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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Do not enter Social Security numbers on this form as it may be made public.

Open to Public Inspection

■ Information about Form 990 and its instructions is at www.irs.gov/form990. For the 2013 calendar year, or tax year beginning JUL 1, 2013 and ending JUN 30, D Employer identification number Check if applicable C Name of organization Opera Colorado Foundation Name change 84-1287161 Doing Business As Initial return Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Termin-ated 303-778-1500 695 S Colorado Boulevard 20 Amended return City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Applica-tion pending Denver, CO 80246 H(a) Is this a group return F Name and address of principal officer Carol Whitley JYes LX No for subordinates? Same as C above H(b) Are all subordinates included? I Tax-exempt status: ■ 501(c)(3) ■ 501(c) () ◀ (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ▶ www.operacolorado.org **H(c)** Group exemption number ▶ K Form of organization: X Corporation Trust Other > Year of formation: 1994 M State of legal domicile: CO Part I Summary Briefly describe the organization's mission or most significant activities: The Foundation is organized to Activities & Governance support the activities of Opera Colorado. Check this box
if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 6 Number of independent voting members of the governing body (Part VI, line 1b) 0 5 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 6 6 Total number of volunteers (estimate if necessary) 6 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a 7b 0. b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 0 27,750. Contributions and grants (Part VIII, line 1h) Revenue 0 0. Program service revenue (Part VIII, line 2g) 9,689 12,760. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 9,689 40,510. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 17.672 34.663. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 13 Benefits paid to or for members (Part IX, column A) Line 1) 0 0. 0. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 16a Professional fundraising fees (Part IX, Layumn (A); line 11e)
b Total fundraising expenses (Part IX, column (D), line 25) 0 0. 0. 4,491 8,743. 17 Other expenses (Part IX, column (A), Ines 11a 11d, 11f 24e). 18 Total expenses Add lines 13-17 (must equal Part IX column (A) line 25 22,163 43,406. <12,474 <2,896.> Revenue less expenses Subtract line 18 from line 12 **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) 840,557 944,593. 0. 0 21 Total liabilities (Part X, line 26) 840,557. 9**44**,5<u>93.</u> Net assets or fund balances Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Carol Whitley, Board President Here Type or print name and title Date Check Print/Type preparer's name Preparer's signature self-employed P01363943 Paid Steve Corder Firm's name Kundinger, Corder, & Engle, Preparer Firm's EIN Firm's address 475 Lincoln Street, Suite 200 Use Only Denver, CO 80203 Phone no. 303 – 534 – 5953

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

332001 10-29-13 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2013)

orm	990 (2013) Opera Colorado Foundation	84-1287161	Page 2
	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		🖂
1	Briefly describe the organization's mission:		
-	The Foundation is organized to support the activities of	Opera	
	Colorado.		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Ye	s X No
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Y(es X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by expens	ses
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	rs, the total expense	s, and
	revenue, if any, for each program service reported		
4a		e \$)
	The Foundation makes grants to Opera Colorado to support	: its	
	activities.		
4b	(Code) (Expenses \$ including grants of \$) (Revenu	e \$)
			-
		······································	
		· · · · · · · · · · · · · · · · · · ·	·
4c	(Code) (Expenses \$	o ¢	1
40	(Code) (Expenses \$) (Nevent		<i>'</i>
			-
	Oll and the second of December 19 Och 19 19 Och		
4d		,	
	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ▶ 34,663.		
40	Total program service expenses > 34,663.		

Form **990** (2013)

Form 990 (2013) Opera Colorado Foundation
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		103	110
•	If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
2 3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
3	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
4	during the tax year? If "Yes," complete Schedule C, Part II	4		х
_	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
5	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			23
6	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
-	Did the organization receive or hold a conservation easement, including easements to preserve open space,			22
7	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	'		-11
8		8		х
	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	0		21
9	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
		9		х
40	If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	-	_	21
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
44	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	10		
11	as applicable			
_	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а	Part VI	11a		х
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	110		
D	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	х	
_	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
C	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
А	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			
ŭ	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	1,10		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
_	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	'		
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	<u></u>	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990	(2013)

Yes No

Form 990 (2013) Opera Colorado Foundation

Part IV Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or 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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		_X_
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		ļ
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) 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		X
b	is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	i		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X_
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			₹.
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	00-		x
~~	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c 29		X
29 20	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		^
30	contributions? If "Yes," complete Schedule M	30		x
24	Did the organization liquidate, terminate, or dissolve and cease operations?	30		
31	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			1
32	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	52		
•	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	"		
•	Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
_	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			Ĭ
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990	(2013)

