| 71171 | -1 |
|---------|----|
| xo > | |
| 021 | ! |

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 2018

► Do not enter social security numbers on this form as it may be made public 208

| Dep. | artment o | of the Treasury | ▶ Do not enter social security numbers on this form as it may be made pub ▶ Go to www.irs.gov/Form990 for instructions and the latest information | | Open to Public Inspection | | |
|-------------------|----------------|-----------------|---|----------------------|---------------------------------------|--|--|
| A | | | | 08/31 | , 20 19 | | |
| В | | | C Name of organization Colorado School & Public Employees Retirement Association | D Employer | dentification number | | |
| | | schange | Doing business as CSPERA | 7 | 74-2122589 | | |
| $\overline{\Box}$ | Name c | · · · | E Telephone number | | | | |
| \Box | Initial re | | 1085 Peoria St. | 3(| 03-326-1808 | | |
| $\overline{\Box}$ | | urn/terminated | | | | | |
| $\overline{\Box}$ | | | G Gross rece | ipts \$ 212,501 | | | |
| $\overline{\Box}$ | | | Aurora, Co 80011 F Name and address of principal officer Nancy Carlson H(a) is this a | group return for sub | ordinates? Yes No | | |
| | | 1 | · · · · · · · · · · · · · · · · · · · | | cluded? Yes No | | |
| $\overline{}$ | Tax-exe | mpt status | | | t (see instructions) | | |
| J | Website | . | | up exemption nu | mber ▶ | | |
| ĸ | Form of | | Corporation ☐ Trust | M State of | legal domicile CO | | |
| P | art I | Summa | | | | | |
| | 1 | | escribe the organization's mission or most significant activities: | | | | |
| ĕ | | See Sched | | | | | |
| Governance |] | | | | | | |
| ern | 2 | Check the | ils box ▶ ☐ if the organization discontinued its operation தூறு நார்க்கு முற்று ore tha | n 25% of its | net assets | | |
| Š | 3 | Number o | of voting members of the governing body (Part VI, Ine 1a) | . 3 | 5 | | |
| | 4 | | of independent voting members of the governing body (Part VI, line 1b) | 4 | 5 | | |
| ies | 5 | Total num | mber of individuals employed in calendar year 2018 (Part V) line 2a) 1 2019 | . 5 | 2 | | |
| Activities & | 6 | Total num | nber of volunteers (estimate if necessary) | . 6 | 0 | | |
| Ş | 7a | Total unre | related business revenue from Part VIII, column (C) line 10GDEN; UT | . 7a | | | |
| | Ь | Net unrel | lated business taxable income from Form 990-T, line 38 | J. 7b | 0 | | |
| _ | | | Prior | Year | Current Year | | |
| 41 | 8 | Contribut | tions and grants (Part VIII, line 1h) | 6,228 | 627 | | |
| Revenue | 9 | | service revenue (Part VIII, line 2g) | 196,889 | 210,515 | | |
| eve | 10 | | ent income (Part VIII, column (A), lines 3, 4, and 7d) | 838 | 1,359 | | |
| č | 11 | | venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 0 | 0 | | |
| | 12 | | enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 203,955 | 212,501 | | |
| _ | 13 | | nd similar amounts paid (Part IX, column (A), lines 1-3) . | 0 | 0 | | |
| | 14 | | paid to or for members (Part IX, column (A), line 4) | 0 | 0 | | |
| s | 15 | | other compensation, employee benefits (Part IX, column (A), lines 5–10) | 67,340 | 64,475 | | |
| Expenses | 16a | | onal fundraising fees (Part IX, column (A), line 11e) | 0 | 0 | | |
| ē | Ь | | draising expenses (Part IX, column (D), line 25) ▶ | | | | |
| ŭ | 17 | | penses (Part IX, column (A), lines 11a-11d, 11f-24e) | 111,561 | 100,458 | | |
| | 18 | Total exp | penses. Add lines 13-17 (must equal Part IX, column (A), line 25) | 178,901 | 164,933 | | |
| | 19 | Revenue | less expenses. Subtract line 18 from line 12 | 25,054 | 47,568 | | |
| - J | | | Beginning of | Current Year | End of Year | | |
| se ts | 20 | Total ass | sets (Part X, line 16) | 165,759 | 232,646 | | |
| Ϋ́ | 21 | Total liab | pilities (Part X, line 26) | 23,082 | 42,401 | | |
| Net Assets or | 22 | Net asset | ets or fund balances. Subtract line 21 from line 20 | 142,677 | 190,245 | | |
| Р | art II | Signat | ture Block | | | | |
| Ur | nder pen | alties of perju | ury, I declare that I have examined this return, including accompanying schedules and statements, and to | o the best of my | knowledge and belief, it is | | |
| tru | ie, corre | ct, and compl | lete Declaration of preparer (other than officer) is based on all information of which preparer has any kno | wledge | · · · · · · · · · · · · · · · · · · · | | |
| | | 15 | Dandy Fallon | Lecem | ver 2, 201 | | |
| Si | gn | Sign | nature of officer | Date | , | | |
| Не | ere | 1 X | Janay Tation | | | | |
| | | Туре | e or print name and title | | <u> </u> | | |
| D, | aid | Print/Ty | /pe preparer's name Preparer's signature Date | Check ✓ | rf PTIN | | |
| | epar | Gr Glenn E | E. Gustafson, CPA, Inc | self-emplo | | | |
| | epare se On | C1 | | ırm's EIN ▶ | 84-3736271 | | |

