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  (b) Cost or other basis (c) Accumulated depreciation  (d) Book value  (d) Book value  (d) Book value  (e) Part X, line 10.  (b) Cost or other basis (other)  (other)  (d) Book value  (e) Part X, line 10.  (d) Book value	b	• • • • • • • • • • • • • • • • • • • •	•	•			3b	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  (b) Cost or other basis (c) Accumulated depreciation  (d) Book value  (d) Book value  (e) Part X, line 10.  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  (e) Part X, line 10.  (f) Accumulated depreciation  (g) Book value  (h) Cost or other basis (other)  (other)  (other)				tion's endowment fu	nds.			
Description of property  (a) Cost or other basis (investment)  (b) Cost or other basis (c) Accumulated depreciation  (d) Book value  (d) Book value  (d) Book value  (d) Book value  (e) Property  (f) Accumulated depreciation  (h) Cost or other basis (other)  (other	Pa	Land, Buildings, and Equation Complete if the organize	עו <b>pment.</b> ation answered "Ye	es" on Form 990	Part IV. line 11a S	See Form 990. Pa	art X. line	10.
1a Land			(a) Cost or	other basis (b) Cost	or other basis (c) Acc	cumulated (d		
b Buildings		Land	,	ment) (o	ther) depr	eciation		
c Leasehold improvements d Equipment e Other	1 a							
d Equipment           e Other	b							
e Other	С							
	d							
				000 Part V 1	n (D) line 40= \			

Schedule D (Form 990) 2019

Page 3 Schedule D (Form 990) 2019

Part VII	Investments - Other Securities. Complete if the organization answered	d "Yes" on Form 990	), Part IV, line 11b. See Form 990, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financia	al derivatives		
(2) Closely	held equity interests		
(3) Other_			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)	n (h) must squal Form 000 Part V cal (P) line 12.)		
Part VIII	n (b) must equal Form 990, Part X, col. (B) line 12.) .  Investments - Program Related.		
Part VIII		"Yes" on Form 990	), Part IV, line 11c. See Form 990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5) (6)			
(6) (7)			
(7) (8)			
(8) (9)			
	n (b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX	Other Assets.	I.	
	Complete if the organization answered	d "Yes" on Form 990	), Part IV, line 11d. See Form 990, Part X, line 15.
	(a) De	escription	(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Tatal (0 at	(h)	Po - 45 \	
	umn (b) must equal Form 990, Part X, col. (B)	line 15.)	······
Part X		d "Yes" on Form 990	), Part IV, line 11e or 11f. See Form 990, Part X,
1.	line 25.	otion of liability	(b) Book value
(1) Feder	ral income taxes	•	
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Γotal. (Colun	nn (b) must equal Form 990, Part X, col. (B) line 25.)		▶
2. Liability fo	or uncertain tax positions. In Part XIII, provide the	text of the footnote to	the organization's financial statements that reports the the text of the footnote has been provided in Part XIII

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Schedule D (Form 990) 2019 Page 4

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	1 ago 1
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:		
а	Net unrealized gains (losses) on investments	-	
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)	2e	
е 3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)	_	
	Add lines 4a and 4b	4c 5	
5 Part	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		_
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	
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 d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)	40	
с 5	Add lines <b>4a</b> and <b>4b</b>	4c 5	
	XIII Supplemental Information.		
Provide	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; F	Part V,	line 4; Part X, line
	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform	nation	•
SEE	PAGE 5		
_			

#### Part XIII Supplemental Information (continued)

SCHEDULE D, PART X, LINE 2

FIN 48 DISCLOSURE

MANAGEMENT HAS EVALUATED THEIR INCOME TAX POSITIONS UNDER THE GUIDANCE INCLUDED IN ASC 740. BASED ON THEIR REVIEW, MANAGEMENT HAS NOT IDENTIFIED ANY MATERIAL UNCERTAIN TAX POSITIONS TO BE RECORDED OR DISCLOSED IN THE FINANCIAL STATEMENTS.

SCHEDULE D, PART V, LINE 4

USE OF ENDOWMENT

THE ORGANIZATION USES THE ENDOWMENT FUNDS FOR SCHOLARSHIPS FOR COLORADO COLLEGE STUDENTS.