	Check if Schedule O contains a response or note to any line in this Part V					لسل
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	0			l
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			l
C	Did the organization comply with backup withholding rules for reportable payments to vendors and re-	eporta	ble gamıng			ļ
	(gambling) winnings to prize winners?	. :		1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	0			į
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retuined to the control of the control			2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)		,		
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0		3b_		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	author	ity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶					Į
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accou	nts.			ļ
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction?		5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne orga	anızatıon solıcıt			l
	any contributions that were not tax deductible as charitable contributions?			6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribute	ions o	r gifts			l
	were not tax deductible? .			6b		
7	Organizations that may receive deductible contributions under section 170(c).			!		l
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	rvices p	provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as req	uired			ـــ
	to file Form 8282?		I	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		ļ		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		ct?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conti			7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		<u> </u>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D			_		
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any tin	ie during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.					ĺ
a	Did the organization make any taxable distributions under section 4966?			9a 9b		
10 10	Did the organization make a distribution to a donor, donor advisor, or related person?			90		
10	Section 501(c)(7) organizations. Enter.	10a				ĺ
a	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a				ĺ
_ b	Section 501(c)(12) organizations. Enter	_ 100				ĺ
11	Gross income from members or shareholders	11a				ĺ
a b	Gross income from other sources (Do not net amounts due or paid to other sources against	' 'a		1		
D	amounts due or received from them.)	11b				l
122	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		·	12a	İ	1
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		<u></u>	1		ĺ
	Is the organization licensed to issue qualified health plans in more than one state?			13a		
u	Note. See the instructions for additional information the organization must report on Schedule O					
ь	Enter the amount of reserves the organization is required to maintain by the states in which the					ĺ
	organization is licensed to issue qualified health plans	13b				ĺ
С	Enter the amount of reserves on hand	13c		1		ĺ
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e O		14b		
					990	(2013

84-1287161 Opera Colorado Foundation Form 990 (2013) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 6 b Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X 2 officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 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 b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Х persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 8a The governing body? X **b** Each committee with authority to act on behalf of the governing body? 8h 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No Yes 10a Did the organization have local chapters, branches, or affiliates? 10a 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? X 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c in Schedule O how this was done X Did the organization have a written whistleblower policy? 13 13 X Did the organization have a written document retention and destruction policy? 14 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a b Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's

Section C. Disclosure

List the states with which a copy of this Form 990 is required to be filed None

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

___ Another's website X Upon request Own website

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 during the tax year.

80246

State the name, physical address, and telephone number of the person who possesses the books and records of the organization: Darrel Curtice - 303-778-1500

695 S Colorado Blvd., No. 20, Denver,

exempt status with respect to such arrangements?

16b

Form	aan	(201	31

84-1287161

Form 990 (2013) Opera Colorado Foundation 84-1: Part VII | Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

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

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

X Check this box if neither the organization	nor any related	orga	anıza	ation	COL	npe	nsat	ted any current officer, o	director, or trustee		
(A)	(B)			_ (0	C)			(D)	(E)	(F)	
Name and Title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated				
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	amount of other	
	week				1	T	1	from	from related		
	(list any hours for	Jirect				_		the organization	organizations (W-2/1099-MISC)	compensation from the	
	related	5	寶			sate		(W-2/1099-MISC)	(***271033*****100)	organization	
	organizations	Individual trustee or director	Institutional trustee		e Xe	m Be		(** 2, 1000 111100)		and related	
	below	를	l ge	=	튙	oyee	5			organizations	
	line)	Indiv	Instit	Officer	Key	Highest compensated employee	튠			J	
(1) Harry Sterling	1.00										
Secretary		X		X				0.	0.	0.	
(2) Bruce Allen	1.00										
Treasurer		X		X				0.	0.	0.	
(3) Carol Whitley	1.00								, , <u>, , , , , , , , , , , , , , , , , </u>		
President		X		X				0.	0.	0.	
(4) Walter Rasmussen	1.00		ŀ			1					
Member		X						0.	0.	0.	
(5) Richard Robinson	1.00	1					l				
Member		X	<u> </u>		<u> </u>		<u> </u>	0.	0.	0.	
(6) Pamela Whitehill	1.00	1									
Member		X						0.	0.	0.	
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	84-12	<u> 287</u>	<u> 161</u>	Pa	age 8
/ee	es (continued)	1		(F)	
ĺ	(E) Reportable		Es	ור) timate	d
	compensatio	4		ount (
	from related			other	
	organization (W-2/1099-MIS			pensa om the	
	(11 2) 1000 11110	,		anızatı	
				d relate	
			orga	ınızatı	ons
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				Yes	No
e t	mployee on		3		X
m	the organization		-		
•			4		_X_
vıb	idual for services	3			
			5		X
an	\$100,000 of cor	npens	ation	from	
	year.				
) _		_		C)	
of s	services	_ C	ompe	nsatio	n
				<u> </u>	

