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DLN: 93493057006293

Form 990

Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2011

OMB No 1545-0047

2011

► The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public

_					Inspection		
		2011 calendar year, or tax year beginning 07-01-2011 and ending 06-30-2012 C Name of organization	2	D Employer id	entification number		
_	eck ıf a _l dress ch	NAROPA UNIVERSITY		84-102922) <u>R</u>		
_	me chai	Doing Business As	-	E Telephone n			
_	tıal retui		_ [(303)444-	0202		
_	rminated	Number and street (of P O box it mail is not delivered to street address) Room/su	ite	G Gross receipts	\$ 24,835,295		
— _{Am}	nended i	return City or town, state or country, and ZIP + 4 BOULDER, CO 80302	_				
Ap	plication	pending					
		F Name and address of principal officer		s a group retur			
		CHARLES LIEF 2130 ARAPAHOE AVE	affilia	tes?	⊤Yes ✓ No		
		BOULDER, CO 80302	H(b) Are all	affiliates includ	ded?		
r Ta	ıx-exem	pt status	_		(see instructions)		
		WWW NAROPA EDU	H(c) Grou	p exemption nu	imber 🟲		
			1		Was a 61 11 1 2		
	m of org I rt I	ganization	L Year of for	mation 1974	M State of legal domicile Co		
Pa		Summary					
		Briefly describe the organization's mission or most significant activities NAROPA UNIVERSITY IS NORTH AMERICA'S LEADING INSTITUTION OF	CONTEMPLA	TIVE EDUCAT	ION		
Governance							
<u> </u>	-						
<u>ş</u>	2 -	Check this box 🛌 if the organization discontinued its operations or disposed o	of more than 2	5% of its net a	ssets		
3		Number of voting members of the governing body (Part VI, line 1a)		з	20		
		Number of independent voting members of the governing body (Part VI, line 1b)			18		
ĕ		Fotal number of individuals employed in calendar year 2011 (Part V, line 2a)		5	765		
ACUMINES &		Fotal number of volunteers (estimate if necessary)		6	19		
ą		Fotal unrelated business revenue from Part VIII, column (C), line 12		7a	5,263		
	1	Net unrelated business taxable income from Form 990-T, line 34		7b	3,200		
	-	,	Prior	r Year	Current Year		
	8	Contributions and grants (Part VIII, line 1h)	1110	1,037,862	1,060,073		
ā	9	Program service revenue (Part VIII, line 2g)		22,934,832	23,520,806		
Revenu	10	Investment income (Part VIII, inle 2g)		-338,737	168,254		
Ž	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0	5,263		
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line	<u>.</u>	- V	3,203		
		12)		23,633,957	24,754,396		
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		3,979,141	4,098,612		
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0	0		
8	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines $5-10$)		11,500,335	12,105,336		
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		45,638	0		
ਡੌ	Ь	Total fundraising expenses (Part IX, column (D), line 25) • 629,531					
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		7,234,800	7,253,079		
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		22,759,914	23,457,027		
. 00	19	Revenue less expenses Subtract line 18 from line 12		874,043	1,297,369		
Not Assets or Fund Balances				of Current ear	End of Year		
35 TE	20	Total assets (Part X, line 16)		32,876,943	32,943,269		
3 E	21	Total liabilities (Part X, line 26)		14,948,518	13,801,618		
	22	Net assets or fund balances Subtract line 21 from line 20		17,928,425	19,141,651		
	rt II	Signature Block					
know		ties of perjury, I declare that I have examined this return, including accompanying so and belief, it is true, correct, and complete. Declaration of preparer (other than office					
		*****		13-02-12			
Sigr Her		Signature of officer	Da	ıc			
ner	e	CHARLES LIEF PRESIDENT Type or print name and title					
Paid	- w •	signature CRAIG CHOUN	Check if elf- employed •	lf (see instructions)			
_	arer's Only	ıf self-employed),		EIN • 84-0869	721		
200	J.113	address, and ZIP + 4 7979 E TUFTS AVENUE SUITE 400		Phone no 🕨 (3	303) 740-9400		
		DENVER, CO 802372843		FINITE TIOF (.	JUJ) /4U-34UU		

May the IRS discuss this return with the preparer shown above? (see instructions) . .

Par	Statement of Prog Check if Schedule O co			Part III		.
1	Briefly describe the organizati	on's mission				
SEE	SCHEDULE O					
2	Did the organization undertake the prior Form 990 or 990-EZ	•	-	•		es 🗸 No
	If "Yes," describe these new se	ervices on Schedule	e O			
3	Did the organization cease cor services?				_	es 🔽 No
	If "Yes," describe these chang	es on Schedule O				
4	Describe the organization's pro expenses Section 501(c)(3) a grants and allocations to other	nd 501(c)(4) organ	nizations and section 4	1947(a)(1) trusts are r	equired to report th	•
4a	(Code) (Ex	penses \$ 18,	139,335 including grants	s of \$ 4,058,932	2) (Revenue \$	23,004,019)
	THE UNIVERSITY OFFERS UNDERGR ISACCREDITED BY THE HIGHER LEA STUDENT SERVICES, AND ACADEMIC	RNING COMMISSION T	HERE ARE APPROXIMATELY	1,100 GRADUATE AND UND	ERGRADUATE STUDENT	S INSTRUCTION,
4b	(Code) (Ex	penses \$	542,620 including grants	of \$ 39,680)) (Revenue \$	516,787)
	ALAYA PRESCHOOL OPERATES AS A NAROPA UNIVERSITY, ALAYA PRESCI PROGRAMS ALAYA IS LICENSED BY FINANCIAL SUPPORT IS PROVIDED F	HOOL OPERATES AS A L THE COLORADO DEPAR	AB SCHOOL SERVING STUD TMENT OF HUMAN SERVICI	ENTS IN NAROPA'S EARLY C ES, DIVISION OF CHILD CAR	HILDHOOD AND CONTE	MPLATIVE EDUCATION
4c	(Code) (Ex	penses \$	ıncludıng grants	of \$) (Revenue \$)
	Other program services (Des	cribe in Schedule ())			
	(Expenses \$	ıncluding (•) (Revenue	\$)
4e	Total program service expens	es► \$ 18	,681,955			

Dart TV	Checklist	of Peguire	ed Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
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		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
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	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
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, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? <i>If "Yes," complete Schedule F, Part III and IV</i>	16		No
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? <i>If</i> " <i>Yes," complete Schedule G, Part I</i>	17		No
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		No
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		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II $\textcircled{\textbf{5}}$	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) 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		No
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		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
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, or key employee? If "Yes," complete Schedule L, Part			
	IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule Ma	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Νo
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	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		No
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		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V	Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V	•	-1	
			Yes	No
.a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	1			
L.	Enter the number of Forms W. 2C uncluded in line 15. Enter, 0, if not applicable			
D	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this			
	return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
la	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?	4a		No
b	·			110
_	If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tay cholter transaction at any time during the tay year?	5a		N.c
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No No
		5b		1110
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
•	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			NO
	and the same and t			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did			
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
	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)			
2a	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? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization			
	allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the aggregate amount of reserves on hand			
.4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ection 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			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		Νo
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	evenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," described in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available.

