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# CHANGE OF ACCOUNTING PERIOD

**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 Open to Public

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

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

Inspection

'	01 1116	2013 Calendar year, or tax year beginning AFIX 1, 2013 and	enuing C	AN 31, 2010					
В	Check if applicable	C Name of organization		D Employer identific	ation number				
	Addres	Denver Film Society		]					
	Name change	Doing business as		84-07	771070				
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number					
Г	Final return/	1510 Vork St 3rd floor			595-3456				
	termin ated		G Gross receipts \$	3,688,841.					
Г	Amend		H(a) Is this a group re						
-	Ireturn ☐Applic		for subordinates?						
_	⊥tión pendir	same as C above		H(b) Are all subordinates in					
_		empt status	or 527	<b>⊣</b> ''					
<u> </u>	ı ax-exe	empt status (A) 50 (c)(3) (1) 50 (c) (1) (1) (1) (1) (1) (2) (4) (4) (1) (1) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2	01 321	4	list (see instructions)				
			I Voor	H(c) Group exemption	State of legal domicile CO				
_			L Tear	Uniormation, 1970 M	State of legal domicile CO				
	art I	Summary	Schedu	110.0					
<u>S</u>	1	Briefly describe the organization's mission or most significant activities See	Schedi	ile o					
Governance	2	Check this box  if the organization discontinued its operations or dispo	sed of more	e than 25% of its net as	sets				
Š	l	Number of voting members of the governing body (Part VI, line 1a)		3	24				
Ğ	1	Number of independent voting members of the governing body (Part VI, line 1b)		4	23				
ري حق		The state of the s	MED	5	79				
Ęį		Total number of volunteers (estimate if necessary)	INEM.	701 6	400				
Activities &			- ^ ^ C	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	0.				
ĕ		Total unrelated business revenue from Part VIII, column (C), line 12  Net unrelated business taxable income from Form 990 T, line 34 CFP 2	O SOLD	\(\frac{1}{10}\) \(\frac{7}{10}\)	0.				
_	- 5		T	Prior Year	Current Year				
	8	Contributions and grants (Part VIII, line 1h)		- 2 022 ECO	1,674,775.				
를		Contributions and grants (Part VIII, line 1h)  Program service revenue (Part VIII, line 2g)	ien. U	1,853,795.	1,647,051.				
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		13,636.	-33,989.				
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		271,006.	246,737.				
	1 '			4,160,997.	3,534,574.				
_	_	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.				
		• • • • • • • • • • • • • • • • • • • •		0.	0.				
	1	Benefits paid to or for members (Part IX, column (A), line 4)		1,261,114.	1,059,882.				
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	' ⊢	0.	0.				
ē	loa	Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)  284,7	76	<del></del>					
Ä			<del></del>	2,817,323.	2,503,989.				
	''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	-	4,078,437.	3,563,871.				
	i	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	<u> </u>	82,560.	-29,297.				
		Revenue less expenses Subtract line 18 from line 12							
ts or	[	Total access (Da A.V. Isra 40)	B	eginning of Current Year 4,183,893.	End of Year 4,171,524.				
Net Assets	20	Total assets (Part X, line 16)	<u> </u>	1,471,556.	1,500,551.				
et	21	Total liabilities (Part X, line 26)	<u> </u>	2,712,337.	2,670,973.				
		Net assets or fund balances Subtract line 21 from line 20		2,112,331.	2,010,313.				
	art II	Signature Block alties of perjury, I declare that I have examined this return, including accompanying schedul		nents, and to the best of m	uknowledge and belief at in				
					, knowledge and bellet, it is				
tru	e, correc	ct, and complete. Declaration of prepare (other than officer) is based on all information of w	vilicii prepare	i has any knowledge.	1/2016				
٥.		Signature of officer Codyles		Date Date	a/a010				
Sig	-	Andrew Rodgers, Executive Director		,					
He	re	Type or print name and title							
_		Print/Type preparer's name Preparer's signature	$\overline{}$	Date Check	TI PTIN				
Trinitiyye pieparei sinanie Trioparei sagnature ( / / / / )									
	eparer		$ \stackrel{()}{\longrightarrow}$	Seil-empioye	80 F 0 T 3 O 3 J Z 3				
	-			Firm's EIN					
US	e Only	Firm's address 475 Lincoln Street Suite 200 Denver, CO 80203		Phone no. (3	03) 534-5953				
_		·			137				
Ma	y the I	RS discuss this return with the preparer shown above? (see instructions)			Yes No				

Form	990 (2015) Denver Film Society	84-0//10/0	Page 2
Pai	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission		
	See Form 990, Part I, Line 1.		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	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	s measured by expenses	6
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to oth		
	revenue of any for each program service reported		
43	(Code) (Expenses \$ 1,113,521. including grants of \$) (Rever	sue \$ 826,	195.1
70	Sie Film Center		
	The Denver Film Society is a membership-based, not for	profit film	
	organization serving more than 200,000 community member	s annually.	The
	Film Society hosts regular program series, festivals, a	nd other spe	cial
	events, bringing filmgoers and filmmakers together to c	alebrate the	art
	of film. Year round programs include: Cine Club-a month		
	and discussion program; occasional Cinema Q programs, h	rgnrighting	the
	newest films by, for and about the gay, lesbian, transg		
	bisexual community; Women+Film-monthly programs showcas		
	for, and about women; Culinary Cinema programs that mel		<u>ooa,</u>
	the Young Filmmakers Workshop-over a two week period in	the summer,	
	students age 12-19 learn to plan, write, shoot, edit an		
4b	(Code) (Expenses \$ 988,448 ·		<u>584.</u> )
	Denver Film Festival; diverse mini-Festivals and specia		
	including Women+Film Festival, CinemaQ Festival, J'ador	e Focus on	
	French Cinema, Sci-Fi Film series and much more.		
	· · · · · · · · · · · · · · · · · · ·		
4c	(Code ) (Expenses \$ 575, 485 · including grants of \$ ) (Reve	nue \$ 694,	180.)
40	Film on the Rocks		′
	In the summer, Denver Film Society presents Film on the	Rocks nine	1
	classic films that screen at Red Rocks Amphitheatre to	audiences of	าเก
	to 8,000 nightly.	dddicheeb oi	<u>up</u>
	to 8,000 firghtly.		
	Other program services (Describe in Schedule O )		
4d			
4d	(Expenses \$ 92,533 ⋅ including grants of \$ ) (Revenue \$  Total program service expenses ► 2,769,987 ⋅	56,829. <sub>)</sub>	

Part IV	Checklist of Required Schedules
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	<del>-</del> -		
Ü	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	Ť		<del></del> -
•	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			<b></b>
•	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		_ X_
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	<u> </u>
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		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			٠,
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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		v	
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	A	<del>                                     </del>
T	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11f		x
120	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X  Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	- ' '''		
12.0	Schedule D, Parts XI and XII	12a	Х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	124		$\vdash$
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
	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		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			l <u>.                                    </u>
	complete Schedule G, Part III	19		X
		Form	990	(2015)