Form 990 (2013) Opera Co									84-12	<u>871</u>	61	Page	<u>8</u>
Part VII Section A. Officers, Directors, Trus (A) Name and title	tees, Key Emp (B) Average	(B) (C)		;) tion			compensated Employe (D) Reportable	es (continued) (E) Reportable			F) nated	_	
	hours per week (list any hours for related organizations below line)	box,	unles	ss per	rson i recto	Highest compensated ships of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of the seminary of t	han tee)	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MIS	amount of other compensation		her nsation the ization elated	
			_		×								
	,												_
	-												_
										\dashv			_
						_							—
										-			
			į										
													_
1b Sub-total c Total from continuation sheets to Part V	'II, Section A		1	<u> </u>	<u> </u>	<u> </u>	>	0.		0.		0) .
d Total (add lines 1b and 1c) 2 Total number of individuals (including but	not limited to th	nose	liste	ed al	bove	e) wl	ho r	eceived more than \$100),000 of reportable	0.			<u>.</u>
compensation from the organization											Y	es N	<u>0</u>
3 Did the organization list any former officer line 1a? If "Yes," complete Schedule J for			e, ke	ey er	nplo	yee	, or	highest compensated e	employee on		3	×	 [
4 For any individual listed on line 1a, is the sand related organizations greater than \$15	um of reportab	le co							the organization	Ī	4	x	
5 Did any person listed on line 1a receive or	accrue compe	nsat	ion 1	from	any	/ uni			ridual for services				
rendered to the organization? If "Yes," con Section B. Independent Contractors	nplete Schedui	e <i>J f</i>	or s	uch	pers	son			·		5	<u> </u>	<u>`</u>
Complete this table for your five highest c the organization. Report compensation for										pensa	ation fro	m	
(A) Name and busines			ON			<u> </u>		(B) Description of		C	(C) ompens	ation	
-,,													
	<u></u> .											-	
· · · · · · · · · · · · · · · · · · ·													
2 Total number of independent contractors	(including but	30t l-	ımı+a	nd +0	the	neo !-	etor	d above) who received :	more than				
2 Total number of independent contractors \$100,000 of compensation from the organ		IUL II	minte	5U 10		0 0	3160		nois ulan				

rai	(VIII			or note to any En	s in this Dort VIII			
		Check if Schedule O conti	ains a response	or note to any line	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f		ts, and ve 1f	27,750.	27,750.			
0 (0	<u>ū</u>	Total. Add lines 1a-1f		Business Code	21,130			
Program Service Revenue		All other program service reve		Business code				
	3 4 5	Investment income (including other similar amounts) Income from investment of tal Royalties		est, and	12,760.			12,760
	6 a b c		(i) Real	(II) Personal				
	b c	Gross amount from sales of assets other than inventory Less. cost or other basis and sales expenses Gain or (loss)	(i) Securities	(ii) Other				
Other Revenue		Net gain or (loss) Gross income from fundraisin including \$ contributions reported on line Part IV, line 18	of					
Oth	С	Less direct expenses Net income or (loss) from fund Gross income from gaming an	ctivities See	•				
	С	Net income or (loss) from gan	=					
	ь	Gross sales of inventory, less and allowances Less. cost of goods sold Net income or (loss) from sale	a b s of inventory	.				
	<u> </u>	Miscellaneous Revenu		Business Code				
	11 a b c	·						
		All other revenue Total. Add lines 11a-11d		•	40 F10	0.		12 760
	12	Total revenue. See instructions.		_ _	40,510.	U•	0	. 12,760

Form 990 (2013) Opera Colorado Foundation

Part IX | Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must comp			omplete column (A)	
_	Check if Schedule O contains a respons	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	34,663.	<u>34</u> ,663.		
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22				
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				
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			-	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				<u>-</u> -
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting				
d	· · · · · F				
е	Professional fundraising services. See Part IV, line 17	0.742		0.743	
f	Investment management fees	8,743.		8,743.	
g					
	column (A) amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology		-		
15	Royalties		,		
16	Occupancy			<u>-</u>	
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
40	Conferences, conventions, and meetings				
19 20	Interest			· · · · · · · · · · · · · · · · · · ·	
20 21	Payments to affiliates				
21 22	Depreciation, depletion, and amortization				
23	Insurance	·	-		
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а					
b					
С					
d					
е	All other expenses	15 15 5			
<u> 25</u>	Total functional expenses. Add lines 1 through 24e	43,406.	34,663.	8,743.	0.
26	Joint costs Complete this line only if the organization]	
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)	l		ı l	