Own website Another's website V Upon request

- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization PATTI WARREN 2130 ARAPAHOE AVE

BOULDER, CO 80302 (303)444-0202

<u>Part VII</u> 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, and **current** key employees 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization nor any related organizations compensated any current or former officer, director, or trustee										or, or trustee
(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	Position (do not check more than one box, unless person is both an officer and a director/trustee) Highest compensated employee Key employee Individual trustee or director		Former	(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			
		и.	ě.			ted				
(1) CHARLES LIEF CHAIRMAN	3 00	Х		Х				0	0	0
(2) JUDITH LIEF VICE CHAIR	3 00	х		Х				0	0	0
(3) JOHN BENNETT VICE CHAIR	3 00	х		Х				0	0	0
(4) LYNNE KATZMANN SECRETARY	3 00	Х		Х				0	0	0
(5) JUDITH SIMMER-BROWN FACULTY TRUSTEE	40 00	Х						64,555	0	7,175
(6) NATHAN SNYDER STUDENT TRUSTEE	3 00	X						0	0	0
(7) SAKYONG MIPHAM RINPOCHE TRUSTEE & LINEAGE HOLDER	3 00	X						0	0	0
(8) JIM ROSEN TRUSTEE	3 00	X						0	0	0
(9) PAMELA KRASNEY TRUSTEE	3 00	Х						0	0	0
(10) VIJAY SINGH TRUSTEE	3 00	х						0	0	0
(11) JAN WILLIS TRUSTEE	3 00	Х						0	0	0
(12) THOMAS HAST TRUSTEE	3 00	Х						0	0	0
(13) JERRY COLONNA TRUSTEE	3 00	Х						0	0	0
(14) CHRISTOPHER HORMEL TRUSTEE	3 00	Х						0	0	0
(15) ANDREW DAVISON TRUSTEE	3 00	Х						0	0	0
(16) CAROLYN JACOBS TRUSTEE	3 00	х						0	0	0
(17) GABRIELLE EDISON TRUSTEE	3 00	Х						0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) A verage hours per week (describe hours for related organizations in Schedule O)	unles an	on (d e thar	n one son er ai	e bo is bo nd a stee	x, oth	Former	(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
(18) MARGERY GOLDMAN TRUSTEE	3 00	Х						0	0	0
(19) MARTIN JANOWITZ TRUSTEE	3 00	Х						0	0	0
(20) JOHN WHITEHOUSE COBB PRESIDENT	40 00	х		х				39,637	0	1,857
(21) STUART LORD PRESIDENT	40 00	х		х				181,409	0	58,115
(22) TODD KILBURN INTERIM CFO	40 00			х				74,495	0	7,984
(23) CAROL BLACKSHIRE-BELAY PROVOST	40 00			х				63,864	0	5,332
(24) STUART SIGMAN PROVOST	40 00			х				87,262	0	6,225
(25) CHERYL BARBOUR VP STUDENT AFFAIRS AND ENROLLEMENT MANAGEMENT	40 00					х		110,029	0	6,629
(26) JILL GRAMMER VP OF DEVELOPMENT	40 00					х		134,174	0	14,616
1b Sub-Total				•	<u> </u>		<u> </u> ►			
c Total from continuation sheets t	o Part VII, Sect	ion A					►			
d Total (add lines 1b and 1c)						•	►	755,425	0	107,933
Total number of individuals (inclu \$100,000 of reportable compens	•				ted a	above) who	received more tha	n	

			Yes	No	
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee		1		
	on line 1a? If "Yes," complete Schedule I for such individual	3		Νo	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule I for such				
	ındıvıdual	4	Yes		
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No	

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
JENZABAR 101 HUNTINGTON AVENUE SUITE 2200 BOSTON, MA 02199	SOFTWARE MANAGEMENT	788,892
DENEUVE DESIGN 2344 SPRUCE ST SUITE B BOULDER, CO 80302	CONSTRUCTION	326,378
JACKSON KELLY PLLC 1099 18TH ST SUITE 2150 DENVER, CO 80202	LEGAL	262,225
NOEL LEVITZ 6300 S SYRACUSE WAY SUITE 645 CENTENNIAL, CO 80111	STUDENT ENROLLMENT & RETENTION	219,530
CENTER MANAGEMENT GROUP 2741 IRIS AVE SUITE C BOULDER, CO 80304	GENERAL CONTRACTOR	131,080
2 Total number of independent contractors (including but not limited to those listed above)	who received more than	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization >7

Form 9								Page 9
Part	/1111	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
# St	1a	Federated cam	paigns 1a					
g is	b	Membership du	ies 1b					
ું∉	c	Fundraising eve	ents 1c					
≝ ĕ	d	Related organiz	zations 1d					
%∭	e	Government grant	s (contributions) 1e	587,345				
Contributions, gifts, grants and other similar amounts	f g	sımılar amounts no Noncash contri	ibutions included in	472,728				
Cont	h	lines 1a-1f \$ Total. Add lines	s 1a-1f	▶	1,060,073			
<u>-</u>				Business Code				
Program Serwce Revenue	2a	TUITION & FEES		611710	22,310,398	22,310,398		
둏	b	AUXILIARY-PRESCI	HOOL	611710	516,787	516,787		
92	С	AUXILIARY-HOUSIN	NG	611710	482,599	482,599		
<u>7</u>	d	OTHER PROGRAM	REVENUE	611710	211,022	211,022		
Ē	e							
Ž	f	All other progra	am service revenue					
Š	g	Total. Add lines	s 2a - 2f		23,520,806			
	3		ome (including dividen		, ,			
			ar amounts)		223,173			223,173
	4	Income from inves	stment of tax-exempt bond	proceeds 🕨				
	5	Royalties						
			(ı) Real	(II) Personal				
	6a	Gross rents						
	b	Less rental expenses						
	C	Rental income or (loss)						
	d	Net rental inco	me or (loss)	▶				
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	25,705	275				
	b	Less cost or other basis and sales expenses	80,899	0				
	c	Gain or (loss)	-55,194	275				
	d	Net gain or (los	ss)		-54,919			-54,919
ıne	8a	Gross income f events (not inc \$	rom fundraising luding					
Other Revenue			s reported on line 1c) ne 18 a					
Ŧ.	b	Less direct ex	penses b					
Õ	С		(loss) from fundraising	events 🛌				
	9a		rom gaming activities ne 19 a					
	b c		penses b	vities				
	10a	Gross sales of returns and allo	ınventory, less					
	b c		oods sold b (loss) from sales of invo	entory				
		Miscellaneous		Business Code				
	11a	UBI FROM K-1	S	900099	5,263		5,263	
	ь							
	c							
	d	All other reven	ue					
	е	Total. Add lines	s 11a-11d		5,263			
	12	Total revenue.	See Instructions .	•	24,754,396	23,520,806	5,263	168,254

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) but are not required to complete columns (B), (C), and (D) Check if Schedule O contains a response to any question in this Part IX