Firm's address ▶ 857 Fuller Rd, Colorado Springs, CO 80920

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

For Paperwork Reduction Act Notice, see the separate instructions.



719-650-1960

✓ Yes
☐ No Form **990** (2018)

Phone no

Cat No 11282Y

Other program services (Describe in Schedule O.) including grants of \$ (Expenses \$

) (Revenue \$

| Form 99 | O (2018) | | F | age 3 |
|---------|---|-----------|-------|--|
| Part | V _a Checklist of Required Schedules | | | |
| | | | Yes | No |
| `1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A | 1 | | 1 |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? | 2 | | ✓ |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I | 3 | | 1 |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i> | 4 | | |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | ✓ | |
| 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 | | 1 |
| 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 | | ✓ |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III | 8 | | 1 |
| 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 | | ✓ |
| 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 | | ✓ |
| 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 | | | |
| | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI | 11a | | ✓ |
| 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 | | <u>/</u> |
| С | Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | 1 |
| d | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | <u>/</u> |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | | ✓ |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | _ | ✓_ |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII | 12a | _ | ✓ |
| | Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | | √ |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 14a | | √ |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 144 | | • |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV | 14b | | 1 |
| 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 | | 1 |
| 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 | | ✓ |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) | 17 | | ✓ |
| 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 | | ✓ |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III | 19 | | 1 |
| 20 a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | √ |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |
| 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | 000 | \ <u>\</u> |
| | | For | ฑ ษษ(| (2018) |

| Part | Checklist of Required Schedules (continued) | _ | | |
|---------|---|----------|-------|------------|
| | | | Yes | No |
| 22 | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | ✓ |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J | 23 | | ✓ |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a | 24a | | ✓ |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | 1 |
| С | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24c | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 25a | Section 501(c)(3), 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 | | ✓ |
| 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 | | ✓ |
| 26 | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II | 26 | | ✓ |
| 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 | | 1 |
| 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 | | ✓ |
| | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28b | | ✓ |
| _ | 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 | | √ |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | | ✓ |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M | 30 | | √ |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | ļ | √ |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II | 32 | | 1 |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | ✓ _ |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 | 34 | | 1 |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | ✓ |
| b | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | | |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> | 36 | | |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37_ | | ✓ |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O. | 38_ | 1 | |
| Part | | | | _ |
| | Check if Schedule O contains a response or note to any line in this Part V | <u> </u> | Yes | |
| 1. | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 2 | | Tes | No |
| 1a b | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 2 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 2 | 1 | [| 1 |
| C | Did the organization comply with backup withholding rules for reportable payments to vendors and | 4 | | |
| C | reportable gaming (gambling) winnings to prize winners? | 1c | 1 | [|
| _ | | | n 990 | (2018) |