Form 990 (2013)
Part X | Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing		1	
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined und	er		
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contribute	ing		
ţ		employers and sponsoring organizations of section 501(c)(9) voluntary			
		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	-
Assets	7	Notes and loans receivable, net		7	_
⋖	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis Complete Part VI of Schedule D 10a			
	b			10c	
	11	Investments - publicly traded securities .		11	
	12	Investments - other securities See Part IV, line 11	840,557.	12	944,593.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets .		14	
	15	Other assets See Part IV, line 11	0.40 555	15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	840,557.	16	944,593.
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons			
Ē		Complete Part II of Schedule L	ł	22	
Lia	23	Secured mortgages and notes payable to unrelated third parties	<u> </u>	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 D	į	25	
	26	Total liabilities. Add lines 17 through 25	0.	26	0.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
S		complete lines 27 through 29, and lines 33 and 34.			
ĕ	27	Unrestricted net assets	<314,395.	>27	<277,143.>
ala	28	Temporarily restricted net assets	88,768.	28	127,802.
B	29	Permanently restricted net assets	1,066,184.	29	1,093,934.
돌		Organizations that do not follow SFAS 117 (ASC 958), check here			
ō		and complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32	
Z	33	Total net assets or fund balances	840,557.	33	944,593.
	34	Total liabilities and net assets/fund balances	840,557.	34	944,593.

	990 (2013) Opera Colorado Foundation	<u>84-128</u>	<u>7161</u>	Pag	<u>e 12</u>
Pa	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			<u>10.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	_2			06.
3	Revenue less expenses. Subtract line 2 from line 1	3			96.:
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			<u>57.</u>
5	Net unrealized gains (losses) on investments	5	<u> 106</u>	<u>, 9:</u>	<u>32.</u>
6	Donated services and use of facilities .	6		_	
7	Investment expenses	7	<u> </u>		
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	944	1,5	<u>93.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u>X</u>
				Yes	No
1	Accounting method used to prepare the Form 990: Lash X Accrual Cother				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.		ļ	
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	ļ	<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis,	1 1		
	consolidated basis, or both		1 1	ł	
	Separate basis X Consolidated basis Both consolidated and separate basis		1 1	-	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audıt,		l	
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch		1		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ngle Audıt			
	Act and OMB Circular A-133?		3a		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ııred audıt			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form 9	9 90 (2013)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

ZU 13

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

Open to Public Inspection

		Opera C	olorado Foun	datio	n				8	<u>4-1287</u>	161	
Part I	Reason	for Public Chari	ty Status (All organiz	ations mus	st complete	e this part) See inst	ructions.				
he organ	zation is not a	private foundation t	pecause it is (For lines 1	through 1	1, check o	nly one b	ox.)					
1 🔲	A church, cor	vention of churches	, or association of churc	ches descr	rbed in se	ction 170	(b)(1)(A)(i)					
2	A school des	cribed in section 170	0(b)(1)(A)(ii). (Attach Scl	hedule E)								
з 🗔			al service organization of		n section	170(b)(1)((A)(iii).					
4			perated in conjunction					(b)(1)(A)(iii	i). Enter t	he hospital	's nar	ne,
	city, and state											
5 🔲			penefit of a college or ur	niversity ov	vned or op	erated by	a governr	nental unit	describ	ed in		
	section 170	(b)(1)(A)(iv). (Comple	te Part II)									
6 🔲			ent or governmental unit									
7	An organizati	on that normally rece	eives a substantial part o	of its supp	ort from a	governme	ntal unit o	r from the	general (public desc	ribed	ın
	section 170(b)(1)(A)(vi). (Complet	te Part II.)									
8 🖳	A community	trust described in s	ection 170(b)(1)(A)(vi). ((Complete	Part II.)							
9 📖			eives (1) more than 33 1									
	activities rela	ted to its exempt fur	ictions - subject to certa	un excepti	ons, and (2	?) no more	than 33 1	/3% of its	support	from gross	inves	tment
	income and u	inrelated business ta	axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	nızatıon	after June 3	JO, 19	75
		509(a)(2). (Complete										
10			erated exclusively to te									
11 X			erated exclusively for th									or
			tions described in section				2) See sec	ction 509(a	a)(3). Cho	eck the box	that	
			organization and comple					.—				
	a X Type I			•	nctionally i	•				n functional	•	-
e X		-	t the organization is not									
		_	nan one or more publicly						9(a)(1) or	section 505	3(a)(2)	
f			ten determination from t	the IRS tha	atitisa Iy	pe I, Type	II, or Type	e III				
		rganization, check th		<u>.</u>					•			ш
g			rganization accepted ar								.	Τ
			rectly controls, either al	one or tog	etner with	persons c	iescribea i	ın (ii) and (i	iii) below.		Yes	
	_	-	upported organization?							11g(i)	+-	X
	., .	•	n described in (i) above?		•					11g(ii)		$\frac{\lambda}{X}$
_			person described in (i) o							11g(iii)	ш	<u> </u>
h	Provide the f	ollowing information	about the supported or	ganization	(S)							
(3 Nama	of our posted	(::) EIN	(iii) Type of organization	(iv) Is the o	organization	(v) Did vo	u notify the	(vi) Is	the	(vii) Amoun	t of me	netary
	of supported anization	(ii) EIN	(described on lines 1-9		sted in your	organizat	ion in col.	organizatio (i) organiz	on in col. ed in the l		port	,,,otal y
0.9	ameanor,		above or IRC section	governing	document?	(i) of you	r support?	Ü.S	.?			
			(see instructions))	Yes	No	Yes	No	Yes	No			
Opera										_		
Color	ado	<u>84-0850527</u>	7	X		Х	<u> </u>	X			<u>,4,6</u>	<u> 563.</u>
		1										
					 							
				<u> </u>	 			_				
				 				ļ				
Total	1									3	34,(663.