Do no	to any question in this Part IX of include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22	4,098,612	4,098,612		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	519,298	239,481	279,817	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	9,515,715	8,071,984	1,091,902	351,829
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	275,958	219,924	43,506	12,528
9	Other employee benefits	1,004,946	831,315	134,566	39,065
10	Payroll taxes	789,419	662,541	100,344	26,534
11	Fees for services (non-employees)				
а	Management	100,000		100,000	
b	Legal	358,667	117,386	239,941	1,340
C	Accounting	114,344	94	114,250	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	52,810	21,811	30,743	256
g	Other	923,442	528,412	364,140	30,890
12	Advertising and promotion	372,498	72,212	298,640	1,646
13	Office expenses	294,559	239,529	24,893	30,137
14	Information technology	934,908	752,104	145,553	37,251
15	Royalties				
16	Occupancy	535,842	355,287	173,653	6,902
17	Travel	293,830	220,500	66,332	6,998
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	97,967	72,790	22,764	2,413
20	Interest	530,557	265,384	263,005	2,168
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	594,178	519,720	69,088	5,370
23	Insurance	202,698	83,714	118,001	983
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	EQUIPMENT & MAINTENANCE	606,618	427,721	175,373	3,524
b	EDUCATION MATERIAL	509,204	504,499	4,147	558
c	HOSTING	175,021	108,383	43,057	23,581
d	MERCHANT FEES & LICENSE	115,760	48,454	64,739	2,567
e	All all	_			
f 	All other expenses	440,176	220,098	177,087	42,991
25	Total functional expenses. Add lines 1 through 24f	23,457,027	18,681,955	4,145,541	629,531
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				rm 990 /2011)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 4,540,241 859,669 1 1 4.338.081 7,229,161 2 2 3 324,026 126,648 3 483.691 4 532.485 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 510,559 7 488,642 8 9 9 461.075 390,593 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis *Complete* 23,872,512 Part VI of Schedule D 10a 10b 6,108,134 b Less accumulated depreciation 17,371,349 **10c** 17,764,378 17,245 0 11 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 4,830,676 5,551,693 15 15 32,876,943 16 16 32,943,269 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 1,749,649 997,077 17 17 Accounts payable and accrued expenses . 18 18 19 457,730 19 338,088 20 11.190.000 20 10.975.000 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 1,551,139 25 1,491,453 D 26 14,948,518 26 13,801,618 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 14,924,156 27 16,508,502 Unrestricted net assets 1,475,951 1,101,007 28 Temporarily restricted net assets 28 Fund 29 1,528,318 29 1,532,142 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 Total net assets or fund balances 17.928.425 33 19.141.651 32,876,943 34 Total liabilities and net assets/fund balances 34 32.943.269

Pal	Check if Schedule O contains a response to any question in this Part XI			. [
1	Total revenue (must equal Part VIII, column (A), line 12)	1		24,7	754,39
2	Total expenses (must equal Part IX, column (A), line 25)	2			457,02°
3	Revenue less expenses Subtract line 2 from line 1	3	1,2		297,36
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		17,9	928,42
5	Other changes in net assets or fund balances (explain in Schedule O)	5			-84,14
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		19,1	141,65
Par	The Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			୮	
1	Accounting method used to prepare the Form 990			Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	ssued			
	Separate basis Consolidated basis Both consolidated and separated basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	9	За	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes	

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

NAROPA UNIVERSITY

Name of the organization

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

Public Charity Status and Public Support

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Employer identification number

									84-1029				
	rt I			blic Charity Sta						ınstructıo	ns		
he d	organiz	zatıon ıs	not a privat	e foundation becaus	eıtıs (Forl	lines 1 thro	ugh 11, checl	k only one b	oox)				
1	Γ	A churc	h, conventi	on of churches, or as	ssociation of	fchurches	section 170(b	o)(1)(A)(i)					
2	굣	A scho	ol described	in section 170(b)(1	.)(A)(ii). (At	tach Scheo	dule E)						
3	Г	A hosp	ital or a coo	perative hospital se	rvice organiz	zatıon desc	rıbed ın sectio	on 170(b)(1	.)(A)(iii).				
4	Γ			n organization operat ty, and state	ed in conjun	iction with a	a hospital des	cribed in se	ection 170(b)	(1)(A)(iii)). Enter t	he	
5	Г	_	•		rated for the benefit of a college or university owned or operated by a governmental unit des							ın	
	_			A)(iv). (Complete P	•								
6	<u> </u>			local government or	=								
7	ı	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II)											
8	Г	A comn	nunity trust	described in section	170(b)(1)(A)(vi) (Co	mplete Part I	I)					
9	Г Г	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2) . (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4) .											
11	ļ_	An orga one or r the box	anization org more public that descri Type I	ganized and operated ly supported organized bes the type of supp b Type I.	d exclusively ations descr orting organ I c	for the being the following th	nefit of, to per tion 509(a)(1 complete line I - Functiona	form the fur) or sectior es 11e thro lly integrate	nctions of, or i 509(a)(2) S ugh 11h ed	See sectio	n 509(a) (ype III -	(3). Oth	Check er
e f g	l	other th section If the o check t Since A	nan foundati 509(a)(2) rganization his box ugust 17, 2	ox, I certify that the on managers and other received a written do 2006, has the organi	ner than one	or more pu	blicly support	Type I, Tyl	ations describ	bed in sect	tion 509((a)(1	.) or
			g persons?	rectly or indirectly c	ontrols aith	ar alona or	together with	narenne da	scribed in (ii	١	Γv	es	No
				governing body of th			=	persons de	scribed iii (ii		1g(i)	es	110
			•	er of a person descri		_	Edition			<u> </u>	1g(ii)	\dashv	
			· ·	led entity of a persoi			ahove?				1g(iii)		
h				ng information about						<u> </u>	<u> 19(111) </u>		
(i) Name of supported organization		of ted	ted EIN lines 1- 9 above your governing tion or IRC section document?		e ion in ted in rning	(v) Did you no organizat col (i) of suppor	ion in your	(vi Is t organiza col (i) or in the l	he ition in ganized			ii) Int of ort?	
				(see instructions))	Yes	No	Yes	No	Yes	No			
			-										
ota	I					1	1	1	1				

instructions

Sch	edule A (Form 990 or 99	90-EZ)2011						Page 2
	(Complet	e only if you	checked the	box on line 5,	7, or 8 of Part	(b)(1)(A)(iv) I or if the orgar	nızatıon faıle	d to qualify
			<u>organızatıon f</u>	fails to qualify ι	<u>under the tests</u>	listed below, pl	<u>lease comple</u>	ete Part III.)
	ection A. Public Su					Т	1	
Cal	endar year (or fiscal ye in)	ar beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contribut	ions, and						
	membership fees recei							
	ınclude any "unusual							
_	grants ") Tax revenues levied fo	rtho						
2	organization's benefit a							
	paid to or expended on							
	behalf							
3	The value of services of							
	furnished by a governme the organization withou							
4	Total. Add lines 1 thro	_						
5	The portion of total cor	-						
-	by each person (other	than a						
	governmental unit or p	•						
	supported organization line 1 that exceeds 2%							
	amount shown on line 1							
	(f)	21,0014						
6	Public Support. Subtractine 4	ct line 5 from						
S	ection B. Total Sup	port						
Cal	endar year (or fiscal yea	r beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
_	ın)	_	(4) 2007	(2) 2000	(4) 2005	(4) 2020	(0) 2022	(1) 1 3 4 4
7 8	A mounts from line 4 Gross income from inte	rost –						
0	dividends, payments re							
	securities loans, rents							
	and income from simila	ır						
_	sources							
9	Net income from unrela business activities, wh							
	not the business is reg							
	carried on							
10	Other income (Explain							
	IV) Do not include gai from the sale of capital							
11	Total support (Add line							
	through 10)							
12	Gross receipts from re	lated activities	s, etc (See inst	ructions)			12	
13	First Five Years If the		r the organizati	on's first, second	l, thırd, fourth, or	fıfth tax year as a	501(c)(3) or	
	check this box and sto	p here						▶ □
S	ection C. Computat	ion of Publ	ic Support F	Percentage				
14	Public Support Percen	tage for 2011	(line 6 column	(f) dıvıded by lıne	11 column (f))		14	
15	Public Support Percen	tage for 2010	Schedule A , Pa	rt II, line 14			15	
16a	33 1/3% support test-					line 14 is 33 1/3%	% or more, che	
h	and stop here. The org 33 1/3% support test					6a and line 15 is	33 1/20% or m	ore check this
D	box and stop here. The					oa, and inte 15 IS	1/3%0 UI M	ore, check this
17a	10%-facts-and-circum	-	•		-	ne 13, 16a, or 16	b and line 14	٠,
	ıs 10% or more, and ıf							
	in Part IV how the orga	anızatıon meet	s the "facts and	d circumstances"	test The organiz	zatıon qualıfıes as	a publicly su	
b	organization 10%-facts-and-circum	stances test—	2010. If the ora	anization did not	check a hov on li	ne 13, 16a 16b	or 17a and lin	▶
,	15 is 10% or more, an							-
	Explain in Part IV how	the organizati						
10	supported organization Private Foundation If t		n did not chools	a hov on line 12	16a 16h 17a a	or 17h chack this	hov and coc	► □