| Part | V- Statements Regarding Other IRS Filings and Tax Compliance (continued) | | _ | |
|----------|--|-----------------|-----|--|
| | | | Yes | No |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax | | | |
| | Statements, filed for the calendar year ending with or within the year covered by this return 2a 2 | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . | 2b | ✓ | |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | | | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | | ✓ |
| b | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O | 3b | | ✓ |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, | | | ļ |
| | a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4 a | | ✓ |
| 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 | | ✓ |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | √ |
| 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 | | | ١, |
| | 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 were not tax deductible? | 6b | | ✓ |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | |] [|
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods | | | |
| L | and services provided to the payor? | 7a 7b | | √ |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | /B | | - |
| С | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7c | | |
| А | · | 76 | | V |
| d e | If "Yes," indicate the number of Forms 8282 filed during the year | 7e | | |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | 1 |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | - |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | _ | |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the | | | |
| • | sponsoring organization have excess business holdings at any time during the year? | 8 | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | _ |
| а | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | | |
| ь | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | |
| 10 | Section 501(c)(7) organizations. Enter. | | | |
| а | Initiation fees and capital contributions included on Part VIII, line 12 | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b | | | |
| 11 | Section 501(c)(12) organizations. Enter: | | | |
| а | Gross income from members or shareholders | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources | | | ļ |
| | against amounts due or received from them.) | | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year . 12b | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | 10 | | |
| а | Is the organization licensed to issue qualified health plans in more than one state? | 13a | | - |
| | Note. See the instructions for additional information the organization must report on Schedule O | ł ' | | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which | | | ĺ |
| _ | the organization is licensed to issue qualified health plans | , | | 1 |
| C 142 | Enter the amount of reserves on hand | 14a | | 1 |
| 14a | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. | 14a | | • |
| b 15 | Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or | 1-75 | | - |
| 13 | excess parachute payment(s) during the year? | 15 | | 1 |
| | If "Yes," see instructions and file Form 4720, Schedule N. | _ `` | | |
| 16 | Is the organization an educational institution subject to the section 4968 excise tax on net investment income? | 16 | | 1 |
| | If "Yes," complete Form 4720, Schedule O. | | - | Ė |
| | · · · · · · · · · · · · · · · · · · · | | | |

| Dowl | | | | "Made |
|-------|--|----------|----------|--|
| Part | | | | |
| | response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. | | | _ |
| Sacti | Check if Schedule O contains a response or note to any line in this Part VI | <u></u> | • | . <u>(</u> |
| Secu | on 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 5 | | res | NO |
| 14 | 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. | | | |
| ь | Enter the number of voting members included in line 1a, above, who are independent 1b 5 | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with | | | |
| | any other officer, director, trustee, or key employee? . • | 2 | | 1 |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct | | | |
| | supervision of officers, directors, or trustees, or key employees to a management company or other person? | 3 | | 1 |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | ✓ |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? . | 5 | | ✓ |
| 6 | Did the organization have members or stockholders? | 6 | | / |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? | 7a | | / |
| ь | Are any governance decisions of the organization reserved to (or subject to approval by) members, | | | |
| | stockholders, or persons other than the governing body? | 7b | | 1 |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during | | | |
| | the year by the following: | | | |
| а | The governing body? | 8a | ✓ | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | ✓ | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at | | | , |
| Sacti | the organization's mailing address? If "Yes," provide the names and addresses in Schedule O on B. Policies (This Section B requests information about policies not required by the Internal Revenues. | 9 | ode l | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
| 3601 | IT B. Folicies (This Section B requests information about policies not required by the internal nevert | <u> </u> | Yes | No |
| 10a | Did the organization have local chapters, branches, or affiliates? | 10a | | 110 |
| 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 | 1 | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | ✓ | |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990. | | | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | | 1 |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | | |
| С | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," | | | |
| | describe in Schedule O how this was done | 12c | | |
| 13 | Did the organization have a written whistleblower policy? | 13 | | ✓ |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | | ✓ |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | ' |
| а | The organization's CEO, Executive Director, or top management official | 15a | | 1 |
| b | Other officers or key employees of the organization | 15b | | 1 |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement | | | |
| | with a taxable entity during the year? | 16a | - | √ |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the | | | |
| | organization's exempt status with respect to such arrangements? | 16b | | |
| Secti | on C. Disclosure | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed ▶ N/A | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T | | | |
| | (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. | | | |
| | ☐ Own website ☐ Another's website ☑ 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 inte | erest | policy | y, and |
| | financial 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 rec | ords | | |
| | CSPERA, 1085 Peoria St, Aurora, Co 80011 1-303-326-1808 | | | |

| Form | $\alpha \alpha \alpha$ | 1001 | c۱ |
|------|------------------------|------|----|
| | | | |

Form 990 (2018)

| Part VIII | Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, | and |
|-----------|--|-----|
| | Independent Contractors | |

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

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

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

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

| ☐ Check this box if neither the organization no | r any relate | d orga | anız | atıo | n c | ompe | nsa | ted any curren | t officer, director | r, or trustee. |
|---|--|----------------|-----------------------|-----------------------------|--------------|---------------------------------|-----------|---|--|--|
| • (A) Name and Title | (B) Average hours per | box, office | unles er and | Pos eck s pe d a d | rson | e than o is both or/trust | an ee) | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other |
| - | week (list any hours for related organizations below dotted line) | | Institutional trustee | Officer | Key emptoyee | Highest compensated employee | Former | | | compensation from the organization and related organizations |
| (1) Nancy Carlson President | 2 | | | 1 | | | | o | 0 | |
| (2) Mary Lynn Jones Past-President | 2 | | | 1 | | | | o | 0 | |
| (3) Randy Ross President- Elect | 2 | | | 1 | | | | o | o | |
| (4) Sandy Patton Treasurer | 2 | | | 1 | | | | 0 | 0 | |
| (5) Jeanette Beck Secretary | 2 | | | 1 | | | | 0 | 0 | |
| (6) | | | | | | | | | | |
| (7) | | | | | : | | | | | |
| (8) | | | | | | | | | | |
| (9) | | | | | | | | | | |
| (10) | | | | | | | | | | |
| (11) | | | | | | | | | | |
| (12) | | | | | | | | | | |
| (13) | | | | | | | | | | |
| (14) | | | | | | | | | | |

