**990-EZ** 

# Short Form

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2018

Open to Public Inspection

Form **990-EZ** (2018)

Cat. No 106421

Department of the Treasury

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

▶ Go to www.irs.gov/Form990EZ for Instructions and the latest information

		nue Service	- CO 10 WWW.ma.gov//				
A F	or the	2018 calend	ar year, or tax year beginning	September 1, 2018	, 2018, and ending	Augus	
Вс	heck if ap	oplicable	C Name of organization			D Employer	Identification number
	Address c	hange	Colorado Wind Ensemble, Inc				84-0893430
=	Name cha	-	E Telephone	e number			
=	nitial retur		P.O. Box 101374				303-981-2163
=		n/terminated	City or town, state or province, country,	, and ZIP or foreign postal code	^2	F Group E	
=	Amended Annicatio	return n pending	Denver, CO 80250-1374		03	Number	
		ting Method:		specify) >	1	1 Check ▶	if the organization is not
	Vebsite	•	coloradowindensemble.org		'		attach Schedule B
			eck only one) - 501(c)(3) 501	(c) ( ) ◀ (insert no.) ☐ 49	947(a)(1) or 527		990-EZ, or 990-PF).
			☑ Corporation ☐ Trust	<del> </del>	Other		<del></del>
LA	dd line	s 5b. 6c. and	7b to line 9 to determine gross rece			tal assets	• • • • • • • • • • • • • • • • • • • •
			500,000 or more, file Form 990 inst			•	\$ 76,051
	art I		e, Expenses, and Changes		Ralances (see th	e instructio	
	aiti		the organization used Schedu				
	1 4		ons, gifts, grants, and similar am		destion in this rain	<del>``                                   </del>	·
			ervice revenue including governi				36,852
	2	_	<del>-</del> -				10,012
	3		up dues and assessments			4	<del></del>
	4	Investment			1 = 1	· · ·	97
	5a		ount from sale of assets other the	•		<u> </u>	
	b		or other basis and sales expens				_
	6 6		ss) from sale of assets other than d fundraising events:	n inventory (Subtract line	5b from line 5a) .	50	0
	а	Gross inc	ome from gaming (attach Sc	hedule G if greater the	an		- DEIVED
PE		\$15,000)			6a	0	JAN 1 4 2020
Revenue	ь	Gross inco	me from fundraising events (not	includina \$	o of contribution		-100
<u>§</u>			raising events reported on line 1			141	JAN 1 4 2020
4			ch gross income and contribution			3,0408	Jan - 19
	c		et expenses from gaming and fui	· · · · · · · · · · · · · · · · · · ·		<del></del>	- FALLIT
	d		e or (loss) from gaming and full			ubtract	OGDEN, UT
	-	line 6c)				- 60	*
	7a	•	s of inventory, less returns and a		7a	0	3,040
			-	allowallo <del>c</del> s	7b		
	b		of goods sold				~
	C						<del></del>
	8		nue (describe in Schedule O) .	7		8	
	9		nue. Add lines 1, 2, 3, 4, 5c, 6d,			> 9	
	10		d similar amounts paid (list in Sci	•		10	<del></del>
	11	•				11	<u> </u>
99	12		ther compensation, and employ				
ST.	13		al fees and other payments to in	•		<del>-</del>	
Expenses	14	•	y, rent, utilities, and maintenance				
Ú	15		ublications, postage, and shippi	_		<del></del>	14,354
	16	•	enses (describe in Schedule O)				<del></del>
	17	Total expe	enses. Add lines 10 through 16	<u> </u>	<u> </u>	🕨 🔀	74,897
Ø	18	Excess or	(deficit) for the year (Subtract lin	e 17 from line 9)		18	
šet	19		or fund balances at beginning				
ASS		end-of-yea	ar figure reported on prior year's	retum)		19	32,950
Net Assets	20	Other char	nges in net assets or fund balanc	ces (explain in Schedule C	0)	20	<del></del>
Ž	21		or fund balances at end of year		·		

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For Paperwork Reduction Act Notice, see the separate instructions.