▶□

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 509(a)(2) (Complete only if you checked the box on line 9 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.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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 Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

33 1/3% support tests-2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

▶[

Part IV	Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).						
	Facts And Circumstances Test						
	Explanation						

Schedule A (Form 990 or 990-EZ) 2011

DLN: 93493057006293

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

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

Supplemental Financial Statements

	f the organization UNIVERSITY				ification numbe	
				84-1029228		
Part I	Organizations Maintaining Donor Aorganization answered "Yes" to Form 99	0, Part IV, line 6.			·	
		(a) Donor adv	rised funds	(b) Funds a	nd other accou	nts
	al number at end of year					
Agg	gregate contributions to (during year)					
Agg	gregate grants from (during year)					
Agg	gregate value at end of year					
	I the organization inform all donors and donor adv ds are the organization's property, subject to the			oradvised	☐ Yes	┌ No
use	I the organization inform all grantees, donors, and ed only for charitable purposes and not for the ber				☐ Yes	⊏ No
	oferring impermissible private benefit	.f.tha.aaaa.		- Faura 000 Pa	· ·) NO
	Conservation Easements. Complete			o Form 990, Pai	rt IV, line 7.	
Pur	rpose(s) of conservation easements held by the o Preservation of land for public use (e g , recreat	• •	that apply) Preservation of an	historically impo	rtantly land are	_
<u>'</u>	Protection of natural habitat	ion of pleasure)	Preservation of a	, ,	•	a
, 	Preservation of open space	'	r reservation or a c	ceremed matorie a	cractare	
ı Cor						
	mplete lines 2a-2d if the organization held a qual sement on the last day of the tax year	ified conservation conf	tribution in the form	of a conservation	1	
cus	rememe on the last day of the tax year		[Held at	the End of the	Year
a Tot	al number of conservation easements			2a		
	al acreage restricted by conservation easements	i I		2b		
	mber of conservation easements on a certified his		ed in (a)	2c		
d Nur	mber of conservation easements included in (c) a	cquired after 8/17/06	, ,	2d		
	mber of conservation easements modified, transfe		ushod or torminato		tion during	
	taxable year •	erreu, reieaseu, extiligi	aisiled, or terminate	d by the organizar	cion during	
tiic	taxable year F					
Nur	mber of states where property subject to conserv	ation easement is loca	ted ►	<u> </u>		
				dling of violations,	, and	
	es the organization have a written policy regarding orcement of the conservation easements it holds		ng, inspection, hand	,	Yes	No
enf		7			,) No
enfo Sta	orcement of the conservation easements it holds Iff and volunteer hours devoted to monitoring, insp	? pecting and enforcing c	conservation easem	ents during the ye	,	NO
enfo Sta A m	orcement of the conservation easements it holds	? pecting and enforcing c	conservation easem	ents during the ye	,) NO
enfo Sta Am ► \$ Doe	orcement of the conservation easements it holds off and volunteer hours devoted to monitoring, inspection of expenses incurred in monitoring, inspection	? pecting and enforcing ong, and enforcing cons	conservation easem ervation easements	ents during the yes	,	
enfo Sta Am F \$ Doe 170 In F bala	orcement of the conservation easements it holds off and volunteer hours devoted to monitoring, inspection ount of expenses incurred in monitoring, inspection es each conservation easement reported on line 2	pecting and enforcing ong, and enforcing cons (d) above satisfy the i	conservation easements requirements of sec	ents during the yes during the year stion	ear ► Yes	
enfo Sta Am • \$ Doe 170 In F bala	orcement of the conservation easements it holds aff and volunteer hours devoted to monitoring, inspection of expenses incurred in monitoring, inspection in the second conservation easement reported on line 20(h)(4)(B)(i) and 170(h)(4)(B)(ii)? Part XIV, describe how the organization reports cance sheet, and include, if applicable, the text of	pecting and enforcing ong, and enforcing cons (d) above satisfy the incomparison easement the footnote to the organisments ons of Art, Historical	conservation easements requirements of second sin its revenue and anization's financial cal Treasures,	ents during the yes during the yes during the year stion lexpense statements that	ear ► Yes ent, and describes	No
enformation enform	orcement of the conservation easements it holds aff and volunteer hours devoted to monitoring, inspection of expenses incurred in monitoring, inspection in the second conservation easement reported on line 20 (h)(4)(B)(i) and 170 (h)(4)(B)(ii)? Part XIV, describe how the organization reports cance sheet, and include, if applicable, the text of organization's accounting for conservation easement. Organizations Maintaining Collection	pecting and enforcing ong, and enforcing cons (d) above satisfy the incommentation easement the footnote to the organism of Art, Historial (Yes" to Form 990, 15 116, not to report in infor public exhibition, e	ervation easements requirements of sec s in its revenue and anization's financial cal Treasures, Part IV, line 8. ts revenue stateme	ents during the year statements that or Other Similant and balance should be for furtherance of the conference of the co	Yes ent, and describes lar Assets.	┌ No
enformation Sta Am Am Doe 170 In F bala the art III art, pro b Iftl hist	orcement of the conservation easements it holds aff and volunteer hours devoted to monitoring, inspection of expenses incurred in monitoring, inspection of expenses incurred in monitoring, inspection of easement reported on line 20 (h)(4)(B)(i) and 170 (h)(4)(B)(ii)? Part XIV, describe how the organization reports cance sheet, and include, if applicable, the text of organization's accounting for conservation easemals. Organizations Maintaining Collection Complete if the organization answered the organization elected, as permitted under SFAS, historical treasures, or other similar assets held	pecting and enforcing ong, and enforcing conservation easement the footnote to the organisms of Art, Historia (Yes" to Form 990, 15 116, not to report in 16 for public exhibition, enancial statements that public exhibition, educing the statements of the statements	conservation easements requirements of section its revenue and anization's financial cal Treasures, Part IV, line 8. ts revenue statement describes these it evenue statement a	tents during the year statements that statements that statements that and balance should be the formulation of the formulation of the statements that statements that statements that statements that statements that statements that statements and balance sheet	Yes ent, and describes lar Assets. neet works of of public service works of art,	┌ No
enformation Sta Am Sta Am Sta In F Bala the art III a Iftl art, pro b Iftl hist pro	orcement of the conservation easements it holds aff and volunteer hours devoted to monitoring, inspection of expenses incurred in monitoring, inspection of expenses incurred in monitoring, inspection of easement reported on line 20 (h)(4)(B)(i) and 170 (h)(4)(B)(ii)? Part XIV, describe how the organization reports cance sheet, and include, if applicable, the text of organization's accounting for conservation easement. Organizations Maintaining Collection Complete if the organization answered the organization elected, as permitted under SFAS, historical treasures, or other similar assets held for treasures, or other similar assets held for treasures, or other similar assets held for	pecting and enforcing ong, and enforcing consolors, and enforcing consolors, and enforcing consolors, and enforcing easement the footnote to the organism of Art, Historia "Yes" to Form 990, is 116, not to report in its for public exhibition, enancial statements that is 116, to report in its republic exhibition, educts	conservation easements requirements of section its revenue and anization's financial cal Treasures, Part IV, line 8. ts revenue statement describes these it evenue statement a	sents during the year statements that we statements that we consider the statements of the constant of the con	Yes ent, and describes lar Assets. neet works of of public service works of art,	┌ No
enformation Sta Am Am Sta Am Doe 170 In F bala the art III a Iftl art, pro b Iftl hist pro (i)	orcement of the conservation easements it holds aff and volunteer hours devoted to monitoring, inspection of expenses incurred in monitoring, inspection of expenses incurred in monitoring, inspection of easement reported on line 20 (h)(4)(B)(i) and 170 (h)(4)(B)(ii)? Part XIV, describe how the organization reports cance sheet, and include, if applicable, the text of organization's accounting for conservation easement. Organizations Maintaining Collection Complete if the organization answered the organization elected, as permitted under SFAS, historical treasures, or other similar assets held vide, in Part XIV, the text of the footnote to its firm the organization elected, as permitted under SFAS torical treasures, or other similar assets held for vide the following amounts relating to these items	pecting and enforcing ong, and enforcing consolors, and enforcing consolors, and enforcing consolors, and enforcing easement the footnote to the organism of Art, Historia "Yes" to Form 990, is 116, not to report in its for public exhibition, enancial statements that is 116, to report in its republic exhibition, educts	conservation easements requirements of section its revenue and anization's financial cal Treasures, Part IV, line 8. ts revenue statement describes these it evenue statement a	tents during the year statements that the statements that the correction or Other Similarity and balance should be alance sheet in furtherance of put the statements of put the statements.	Yes ent, and describes lar Assets. neet works of of public service works of art, ublic service,	┌ No

Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Ar	t, His	torica	l Treas	ures, or Othe	<u>er Similar Ass</u>	ets (c	ontınued)
3	Using the organization's accession and other items (check all that apply)	r records, check ar	ny of th	ne follow	ıng that a	re a significant i	use of its collection	n	
а	Public exhibition		d		oan or exc	change programs	5		
b	Scholarly research		e	Гο	ther				
С	✓ Preservation for future generations								
4	Provide a description of the organization's c Part XIV	ollections and expl	aın hov	w they fu	irther the	organızatıon's e	xempt purpose in		
5	During the year, did the organization solicit assets to be sold to raise funds rather than							Yes	√ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an ar	ements. Compl	ete ıf	the or	ganızatıc		es" to Form 99	0,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other interm	ediary	for cont	rıbutıons	or other assets		Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	V and complete the	follov	ving tabl	e		1 -		
_							Amo	unt	
C	Beginning balance					1c			
d	Additions during the year					1d			
e	Distributions during the year					1e			
f	Ending balance					1f	<u> </u>		
2a	Did the organization include an amount on F	orm 990, Part X, Iır	ne 21?					Yes	☐ No
	If "Yes," explain the arrangement in Part XIV								
Pa	rt V Endowment Funds. Complete							/-\Faur	Vaara Baak
1a	Beginning of year balance	(a)Current Year 4,830,676	(D	Prior Yeal) 3,906		wo Years Back (d 3,029,444	4,157,674	(e)rour	Years Back
ь	Contributions	815,154			,499	342,419	4,828		
_	Investment earnings or losses	-36,536			,871	595,575	120,454		
c d	Grants or scholarships	57,601			3,526	60,606	120,131		
e	Other expenditures for facilities	37,001			,,520	00,000			
	and programs								
f	Administrative expenses						1,253,512		
g	End of year balance	5,551,693		4,830	,676	3,906,832	3,029,444		
2	Provide the estimated percentage of the year	r end balance held	as						
а	Board designated or quasi-endowment 🕨	66 770 %							
b	Permanent endowment 🕨 27 600 %								
С	Term endowment ► 5 630 %								
За	Are there endowment funds not in the posse	ssion of the organiz	zatıon	that are	held and	administered for	the		
	organization by							Yes	+
	(i) unrelated organizations		•				3a(i)		No
	(ii) related organizations						3a(ii)	<u> </u>	No
	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the	•					<u>3b</u>		
4									
Peli	t VI Land, Buildings, and Equipme	ent. See ronn 9:	90, Pa	T		T	T		
	Description of property				st or other nvestment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) B	ook value
1a	Land					6,061,975			6,061,975
b	Buildings		•			14,697,090	4,078,075		10,619,015
c	Leasehold improvements		•			42,635	6,091		36,544
d	Equipment					1,403,270	1,038,947		364,323
	Other					1,667,542	985,021		682,521
Tota	I. Add lines 1a-1e <i>(Column (d) should equal F</i>	orm 990, Part X, colu	mn (B), line 10	(c).) •				17,764,378
							Schedule D (Form 9	990) 2011

Part VIII Investments—Other Securities. See	Form 990, Part X, line 1.	2.	
(a) Description of security or category	(b)Book value	(c) Metho	d of valuation
(including name of security)		Cost or end-of	-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
			_
	•		
Part VIII Investments—Program Related. Se	e Form 990, Part X, line	13.	
(a) Description of investment type	(b) Book value		d of valuation
	(-, - : : : : : : : : : : : : : : : : : :	Cost or end-of	-year market value
	_		
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	+		
Part IX Other Assets. See Form 990, Part X, II	ne 15.		
(a) Descri	ption		(b) Book value
(1) ENDOWMENT ASSETS			5,551,693
Total (Column (h) should equal Form 990, Part X, col (R) line	15)		5 551 693
Total. (Column (b) should equal Form 990, Part X, col.(B) line.			5,551,693
Part X Other Liabilities. See Form 990, Part X	K, line 25.		5,551,693
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability			5,551,693
Part X Other Liabilities. See Form 990, Part X	K, line 25.		5,551,693
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	K, line 25.		5,551,693
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	K, line 25. (b) A mount		5,551,693
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes SWAP AGREEMENT	(, line 25. (b) A mount 969,080 29,016		5,551,693
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes SWAP AGREEMENT STUDENT DEPOSITS HELD	(b) A mount		5,551,693
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes SWAP AGREEMENT STUDENT DEPOSITS HELD	(, line 25. (b) A mount 969,080 29,016		5,551,693
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes SWAP AGREEMENT STUDENT DEPOSITS HELD	(, line 25. (b) A mount 969,080 29,016		5,551,693
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes SWAP AGREEMENT STUDENT DEPOSITS HELD	(, line 25. (b) A mount 969,080 29,016		5,551,693
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes SWAP AGREEMENT STUDENT DEPOSITS HELD	(, line 25. (b) A mount 969,080 29,016		5,551,693
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes SWAP AGREEMENT STUDENT DEPOSITS HELD	(, line 25. (b) A mount 969,080 29,016		5,551,693
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes SWAP AGREEMENT STUDENT DEPOSITS HELD	(, line 25. (b) A mount 969,080 29,016		5,551,693
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes SWAP AGREEMENT STUDENT DEPOSITS HELD	(, line 25. (b) A mount 969,080 29,016		5,551,693
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes SWAP AGREEMENT STUDENT DEPOSITS HELD	(, line 25. (b) A mount 969,080 29,016		5,551,693
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes SWAP AGREEMENT STUDENT DEPOSITS HELD	(, line 25. (b) A mount 969,080 29,016		5,551,693
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes SWAP AGREEMENT STUDENT DEPOSITS HELD	(, line 25. (b) A mount 969,080 29,016		5,551,693

Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemer	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	24,754,396
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	23,457,027
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	1,297,369
4	Net unrealized gains (losses) on investments	4	-104,253
5	Donated services and use of facilities	5	565
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	19,545
9	Total adjustments (net) Add lines 4 - 8	9	-84,143
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	1,213,226
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	20,571,641
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	-78,880
3	Subtract line 2e from line 1	3	20,650,521
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 XIV)		
C	Add lines 4a and 4b	4c	4,103,875
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	24,754,396
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial	1	19,358,415
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	19,358,415
4	A mounts 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 XIV) 4b 4,098,612		
C	Add lines 4a and 4b	4c	4,098,612
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	23,457,027
Da	rt XIV Supplemental Information		