Part IV	Checklist of Required	Schedules (continued)
-		

L			Yes	No
00-	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	163	X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<del></del> -
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		<b>-</b>	
21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	<u> </u>		
22	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			
20	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		<u> </u>	
240	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25a	24a		Х
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
Ŭ	any tax-exempt bonds?	24c		l
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"		Ì	
	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		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)	-		
а	A current or former officer, director, trustee, 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	<u> </u>	X
C	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 direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	ļ_ <u>_</u>	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			۱,,
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			١,,,
	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			x
	Schedule N, Part II	32	<b>.</b>	<b>├</b> ^
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	1 22	x	
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	<u> </u>	<del>                                     </del>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		1	х
	Part V, line 1	34	┼	X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	<u> </u>	- A
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	256		
20	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b	$\vdash$	$\vdash$
36	If "Yes," complete Schedule R, Part V, line 2	36		x
27	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30	<del> </del>	<del> </del> -
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
20	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	\ <del>''</del>	+-	+
38	Note. All Form 990 filers are required to complete Schedule O	38	х	
	Note: All Form 555 mers are required to complete obnequire o		•	(2015

Pai	Check if Schedule O contains a response or note to any line in this Part V			
	Oncon in Contentine Contentine a response of flote to any line in this fact v	Γ.	Yes	No
4	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	-	res	NO_
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1a 53  1b 0	- 1		
b	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	-	l	
·	(gambling) winnings to prize winners?	1c	x	
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	<del>''</del>		
Za	filed for the calendar year ending with or within the year covered by this return 2a 79	1		
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	x	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	I	X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	i	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
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?	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 organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			1
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	_	χ̈	-
a	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	$\frac{\Lambda}{X}$	
	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 was required to file Form 8282?	7c		х
а	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	- 1	Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/	Ā
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	N/	A
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the N/A	`~~		
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders N/A 11a	]		ŀ
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against			ĺ
40-	amounts due or received from them)  11b	40-	i	İ
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes." enter the amount of tax-exempt interest received or accrued during the year N/A   12b	12a		<del> </del>
13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?  N/A	13a		<del> </del>
4	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			
С	Enter the amount of reserves on hand	_		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		Form	990	(2015)

Form 990 (2015) Denver Film Society 84-0771070 Page
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

	to line 6a, 6b, 01 Tob 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			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 24			
	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.			
	Enter the number of voting members included in line 1a, above, who are independent  1b  23			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other		v	
	officer, director, trustee, or key employee?	2	_X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			v
_	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	7.		х
_	more members of the governing body?  Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7a		
D	persons other than the governing body?	7b		x
0	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	70		<del></del>
8 a	The governing body?	8a	x	-
b	Each committee with authority to act on behalf of the governing body?	8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	0.0		
•	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
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		<u> </u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		1 9	· :
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	Х	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c	Х	<u> </u>
13	Did the organization have a written whistleblower policy?	13	X	<u> </u>
14	Did the organization have a written document retention and destruction policy?	14	X	<u> </u>
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?		v	1
a	The organization's CEO, Executive Director, or top management official	15a	X	Х
b	Other officers or key employees of the organization	15b		<u> </u>
16~	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
ıoa	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		x
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	iva		<del>                                     </del>
	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		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) and 990-T (Section 501(c)(3)s only) are section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are section 6104 requires an organization of the first forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are section 6104 requires at the first forms 1023 (or 1024 if applicable).	vailab	le	
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	cıal	
	statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	Gail Gonzales - 303-595-3456			
	1510 York St, 3rd floor, Denver, CO 80206			

# 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

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average			Pos	ition	١		Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	than is bot	h an	compensation	compensation	amount of
	week		cer an	dad	irecto	r/trus	tee)	from	from related	other
	(list any	trustee or director						the .	organizations	compensation
	hours for related	or di	92			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
	organizations	ruste	Institutional trustee		ee,	ngu		(**-2/1099-141130)		organization and related
	below	dual t	trona	_	Key employee	stcor	15			organizations
	line)	Individual	Instit	Officer	Key e	Highest compensated employee	Former			3
(1) Jim Bunch	1.00									
Board Chair		X		X				0.	0.	0.
(2) Jack McGuire	1.00									
Treasurer		Х		Х				0.	0.	0.
(3) Lauren Handler	1.00									
Secretary		X		Х				0.	0.	0.
(4) Robert Classen	1.00									
Chair-Elect		X		Х		_		0.	0.	0.
(5) John Dee	1.00							_	_	_
Trustee		Х				<u> </u>		0.	0.	0.
(6) Shannon Gifford	1.00								_	_
Trustee		X			L			0.	0.	0.
(7) Ron Henderson	1.00							_		
Trustee		X						0.	0.	0.
(8) Leslie Horna	1.00	ĺ			Ì		l			_
Trustee		Х					<u> </u>	0.	0.	0 .
(9) Joanne Katz	1.00	l				ĺ				
Trustee	1 00	Х				ļ		0.	0.	0.
(10) Chris Law	1.00	١.,						_		
Trustee	1 00	Х	ļ					0.	0.	0.
(11) Linda Petrie Bunch	1.00				ļ			0.	0.	١ ,
Trustee	1.00	X	<del> </del>	<u> </u>			_	0.	0.	0.
(12) Mary Lee Beauregard Trustee	1.00	X					ľ	0.	0.	0.
(13) Todd Lemley	1.00	<del> </del> ≏	┢		-	-		0.	0.	0.
Trustee	1.00	X			ĺ	ŀ		0.	0.	0.
(14) Michelle Livingston	1.00	^		$\vdash$	$\vdash$	⊢	<u> </u>	0.	0.	0,
Trustee	1.00	X						0.	l 0.	0.
(15) Katie Shapiro	1.00	1	├	├-	-	├		·		
Trustee	1.00	x						٥.	0.	О.
(16) Polly Loewy	1.00		╁┈			╁╌			-	<del> </del>
Trustee		$\mathbf{x}$					1	٥.	0.	О.
(17) Julie Mordecai	1.00	† <u>-</u> -	t	$\vdash$	$\vdash$	H	$\vdash$	-		
Trustee & Interim Executive Director		$\mathbf{x}$		x		1	1	l o.	0.	О.