## **SCHEDULE I** (Form 990)

COLLEGE

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

OMB No. 1545-0047

2019 **Open to Public** 

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

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

WOMANS EDUCATIONAL SOCIETY OF COLORADO Employer identification number 84-6029599

Part	General Information on Grants a	nd Assistanc	e				'	
	Does the organization maintain records to							
	the selection criteria used to award the gra							X Yes No
2	Describe in Part IV the organization's proc	edures for mo	nitoring the use	of grant funds in the	e United States.			
Part	■ Grants and Other Assistance to	Domestic Or	ganizations ar	nd Domestic Gov	vernments. Com	plete if the organiz	ation answered "Ye	es" on Form 990,
	Part IV, line 21, for any recipient	that received	I more than \$5	,000. Part II can I	be duplicated if a	additional space is r	needed.	
	1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
	Enter total number of section 501(c)(3) and							
3	Enter total number of other organizations li	sted in the line	e 1 table				<u></u>	

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

Schedule I (Form 990) (2019)

Schedule I (Form 990) (2019)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 SCHOLARSHIPS PAID TO STUDENTS	16.	145,152.			
2					
3					
4					
5					
6					
7 Supplemental Information Provide					

**Part IV** Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

SCHEDULE I, PART III, LINE 1

MONITORING USE OF GRANT FUNDS

THE WOMAN'S EDUCATION SOCIETY TRANSFERS THE TOTAL SCHOLARSHIP AWARD TO

COLORADO COLLEGE WHO ADMINISTERS THE FUNDS, CREDITING SCHOLARSHIP AWARDS

TO THE INDIVIDUAL STUDENTS.

### 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.

OMB No. 1545-0047

On Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

COLLEGE

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization WOMANS EDUCATIONAL SOCIETY OF COLORADO

84-6029599

FORM 990, PART VI, SECTION A, LINE 6, 7A & 7B MEMBERSHIP:

MEMBERSHIP IN WES IS OPEN TO ALL WHO DESIRE TO SUPPORT THE COLORADO COLLEGE. MEMBERS ELECT THE BOARD OF MANAGERS AT THE ANNUAL MEETING.

PROJECTS WHICH BENEFIT THE COLORADO COLLEGE, AS A WHOLE, AND UNDERTAKEN BY WES SHALL BE SUBJECT TO THE APPROVAL OF THE BOARD OF TRUSTEES OF THE COLORADO COLLEGE.

FORM 990, PART VI, SECTION B, LINE 11A
PROCESS TO REVIEW FORM 990:

THE FORM 990 IS PREPARED BY A THIRD PARTY AND REVIEWED BY THE TREASURER OF THE ORGANIZATION. A COPY OF THE FORM 990 IS PROVIDED TO THE BOARD FOR REVIEW PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, SECTION C, LINE 19
GOVERNING DOCUMENTS AVAILABLE TO PUBLIC:

DOCUMENTS ARE MADE AVAILABLE UPON REQUEST.

FORM 990. PART VII

REPORTABLE COMPENSATION FROM RELATED ORGANIZATIONS

AMY DOUNAY, TESS POWERS, AND LYRAE WILLIAMS WERE EMPLOYED BY COLORADO

COLLEGE (CC), THE SUPPORTED ORGANIZATION, DURING CALENDAR YEAR 2020.