Pa	rt II	Balance Sheets (see the instructions t					
		Check if the organization used Schedule	O to respond to a	ny question in this		· ·	<u> 🗸</u>
					(A) Beginning of year	ļ	(B) End of year
22		h, savings, and investments			28,724		29,878
23		d and buildings	• • • • •			23	
24		er assets (describe in Schedule O)			4,226		4,226
25		al assets		<i>.</i>	32,950		34,104
26		al liabilities (describe in Schedule O)				26	
27		assets or fund balances (line 27 of column			32,950	27	34,104
Par	t III	Statement of Program Service Accom	•		•	İ	F
		Check if the organization used Schedule			Part III 🔽	(80	Expenses quired for section
What	t is the	organization's primary exempt purpose?	Music performance a	and education			(c)(3) and 501(c)(4)
as m	easure	ne organization's program service accomplised by expenses. In a clear and concise manefited, and other relevant information for ea	anner, describe the				anizations; optional for ers )
28		olorado Wind Ensemble's concert season inclu					
		r metropolitan area, performed for approximate			included		
		rt for specific performances and core operation			<u></u> -	1	
	(Grant	s \$ 18,066) If this amount	includes foreign gra	ints, check here .	<u></u>	28	62,612
29	The Co	olorado Wind Ensemble provided 3 free outrea	ch concert performat	nces to the public, i	ncluding a	ŀ	
	John F	Philip Sousa Tribute concert to students, a fam	liy holiday concert, a	nd an outdoor sum	mer concert	ŀ	1
	servin	g approximately 571 audience members.					
	(Grant	s \$ 700) If this amount	ıncludes foreign gra	ints, check here .	<u></u> ▶ □	298	3,145
30	The Co	olorado Wind Ensemble provided educational	outreach to schools a	and programs, inclu	ding 2	1	Ì
	side-b	y-side mentoring performances, coaching sess	sions, and a mulit-se	ssion instructional	rogram		
	servin	g approximately 235 students.					
	(Grant	s\$ 2,800) If this amount	includes foreign gra	ints, check here .	▶ 🔲	308	3,000
31	Other	program services (describe in Schedule O)					
	(Grant	s \$ o) If this amount	includes foreign gra	ints, check here .	▶ 🔲	318	6,140
32	Total	program service expenses (add lines 28a t	through 31a)		🕨	32	74,897
Par	t IV	List of Officers, Directors, Trustees, and Key	Employees (list each	n one even if not con	pensated-see the i	nstru	ctions for Part IV)
		Check if the organization used Schedule	O to respond to a	ny question in this	Part IV	•	🗆
		(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISO (If not paid, enter -0-		- [	) Estimated amount of other compensation
Nick	Bidinge	er, President, Director					
			1 5		o	o	O
Broo	ke Hen	gst, Vice President, Director		İ			
		•	2	ļ	ol	0	O
Emili	e Heim:	s, Secretary, Director	-			Ť	· · · · · · · · · · · · · · · · · · ·
			3		o	0	0
lame	s Bund	ly, Treasurer, Director	<u> </u>	· · · · · · · · · · · · · · · · · · ·	<del>-</del>		<del></del>
2.4111.	9.94119	12	7		o	0	O
Filen	Christe	enson, Director	<u> </u>	· · · · · · · · · · · · · · · · · · ·	<del>-</del>		
			2		o	0	n
Heath	or Day	is. Director			<u> </u>	1	
neau	iei Dav	15, Director	١ .		م		
LA		Director	2		0	0	<u>_</u>
IVY H	artileid	, Director					_
			4		0	0	0
		sh, Conductor and Musical Director and		:		]	
	ficio Di	<del></del>	10	1,95	0	0	0
Cheri	se Leit	er					
		· · · · · · · · · · · · · · · · · · ·	2		0	0	
Mich	ael McL	ean, Director				-	
			2		0	0	0
Jean	ne Soni	nleitner, Director					
			2		o	0	O
Micha	ael Vall	ez, Director				1	<del>_</del>
			1	1	ا		