Part VII Section A. Officers, Directors, Trus		ploy	ees			ghe	st C	1		—т	—–	<b>(</b> ()	
(A)	(B) (C) Average Position							(D)	(E)		_	(F)	
Name and title	hours per		(do not check box, unless pe			than		Reportable	Reportable compensation			stimati nount	
	week				a director/truste			compensation from	from related	- 1		other	
	(list any	ctor						the	organizations			pensa	
	hours for	trustee or director				<u>a</u>		organization	(W-2/1099-MISC	3)	fr	om th	ie
	related	tee o	nal trustee			Highest compensated employee		(W-2/1099-MISC)			•	anızat	
	organizations	al Tus	nal tr		Key employee	g a				ĺ		d relat	
	below line)	Individual	Institution	Officer	dwa /	plest	ig E				orga	anızatı	ions
	1 '	ᄪ	SE.	₽	Key	풀통	훈						
(18) David Thomson	1.00	x			ı			0.		٥.			0.
Trustee	1.00	^	ļ —	_	<del> </del>	┢	-			<del>'                                    </del>			<u> </u>
(19) Natalie West	1.00	х						0.		0.			0.
Trustee (20) Sheila K. O'Brien	1.00	^	┢			┢	├	0.		<del>-  </del>			<del></del>
Trustee	1.00	х						0.		0.			0.
(21) Deborah Park	1.00	Ĥ	├─	-	$\vdash$	$\vdash$				<del>"  </del>			<del></del>
Treasurer	1.00	x						0.		0.			0.
(22) Richard N. Rhodes	1.00	^			$\vdash$	$\vdash$	┢	- 0.		<del>-  </del>			
Trustee	1.00	х	ŀ					0.		٥.			0.
(23) Suzanne Sell	1.00	^	⊢		$\vdash$	$\vdash$	├-	- 0.					
Trustee	1.00	x						0.		0.			0.
(24) Mike Day	1.00	<del>                                     </del>	$\vdash$	$\vdash$	-	t				$\ddot{\dashv}$			<del></del>
Trustee		x						0.		0.			0.
(25) Tom Botehlo	40.00		t		_	t			-	ヿ			
Executive Director through 9/30/15				X			l	160,118.		0.		8,9	30.
(26) Gail Gonzales	40.00	<u> </u>			T	$\vdash$	1	·					
Accountant		1		X				52,442.		0.		8,0	60.
1b Sub-total							▶	212,560.		0.	1	6,9	90.
c Total from continuation sheets to Part V	II, Section A						<b>•</b>	0.		0.			0.
d Total (add lines 1b and 1c)	•						<b>•</b>	212,560.		0.	1	6,9	90.
2 Total number of individuals (including but r	not limited to th	nose	liste	ed a	bov	e) w	ho r	eceived more than \$100	,000 of reportable	,		_	
compensation from the organization													2
												Yes	No
3 Did the organization list any former officer	, director, or tru	uste	e, ke	ey er	nplo	oyee	, or	highest compensated e	mployee on	ŀ	- "		`
line 1a? If "Yes," complete Schedule J for s	such individual										3		X
4 For any individual listed on line 1a, is the s									the organization				
and related organizations greater than \$15	0,000? If "Yes,	" cc	mpl	ete S	Sch	edul	e J	for such individual		ļ	4	Х	ــــ
5 Did any person listed on line 1a receive or	•						relat	ted organization or indiv	idual for services	1			,,
rendered to the organization? If "Yes," con	nplete Schedul	e J	for s	uch	per:	son					5	<u> </u>	<u>  X</u>
Section B. Independent Contractors													
1 Complete this table for your five highest co										ens	ation	from	
the organization Report compensation for	the calendar y	ear	end	ıng v	with	or w	/ithii		year I		<del></del>		
(A) Name and business	address	NT	ON:	<b>.</b>			ı	(B) Description of s	services	С	) ompe	C) ensatio	on
		TA	OIV.					- Bosonption or c					
									+				
							ļ						
<del></del>	-												
2 Total number of independent contractors	(including but r	not I	ımıte	ed to	the	ose I	ste	d above) who received in	nore than				
\$100,000 of compensation from the organ	. •					0		<u> </u>					

Form 990 (2015) Denver Film Society
Part VIII Statement of Revenue 84-0771070 Page 9

		Check if Schedule O contains a re-	ponse or	r note to any lin	e in this Part VIII			
					( <b>A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ts si	1 a	Federated campaigns	1a					
ira or u		Membership dues	1ь 1	53,369.				
P, G	c	Fundraising events	1c	20,981.				1
ar Zit	d	Related organizations	1d					
JE S	е	Government grants (contributions)	1e 5	47,719.				
ËΩ		All other contributions, gifts, grants, and						
를		similar amounts not included above	1f 9	52,706.				
들임	g	Noncash contributions included in lines 1a-1f \$	2	274,281.				
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a-1f		<b>&gt;</b>	1,674,775.			
			B	usiness Code				
9	2 a	Film Ticket Sales		713990	1,489,391.	1,489,391.		
Program Service Revenue	b							
n S	c	·	ႃ		•			
e a	c							
5 P	e				1.5.5	4.5.5.44		
۱ ۵	f	All other program service revenue	L	900099	157,660.	157,660.		
$\rightarrow$	ç	Total. Add lines 2a-2f		-	1,647,051.			
	3	Investment income (including dividend	s, interes	t, and	11			44
ł		other sımılar amounts)			11.			11.
	4	Income from investment of tax-exempt	bond pro	oceeds				
	5	Royalties		<u> </u>				<del> </del>
		(i) F		(II) Personal				
	6 a	<del> </del>	667.					
		Less rental expenses						
ŀ		Rental income or (loss) 120,	00/-		120 667	120 667		}
		Net rental income or (loss)	. 1		120,667.	120,667.		
	7 a	Gross amount from sales of (i) Sec	urities	(II) Other				
		assets other than inventory						
i	t	Less cost or other basis		34,000.				1
		and sales expenses		-34,000.				
		Gain or (loss)		-34,000.	-34,000.			-34,000.
		Net gain or (loss)	Г		-34,000.			-34,000.
e l	8 2	Gross income from fundraising events including \$ 20,981.						
Other Revenue			·					
~ 윤		contributions reported on line 1c) See		20,644.				1
힐		Part IV, line 18 Less direct expenses	a b	20,644.		1		1
ŏ		•	~ L	20,011.	0.			İ
- 1		<ul> <li>Net income or (loss) from fundraising e</li> <li>Gross income from gaming activities</li> </ul>			<del> </del>			<del>                                     </del>
	96	Part IV, line 19	a					
		Less direct expenses	a b					1
		<ul> <li>Net income or (loss) from gaming active</li> </ul>	<u> </u>					1
		Gross sales of inventory, less returns	Г					<del></del> -
		and allowances	a 2	225,693.				1
	ŧ	Less cost of goods sold		99,623.				
		Net income or (loss) from sales of inve	_		126,070.	126,070.		
- 1		Miscellaneous Revenue		Business Code	<del></del>		<u> </u>	
ı	11 a	·				,		
	t		[					
	c		[					
	ď	All other revenue		-				
	•	Total. Add lines 11a-11d		<b>&gt;</b>				
	12	Total revenue. See instructions.		<u> </u>	<u>3,534,574.</u>	1,893,788.	0	
53200	9 12-1	6-15						Form <b>990</b> (2015)