| Part | Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) | | | | | | | | | | | | |
|-----------------|---|---------------------------------------|-----------------------------------|-----------------------|----------|--------------|------------------------------|--------------|-------------------|-----------------------|--|-----------------------|------------------|
| (C) Position | | | | | | | | (F) | | | | | |
| | (A) - Name and title | (B) | , | | eck | more | than o | | (D) Reportable | (E) Reportable | | | |
| | Name and title | Average hours per | | | | | ıs both or/trust | | compensation | compensation from | 1 | timated rount o | |
| | | week (list any hours for | | | | т - | | - | from the | related organizations | 1 | other pensatı | 100 |
| | | related | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | organization | (W-2/1099-MISC) | | om the | |
| | | organizations below dotted | cto | tion | _ | 뮻 | yee yee | = | (W-2/1099-MISC) | | | anızatıcı d relate | |
| | | line) | l as | al tru | | yee | ğ | | | | | ınızatıo | |
| | | | tee | ıste | | | ensa | | | | | | |
| | | | | ı e | | | ted | | | | | | |
| (15) | | | | | | | | | | | | | |
| | | | | | | | | | | | <u> </u> | | |
| (16) | | | | | | | | | i | | | | |
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| (17) | •••• | ļ | | | | | | 1 | | | | | |
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| (19) | •••• | · | - | | | | | | | | | | |
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| (21) | | | | | | \vdash | | ┢ | 1 | | + | | |
| (4!) | | | - | | | | | | | | | | |
| (22) | | · · · · · · · · · · · · · · · · · · · | | | | | | <u> </u> | | | + | | |
| \ / | •••• | · | 1 | | | | | | | | | | |
| (23) | . | | | | | | | <u> </u> | | | | | |
|) / | ••••••••••••••••••••••••••••••••••••••• | · | 1 | | | | | | | | | | |
| (24) | | <u> </u> | | | | | | | | | † | | |
| 33 | | 1 | 1 | | | | | | | | | | |
| (25) | | | | | | | | | | | | | |
| | | | | | | | | | | | <u> </u> | | |
| 1b | Sub-total | | | | | | | ightharpoons | 0 | (| 0 | | 0 |
| С | Total from continuation sheets to Part | | | | | | | | | | <u> </u> | | |
| d_ | Total (add lines 1b and 1c) | | | | | | • | <u> </u> | 0 | <u> </u> | 0 | | 0 |
| 2 | Total number of individuals (including but | | to th | ose | list | ed : | above | e) w | ho received m | ore than \$100,0 | 00 of | | |
| | reportable compensation from the organi | zation > | | | | | | | 0 | | | | |
| | | | | | | | | | | | | Yes | No I |
| 3 | Did the organization list any former of | | | | | | | | | est compensat | | - | - |
| | employee on line 1a? If "Yes," complete | | | | | | | | | | . 3 | +- | / |
| 4 | For any individual listed on line 1a, is the | | | | | | | | | | | | |
| | organization and related organizations | - | | | | | | | | nedule J for su | | - | - |
| _ | | | | | | | | | | | 4 | + | + |
| 5 | Did any person listed on line 1a receive of for services rendered to the organization | | | | | | | | | | | - | - ' |
| Section | on B. Independent Contractors | : 11 163, 0 | Jonipi | CIC | <u> </u> | 1000 | 110 0 1 | 101 3 | acri persori | · · · · · · | | | |
| 1 | Complete this table for your five highest | compensat | ed in | done | and | ont | contr | act | ore that receive | nd more than \$1 | 00 000 c | | |
| • | compensation from the organization. Rep | | | | | | | | | | | | tax |
| | year | Joir Joinpo | · iouii | | J. L. | | 4.00 | ر | , our onemig with | | n gui ii zu i | 0 | |
| | (A) (B) (C) | | | | | | | | | | | | |
| | Name and business add | iress | | | | | | | Description of s | ervices | Comper | | |
| | | | | | | | | | | | | | |
| | | | | | | | | 1 | | | | | |
| | | | | | | | | ĺ | | | | | |
| | | | • | | | | | | | | | | |
| | | | | | | | | | | | | | |
| 2 | Total number of independent contractor | | | | | | | o th | nose listed ab | ove) who | _ | | |
| | received more than \$100,000 of compens | ation from | the or | aan | ızat | ion | ▶ | | | | | | |