Part	· · · · · · · · · · · · · · · · · · ·			_
	instructions for Part V.) Check if the organization used Schedule O to respond to any question in this	3 Part	V . Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	162	. 🗸
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions	34		1
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		<u> </u>
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		1
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions > 273 0		- jDar ,	
390 b	Did the organization file Form 1120-POL for this year?	37b	$\vdash \vdash$	<b>✓</b>
38a	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		1
ь	If "Yes," complete Schedule L, Part II and enter the total amount involved   38b   0	<b>—</b>		•
39	Section 501(c)(7) organizations. Enter:	1		,
а	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0; section 4912 ▶ 0; section 4955 ▶ 0	, .		
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		<b>-</b>
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		: 1	
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		7
41	List the states with which a copy of this return is filed ► Colorado			
42a		303-98		
b	Located at ► 22 South Jackson St, Denver, CO ZIP + 4 ► At any time during the calendar year, did the organization have an interest in or a signature or other authority over		-3124 Yes	
_	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	163	\ <u>\</u>
	If "Yes," enter the name of the foreign country ▶			.,
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
С	At any time during the calendar year, did the organization maintain an office outside the United States? . If "Yes," enter the name of the foreign country ▶	42c		✓
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here		. I	<b>▶</b> □
		<del></del>	Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		1
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		1
С	Did the organization receive any payments for indoor tanning services during the year?	44c		1
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an			
45	explanation in Schedule O	44d	<b> </b>	1
45a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		<b>✓</b>
	Form 990-EZ. See instructions	45b		1

OIII 33	اعد رعد	110)						<u>'</u>	ugo .
46		ne organization engage, directly or in					t .	Yes	No
Part \	VI :	ndidates for public office? If "Yes," of Section 501(c)(3) Organizations All section 501(c)(3) organization	s Only				46 ables fo	or line	_ <b>√</b> es
		50 and 51. Check if the organization used Sci	·						
47		ne organization engage in lobbying					,	Yes	No
71	year?	if "Yes," complete Schedule C, Par	tN				47		✓
18 49a	Did th	organization a school as described in ne organization make any transfors to	o an exempt non-cha	ritable related organ			48 49a		<b>√</b>
50	Comp	s," was the related organization a se plete this tablo for tho organization's pyees) who each received more than	five highest compen	sated employees (of		fficers, directors			d key
	•	Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC	(d) Hea contribution benefit pla	uith benefits, ons to employee (e)	Estimate	d amou	
None			<del></del>						
•									
f 51	Comp	number of other employees paid ovolete this table for the organization 000 of compensation from the orga	s five highest compo		nt contracto	ors who each re	eceived	more	thar
		Name and business address of each independ		(b) Type of se	ervice	(c) Co	mpensati	on	
None									
					<del></del>				
									<u>-</u>
d 52	Did t	number of other independent contra			. ▶				-
	enalties	leted Schedule A				the best of my know	Yes ledge and		
	rect, and	d complete. Designation of preparer (other than	n officer) is based on all info	ormation of which prepare		1-7-202	20		
Sign Here		Signature of officer  James A Bundy, Board member at	nd Treasurer		<u>-</u>	Date			
Paid		Type or print name and title  Print/Type preparer's name	Preparer's signature	T	Date	Check I if	PTIN		
Prepa Use (		Firm's name ▶				setf-employed Firm's EIN ▶	<u> </u>		_
		Firm's address ▶	r shown above? Soo	instructions		Phone no.	□ Vos		Va.

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

Department of the Treasury Internal Revenue Service **Public Charity Status and Public Support** 

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer Identification number Name of the organization 840893430 Colorado Wind Ensemble, Inc. Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331,3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having b control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. ☐ Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I. Type III. Type III. functionally integrated, or Type III non-functionally integrated supporting organization. Provide the following information about the supported organization(s). (I) Name of supported organization (Iv) Is the organization an FIN (iii) Type of organization (v) Amount of monetary (vi) Amount of listed in your governing (described on lines 1-10 support (see other support (see document? above (see instructions)) instructions) Instructions) Yes No (A) (B) (C) (D) (E)