	1 990 (2015) Denver Film  rt IX   Statement of Functional Expense			84-07	71070 Page 10
_	ion 501(c)(3) and 501(c)(4) organizations must comp		er organizations must co	mplete column (A)	
	Check if Schedule O contains a respon-				X
	not include amounts reported on lines 6b, 8b, 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 domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				<u></u> .
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				· · · · · ·
5	trustees, and key employees	184,000.	37,420.	100,253.	46,327
6	Compensation not included above, to disqualified	202,000.	3,,120,	100,2331	10,32,
Ü	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)		:		
7	Other salaries and wages	740,388.	576,382.	30,596.	133,410
8	Pension plan accruals and contributions (include	, 20, 000	0,0,0020	30,000	
Ü	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	67,868.	37,883.	7,523.	22,462
10	Payroll taxes	67,626.	39,817.	13,851.	13,958
11	Fees for services (non-employees)	,	•		·
а	Management				
	Legal				•
	Accounting				
	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	411,813.	294,468.	109,700.	7,645 729
12	Advertising and promotion	105,691.	79,906.	25,056.	
13	Office expenses	50,064.	32,972.	17,077.	15
14	Information technology				
15	Royalties				
16	Occupancy	136,313.	108,546.	12,451.	15,316
17	Travel	214,200.	162,714.	48,895.	2,591
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	166 509	160 116	2 411	
22	Depreciation, depletion, and amortization	165,527.	162,116.	3,411.	
23	Insurance	68,661.	26,723.	41,344.	594
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 0)				
а	Events and Receptions	482,270.	480,145.	1,058.	1,067
b		305,058.	301,483.	3,575.	
С		150,482.	146,607.	3,105.	770
d	Development	99,848.	16,744.	65,770.	17,334
е	All other expenses	314,062.	266,061.	25,443.	22,558
25	Total functional expenses. Add lines 1 through 24e	3,563,871.	2,769,987.	509,108.	284,776
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)				

Par	<u> </u>	Balance Sneet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A)		(B)
			Beginning of year		End of year
ı	1	Cash - non-interest-bearing	673,667.	1	245,064.
	2	Savings and temporary cash investments	35,958.	2	1,363.
	3	Pledges and grants receivable, net	117,486.	3	12,152.
	4	Accounts receivable, net	51,542.	4	367,633.
	5	Loans and other receivables from current and former officers, directors,		1	
		trustees, key employees, and highest compensated employees. Complete	± .		
		Part II of Schedule L		5	<del></del>
ļ	6	Loans and other receivables from other disqualified persons (as defined under			
İ		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary		,	
ets		employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net	15 663	7	00 161
٩	8	Inventories for sale or use	15,663.	8_	29,161
	9	Prepaid expenses and deferred charges	22,481.	9	76,100
	10a	Land, buildings, and equipment cost or other			
l		basis Complete Part VI of Schedule D 10a 3,963,837.	2 2 5 2 2 2 5		
	b	Less accumulated depreciation 10b 750,848.	3,267,096.	10c	3,212,989
	11	Investments - publicly traded securities		11	
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments · program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	0.	15	227,062
	16	Total assets. Add lines 1 through 15 (must equal line 34)	4,183,893.	16	4,171,524
	17	Accounts payable and accrued expenses	230,760.	17	367,976
	18	Grants payable	100 - 10	18	
	19	Deferred revenue	122,543.	19	90,139
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
S	22	Loans and other payables to current and former officers, directors, trustees,	a * 1	* ,	
Liabilities		key employees, highest compensated employees, and disqualified persons		_ 1	
힐		Complete Part II of Schedule L		22	
-	23	Secured mortgages and notes payable to unrelated third parties	1,048,882.	23	1,012,502
	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	69,371.	25	29,934
	26	Total liabilities. Add lines 17 through 25	1,471,556.	26	1,500,551
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
es		complete lines 27 through 29, and lines 33 and 34.	0 460 005		
anc	27	Unrestricted net assets	2,468,025.	27	2,339,897
gai	28	Temporarily restricted net assets	244,312.	28	331,076
<u> </u>	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here			
ö		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	
et	32	Retained earnings, endowment, accumulated income, or other funds		32	
Z	33	Total net assets or fund balances	2,712,337.	33	2,670,973.
	34	Total liabilities and net assets/fund balances	4,183,893.	34	4,171,524.

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Pai	t XI Reconciliation of Net Assets		-			
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1				74.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3			71.
3	Revenue less expenses Subtract line 2 from line 1	3				97.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2			37.
5	Net unrealized gains (losses) on investments	5			6,7	33.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-	5,3	34.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	2	,67	0,9	73.
Pai	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		ļ	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	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?		ļ	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basıs,			٠,	
	consolidated basis, or both		-		•	
	Separate basis Consolidated basis Both consolidated and separate basis		1			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,	ļ			
	review, or compilation of its financial statements and selection of an independent accountant?		į	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O		<i></i> ,	, -	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Aud	irt	. ",	, 7 *	
	Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired auc	lit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		I

Form **990** (2015)

## SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Name of the organization

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.

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

			er Film So						4-0771070	
Pa	rt T	Reason for Public (	Charity Status (	All organizations must co	omplete th	ıs part ) Se	ee instruction	s		
The	organ	ization is not a private found	lation because it is (	(For lines 1 through 11, o	check only	one box )				
1	Ш	A church, convention of ch	urches, or association	on of churches describe	d ın <b>sectio</b>	n 170(b)(1	I)(A)(ı).			
2		A school described in secti	ion 170(b)(1)(A)(iı). (	Attach Schedule E (Forn	n 990 or 99	90-EZ))				
3		A hospital or a cooperative hospital service organization described in <b>section 170(b)(1)(A)(iii).</b>								
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,								
		city, and state								
5		An organization operated for	or the benefit of a co	llege or university owner	d or opera	ted by a g	overnmental ı	unit describ	ped in	
		section 170(b)(1)(A)(iv). (C	Complete Part II)							
6		A federal, state, or local go	vernment or governr	mental unit described in	section 17	70(b)(1)(A)	(v).			
7		An organization that norma	illy receives a substa	intial part of its support t	from a gov	ernmental	unit or from t	he general	public described in	
		section 170(b)(1)(A)(vi). (C	omplete Part II)		_			•	•	
8		A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II`)					
9	X	An organization that norma	illy receives (1) more	than 33 1/3% of its sup	port from	contributi	ons, members	ship fees, a	and gross receipts from	
		activities related to its exen	npt functions - subje	ct to certain exceptions,	and (2) no	more tha	n 33 1/3% of	its suppor	t from gross investment	
		income and unrelated busing	ness taxable income	(less section 511 tax) fr	om busine	sses acqu	ired by the oi	rganization	after June 30, 1975	
		See section 509(a)(2). (Cor	mplete Part III)				•	•		
10		An organization organized a	and operated exclus	ively to test for public sa	afety See	section 50	09(a)(4).			
11		An organization organized a	and operated exclus	ively for the benefit of, to	o perform i	the functio	ons of, or to c	arry out the	purposes of one or	
		more publicly supported or	ganizations describe	ed in <b>section 509(a)(1)</b> o	r section :	509(a)(2)	See <b>section</b> 9	509(a)(3). (	Check the box in	
		lines 11a through 11d that	describes the type of	of supporting organization	n and com	plete line:	s 11e, 11f, an	d 11g		
а		Type I. A supporting orga	anization operated, s	supervised, or controlled	by its sup	ported org	ganization(s),	typically by	giving	
		the supported organization	on(s) the power to re	gularly appoint or elect a	a majority	of the dire	ctors or truste	es of the s	supporting	
		organization You must o	complete Part IV, Se	ections A and B.						
b		Type II. A supporting org	janization supervised	d or controlled in connec	tion with it	s support	ed organizatio	on(s), by ha	iving	
		control or management o	of the supporting org	anization vested in the s	ame perso	ons that co	ontrol or mana	age the sup	ported	
		organization(s) You mus	t complete Part IV,	Sections A and C.						
С		Type III functionally inte	egrated. A supportin	g organization operated	ın connec	tion with,	and functiona	illy integrat	ed with,	
		its supported organizatio	n(s) (see instructions	s) You must complete l	Part IV, Se	ections A,	D, and E.			
d		Type III non-functionally	y integrated. A supp	orting organization oper	ated in co	nnection v	vith its suppo	rted organi	zation(s)	
		that is not functionally int	tegrated The organi	zation generally must sa	tisfy a dist	ribution re	quirement an	d an attent	iveness	
		requirement (see instruct	tions) You must cor	mplete Part IV, Sections	s A and D,	and Part	V.			
е		Check this box if the orga	anization received a	written determination fro	m the IRS	that it is a	Type I, Type	II, Type III		
		functionally integrated, or	r Type III non-functio	nally integrated support	ing organi	zation				
f	Ente	er the number of supported o	organizations							
g		vide the following information	n about the supporte							
	(	(i) Name of supported	(ii) EIN	(III) Type of organization (described on lines 1-9	(ıv) Is the o listed i	rganization in your	(v) Amount of	•	(vi) Amount of	
		organization		above (see instructions))	governing	document?	support instruct	•	other support (see instructions)	
					Yes	No	IIISITUCI	10115/	instructions)	
					ļ			·		
									<b></b>	
					ļ					
		·			<del> </del>					
						1				
			-	<del> </del>		-				
			1	1	I	l	l		1	