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
	PART III, LINE 4	THE ARTWORK IS COMPOSED OF PAINTINGS, CALLIGRAPHIES, SLIDES, AND PHOTOS THAT PROVIDE HISTORICAL REFERENCES TO THE SCHOOL'S FOUNDER AND HERITAGE
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	EACH YEAR, THE UNIVERSITY CAN USE UP TO 5% OF THE FAIR MARKET VALUE FROM ENDOWMENT FUNDS FOR SCHOLARSHIPS AND OTHER PURPOSES AS SPECIFIED BY THE DONOR IN THE ENDOWMENT AGREEMENT
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE UNIVERSITY APPLIES A MORE-LIKELY-THAN-NOT MEASUREMENT METHODOLOGY TO REFLECT THE FINANCIAL STATEMENT IMPACT OF UNCERTAIN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN AFTER EVALUATING THE TAX POSITIONS TAKEN, NONE ARE CONSIDERED TO BE UNCERTAIN, THEREFORE, NO AMOUNTS HAVE BEEN RECOGNIZED AS OF JUNE 30, 2012 AND 2011 IF INCURRED, INTEREST AND PENALTIES ASSOCIATED WITH TAX POSITIONS ARE RECORDED IN THE PERIOD ASSESSED IN MANAGEMENT AND GENERAL EXPENSES NO INTEREST OR PENALTIES HAVE BEEN ASSESSED AS OF JUNE 30, 2012 AND 2011 TAX YEARS THAT REMAIN SUBJECT TO EXAMINATION INCLUDE 2008 THROUGH PRESENT
PART XI, LINE 8 - OTHER ADJUSTMENTS		CHANGE IN SWAP AGREEMENTS 24,808 UBI FROM K-1S - 5,263 TOTAL TO SCHEDULE D, PART XI, LINE 8 19,545
PART XII, LINE 2D - OTHER ADJUSTMENTS		CHANGE IN SWAP AGREEMENTS 24,808
PART XII, LINE 4B - OTHER ADJUSTMENTS		SCHOLARSHIPS & GRANTS NETTED WITH TUITION REVENUE PER FS 4,058,932 UBI FROM K-1S 5,263 ALAYA SCHOLARSHIPS 39,680
PART XIII, LINE 4B - OTHER ADJUSTMENTS		SCHOLARSHIPS & GRANTS NETTED WITH TUITION REVENUE PER FS 4,058,932 ALAYA SCHOLARSHIPS 39,680

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493057006293

OMB No 1545-0047

2011

2011

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service ►Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

► Attach to Form 990 or Form 990-EZ.

Schools

Name of the organization NAROPA UNIVERSITY

Employer identification number

84-1029228

Рa	rtI		YES	NO
			120	
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,			
	other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its			
	brochures, catalogues, and other written communications with the public dealing with student admissions,			
	programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during			
	the period of solicitation for students, or during the registration period if it has no solicitation program, in a way			
	that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No,"			
	please explain If you need more space use Part II	3	Yes	
		4		
		1		
		-		
		4		
4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory			
	basis?	4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II			
		1		
5	Does the organization discriminate by race in any way with respect to	1		
	Students' rights or privileges?	5a		No
b	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		No
d	Scholarships or other financial assistance?	5d		No
_	Educational policies?	_		
	. Educational policies	5e		No
f	Use of facilities?	5f		No
g	Athletic programs?	5g		Νo
h	Other extracurricular activities?	5h		No
	If you answered "Yes" to any of the above, please explain If you need more space, use Part II			
		-		
		-		
		1		
	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes	
Ь	Has the organization's right to such aid ever been revoked or suspended?	6b		No
_	If you answered "Yes" to either line 6a or line 6b, explain on Part II			
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05			
	of Rev Proc 75-50, 1975-2 CB 587, covering racial nondiscrimination? If "No," explain on Part II	7	Yes	

Part II Supplemental Information

Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions)

ldentifier	Return Reference	Explanation
EXPLANATION OF NONDISCRIMINATORY POLICY PUBLICATION	SCHEDULE E, PART I, LINE 3	THE STATEMENT IS POSTED ON THE UNIVERSITY'S PUBLIC WEBSITE
EXPLANATION OF GOVERNMENT FINANCIAL ASSISTANCE	SCHEDULE E, PART I, LINE 6	NAROPA OFFERS STUDENT LOANS THROUGH GOVERNMENT PROGRAMS SUCH AS PELL, STAFFORD, PERKINS, AND DIRECT LOANS NAROPA ALSO HAS STUDENT WORKERS AND RECEIVES A SUBSIDY FROM THE GOVERNMENT TO OFFSET A PORTION OF THEIR COMPENSATION

Schedule E (Form 990 or 990-EZ) 2011

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493057006293

OMB No 1545-0047

(Form 990)

SCHEDULE F

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ See separate instructions.

Statement of Activities Outside the United States

Open to Public **Inspection**

Department of the Treasury Internal Revenue Service Name of the organization

NAROPA UNIVERSITY

Employer identification number

					84-1029228	
Pa	rt I General Informatio "Yes" to Form 990, Pa			ne United States. C	omplete if the organiz	ation answered
1	For grantmakers. Does the dassistance, the grantees' eligible the grants or assistance?	organization m gibility for the	naintain record grants or assis	stance, and the select	ion criteria used to awa	
2	For grantmakers. Describe in Pa					·
3	Activites per Region (Use Part	V ıf addıtıonal sı	pace is needed `)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g ,	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
	EAST ASIA AND THE PACIFIC	0	0		ART THERAPY	19,700
3~	Sub-total	0	0			19,700
	Total from continuation sheets to Part I	0	0			19,700
c	Totals (add lines 3a and 3b)	0	0			19,700

Pai	Part IV,	line 15, for any	sistance to Organ recipient who recesspace is needed.	nizations or Entiti erved more than \$5,	es Outside the Ur ,000. Check this box	nited States. Comp x if no one recipient	plete if the organiza received more thai	tion answered "Yes' n \$5,000	' to Form 990, ▶ 厂
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2	Enter total nur tax-exempt by	mber of recipie y the IRS, or fo	ent organizations lis or which the grante	ted above that are e or counsel has pro	recognized as chari ovided a section 50	ties by the foreign of 1(c)(3) equivalency	country, recognized letter	as . •	
3	Enter total nui	mber of other o	organizations or en	tities					(Form 990) 2011

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Part V if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
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		+			+		
		+ +	·	<u> </u>	+		
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		+	<u> </u>	-	+	<u> </u>	+
		+	ı———			1	
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			<u></u>	<u> </u>		1	
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-					1		
		+ + + + + + + + + + + + + + + + + + + +	 I		†		
		+		<u> </u>	+		
		+	·	<u> </u>	+		
	+	+	 I	<u> </u>	+	<u> </u>	+
·	 	+	ı———	<u>'</u>		1	_
			<u> </u>	<u> </u>		 	1
						1	dula E (Earry 000) 2011

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	Γ	Yes	<u> </u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Г	Yes	্	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	┍	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	┍	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	~	No

Schedule F (Form 990) 2011

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

Schedule I

(Form 990)

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

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

OMB No 1545-0047

DLN: 93493057006293

Department of the Treasury **Inspection** Internal Revenue Service Name of the organization Employer identification number NAROPA UNIVERSITY 84-1029228 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use (a) Name and address of **(b)** EIN (c) IRC Code (d) Amount of cash (f) Method of (a) Description of (h) Purpose of grant (e) A mount of nonorganization section grant valuation non-cash assistance or assistance cash ıf applicable (book, FMV, or government assistance appraisal, other)