**Total** 

Part	(Complete only if you checked the						
	Part III. If the organization fails to				_	•	ally urluer
Secti	on A. Public Support	quality dilue	er trie tests lis	sted below, p	ilease comple	oto r art iii.j	
	dar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	<b>(e)</b> 2018	(f) Total
1	Gifts, grants, contributions, and	(6) 2011	(3) 20.0	(0) 20 10	(4, 23 .)	(0) 20.0	1,7,2,4
•	membership fees received. (Do not			1			/
	include any "unusual grants.")		`	1			/
2	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						1
3	The value of services or facilities						
	furnished by a governmental unit to the			1	/		
	organization without charge . \						<u> </u>
4	Total. Add lines 1 through 3						<u> </u>
5	The portion of total contributions by						
	each person (other than a				/.		
	governmental unit or publicity			/	ľ	]	
	supported organization) included on	N		/			
	line 1 that exceeds 2% of the amount shown on line 11, column (f)		:				}
•	•	<del></del>		<del> /</del>			<del>                                     </del>
6 Sooti	Public support. Subtract line 5 from line 4 on B. Total Support	<u> </u>	ļ <u>.</u>	<del>/</del>	L	<u> </u>	
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015 /	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	(8) 2014	(6) 2013	(6) 2010	(4) 2017	(6) 2010	(i) Total
8	Gross income from interest, dividends,	\ \ \	/		-		
	payments received on securities loans,		N /				
	rents, royalties, and income from		\/		1	!	
	similar sources		/\				
9	Net income from unrelated business	,					
	activities, whether or not the business	/					1
	is regularly carried on						
10	Other income. Do not include gain or	/	\ \				
	loss from the sale of capital assets	/		$\setminus$		i	
	(Explain in Part VI.)			<u> </u>		ļ	ļ
11	Total support. Add lines 7 through 10	(222 instruction			l	40	<u> </u>
12 13	Gross receipts from related activities, etc	•	•	) .al .absinal\&aab		12	- F04(-)(0)
13	First five years. If the Form 990 is for the organization, check this box and stop he	=		` `	· -		* * * * * * * * * * * * * * * * * * * *
Secti	on C. Computation of Public Suppor			$\overline{}$			· · · <b>&gt;</b> 🗆
14	Public support percentage for 2018 (line (			1 column (f)	<del></del>	14	<del></del>
15	Public support percentage from 20/17 Sci	. ,,	•		<i>Y</i>	15	<del>//</del>
16a	, , , , ,			x on line 13, a	nd line 14 is 3		
	box and stop here. The organization qua						🕨 🗀
b	331/3% support test - 2017. If the organi	zation did not	check a box o	on line 13 or 16	a, and line 15	is 331/3% or m	nore, check
	this box and stop here. The organization	qualifies as a	publicly suppo	rted organizat	ion . $\cdot \setminus$		🕨 🗀
17a	10%-facts-and-circumstances test -2	<b>018.</b> If the orga	anization did n	ot check a bo	x on line 13, 1	6a, or 16b, an	d line 14 is
	10% or more, and if the organization me						
	Part VI how the organization meets the "	facts-and-circ	umstances" te	est. The organi	ization qualifies	s\as a publicly	supported
	organization $/$					·/· · · ·	🟲 🗀
b	10%-facts-and-circumstances test -2						
	15 is 10% or more, and if the organiza						
	Explain in Part VI how the organization r	neets the "fact	ts-and-circums	stances" test.	ine organizati	on qualifies as	a publicly
40	supported organization		 hav an K 40	400 405 47		٠	· · · 🟲 📙
18	Private foundation/ If the organization di instructions /	u not check a	DOX ON IINE 13	, 10a, 16b, 1/a	a, or 1/D, chec	k this box and	see \ ►□
	/	· · · ·	· · · · ·	· · · · · ·			
	,				671	rodulo A (Eomo 00	10 ok 990-EZ) 2018

## Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Secti	on A. Public Support	•					
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2018	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees						<del> </del>
	received. (Do not include any "unusual grants.")	37,804	34,319	41,450	41,916	36,852	192,341
2	Gross receipts from admissions, merchandise		,.				
	sold or services performed, or facilities	1					
•	furnished in any activity that is related to the organization's tax-exempt purpose	13,613	19,029	22,353	20,044	18,672	93,717
3	Gross receipts from activities that are not an	13,013	13,023	22,333	20,044	10,072	33,717
•	unrelated trade or business under section 513	3 330	2 207	3,072	2,081	3,060	14,749
4	Tax revenues levied for the	3,329	3,207	3,072	2,081	3,000	14,143
4	organization's benefit and either paid to			i		j	
	or expended on its behalf		_			أ	_
_	· · · · · · · · · · · · · · · · · · ·	0	0	<u> </u>	0	0	0
5	The value of services or facilities	1					
	furnished by a governmental unit to the	:					
_	organization without charge	0	10,551	13,865	11,820	17,370	53,566
6	Total. Add lines 1 through 5	54,746	67,066	80,740	75,861	75,954	354,367
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .	0	0	0	0	0	0
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000			]	į	Ì	
	or 1% of the amount on line 13 for the year	0	0	0	0	0	0
C	Add lines 7a and 7b	o	o	O	0	0	. 0
8	Public support. (Subtract line 7c from				ı		
	line 6.)						354,367
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	54,746	67,066	80,740	75,861	75,954	354,367
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,	İ					
	royalties, and income from similar sources.	49	62	75	87	97	370
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses			į	ŀ		
	acquired after June 30, 1975	o	o	O	0	o	0
C	Add lines 10a and 10b	49	62	<sub>-</sub> 75	- 87	97	370
11	Net income from unrelated business						
	activities not included in line 10b, whether			-			
	or not the business is regularly carried on	o	o	o	o	o	0
12	Other income. Do not include gain or						
	loss from the sale of capital assets					]	
	(Explain in Part VI.)	o	o	o	ol	o	0
13	Total support. (Add lines 9, 10c, 11,	<del>-</del>	····				<del></del>
	and 12.)	54,795	67,128	80,815	75,948	76,051	354,737
14	First five years. If the Form 990 is for the						
	organization, check this box and stop he	-			-		` ▶ □
Secti	on C. Computation of Public Suppor		<u> </u>				
15	Public support percentage for 2018 (line 8			3. column (f))		15	99.90 %
16	Public support percentage from 2017 Sch					16	99.91 %
$\overline{}$	on D. Computation of Investment In			<u> </u>	•		00.01 .0
17	Investment income percentage for 2018 (			v line 13. colur	nn (f) .	17	0.10 %
18	Investment income percentage from 2017			•		18	0.09 %
19a	331/3% support tests—2018. If the organ						
ıJa	17 is not more than 331/3%, check this box						
b	331/3% support tests—2017. If the organiz		_			_	_
D	line 18 is not more than 331,5%, check this						
20	Private foundation. If the organization di	-	_	•		- ·	

## Part IV Supporting Organizations

Section A. All Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by 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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2	y wanted	
3a	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 <b>Part VI</b> when and how the organization made the determination.	3b		
C	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.			
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> 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 under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	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 <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;			, 1

**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?

(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action

c Substitutions only. Was the substitution the result of an event beyond the organization's control?

was accomplished (such as by amendment to the organizing document).

- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- B Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI**.
- 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.)

**5a** 

5b

5c

6

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9a

9b

9с

10a

10b

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Part	V 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)	44.	war the same	لـــا
_	below, the governing body of a supported organization?	11a 11b		<del> </del>
	A family member of a person described in (a) above?  A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI.</b>	11c		<del></del>
	on B. Type I Supporting Organizations	110		L
0000	on b. Type I dapporting digunzations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		100	1
	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 Part VI how the supported organization(s) effectively operated, supervised, or			1 1
	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.			اــــا
_		1		ļ,
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 <b>Part</b> VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	-		
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			L
0000	on or type it outporting 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		
Secti	on 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		<del></del>
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			<del> </del>
•	significant voice in the organization's investment policies and in directing the use of the organization's	ļ		-
	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		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstru	ctions	s).
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (	see in		
2	Activities Test. Answer (a) and (b) below.		Yes	NO
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI Identify those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			-
	that these activities constituted substantially all of its activities.	2a		
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			
	reasons for the organization's position that its supported organization(s) would have engaged in these	<u> </u> :		
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a	L	L
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			<b> </b> -
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		L