THEIR EMPLOYMENT AT CC WAS IN NO WAY RELATED TO THEIR MEMBERSHIP IN THE

WOMAN'S EDUCATIONAL SOCIETY OR SERVICE ON THE WOMAN'S EDUCATIONAL SOCIETY

Name of the organization WOMANS EDUCATIONAL SOCIETY OF COLORADO

Employer identification number

84-6029599

BOARD. PER THE INSTRUCTIONS FOR FORM 990 A BOARD DIRECTOR SHOULD LIST COMPENSATION AS AN EMPLOYEE OF A RELATED ORGANIZATION. CC CHOOSES NOT TO SHARE SENSITIVE EMPLOYEE INFORMATION WITH THE WOMAN'S EDUCATIONAL SOCIETY, OTHER THAN FOR OFFICERS OF CC WHO WILL BE LISTED ON CC'S OWN FORM 990. THE DIRECTORS MENTIONED ABOVE DO NOT BELIEVE THEIR COMPENSATION FROM CC WOULD IN ANY WAY ENHANCE THE TRANSPARENCY OR UNDERSTANDING OF THE WOMAN'S EDUCATIONAL SOCIETY AND THEREFORE, RESPECTFULLY DECLINED TO PROVIDE COMPENSATION INFORMATION TO BE DISCLOSED ON THE WOMAN'S EDUCATIONAL SOCIETY'S FORM 990.

#### SCHEDULE R (Form 990)

# **Related Organizations and Unrelated Partnerships**

 $\blacktriangleright$  Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047
2019
Open to Public Inspection

Name of the organization

WOMANS EDUCATIONAL SOCIETY OF COLORADO

Employer identification number 84-6029599

COLLEGE

Part I

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

(a) Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(3)					
(4)					
<u>(5)</u>					
(6)					

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

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity		12(b)(13) rolled
						Yes	No
(1) WOMAN'S EDUCATIONAL SOCIETY OF CC TRUST 84-6035651  14 EAST CACHE LA POUDRE STREET COLORADO SPRINGS, CO 80903	SCHOLARSHIPS	СО	501(C)(3)	LN 12, III	WES	Х	
(2) THE COLORADO COLLEGE 84-0402510  14 E. CACHE LA POUDRE COLORADO SPRINGS, CO 80903	COLLEGE	CO	501(C)(3)	LINE 2	N/A		Х
_(3)							
_(4)							
(6)							
(7)							

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

Schedule R (Form 990) 2019

JSA

Schedule R (Form 990) 2019

Part III Identification of Relabecause it had one or  (a)  Name, address, and EIN of related organization	ted Organization more related org  (b) Primary activity	(c) Legal domicile (state or foreign	e as a Partnersi as treated as a p (d) Direct controlling entity	rip. Complete if the eartnership during the e	e organization a e tax year.  (f) Share of total income	(g) Share of end-of-year assets	( Dispro	h) portionate ations?	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man	34, (j) eral or eaging tner?	(k) Percentage ownership
		country)		Sections 512 - 514)			Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												

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	(d)	(e) Type of entity	(f) Share of total	(g) Share of	(h)	(i) Section
rvanie, addiess, and Enviorielated diganization		(state or foreign country)		(C corp, S corp, or trust)		end-of-year assets	(h) Percentage ownership	512(b)(13) controlled entity?
								Yes No
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								

(6)

(7)

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Par	Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity.	1a	_	X
	Gift, grant, or capital contribution to related organization(s)	1b		
	Gift, grant, or capital contribution from related organization(s)			X
	Loans or loan guarantees to or for related organization(s)		X	
	Loans or loan guarantees by related organization(s)			X
f	Dividends from related organization(s)	1f		
g	Sale of assets to related organization(s)	1g		X
h	Purchase of assets from related organization(s)			X
i	Exchange of assets with related organization(s)			X
j	Lease of facilities, equipment, or other assets to related organization(s)			X
•				
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		X
- 1	Performance of services or membership or fundraising solicitations for related organization(s)			X
m	Performance of services or membership or fundraising solicitations by related organization(s)		X	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		X
	Sharing of paid employees with related organization(s)			X
р	Reimbursement paid to related organization(s) for expenses	1p	X	
-	Reimbursement paid by related organization(s) for expenses	- 1	1	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

r Other transfer of cash or property to related organization(s).
 s Other transfer of cash or property from related organization(s).

(a)  Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

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Χ

X

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

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

(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(b) Imary activity  Legal domicile (state or foreign country)  (c)  Legal domicile (state or foreign country)  Predominant income (related, unrelated, excluded from tax under of the country)  (d)  Predominant income (related, sectluded from tax under of the country)  Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets (h) Disproportional allocations?					i) eral or aging ner?	(k) Percentage ownership		
			sections 512-514)	Yes				Yes	No	(1 01111 1000)	Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
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(16)													
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# Part VII Supplemental Information

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