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) SCHOLARSHIPS, TUITION DISCOUNTS, STUDENT AID	853	4,058,932			
(2) ALAYA PRESCHOOL FINANCIAL NEED BASED ASSISTANCE	18	39,680			

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 THE FINANCIAL AID OFFICE MONITORS STUDENTS ADHERENCE TO ACADEMIC SCHOLARSHIP REQUIREMENTS SUCH AS GPA AND SATISFACTORY ACADEMIC PROGRESS
SCHEDULE I, PART III		ALAYA PRESCHOOL HAS CHILDREN WHO RECEIVE SOME SCHOLARSHIP SUPPORT IN THE FORM OF TUITION REDUCTION IN ADDITION TO OTHER CHILDREN THAT RECEIVE SUPPORT VIA CCCAP (COLORADO CHILD CARE ASSISTANCE PROGRAM) THIS IS A STATE FUNDED PROGRAM FOR LOWINCOME FAMILIES WE DO NOT GET FULLY REIMBURSED FOR THE REGULAR COST OF CARE SO SCHOLARSHIPS ARE USED TO FUND THE DIFFERENCE FOR THESE FAMILIES

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493057006293

OMB No 1545-0047

Open to Public Inspection

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

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

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Name of the organization NAROPA UNIVERSITY

Employer identification number

84-1029228

Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	☐ Travel for companions ☐ Payments for business use of personal residence			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
				—
3	Indicate which, if any, of the following the organization uses to establish the compensation of the			
	organization's CEO/Executive Director Check all that apply			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990 , Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		No
b	Any related organization?	5b		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990, Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		No
b	Any related organization?	6b		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

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

(A) Name			W-2 and/or 1099-MI	SC compensation (iii) Other	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior
		(i) Base compensation	incentive compensation	reportable compensation	compensation			Form 990 or Form 990-EZ
(1) STUART LORD	(I) (I)	175,000 0	0	6,409 0	0 0	·	239,524 0	0

Schedule J (Form 990) 2011 Page **3**

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier	Return Reference	Explanation
	PART I, LINE 1A	THE ORGANIZATION PROVIDED A RESIDENCE FOR STUART LORD

Schedule J (Form 990) 2011

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990). ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

DLN: 93493057006293

Open to Public **Inspection**

Internal Revenue Service Name of the organization NAROPA UNIVERSITY

Department of the Treasury

Employer identification number

NAK	COPA UNIVERSITY								8	34-1029	9228			
Pa	rt I Bond Issues									,				
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue P	rıce (f) Description	of Purpose	(g) De	Defeased Be		On alf of suer		Pool
									Yes	No	Yes	No	Yes	No
	COLORADO EDUCATION & CULTURAL FACILITIES AUTHORITY	84-0896727	196458J87	08-04-2005	6,740	,000 UNI	IVERSITY CA PENDITURE P	PITAL ROJECTS		x		x		x
Pai	rt III Proceeds	<u> </u>												
						4		В		С		D		
	A mount of bonds retired													
	A mount of bonds defeased			6,740,00										
3	Total proceeds of issue	<u> </u>										<u> </u>		
4	<u> </u>	Gross proceeds in reserve funds										<u> </u>		
5	Capitalized interest from proc													
6		Proceeds in refunding escrow												
7	Issuance costs from proceeds					134,80	00							
8	Credit enhancement from proc					64,05	51							
9	Working capital expenditures	from proceeds												
10	Capital expenditures from pro	ceeds				813,402								
11	Other spent proceeds													
12	O ther unspent proceeds													
13	Year of substantial completion	n					'	•						
					Yes	No	Yes	No	Yes		No	Yes		No
14	Were the bonds issued as part	t of a current refund	ing issue?		X									
15	Were the bonds issued as part	t of an advance refu	nding issue?			Х								
16	Has the final allocation of prod	ceeds been made?			Х									
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?													
Par	11111 Private Business U	Jse												
				<u> </u>		_	В		C		 	D		
	Was the organization a section		r o momber - f 1	I.C. which award	Yes	No	Yes	No	Yes	+	No	Yes	+	No
1	Was the organization a partne property financed by tax-exen		i a member of an L	_LC, which owned		Х								

financed property?

Are there any lease arrangements that may result in private business use of bond-

Par	Private Business Use (Continued)									
				١		В		С		D
			Yes	No	Yes	No	Yes	No	Yes	No
3a 	Are there any management or service contracts that may result in private use?			Х						
b	If 'Yes' to line 3a, does the organization routinely engage bond counsel or counsel to review any management or service contracts relating to the fine property?									
С	Are there any research agreements that may result in private business us financed property?	e of bond-		х						
d	If 'Yes' to line 3c, does the organization routinely engage bond counsel or counsel to review any research agreements relating to the financed proper									
4	Enter the percentage of financed property used in a private business use to other than a section 501(c)(3) organization or a state or local government.			0 %				•		1
5	Enter the percentage of financed property used in a private business use a unrelated trade or business activity carried on by your organization, anoth 501(c)(3) organization, or a state or local government			0 %						
6	Total of lines 4 and 5			0 %						
7	Has the organization adopted management practices and procedures to er post-issuance compliance of its tax-exempt bond liabilities?	nsure the		Х						
Par	t IV Arbitrage	T								
		Α			<u>B</u>		С		D	T
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?	Yes	No X	Yes	No	•	es	No	Yes	No
2	Is the bond issue a variable rate issue?	Х								
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?	х								
b	Name of provider	WELLS FARG	O BANK		I		I			L
С	Term of hedge	10 00000	0000000							
d	Was the hedge superintegrated?		х							
e	Was a hedge terminated?		х							
4a	Were gross proceeds invested in a GIC?		Х							
b	Name of provider									
С	Term of GIC									
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?									
5	Were any gross proceeds invested beyond an available temporary period?		Х							

Part V Procedures To Undertake Corrective Action

Did the bond issue qualify for an exception to rebate?

Χ

Part VI Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule K (see instructions)

Iden	ntifier	Return Reference	Explanation
PART I LINE 1	-		THE ARBITRAGE REBATE CALCULATION WAS COMPLETED ON JANUARY 20, 2011 AND NO ARBITRAGE REBATE WAS DUE