| Part | : V,III | Statement of Revo | | | | | | |
|--|--------------|--|--------------------|------------------------|--|--|--------------------------------|--|
| <u> </u> | | Check if Schedule C |) contains a res | ponse or note to | (A) Total revenue | Part VIII (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512–514 |
| ts t | 1a | Federated campaigns | s 1a | | | | | |
| ons, Gifts, Grants Similar Amounts | ь | Membership dues . | | | | | | |
| S, G | С | Fundraising events . | 1c | | | | | |
| ar Site | d | Related organizations | s . 1d | | | | | |
| ii. | е | Government grants (cor | ntributions) 1e | | | | | |
| tior s s | f | All other contributions, g | | | | | | |
| 혈 | | and similar amounts not inc | cluded above 1f | 627 | | | | |
| Contributions, Gifts, and Other Similar An | g | Noncash contributions include | | 2 | | | | |
| <u>2 g</u> | h | Total. Add lines 1a-1 | <u>lf</u> | <u> ▶</u> | 627 | | | |
| J. | _ | | | Business Code | | | | |
| eve | 2a | Membership Dues | | | 205,962 | | | |
| Н | b | Registration Fees for e | | | 4,554 | | | |
| Ž | l d | | | | | | | |
| Š | e | | | | - | | | |
| Program Service Revenue | f | All other program ser | | | | | - | |
| Po | g | Total. Add lines 2a-2 | | • | 210,516 | | _ | |
| | 3 | Investment income | | | | | | |
| | | and other similar amo | ounts) | | 1,359 | | | |
| | 4 | Income from investmen | nt of tax-exempt b | ond proceeds ▶ | | | | |
| | 5 | Royalties | <u> </u> | <u> </u> | | | | |
| | | | (i) Real | (II) Personal | | | | |
| | 6a | Gross rents . | | | | | | |
| | b | Less rental expenses | | | | | | |
| | C | Rental income or (loss) | (1000) | | | | | - |
| | d | Net rental income or | (i) Securities | (II) Other | | | | |
| | 7a | Gross amount from sales of assets other than inventory | (,, | (7, 2 | | | | |
| | Ь | Less cost or other basis | | | | | | |
| | ~ | and sales expenses | | | | | | |
| | С | Gain or (loss) . | | | [| | | |
| | d | Net gain or (loss) . | | <u>.</u> . > | | | | |
| une | 8a | Gross income from fi | undraising | | | | | |
| | | events (not including \$ | | | | | | |
| Other Reve | | of contributions report See Part IV, line 18 | ed on line 1c). | , | | | | |
| Ě | b | Less direct expense | s. b | | | | | |
| _ | С | Net income or (loss) | from fundraising | events . > | | | | |
| | 9a | Gross income from g | aming activities. | | | | | |
| | | • | а | · | | | | |
| | | Less: direct expense | | | | | | |
| | | Net income or (loss) | | ivities | | | | - |
| | 10a | Gross sales of in returns and allowance | | | | | | |
| | | | _ | | | | | |
| | 1 | Less: cost of goods: Net income or (loss) | | ` | | | | |
| | - | Miscellaneous I | | Business Code | | | | |
| | 11a | | | Dusiness Code | | | - | _ |
| | b | | | | | | | _ |
| | C | | | | | | | |
| | d | All other revenue | | | | | | |
| | е | Total. Add lines 11a- | | ▶ | | | | |
| | 12 | Total revenue. See | | • | 212 501 | | | |