	(Complete only if you checked fails to qualify under the tests			_			
	ction A. Public Support		1 -				<u> </u>
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to						
	or expended on its behalf						ļ
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total, Add lines 1 through 3	- "					
5	The portion of total contributions						
Ŭ	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)					-	
6	Public support. Subtract line 5 from line 4						
	ction B. Total Support	<u>.</u>		·		<u></u>	_ <u> </u>
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties		1				
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						1
11	Total support. Add lines 7 through 10				,		
12	Gross receipts from related activities	etc (see instruct	ions)			12	
13	First five years. If the Form 990 is fo	r the organization'	s first, second, the	rd, fourth, or fifth t	tax year as a secti	on 501(c)(3)	
	organization, check this box and stop					_	▶□
	ction C. Computation of Publ			· .		<u> </u>	
	Public support percentage for 2013 (column (f))		14	Ç
	Public support percentage from 2012					15	Ç
16a	a 33 1/3% support test - 2013. If the				14 is 33 1/3% or	more, check this t	oox and
	stop here. The organization qualifies	as a publicly supp	oorted organizatio	n			▶∟_
ŧ	o 33 1/3% support test - 2012. If the	organization did n	ot check a box on	line 13 or 16a, and	d line 15 is 33 1/3	% or more, check	this box
	and stop here. The organization qua	•	· · ·				▶∟_
17a	a 10% -facts-and-circumstances tes						
	and if the organization meets the "fac	cts-and-circumstar	nces" test, check	this box and stop	here. Explain in P	art IV how the orga	anızatıon
	meets the "facts-and-circumstances"	test The organiza	ation qualifies as a	publicly supporte	ed organization		▶∟
ŀ	10% -facts-and-circumstances tes	t - 2012. If the org	ganization did not	check a box on lir	ne 13, 16a, 16b, oi	r 17a, and line 15 i	s 10% or
	more, and if the organization meets t	he "facts-and-circi	umstances" test, o	check this box and	stop here. Expla	in in Part IV how th	he

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2013 Part III | Support Schedule for Organizations Described in Section 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 t	pelow, please com	plete Part II)				
Section A. Public Support			r		<u> </u>	
Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
 Gifts, grants, contributions, and 						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to or expended on its behalf					!	
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge					<u> </u>	
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6) Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6	***	1	\ 1			
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						·
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12)		<u> </u>				
14 First five years. If the Form 990 is for	or the organization'	's fırst, second, thi	rd, fourth, or fifth t	ax year as a section	on 501(c)(3) organiz	ation,
check this box and stop here						
Section C. Computation of Pub	lic Support Pe	rcentage				
15 Public support percentage for 2013	(line 8, column (f) o	divided by line 13, o	column (f))		15	%
16 Public support percentage from 201					16	%
Section D. Computation of Inve						
17 Investment income percentage for 2	. 013 (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17	%
18 Investment income percentage from	2012 Schedule A,	, Part III, line 17			18	%
19a 33 1/3% support tests - 2013. If the	e organization did	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line 1	7 is not
more than 33 1/3%, check this box	and stop here. The	e organization qua	lifies as a publicly	supported organiz	ation .	
b 33 1/3% support tests - 2012. If the	e organization did	not check a box or	n line 14 or line 19	a, and line 16 is m	ore than 33 1/3%,	and
line 18 is not more than 33 1/3%, ch		•				▶□
20 Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check t	his box and see in	structions	

SCHEDULE D

(Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Opera Colorado Foundation

Employer identification number 84-1287161

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's		Yes No
	Did the organization inform all grantees, donors, and donor a		e used only
•	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?	,	Yes No
Par		ganization answered "Yes" to Form 990,	
1	Purpose(s) of conservation easements held by the organization		
•	Preservation of land for public use (e.g., recreation or e		storically important land area
	Protection of natural habitat		rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	n of a conservation easement on the last
	day of the tax year		
	, ,		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements	·	2b
c	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired	* *	ture
_	listed in the National Register	·	2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by th	ne organization during the tax
	year▶	•	
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	<u> </u>
	violations, and enforcement of the conservation easements i	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements	during the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements durin	g the year > \$
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 17	0(h)(4)(B)(ı)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservati	ion easements in its revenue and expens	se statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describe	s the organization's accounting for
	conservation easements		
Pa	t III Organizations Maintaining Collections o		Other Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public ex	hibition, education, or research in further	rance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descr	ibes these items	
b	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of p	ublic service, provide the following amounts
	relating to these items.		
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art, historical tre		ıal gaın, provide
	the following amounts required to be reported under SFAS 1	116 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		\$
b	Assets included in Form 990, Part X		> \$