# Schedule A (Form 990 or 990-EZ) 2015 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total	
1	Gifts, grants, contributions, and	•						
	membership fees received (Do not							
	ınclude any "unusual grants ")							
2	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3							
	•							
	•			<u> </u>				
	•							
	• • •							
	on line 1 that exceeds 2% of the							
	amount shown on line 11,					]		
	column (f)		•					
6	Public support. Subtract line 5 from line 4							
		·	,		•			
Cale	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total	
7	Amounts from line 4	į	7.2				.,	
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar sources							
9	Net income from unrelated business							
	activities, whether or not the							
	business is regularly carried on							
10	Other income Do not include gain							
	or loss from the sale of capital							
	assets (Explain in Part VI)							
11	Total support. Add lines 7 through 10						<u> </u>	
12	Gross receipts from related activities,	etc (see instructi	ons)			12		
13	First five years. If the Form 990 is for	the organization'	s first, second, thii	rd, fourth, or fifth t	ax year as a section	n 501(c)(3)		
					-		▶□	
Sec	ction C. Computation of Publ	ic Support Pe	rcentage					
14	Public support percentage for 2015 (	line 6, column (f) d	ivided by line 11, (	column (f))		14	<u>%</u>	
15	Public support percentage from 2014	Schedule A, Part	II, line 14			15	%	
16a	33 1/3% support test - 2015. If the o	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or r	nore, check this bo	x and	
			•					
t	a revenues leved for the organization's benefit and either paid to or expended on its behalf  3. The value of services or facilities furnished by a governmental unit to the organization's without charge  4. Total. Add lines 1 through 3  5. The portion of total contributions by each person (other than a governmental unit to 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 levetion B. Total Support  alendar year (or fiscal year beginning in)							
	and stop here. The organization qual	ifies as a publicly	supported organiz	ation				
17a		-					•	
	and if the organization meets the "fac	ts-and-circumstar	ices" test, check t	his box and <b>stop i</b>	here. Explain in Pa	rt VI how the orgar	ıızatıon	
	meets the "facts-and-circumstances"	test The organiza	ation qualifies as a	publicly supporte	d organization		▶□	
t	10% -facts-and-circumstances tes	<b>t - 2014.</b> If the org	anization did not	check a box on lin	e 13, 16a, 16b, or	17a, and line 15 is	10% or	
	more, and if the organization meets the	ne "facts-and-circi	ımstances" test, c	heck this box and	stop here. Explair	n in Part VI how the	•	
	-		-				▶∟	
18	Private foundation. If the organization	n did not check a	box on line 13, 16	ia, 16b, 17a, or 17	·			
					Sch	odule A (Form 990	or 000-E7) 2015	

# Schedule A (Form 990 or 990-EZ) 2015 Denver Film Society 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

Sec	ction A. Public Support	elow, please comp	nete Part II )				
	ndar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	Gifts, grants, contributions, and	(4) 2011	(B) 2012	(0) 2010	(4) 2014	(e) 2013	(1) Total
•	membership fees received (Do not						
	include any "unusual grants ")	2036700.	3527653.	2068580.	2022560.	1674775.	11330268.
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	1903438.	1865480.	1976800.	2000936.	1872744.	9619398.
3	Gross receipts from activities that						
Ū	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
·	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities					····-	
_	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5	3940138.	5393133.	4045380.	4023496.	3547519.	20949666.
7 <i>a</i>	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						0.
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				_		0.
c	: Add lines 7a and 7b			·····			0.
8	Public support. (Subtract line 7c from line 6)						20949666.
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
-	Amounts from line 6	3940138.	5393133.	4045380.	4023496.	3547519.	20949666.
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties	177 004	105 400	142 151	122 220	100 670	670 406
	and income from similar sources	1//,004.	105,423.	143,151.	132,230.	120,678.	678,486.
Ľ	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
_		177,004.	105,423.	143,151.	132,230.	120,678.	678,486.
	Add lines 10a and 10b  Net income from unrelated business	177,004.	103,423.	143,131.	132,230.	120,070.	070,400.
• •	activities not included in line 10b,						
	whether or not the business is						
12	regularly carried on Other income Do not include gain				·-		
	or loss from the sale of capital						
13	assets (Explain in Part VI)  Total support (Add lines 9, 10c 11, and 12)	4117142.	5498556.	4188531.	4155726.	3668197.	21628152.
	First five years. If the Form 990 is for	·					
	check this box and stop here	<b>g</b>	,	_,			<b>▶</b> □
Sec	ction C. Computation of Publ	ic Support Pe	rcentage			·	
15	Public support percentage for 2015 (I	line 8, column (f) d	ivided by line 13, c	olumn (f))		15	96.86 %
16	Public support percentage from 2014	Schedule A, Part	III, line 15			16	96.91 %
Sec	ction D. Computation of Inves	stment Incom	e Percentage				
17	Investment income percentage for 20	15 (line 10c, colun	nn (f) divided by lin	e 13, column (f))		17	3.14 %
18	Investment income percentage from 2	2014 Schedule A,	Part III, line 17			18	3.09 %
19a	33 1/3% support tests - 2015. If the	-		•		•	
	more than 33 1/3%, check this box a		= :				$\triangleright$ X
t	33 1/3% support tests - 2014. If the	=				-	
20	line 18 is not more than 33 1/3%, che			•		_	<b>₽</b> H
<b>Z</b> U	Private foundation. If the organization	н ию ногспеска	DOX ON IINE 14. 192	a. or 190. Check ff	us oox and see ins	SULICUOUS	<b>■</b> 1