| | 90 (2018) | | | | Page 10 |
|----------|--|----------------|--------------------------|---------------------------------|----------------------|
| | Statement of Functional Expenses | | | | (A) |
| Section | n 501(c)(3) and 501(c)(4) organizations must com | | | | |
| <u> </u> | Check if Schedule O contains a response tinclude amounts reported on lines 6b, 7b, | (A) | (B) | (C) | |
| | , and 10b of Part VIII. | Total expenses | Program service expenses | Management and general expenses | Fundraising expenses |
| 1 | Grants and other assistance to domestic organizations | | Схрензез | general expenses | expenses |
| | and domestic governments See Part IV, line 21 | | | | |
| 2 | Grants and other assistance to domestic individuals. See Part IV, line 22 | | | | |
| 3 | Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 | | | | |
| 4 5 | Benefits paid to or for members | | | | |
| 6 | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | | | | |
| 7 | Other salaries and wages | 58,870 | 58,870 | | |
| 8 | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | | | | |
| 9 | Other employee benefits | • | | | |
| 10 | Payroll taxes | 5,605 | 5,605 | | |
| 11 | Fees for services (non-employees): | | | | |
| a b | Management | | | | |
| C | Accounting | 5,708 | | 5,708 | |
| d | Lobbying | 3,700 | | 0,700 | |
| e | 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 Schedule O.) | | | | |
| 12 | Advertising and promotion | | | | |
| 13 | Office expenses | 14,389 | | 14,389 | |
| 14 | Information technology | | | | |
| 15 | Royalties | | | | |
| 16 17 | Occupancy | | | | |
| 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 | | | | |
| 22 | Depreciation, depletion, and amortization . | | | | |
| 23 | Insurance | 1,950 | | 1,950 | |
| 24 | Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If | | | | |
| | line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) | | | | ' |
| а | Car Calandala O Amarkanana d | 78,411 | 78,411 | | |
| b | | /0,411 | 70,411 | | |
| c | | | | | |
| d | | | | | |
| е | All other expenses Total functional expenses. Add lines 1 through 24e | | | | |
| 25 | | 164,933 | 142,886 | 22,047 | |
| 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) | | | | |

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) (A) End of year Beginning of year 1 147,824 143,765 2 Savings and temporary cash investments . 2 65,009 3 3 Pledges and grants receivable, net 4 4 16,610 23.872 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 7 7 Notes and loans receivable, net . Inventories for sale or use 8 8 9 Prepaid expenses and deferred charges 9 1.325 10a Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D 10a 10c Less accumulated depreciation . . . 10b Investments—publicly traded securities 11 11 12 Investments-other securities. See Part IV, line 11 12 13 13 investments—program-related. See Part IV, line 11 14 14 Intangible assets 15 15 Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 16 165,759 232,646 17 17 2,147 9,954 18 18 Grants payable . . 19 Deferred revenue 20,935 19 32.447 20 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors. trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 26 Total liabilities. Add lines 17 through 25 23.082 26 42,401 Organizations that follow SFAS 117 (ASC 958), check here ▶ or Fund Balances complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets . . . 27 142.677 27 125,236 28 28 Temporarily restricted net assets 65,009 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. 30 Net Assets 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 32 Retained earnings, endowment, accumulated income, or other funds. 32 142,677 33 33 190,245 165.759 34 34 Total liabilities and net assets/fund balances . 232,646 Form 990 (2018)

| Page | 12 |
|------|----|
| aye | - |

| Part | XI Reconciliation of Net Assets | | | |
|------|--|--|---------|----------------|
| | Check if Schedule O contains a response or note to any line in this Part XI | | | . \square |
| `1 | Total revenue (must equal Part VIII, column (A), line 12) | | | 212,501 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | | | 164,933 |
| 3 | Revenue less expenses Subtract line 2 from line 1 | 3 | | 47,568 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | · | | 142,677 |
| 5 | Net unrealized gains (losses) on investments | ; | | |
| 6 | Donated services and use of facilities | | | |
| 7 | Investment expenses | <u>' </u> | | |
| 8 | Prior period adjustments | | | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) |) | | |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line | | | |
| | 33, column (B)) | 0 | | 190,245 |
| Part | XII Financial Statements and Reporting | | | _ |
| | Check if Schedule O contains a response or note to any line in this Part XII | | _ | <u> </u> |
| 4 | Account was attended to a second the Form 2000 TO Cook TO Account TO Others | | Yes | No |
| 1 | Accounting method used to prepare the Form 990: Cash Accrual Other | | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain Schedule O | " " | | |
| 20 | Were the organization's financial statements compiled or reviewed by an independent accountant? | - | !a | |
| Za | | · · · — | - | +* |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled reviewed on a separate basis, consolidated basis, or both. | u or | | |
| | Separate basis Consolidated basis, or both | | | |
| h | Were the organization's financial statements audited by an independent accountant? | | | 1 |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited of | · · · — | | + |
| | separate basis, consolidated basis, or both: |) i a | | |
| | ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis | | | 1 1 |
| c | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for overs | sight - | | |
| _ | of the audit, review, or compilation of its financial statements and selection of an independent accounta | | 2c | |
| | If the organization changed either its oversight process or selection process during the tax year, explain | | | |
| | Schedule O. | _ | | _ |
| За | As a result of a federal award, was the organization required to undergo an audit or audits as set for | th in | | |
| | the Single Audit Act and OMB Circular A-133? | | Ba | |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo | the | | |
| | required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audit | | Bb | Ш |
| | | | Form 99 | (2 018) |