Sche		olorado For		easures, or Oth	er Simil	84-12 lar A sse	-		qe 2
3	Using the organization's acquisition, accessi								
	(check all that apply):	on, and other record	s, oncon any or the	ionoming that are a c	Jigi III.ou.ii.	455 57 115			
а	Public exhibition	Н	Loan or excl	nange programs					
b	Scholarly research	e	Other	ango programo					
c	Preservation for future generations	J		_	-		_		
4	Provide a description of the organization's co	ollections and explain	n how they further th	ne organization's exe	empt purp	ose in Parl	XIII		
5	During the year, did the organization solicit o		•						
•	to be sold to raise funds rather than to be ma						Yes		No
Par	t IV Escrow and Custodial Arran	· · · · · · · · · · · · · · · · · · ·			Form 990	D. Part IV. I			
	reported an amount on Form 990, Par	-				-,	, -		
	Is the organization an agent, trustee, custod	an or other intermed	lary for contribution	s or other assets no	t included			_	
	on Form 990, Part X?		,				Yes		No
h	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing table						
	Too, explain the arrangement in the arrangement	a	g tas.o				Amount		
c	Beginning balance				1c		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	Additions during the year				1d				
	Distributions during the year			•	1e				
f	Ending balance				1f				
	Did the organization include an amount on F	orm 990. Part X. line	21?			·	Yes		No
	If "Yes," explain the arrangement in Part XIII			provided in Part XIII			00	一	
Par									
		(a) Current year	(b) Prior year	(c) Two years back	ľ	years back	(e) Four	vears b	ack
1a	Beginning of year balance	840,557.	831,392.	746,461.		916,206.		987.9	
b	Contributions	27,750,		2,500.		2,500.		•	500.
c	Net investment earnings, gains, and losses	119,692.	31,328.	132,463.		<10,807.		137.0	
d	Grants or scholarships	34,663.	17,672.	40,572.		151,259,		200.2	
	Other expenditures for facilities		17,072.	40,572.		131,237,		200,2	.02,
-	and programs								
f	Administrative expenses	8,743.	4,491.	9,460.		10,179.		11,1	132
g	End of year balance	944,593.	840,557.	831,392.		746,461.		916.2	
2	Provide the estimated percentage of the cur			•		740,401.		210,1	<u></u>
a	Board designated or quasi-endowment	rent year end balane	%	y) Hold do					
_	Permanent endowment ► 100.00	%							
	Temporarily restricted endowment	% %							
Ç	The percentages in lines 2a, 2b, and 2c shou								
32	Are there endowment funds not in the posse		ation that are held a	nd administered for	the organ	zation			
Oa	by.	Josion of the organiza	ation that are more		and organ		Г	Yes	No
	(i) unrelated organizations						3a(i)	X	<u> </u>
	(ii) related organizations	•	•				3a(ii)		X
h	If "Yes" to 3a(ii), are the related organization:	s listed as required o	n Schedule B?				3b		
4	Describe in Part XIII the intended uses of the	•					[00]		
	t VI Land, Buildings, and Equipm		Willong Idinas.						
	Complete if the organization answere		. Part IV. line 11a. S	ee Form 990. Part X	. line 10				
	Description of property	(a) Cost or o			Accumulat	ed	(d) Book	value	
	beautiful of property	basis (investr	1	1 , ,	epreciation	1	(u) 200.		
12	Land		,	. ,	<u>· </u>				
b	Buildings								
-	Leasehold improvements								
d	Equipment								_
	Other								
	I. Add lines 1a through 1e. (Column (d) must e	egual Form 990. Part	X. column (B), line 1	(O(c))		•			0.

Opera	Color	oher	Foun	dat	Ηi	OT
Obera	COTO	auo	roun	uai	ᅩ	OI.