### Part IV | Supporting Organizations

Section A. All Supporting Organizations

(Complete only if you checked a box in line 11 on Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V)

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No" describe in Part VI how the supported organizations are designated. If designated by		İ	
	class or purpose, describe the designation. If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2)	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion		]	
	despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination		1	:
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	púrposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,			•
	(III) the authority under the organization's organizing document authorizing such action, and (IV) how the action			
	was accomplished (such as by amendment to the organizing document)	5a		<u> </u>
b	Type I or Type II only. Was any added or substituted supported organization part of a class already	,		
	designated in the organization's organizing document?	_ 5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		<u> </u>
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class			
	benefited by one or more of its supported organizations, or (iii) other supporting organizations that also			
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in		-	1
	Part VI.	6	-	
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	Idefined in section 4958(c)(2)(C)), a family member of a substantial contributor, or a 35% controlled entity with	l	t t	1

9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?

regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

8

9a

9b

9с

10a

10b

Sche	dule A (Form 990 or 990-EZ) 2015 Denver Film Society 84-07	7107	0 Pa	ge <b>5</b>
Pa	rt IV   Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)		-	
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	لـــــا	
Sec	tion B. Type I Supporting Organizations		r 1	
		-	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s)	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		*
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	_ , #		
	the organization maintained a close and continuous working relationship with the supported organization(s)	2	-	
3	By reason of the relationship described in (2), did the organization's supported organizations have a		,	,
•	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3	ľ	
Sec	ction E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions):			
а				
b				
c		ructions	s)	
2	Activities Test Answer (a) and (b) below.		Yes	No
a				<del>                                     </del>
а	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	those supported organizations and explain how these activities directly furthered their exempt purposes,		ļ	
	how the organization was responsive to those supported organizations, and how the organization determined			ŀ
	that these activities constituted substantially all of its activities	2a		
	·	Za		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	1		
	reasons for the organization's position that its supported organization(s) would have engaged in these			l
	activities but for the organization's involvement	2b	<u> </u>	<u> </u>
3	Parent of Supported Organizations Answer (a) and (b) below.		1	
а				1
	trustees of each of the supported organizations? Provide details in Part VI.	3a	<u> </u>	
b			İ	
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		1

emergency temporary reduction (see instructions)

Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

3

4

5

Minimum asset amount for prior year (from Section B, line 8, Column A)

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

Schedule A (Form 990 or 990-EZ) 2015

3

Enter greater of line 2 or line 3

Income tax imposed in prior year

Schedule A (Form 990 or 990-EZ) 2015

a b

c Excess from 2013d Excess from 2014e Excess from 2015

### SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

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

► Attach to Form 990.

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

2015
Open to Public Inspection

Name of the organization **Employer identification number** Denver Film Society 84-0771070 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) 3 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds Yes No are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II | Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure □ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last Held at the End of the Tax Year day of the tax year Total number of conservation easements Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

		<u>Film Socie</u>					71070 Page 2
Pai	rt III   Organizations Maintaining C	Collections of A	rt, Historical	reasures, or C	Other Sim	ilar Asse	ts(continued)
3	Using the organization's acquisition, access	on, and other record	ls, check any of the	ne following that are	e a significar	nt use of its	collection items
	(check all that apply)						
а	Public exhibition	d	I	kchange programs			
b	Scholarly research	е	· L Other				
С	Preservation for future generations						
4	Provide a description of the organization's co	ollections and explai	n how they furthe	r the organization's	exempt pur	pose in Par	t XIII
5	During the year, did the organization solicit of	or receive donations	of art, historical tr	easures, or other si	mılar assets		
	to be sold to raise funds rather than to be m	aintained as part of	the organization's	collection?			Yes No
Pai	rt IV Escrow and Custodial Arran	gements. Comple	ete if the organiza	tion answered "Yes	s" on Form 9	90, Part IV,	line 9, or
	reported an amount on Form 990, Pa	rt X, line 21					
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for contributi	ons or other assets	not include	d	
	on Form 990, Part X?						Yes No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table				
							Amount
С	Beginning balance				1c		
d	Additions during the year				1d		-
е	Distributions during the year				1e		
f	Ending balance				1f		
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for escrow or	custodial account	liability?		Yes No
	If "Yes," explain the arrangement in Part XIII				-		
	rt V Endowment Funds. Complete						
	•	(a) Current year	(b) Prior year	(c) Two years ba	ck (d) Thre	e years back	(e) Four years back
1a	Beginning of year balance						
b	Contributions	10,000.					
С	Net investment earnings, gains, and losses						
d	Grants or scholarships						
е	Other expenditures for facilities				1		
	and programs						
f	Administrative expenses						
g	End of year balance	10,000.					
2	Provide the estimated percentage of the cur		ce (line 1a. column	(a)) held as	1		
	Board designated or quasi-endowment	100.00	%	(=),			
	Permanent endowment	%	<del>_</del> /~				
	Temporarily restricted endowment ▶						
•	The percentages on lines 2a, 2b, and 2c sho						
За	Are there endowment funds not in the posse		ation that are held	and administered	for the orga	nızatıon	
-	by	occion of the organiz		and damminotored	ioi ano orga	· IIIZU III	Yes No
	(i) unrelated organizations						3a(i) X
	(ii) related organizations						3a(ii) X
h	If "Yes" on line 3a(ii), are the related organizations	ations listed as requi	red on Schedule F	37			3b
4	Describe in Part XIII the intended uses of the	•		•			<u> </u>
Pa	rt VI Land, Buildings, and Equipn						
شت	Complete if the organization answere		0. Part IV line 11a	See Form 990 Pa	art X. line 10		
	Description of property	(a) Cost or o	<del></del>		(c) Accumula	ated	(d) Book value
	eddeniphen of property	basis (investi		is (other)	depreciation		(=) Doon value
12	Land			,,			
	Buildings		2.5	99,167.	191,	327.	2,407,840.
	Leasehold improvements			33,918.	192,		341,457.
	Equipment			30,752.	367,		463,692.
	Other			, ,			_30,0020
	I. Add lines 1a through 1e (Column (d) must e	egual Form 990. Part	X. column (B) lini	= 10c)			3,212,989.
	,		· ·,				. , ,