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.
 ▶ Attach to Form 990 or Form 990-EZ.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- · Section 527 organizations Complete Part I-A only

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

| Tax) (| see separate instructions), t | hen | | | |
|-----------------------|--|---|---|---|---|
| • S | ection 501(c)(4), (5), or (6) orga | anizations Complete Part III | | | |
| Name | of organization | | | Employer ider | ntification number |
| Colora | | rees Retirement Association | | | 74-2122589 |
| Part | I-A Complete if th | e organization is exempt u | nder section 501 | (c) or is a section 527 | organization. |
| 1 2 | definition of "political car | | · | ampaign activities in Part | t IV (see instructions for |
| 3 | | ty expenditures (see instructions cal campaign activities (see inst | • | | |
| Pari | | e organization is exempt u | | (0)(3) | |
| 1 | | excise tax incurred by the organ | | | |
| 2 | • | excise tax incurred by the organizat | | | ` |
| 3 | • | ed a section 4955 tax, did it file | - | | . Yes No |
| 4a | Was a correction made? | | 1 01111 4720 101 11113) | year | Yes No |
| b | If "Yes," describe in Part | | | | |
| | | e organization is exempt u | nder section 501 | (c), except section 501 | (c)(3). |
| 1 2 3 4 5 | activities Enter the amount of the 527 exempt function act Total exempt function line 17b Did the filing organization Enter the names, addres organization made paym | tly expended by the filing organization's funds consisting organization's funds consisting funds. Add lines 1 and in file Form 1120-POL for this years and employer identification ents. For each organization lister contributions received that were proposed to the contributions received the contributions | tributed to other or 2 Enter here and ear? number (EIN) of all side, enter the amount | ganizations for section ganizations for section d on Form 1120-POL, section 527 political organit paid from the filing organ | Yes No Izations to which the filing Ization's funds. Also enter |
| | as a separate segregated | fund or a political action commi (b) Address | ttee (PAC) If addition | (d) Amount paid from filing organization's funds If none, enter -0- | de information in Part IV (e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
| (1) | | | | | |
| (2) | | | | | |
| (3) | | | | | |
| (4) | | | | | |
| (5) | | | | | |
| (6) | | | | | |

| Page | 2 |
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| Part II-A | | Complete if the organization section 501(h)). | n is exempt | under section 50 | 01(c)(3) and file | d Form 5768 (ele | ction under |
|-----------|--|--|----------------------------------|----------------------|--------------------------------------|-----------------------|----------------|
| A (| Check ► | Check In the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures) | | | | er's name, | |
| В | Check ▶ | If the filing organization check | ked box A and | "limited control" pi | ovisions apply | | |
| | | Limits on Lobi | | | | (a) Filing | (b) Affiliated |
| | | (The term "expenditures" m | eans amounts | paid or incurred. |) | organization's totals | group totals |
| 1: | a Total lo | obbying expenditures to influence | public opinior | (grass roots lobby | ring) | | |
| 1 | b Total lo | bbying expenditures to influence | a legislative b | ody (direct lobbyin | g) | | |
| | c Total lo | bbying expenditures (add lines 1 | a and 1b) . | • | | | |
| • | | exempt purpose expenditures | | | | | |
| | e Total e | xempt purpose expenditures (ade | d lines 1c and | 1d) | | | |
| 1 | f Lobbyı columr | ng nontaxable amount. Enter | the amount t | from the following | g table in both | | _ |
| | If the ar | nount on line 1e, column (a) or (b) is | : The lobbying | nontaxable amoun | t is: | | |
| | Not ove | r \$500,000 | 20% of the a | mount on line 1e | | | |
| | Over \$5 | 00,000 but not over \$1,000,000 | \$100,000 plu | s 15% of the excess | over \$500,000 | | |
| | Over \$1 | ,000,000 but not over \$1,500,000 | \$175,000 plu | s 10% of the excess | over \$1,000,000 | | |
| | Over \$1 | ,500,000 but not over \$17,000,000 | \$225,000 plu | s 5% of the excess o | ver \$1,500,000 | | |
| | Over \$1 | 7,000,000 | \$1,000,000 | | | | |
| ! | g Grassr | oots nontaxable amount (enter 25 | 5% of line 1f) | | | | |
| ١ | h Subtra | ct line 1g from line 1a. If zero or l | ess, enter -0- | | | | |
| i | i Subtract line 1f from line 1c. If zero or less, enter -0 | | | | | | |
| į | | e is an amount other than zero | | th or line 1i, did | the organization | i file Form 4720 | ¬., ¬., |
| | reporti | ng section 4911 tax for this year | | | | | _ Yes |
| | (Som | e organizations that made a se See the | ction 501(h) el separate inst | tructions for lines | e to complete all 2a through 2f.) | of the five column | ns below. |
| | | Lobbying | Expenditure | S During 4-Year A | veraging Period | | _ |
| | Cale | ndar year (or fiscal year beginning in) | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) Total |
| 2 | a Lobbyi | ng nontaxable amount | | | | | |
| | • | ng ceiling amount of line 2a, column (e)) | | | | | |
| | c Total lo | obbying expenditures | | | | | |
| • | d Grassr | oots nontaxable amount | | | | | |
| | | oots ceiling amount of line 2d, column (e)) | | | | | |
| | f Grassr | oots lobbying expenditures | | ! | | | |