Schedule D (Form 990) 2013 Opera Colora	ado Foundati	LOII	04	-126/101 Page 3
Part VII Investments - Other Securities.		- 115 0 5 000	Don't Villiana 40	
Complete if the organization answered "Yes" t	(b) Book value			i-of-year market value
(1) Financial derivatives	(b) Book value	(c) Memod of v	aladion: ocor or one	or your market value
(2) Closely-held equity interests				· · · · · · · · · · · · · · · · · · ·
(3) Other				
(A) Investments Held at the	-			<u> </u>
	944,593	Pnd. of -V	ear Market	Value
(B) Denver Foundation		bild-01-1	ear Market	varue
(C)				
(D)		<u> </u>		_
(E)				
(F)				
(G)	- -		 .	
(H) Tatal (Col. (h) must equal Form 000. Part V and (P) line 12.)	944,593			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		<u> </u>		
Complete if the organization answered "Yes" to	to Form 990 Part IV lin	110 See Form 990	Part X line 13	
(a) Description of investment	(b) Book value			d-of-year market value
(1)		<u> </u>		
(2)	<u>-</u>			
(3)	-			
(4)				v
(5)				
(6)				
(7)				
(8)				
(9)				
Total (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets.		-		
Complete if the organization answered "Yes"	to Form 990, Part IV, Iir	ne 11d See Form 990,	Part X, line 15.	
(a)	Description			(b) Book value
(2)				
(4)				
(5)				
(6)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 15)			
Part X Other Liabilities.	1- F 000 D-+ N/ I	44 446 O Fa	- 000 D-+V l 05	
Complete if the organization answered "Yes" (a) Description of liability	to Form 990, Part IV, III	(b) Book value	1 990, Part X, line 25	· · ·
1		(b) Book value	_	
(1) Federal income taxes			-	
(2)			-	
(3)			-	
(4)		················	1	
(5)			1	
(6)		 .	†	
(7)			1	
(8)	-	<u> </u>	1	
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 25.)	<u>-</u>	1	
Total (a significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for the significant for				

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

	dule D (Form 990) 2013 Opera Colorado Foundation		84-1287161 Page 4
Pai	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With Revenue pe	r Return.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a		
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
С	Recoveries of prior year grants .	2c	
d	Other (Describe in Part XIII)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1	-	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	-	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
	Add lines 4a and 4b		4c
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem	ents With Expenses p	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a		
_	Total expenses and losses per audited financial statements		1
1	Amounts included on line 1 but not on Form 990, Part IX, line 25		'
2		2a	
a	Donated services and use of facilities		
D	Prior year adjustments	2b	
C	Other losses	2c	-
d	Other (Describe in Part XIII)	2d	\dashv
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1.1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	 i
þ	Other (Describe in Part XIII)	4b	
С			4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5
	rt XIII Supplemental Information.		
	ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part		ine 4, Part X, line 2, Part XI,
lines	2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any add	ditional information	

_			
Pa:	rt V, line 4:		
_			
Ex	planation: To support the general activiti	<u>es oi Opera Co</u>	lorado.
_			
<u>Pa</u>	rt X, Line 2:		
_			e a
EX	planation: The Opera Colorado Foundation i	s exempt irom	rederal income
			<u>-</u> _
<u>ta</u> :	x on its exempt function under Section 501	<u>(c)(3) of the</u>	<u>Internal Revenue</u>
Co	<u>de and qualifies for the charitable contri</u>	<u>bution deducti</u>	on.
<u>Ac</u>	cordingly, the accompanying financial stat	ements contain	no provision
_			
<u>fo</u>	r income taxes. The Foundation adopted gui	dance related	to the
<u>un</u>	certainty in income taxes. After evaluati	ng the tax pos	itions taken,
no	<u>ne are considered to be uncertain; therefo</u>	ore, no amounts	have been
		-	
re	cognized as of June 30, 2014. If incurred	<u>l, interest and</u>	penalties
33205 09-25	94 -13		Schedule D (Form 990) 2013

Schedule D (Form 990) 2013 Opera Colorado Foundation	84-1287161 Page 5
Part XIII Supplemental Information (continued)	
associated with uncertain tax positions would be recorde	ed in the period
assessed as other operating expense. No interest or per	nalties have been
assessed as of June 30, 2014. Management believes the F	Foundation is no
longer subject to income tax examinations for the three	previous tax
years.	
	

SCHEDULE I (Form 990) Department of the Treasury

Internal Revenue Service

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

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

▶ Attach to Form 990.

2013	Open to Public

1

OMB No 1545-0047

► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

ž **Employer identification number** 84-1287161 (h) Purpose of grant or assistance General operations X Yes 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 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (d) Amount of cash grant 34,663 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section ıf applicable Opera Colorado Foundation 84-0850527 General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization 695 S. Colorado Blvd., Suite 20 or government Name of the organization Denver, CO 80246 Opera Colorado Part Part II

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

Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2013)

Page 2

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Provide the information required in		e 2, Part III, column	Part I, line 2, Part III, column (b), and any other additional information	dditional information	
Part I, Line 2:					
Explanation: Monitoring of the grant funds	int funds	is	accomplished by	an	
independent audit of the Opera Colorado done annually by certified public	orado do:	ne annuall	y by certi	fied public	
accountants, as well as by attendance	l l	pera Color	ado board	at Opera Colorado board meetings by	
several directors of the Foundation.	n.				