	Investments - Other Securities.  Complete if the organization answered "Yes"	on Form 990, Part IV, lin	e 11b See Form 990, Part X, line	e 12
(a) Descrip	tion of security or category (including name of security)	(b) Book value		ost or end-of-year market value
(1) Financi	al derivatives			
(2) Closely	held equity interests			
(3) Other				
(A) _				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	b) must equal Form 990, Part X, col. (B) line 12 )			
Part VIII	Investments - Program Related.			
	Complete if the organization answered "Yes"		e 11c See Form 990, Part X, line	13
	(a) Description of investment	(b) Book value	(c) Method of valuation C	ost or end-of-year market value
(1)				
(2)				
(3)				<del></del>
(4)				
(5)				
(6)			<u> </u>	
(7)	<u></u>			
(8)				
(9)				
	b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX		F 000 B+ IV I	- 444 C F 000 B+V I	45
	Complete if the organization answered "Yes"	Description	e 11d See Form 990, Part X, line	(b) Book value
(4) R6	eneficial interest in as		others	227,062
	mericiai interest in as	sees herd by	Ocher 5	227,002
(2)			-	<u> </u>
(3)				
(4)				
<u>(5)</u> (6)				
(7)				
(8)	·			
(9)				
	ımn (b) must equal Form 990, Part X, col (B) lin	ne 15 )		<b>▶</b> 227,062
Part X	Other Liabilities.	<u> </u>		
	Complete if the organization answered "Yes"	on Form 990. Part IV. lin	e 11e or 11f See Form 990. Par	t X. line 25
1.	(a) Description of liability		(b) Book value	
	deral income taxes			
	nounts held for others		29,934.	
(3)		····		
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	umn (b) must equal Form 990, Part X, col (B) lin	ne 25 )	29,934.	
	for uncertain tax positions. In Part XIII. provide			stoments that conside the

Schèc	ule D (Form 990) 2015 Denver Film Society		84-0771070 Page
Part		ents With Revenue per F	Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a		
1	Total revenue, gains, and other support per audited financial statements		1 4,007,655
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments	2a -6,733.	
b	Donated services and use of facilities	2b 385,525	<u>.</u>
С	Recoveries of prior year grants	2c	]
d	Other (Describe in Part XIII )	2d 94,289.	
е	Add lines 2a through 2d		2e 473,081
3	Subtract line <b>2e</b> from line <b>1</b>		3 3,534,574
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	nvestment expenses not included on Form 990, Part VIII, line 7b	4a	]
b	Other (Describe in Part XIII)	4b	]
С	Add lines 4a and 4b		4c 0
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5 3,534,574
Par	XII Reconciliation of Expenses per Audited Financial Statem	ents With Expenses per	r Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a		1 1 1 1 1 1 1 1 1 1
	Total expenses and losses per audited financial statements		1 4,049,019
	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 - 1 - 205 - 505	
	Donated services and use of facilities	2a 385,525.	<u>식</u>
	Prior year adjustments	2b	4 1
	Other losses	2c	4 1
	Other (Describe in Part XIII )	2d 99,623.	405 140
	Add lines 2a through 2d		2e 485,148
	Subtract line 2e from line 1		3 3,563,871
	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	] ]
b	Other (Describe in Part XIII )	4b	
	Add lines 4a and 4b		4c 0
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5 3,563,871
	SUII Supplemental Information.		
	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part		4, Part X, line 2, Part XI,
III ICS 2	d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any add	illonai information	
Par	t V, line 4:		
The	Rose Community Foundation Nonprofit Orga	nization Endowme	ent Fund (the
Fun	d) has been designated by the Board of Di	rectors of DEG t	o function as
- un	d, has been designated by the board of bi	rectors or Dra (	to runction as
an	endowment. The Fund's primary purpose is	to support DFS a	and the intent
<u>is</u>	to preserve the principal of the fund in	perpetuity.	
Par	t XI, Line 2d - Other Adjustments:		
	c x1, bine 2d Other Adjustments.	<del></del>	·_
Cos	t of Sales		99,623
Los	s on write-off of pledges		-5,334
ጥດተ	al to Schedule D, Part XI, Line 2d		94,289
-00	ar to benedite b, rule hr, brine bu		74,203
Par	t XII, Line 2d - Other Adjustments:		
532054 09-21-1			Schedule D (Form 990) 20
~~ £ 1"			

Schedule D (Form 990) 2015

Schedule D (Form 990) 2015 Denver Film Society	84-0771070 Page 5
Schedule D (Form 990) 2015 Denver Film Society  Part XIII Supplemental Information (continued)	
Cost of Sales	99,623.
<del></del>	
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	<del></del>
1	
	<del></del>

532055 09-21-15 Schedule D (Form 990) 2015

### **SCHEDULE J** (Form 990)

# **Compensation Information**

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

➤ Attach to Form 990.
➤ Information about Schedule J (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

Denver Film Society

Employer identification number 84-0771070

Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a Complete Part III to provide any 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 indemnification 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 on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to		]	
	establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee X Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
4	During the year, did any person listed on 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		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	-	٠,	-
			4 14	
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of			
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of		1	
а	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7	]	Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
_	Regulations section 53 4958-6/c)?	9	1	

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

Schedule J (Form 990) 2015

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

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

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

		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(ı) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deterred compensation	Denemis	(a)-(i)(a)	in column (b) reported as deferred on prior Form 990
(1) Tom Botehlo Executive Director through 9/30/15	€ 9	143,618.	16,500.	0.0	0	8,930.	169,048.	0
באפרתרואם הדומרים לוווי ליינים	<b>=</b>							
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532112 10-14-16							Schedu	Schedule J (Form 990) 2015

# SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service **Noncash Contributions** 

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

OMB No 1545-0047

2015

Open To Public Inspection

Name of the organization

Denver Film Society

Employer identification number 84-0771070

Par	rt I Types of Property									
		(a) Check if applicable	(b) Number of contributions or	(c) Noncash contrib amounts report	ed on		(d) Method of de cash contribu			s
	Art - Works of art		litems contributed	Form 990, Part VIII	, line 1g					
1	, , , , , , , , , , , , , , , , , ,			<del>_</del>			<del></del>			
2	Art - Historical treasures			<u></u>			<del> </del>			
3	Art - Fractional interests									
4	Books and publications		····							
5	Clothing and household goods									
6	Cars and other vehicles									
7	Boats and planes									<del></del>
8	Intellectual property									
9	Securities - Publicly traded									
10	Securities - Closely held stock						<del></del>			
11	Securities - Partnership, LLC, or									
	trust interests									
12	Securities - Miscellaneous									
13	Qualified conservation contribution -									
	Historic structures									
14	Qualified conservation contribution - Other		ļ							
15	Real estate - Residential		,							
16	Real estate - Commercial									
17	Real estate - Other									
18	Collectibles									
19	Food inventory									
20	Drugs and medical supplies							-		
21	Taxidermy						·			
22	Historical artifacts									
23	Scientific specimens									
24	Archeological artifacts									
25	Other (Supplies, foo)	X	21				market			
26	Other (Equipment)	X	3	92,	444.	Fair	market	va	lue	
27	Other ()									
28	Other ()		İ	l						
29	Number of Forms 8283 received by the organi		• .							
	for which the organization completed Form 82	83, Part IV,	Donee Acknowled	gement	29		`			
									Yes	No
30a	During the year, did the organization receive b	y contribution	on any property re	ported in Part I, line	s 1 throu	gh 28, th	at it			1
	must hold for at least three years from the date	e of the initia	al contribution, and	d which is not requii	ed to be	used for				l
	exempt purposes for the entire holding period	?						30a		X
b	If "Yes," describe the arrangement in Part II									1
31	Does the organization have a gift acceptance	policy that r	equires the review	of any non-standar	d contrib	utions?		31		X
32a	Does the organization hire or use third parties	or related or	rganizations to sol	ıcıt, process, or sell	noncash					
	contributions?							32a		X
b	If "Yes," describe in Part II						!			
33	If the organization did not report an amount in	column (c) 1	for a type of prope	rty for which colum	n (a) is ch	ecked,				
	describe in Part II									L .