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			l
maintenance of property held for production of income (see instructions)	6		l
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):	4 -	r	• (
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1 <b>d</b>		
e Discount claimed for blockage or other	]		
factors (explain in detail in Part VI):	L.,	· · · · · · · · · · · · · · · · · · ·	
2 Acquisition indebtedness applicable to non-exempt-use assets	2	****	<del>,</del>
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6	·	
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8	· · · · · · · · · · · · · · · · · · ·	
Section C – Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	والأمام والأفاع والأمام والمام والمام	
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6	,	<u>.                                    </u>
7 Check here if the current year is the organization's first as a non-functional	y int	tegrated Type III supporting	organization (see
instructions).		_	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)							
Secti	Section D—Distributions						
1	Amounts paid to supported organizations to accomplish	exempt purposes					
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	rted				
	organizations, in excess of income from activity						
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nızations				
4	Amounts paid to acquire exempt-use assets						
5	Qualified set-aside amounts (prior IRS approval required)						
6	Other distributions (describe in Part VI). See instructions.						
7_	Total annual distributions. Add lines 1 through 6.						
8	Distributions to attentive supported organizations to whic (provide details in <b>Part VI</b> ). See instructions.	h the organization is res	ponsive				
9	Distributable amount for 2018 from Section C, line 6						
10	Line 8 amount divided by line 9 amount	· · · · · · · · · · · · · · · · · · ·					
	Line o amount divided by line o amount		(ii)	(iii)			
Secti	on E-Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2018	Distributable Amount for 2018			
1	Distributable amount for 2018 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in <b>Part VI</b> ). See						
	instructions.						
3	Excess distributions carryover, if any, to 2018						
а	From 2013						
b	From 2014						
C	From 2015						
d	From 2016						
е	From 2017						
f	Total of lines 3a through e		-				
9	Applied to underdistributions of prior years						
h	Applied to 2018 distributable amount	•					
i	Carryover from 2013 not applied (see instructions)						
J	Remainder. Subtract lines 3g, 3h, and 3i from 3f.						
4	Distributions for 2018 from						
	Section D, line 7:						
а	Applied to underdistributions of prior years						
b	Applied to 2018 distributable amount						
c	Remainder. Subtract lines 4a and 4b from 4.						
5	Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result						
	greater than zero, explain in Part VI. See instructions.						
6	Remaining underdistributions for 2018. Subtract lines 3h						
	and 4b from line 1. For result greater than zero, explain in <b>Part VI.</b> See instructions.						
7	Excess distributions carryover to 2019. Add lines 3j						
	and 4c.	<u></u>					
8	Breakdown of line 7:						
<u>a</u>	Excess from 2014						
<u> </u>	Excess from 2015						
<u> </u>							
<u>d</u>	Excess from 2017						
е	Excess from 2018	l					

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Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
N/A	

#### 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.

OMB No. 1545-0047

Open to Public

Inspection

**Employer Identification number** 

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

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

84-0893430 Colorado Wind Ensemble 990-EZ, Part I, Line 8: Other income is in-kind income related to a partnership with Metropolitan State University of Denver, representing in-kind fees for mentoring qualified music students. 990 EZ Part I, Line 16: The other expenses reported include rental and purchase of performance music, transportation and storage of musical instruments, box office ticket fees, insurance, token gifts, supplies, legal fees, bank charges, parking fees for musicians during rehearsals, and licenses. This line also includes \$17,370 of in-kind expenses consisting of hall rent, fees otherwise payable to the conductor for his services, and music rental expenses through a partnership with Metropolitan State University of Denver. 990 EZ, Part III, Line 24: The other assets value of \$4,226 represents the value of the depreciated musical instruments owned by the Colorado Wind Ensemble, Inc. 990 EX, Part III, Line 31: Other program expenses are administrative expenses not directly attributed to the three core programs listed in this section, consisting of storage of musical instruments, insurance, bank charges, and supplies.