SCHEDULE O (Form 990 or 990-EZ)

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

Attach to Form 990 or 990-EZ.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number

Opera Colorado Foundation	84-1287161
Form 990, Part VI, Section A, line 2:	
Explanation: Bruce Allen and Carol Whitley are on the Ope	ra Colorado board.
Form 990, Part VI, Section B, line 11:	
Explanation: Form 990, Part VI, Section B, Line 11: The F	orm 990 is
reviewed by the board either at a board meeting or distri	buted by email
prior to its filing.	
Form 990, Part VI, Section B, Line 12c:	
Explanation: Opera Colorado Foundation sends a Conflict o	of Interest Policy
and Statement of Acknowledgement to all board members pri	or to the annual
meeting. Signed forms are collected at the annual meeting	ſ <u>•</u>
Form 990, Part VI, Section C, Line 19:	
Explanation: Opera Colorado Foundation's governing docume	nts are made
available upon request at the Opera Colorado office.	
Form 990, Part VI, Section B, line 15	
Explanation: The Foundation has no paid emloyees.	
Form 990, Part XII, line 2c	
Explanation: The organization has not changed its oversig	ht process or
selection process during the tax year.	

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

► Attach to Form 990.

Opera Colorado Foundation

► See separate instructions.

2013

Open to Public Inspection

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

Employer identification number 84-1287161

Direct controlling Identification of Related Tax-Exempt Organizations Complete of the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year End-of-year assets e Total income € Legal domicile (state or Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33 foreign country) Primary activity Name, address, and EIN (if applicable) of disregarded entity Part II Part

(g) Section 512(b)(13) controlled ŝ × entity? Yes Direct controlling entity status (if section 501(c)(3)) Public charity Line 7 Exempt Code section 501(c)(3) ፱ Legal domicile (state or foreign country) Colorado Primary activity Opera Performances Name, address, and EIN 695 S. Colorado Blvd., Suite 20 of related organization Opera Colorado - 84-0850527 80246 ខ Denver

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

Schedule R (Form 990) 2013

332161 09-12-13 LHA

Page 2

84-1287161

Schedule R (Form 990) 2013 Opera Colorado Foundation

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

(K)	General or Percentage of managing ownership										
S	ieneral or nanagingi partner?	es No					_				
9	Code V-UBI General or Pramount in box managing or 20 of Schedule	K-1 (Form 1065) N		•		_					
E	rtionate ons?	ટ	 								
L	Dispro	Yes					_	 			
(6)	Share of end-of-year assets	į									
€	Share of total income										
(e)	Predominant income (related, unrelated, excluded from tax under	sections 512-514)									
(D)	Direct controlling entity										
(0)	Legal domicile (state or	country)									
(a)	Primary activity										
(a)	Name, address, and EIN of related organization										

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

				ı					1				
] [ction	D(13) rolled ity?	No										_
	Š	512(b)(13) controlled entity?	Yes										
£	000000000000000000000000000000000000000	ercentage ownership											
(6)	Character	end-of-year	dosers								!		
6	Chart to actual	Share of total			·								
(e)	Time of contract	(C corp, S corp,	or trust)										
(p)	2000	Legal domicile Urrect Controlling Type of entity (C corp., S corp., frequent											
(0)		Legal domicile (state or foreign	country)										
(p)		Primary activity								•			
(a)		Name, address, and EIN of related organization											

Schedule R (Form 990) 2013

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ns with one or more re	lated organizations listed	ın Parts II-IV?	-
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				+
b Gift, grant, or capital contribution to related organization(s)				4
c Gift, grant, or capital contribution from related organization(s)				ئ ب
				1d X
				1e X
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T DIVIDENTES ITOTAL FEIGUE OF GAIN (S)				-
g Sale of assets to related organization(s)				
h Purchase of assets from related organization(s)				¥
i Exchange of assets with related organization(s)				÷ X
j Lease of facilities, equipment, or other assets to related organization(s)				i.
k Lease of facilities, equipment, or other assets from related organization(s)				1k
	anization(s)			× =
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			Tm X
	tion(s)			th X
				10 X
p Reimbursement paid to related organization(s) for expenses				t _p
				1q X
 Other transfer of cash or property to related organization(s) 				¥;
s Other transfer of cash or property from related organization(s)				1s X
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	who must complete the	ns line, including covered	relationships and transaction thresholds.	
(a) Agms of related ordering and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American and American an	(b)	(c)	(b) beylown to both the population of definitions for population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population of the population	paylo
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Schedule R (Form 990) 2013 Opera Colorado Foundation

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

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

(a) (b) Name, address, and EIN Primary activity Legs of entity (state	(b) Primary activity	(c) al domicile s or foreign ountry)	(d) Predominant income pa (related, unrelated, excluded from tax under section 512-514) y	(e) Are all partners sec 501(c)(3) 00gs /	(f) Share of total	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes No	(h) (i) (i) (k) (k) (k) (h) (h) (h) (h) (h) (h) (h) (h) (h) (h	(j) General o managing partner? Yes No	(k) Percentage ownership
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