# 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 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2015
Open to Public Inspection

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

Name of the organization

Denver Film Society

 $\begin{array}{c} \text{Employer identification number} \\ 84-0771070 \end{array}$ 

Form 990, Part I, Line 1, Description of Organization Mission:
The mission of the Denver Film Society is to develop opportunities for
diverse audiences to discover film through creative, thought-provoking
experiences. We strive to cultivate and celebrate film as an art form;
to enrich and expand the film-going experience for regional audiences;
to provide a showcase for international cinema that would not otherwise
be seen in Denver; to provide a platform for Colorado and U.S.
independent filmmakers; to promote dialogue about film artists and the
public; and to provide unique programming for special audiences. The
Denver Film Society offers year-round cinematic programming, special
events, mini festivals and education programs to its members and the
general public, serving more than 200,000 film lovers annually.
Form 990, Part III, Line 4a, Program Service Accomplishments:
own films from leading filmmakers and film experts based in the Rocky
Mountain West. 50% of participants hail from inner-city, Denver Public
Schools and 40% receive some form of financial aid to attend.
Form 990, Part III, Line 4d, Other Program Services:
Stanley Film Festival showcases classic and contemporary independent
horror cinema. The Festival presents emerging and established
filmmakers enabling the industry and general public to experience the

Expenses \$ 92,533.

power of storytelling through genre cinema.

including grants of \$ 0.

Revenue \$ 56,829.

statements available to the public upon request.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990.

2015

Open to Public Inspection

OMB No 1545-0047

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

Denver Film Society

Name of the organization

Department of the Treasury Internal Revenue Service

Employer identification number 84-0771070

Schedule R (Form 990) 2015 (g) Section 512(b)(13) controlled N<sub>o</sub> entity? Direct controlling Yes Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year Direct controlling entity 2,360,910.N/A End-of-year assets <u>e</u> Public charity status (if section 501(c)(3)) Total income Exempt Code ਉ section ਉ Legal domicile (state or Identification of Disregarded Entrtues Complete of the organization answered "Yes" on Form 990, Part IV, line 33 Legal domicile (state or foreign country) foreign country) Colorado Primary activity Primary activity ho hold property For Paperwork Reduction Act Notice, see the Instructions for Form 990. Denver Film Society Building Company, LLC 1510 York Street, Third Floor, Name, address, and EIN (if applicable) Name, address, and EIN of related organization of disregarded entity 80208 Denver, CO 84-0771070, Part II Part

84-0771070

Schedule R (Form 990) 2015 Denver Film Society

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

(j) (k) General or Percentage managing ownership partner? Yes No			e related	Section 512(b)(13) controlled entity?			1		1, 00 (000)
(j) General or managing partner? Yes No			e or mor	(h) Percentage ownership		_			]
(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)			because it had or	(g) Share of Perend-of-year ow assets				_	
(h) Disproportionate allocations? Yes No			 t IV, line 34						-
(g) Share of end-of-year assets			rm 990, Par	(f) Share of total income					
			"Yes" on Fo	(e) Type of entity (C corp, S corp, or trust)	:				
(f) Share of total income			n answered						
(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)			e organizatio	(d) Direct controlling entity					
Predomina (related, i excluded fro sections			mplete if the	(c) Legal domicile (state or foreign country)					1
(d) Direct controlling entity			ration or Trust Co	(b) Primary activity					
(c) Legal domicile (state or foreign			as a Corpo	Prim				į.	
(b) Primary activity		: :	anizations Taxable	7					
(a) Name, address, and EIN of related organization			Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year	(a) Name, address, and EIN of related organization					

Page 3

# Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36 Schedule R (Form 990) 2015 Denver Film Society

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 transaction	is with one or more r	ig transactions with one or more related organizations listed in Parts II-IV?	in Parts II-IV?	
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	>			1a
<b>b</b> Gift, grant, or capital contribution to related organization(s)				1b
c Gift. grant. or capital contribution from related organization(s)				1c
				10
<ul> <li>Loans or loan guarantees by related organization(s)</li> </ul>				ae L
f Dividende from related organization(e)				<del>-</del>
ו טואומפותט ווסוון בומנפת סוקמווובמנוסיון)				
g Sale of assets to related organization(s)				DL
h Purchase of assets from related organization(s)				ŧ
i Exchange of assets with related organization(s)				11
j Lease of facilities, equipment, or other assets to related organization(s)				ĵ.
k Lease of facilities, equipment, or other assets from related organization(s)				¥
I Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			=
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			1m
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	ion(s)			-1n
				-
				2
				1
p Heimbursement paid to related organization(s) for expenses				d
q Reimbursement paid by related organization(s) for expenses				-t
				*
r Other transfer of cash or property to related organization(s)				11
s Other transfer of cash or property from related organization(s)				15
	who must complete t	his line, including covered	relationships and transaction thresholds	•
i.				
<b>(a)</b> Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	nvolved
(1)				
(2)				
(3)				
(4)				
(5)				
(9)				
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Schedule R (Form 990) 2015 Denver Film Society

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)

Predominant income and a state of sections 5 (2-514)	Primary activity Legal dometic Predomatin income Predometic Country) Sections 512-514) Tes No Income assets Country) Sections 512-514) Tes No Income assets Country) Sections 512-514 Tes No Income assets Country) Sections 512-514 Tes No Income assets Country) Sections 512-514 Tes No Income assets Country) Sections 512-514 Tes No Income assets Country) Sections 512-514 Tes No Income assets Country) Sections 512-514 Tes No Income assets Country) Sections 512-514 Tes No Income assets Country) Sections 512-514 Tes No Income assets Country) Sections 512-514 Tes No Income assets Country) Sections 512-514 Tes No Income assets Country) Sections 512-514 Tes No Income assets Country) Sections 512-514 Tes No Income assets Country) Sections 512-514 Tes No Income assets Country) Sections 512-514 Tes No Income assets Country) Sections 512-514 Tes No Income assets Country) Sections 512-514 Tes No Income assets Country) Sections 512-514 Tes No Income assets Country) Sections 512-514 Tes No Income assets Country Sections 512-514 Tes No Income assets Country) Sections 512-514 Tes No Income assets Country Section 512-514 Tes No	(a) (b) (c) (d)	(q)	(0)	(p)	(e)	(J)	(6)	(H)	(1)	(f)	(k)
Country) exclusion (n/m) (100 / m) (	Country) excelled only and assets were assets to a section of the country of the		Primary activity	Legal domicile (state or foreign	Predominant income part (related, unrelated, 50	Are all Iners sec 01(c)(3)	Share of total	Share of end-of-year	Dispropor- tonate	Code V-UBI	General managin	Percentage
				country)	sections 512-514) Ye	S No	ıncome	assets	Yes No	(Form 1065)	X es	10
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