DLN: 93493057006293

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

NonCash Contributions

Name of the organization NAROPA UNIVERSITY

Employer identification number

(a) Check in applicable Check in applicable Contributions or items contributed applicable Contribution amounts reported on Form 990, Part VIII, line Contribution amounts (Contribution amounts) Contribution Contribution (Contribution amounts) Contribution (Contribution amounts) Contribution (Contribution amounts) Contribution (Contribution (84-1029228			
Art—Works of art	art I T	ypes of Property	1		I	1			
Art—Frictional interests . Clothing and household goods . Cars and other vehicles . Boats and planes . Intellectual property . Securities—Publicly traded . Securities—Publicly traded . Securities—Publicly traded . Securities—Publicly traded . Securities—Partnership, LLC, or trust interests . Securities—Partnership, LLC, or trust interests . Securities—Partnership, LLC, or trust interests . Securities—Good interests . Qualified conservation contribution—distone structures . Qualified conservation contribution—Other . Real estate—Commercial . Real estate—Good inventory . Drugs and medical supplies . Taxidermy . Histonical artifacts . Other F () Other F (ıf		reported on Form 990, Part VIII, line			_	
Art—Fractional interests . Books and publications	A rt—Wor	ks of art							
Books and publications	Art—Hist	torical treasures .							
Cars and other vehicles	Art—Frac	tional interests							
goods	Books ar	nd publications							
Boats and planes	_								
Intellectual property . Securites—Publicly traded . X 2 27,324 STOCK MARKET PRICE Securites—Publicly traded . S . Securites—Partnership, LLC, or trust interests . Securites—Partnership, LLC, or trust interests . Securites—Miscellaneous . Qualified conservation contribution—Historic structures . Qualified conservation contribution—Other . Real estate—Residential . Real estate—Commercial . Real estate—Commercial . Real estate—Commercial . Real estate—Other . Collectibles	Cars and	other vehicles							
Securities—Publicly traded. Securities—Closely held stock. Securities—Closely held stock. Securities—Partnership, LLC, or trust interests Cyulalified conservation contribution—Historic structures Qualified conservation contribution—Other Real estate—Commercial Real estate—Commercial Real estate—Other Collectibles Taxidermy Drugs and medical supplies Taxidermy Mistorical artifacts Scientific specimens Archeological artifacts Scientific specimens Archeological artifacts Other + () Other + () Other + () Other + () During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? Notes the organization have a gift acceptance policy that requires the review of any non-standard contributions? If "Yes," describe in Part III	Boats an	d planes							
Securities—Closely held stock Securities—Partnership, LLC, or trust interests	Intellect	ual property							
Securities—Partnership, LLC, or trust interests	Securitie	s—Publicly traded .	X	2	27,324	STOCK MARKET I	PRICE		
or trust interests	Securitie	s—Closely held stock .							
Qualified conservation contribution—Historic structures									
contribution—Historic structures	Securitie	s—Miscellaneous							
contribution—Other	contribu	tion—Historic							
Real estate—Commercial	-								
Real estate—Other Collectibles	Real esta	ate—Residential .							
Collectibles	Real esta	ate—Commercial							
Food inventory Drugs and medical supplies	Real esta	ate—Other							
Drugs and medical supplies . Taxidermy	Collectib	les							
Taxidermy	Food inv	entory							
Historical artifacts Scientific specimens	Drugs ar	d medical supplies .							
Scientific specimens	Taxıdern	ту							
Archeological artifacts Other ► (Historica	ıl artıfacts							
Other \(\bigcup \) Our mode of Forms 8283, Part IV, Donee Acknowledgement \(\bigcup \) . \(\bigcup \) Other \(\bigcup \) Other \(\bigcup \) Other \(\bigcup \) Onee Acknowledgement \(\bigcup \) . \(\bigcup \) Other \(\bigcup \) Other \(\bigcup \) Onee Acknowledgement \(\bigcup \) . \(\bigcup \) Other \(\bigcup \) Onee Acknowledgement \(\bigcup \) Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? \(\bigcup \cdot \bigcup \bigcup \bigcup \cdot \bigcup \cdot \bigcup \cdot \bigcup \cdot \bigcup \big	Scientific	specimens							
Other ►(Archeolo	gıcal artıfacts							
Other ► () Other ► () Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes N	Other ► (·)							
Other ► () Other ► () Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes N	Other ►()							
Number of Forms 8 2 8 3 received by the organization during the tax year for contributions for which the organization completed Form 8 2 8 3, Part IV, Donee Acknowledgement									
For which the organization completed Form 8283, Part IV, Donee Acknowledgement	Other ► ()							
During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?						29			
must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		,		, ,	-			Yes	N
must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	During t	he year, did the organiza	atıon receiv	e by contribution any prope	erty reported in Part I, lines	1-28 that it			
If "Yes," describe the arrangement in Part II Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions? If "Yes," describe in Part II		•				d to be used	30-		l No
Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions? If "Yes," describe in Part II							Sua		140
contributions?		_			review of any non-standard	contributions?	31	Yes	
If "Yes," describe in Part II		-	·	-	to solicit, process, or sell	non-cash	322		NI A
							324	-	1/1/
· ·			t revenues i	n column (c) for a type of p	roperty for which column (a) is checked,			

Page 2

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) 2011

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493057006293

OMB No 1545-0047

2011

Open to Public
Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

Name of the organization NAROPA UNIVERSITY

Employer identification number

84-1029228

ldentifier	Return Reference	Explanation
ORGANIZATION MISSION STATEMENT	FORM 990, PART III, LINE 1	NAROPA RECOGNIZES THE INHERENT GOODNESS AND WISDOM OF EACH HUMAN BEING IT EDUCATES THE WHOLE PERSON, CULTIVATING ACADEMIC EXCELLENCE AND CONTEMPLATIVE INSIGHT IN ORDER TO INFUSE KNOWLEDGE WITH WISDOM, THE UNIVERSITY NURTURES IN ITS STUDENTS A LIFELONG JOY IN LEARNING, A CRITICAL INTELLECT, THE SENSE OF PURPOSE THAT ACCOMPANIES COMPASSIONATE SERVICE TO THE WORLD AND THE OPENNESS AND EQUANIMITY THAT ARISE FROM AUTHENTIC INSIGHT AND SELF-UNDERSTANDING, ULTIMATELY, NAROPA STUDENTS EXPLORE THE INNER RESOURCES NEEDED TO ENGAGE COURAGEOUSLY WITH A COMPLEX AND CHALLENGING WORLD, TO HELP TRANSFORM THAT WORLD THROUGH SKILL AND COMPASSION AND TO ATTAIN DEEPER LEVELS OF HAPPINESS AND MEANING IN THEIR LIVES DRAWING ON THE VITAL INSIGHTS OF THE WORLD'S WISDOM TRADITIONS, THE UNIVERSITY IS SIMULTANEOUSLY BUDDHIST-INSPIRED
	FORM 990, PART VI, SECTION A, LINE 2	CHARLES LIEF, CHAIRMAN, AND JUDITH LIEF, VICE CHAIR, ARE BOTH HUSBAND AND WIFE
	FORM 990, PART VI, SECTION B, LINE 11	FORM 990 WAS PREPARED BY AN INDEPENDENT CPA FIRM AND REVIEWED BY THE FINANCE TEAM AND PRESIDENT BEFORE BEING FILED WITH THE IRS THE REVIEWED FORM 990 IS THEN FORWARDED TO THE ORGANIZATION'S BOARD OF DIRECTORS PRIOR TO FILING
	FORM 990, PART VI, SECTION B, LINE 12C	BOARD MEMBERS ARE REQUIRED TO DISCLOSE CONFLICTS OF INTEREST ANNUALLY
	FORM 990, PART VI, SECTION B, LINE 15	THE SALARIES FOR THE PRESIDENT, VICE PRESIDENTS AND OTHER HIGH RANKING EMPLOYEES ARE SET BY THE BOARD IN CONJUNCTION WITH THE HR DEPARTMENT AND PRESIDENT BOARD MEMBERS INVOLVED WILL USUALLY INCLUDE THE CHAIRMAN OF THE BOARD, THE CHAIR OF THE BUDGET AND FINANCE COMMITTEE, AND MEMBERS OF THE EXECUTIVE COMMITTEE OF THE BOARD HR USES CUPA (COLLEGE AND UNIVERSITY PERSONNEL ASSOCIATION) TO GET COMPARABLE SALARY INFORMATION FOR SIMILAR POSITIONS AT SCHOOLS WITH SIMILAR SIZE AND REVENUE THE DELIBERATIONS AND DECISIONS ARE DOCUMENTED IN THE BOARD MINUTES
	FORM 990, PART VI, SECTION C, LINE 19	THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -104,253 DONATED SERVICES AND USE OF FACILITIES 565 CHANGE IN SWAP AGREEMENTS 24,808 UBI FROM K-1S -5,263 TOTAL TO FORM 990, PART XI, LINE 5 -84,143

Additional Data

Software ID:

Software Version:

EIN: 84-1029228

Name: NAROPA UNIVERSITY

Form 990, Special Condition Description:

Special Condition Description

Additional Data

Software ID:

Software Version:

EIN: 84-1029228

Name: NAROPA UNIVERSITY

Schedule F (Form 990) 2011

Page **5**

Part V Supplemental Information

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.