| Part | Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)). | filed | Form | 1 5768 | | |
|------|--|----------|--------|-----------|---------|------------|
| For | each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed | (6 | a) | | (b) | |
| | iption of the lobbying activity. | Yes | No | A | moun | t |
| 1 | During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: | | | | | |
| а | Volunteers? | | | | | |
| b | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | | | | |
| С | Media advertisements? | | | | | |
| d | Mailings to members, legislators, or the public? | | | | | |
| е | Publications, or published or broadcast statements? | | | | | |
| f | Grants to other organizations for lobbying purposes? | | | | | |
| g | Direct contact with legislators, their staffs, government officials, or a legislative body? | | | | | |
| h | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | | | | |
| i | Other activities? | | | | | |
| j | Total. Add lines 1c through 1i | | | | | |
| 2a | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | | | | |
| b | If "Yes," enter the amount of any tax incurred under section 4912 | | | | | |
| C | If "Yes," enter the amount of any tax incurred by organization managers under section 4912 . | | | | | |
| d | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | <u> </u> | | | | |
| Part | III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). | :)(5), (| or se | ction | | |
| | | | | | Yes | No |
| 1 | Were substantially all (90% or more) dues received nondeductible by members? | | | 1 | ✓ | |
| 2 | Did the organization make only in-house lobbying expenditures of \$2,000 or less? | | | 2 | | ✓ |
| 3 | Did the organization agree to carry over lobbying and political campaign activity expenditures from the | • | | | | <u> </u> |
| Part | Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," C answered "Yes." | | | | line | 3, is |
| 1 | Dues, assessments and similar amounts from members | | 1 | | | |
| 2 | Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid). | s of | | | | |
| а | Current year | • | 2a | | | |
| b | Carryover from last year | | 2b | | | |
| С | Total | | 2c | | | |
| 3 | Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | | 3 | | | |
| 4 | If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb | | | | | |
| _ | and political expenditure next year? | • | 4 | | | |
| 5 | Taxable amount of lobbying and political expenditures (see instructions) | | 5 | | | |
| | Supplemental Information de the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grainstructions), and Part II-B, line 1. Also, complete this part for any additional information. | oup lis | t), Pa | t II-A, I | ines 1 | l and |
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| Schedule C (Form 990 or 990-EZ) 2018 Page 4 | | | |
|---|---------------------------------------|------|--|
| Part IV | Supplemental Information (continued) | | |
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

74-2122589 Colorado School & Public Employees Retirement Association Form 990 - Part III, Line 1 - Organization's Mission CSPERA develops a legislative program which monitors and informs members about legislation that is of concern to retired school and public employees CSPERA holds leadership workshops to train unit leaders in organizational and leadership skills Annual division meetings are held to keep members informed of the activities of the association. CSPERA holds pre-retirement workshops for active school and public employees who are within five years of retirement. Their newsletter, which highlights activities and participation of the membership, is published three times each year. The newsletter is also used to inform members of events of the association The only measurable achievement is the membership level which fluctuates from year to year Currently, there are approximately 6,000 members Form 990, Part III, Line 4 - All other Accomplishments The Colorado School & Public Employees Retirement Association (CSPERA) is a state organization that has as its sole purpose the improvement of the welfare of retired school and public employees in Colorado Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 The 990 is reviewed by the Board of Directors prior to filing Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Governing documents, organization policies and financial statements are available for inspection upon request Form 990, Part IX, Line 24e - Other Expenses See Attachment #1 Total = \$78,411 Form 990, Part XII, Line 1 - Change in Accounting Method The organization changed its method of accounting for tax purposes from cash to accrual in order to more accurately account for the organization's activities

| Schedule O (Form 990 or 990-EZ) (2019) | Page 2 |
|--|--------------------------------|
| Name of the organization | Employer identification number |
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