Form **990** (Rev. January 2020) Department of the Treasury Internal Revenue Service

Extended to November 16, 2020

Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form as it may be made public
 Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 2019
Open to Public Inspection

	<u> </u>	or the	2019 Calendar year, or tax year beginning an	a enaing						
В	Ch ap	eck of	C Name of organization		D Employer identific	cation number				
٢	_	Addres	The <u>Weld</u> Trust							
Ţ	X	Name change		74-2358522						
Ī		Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/surte	 					
Ī	_	Final return/	1801 16th Street	1	(970)810-6052					
		termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$ 454,662,742.					
	_	Amend return			H(a) Is this a group return					
		Applica tion	F Name and address of principal officer. Total Grane		for subordinates					
_		релоіп	same as C above		H(b) Are all subordinates in	ncluded? Yes No				
I Tax-exempt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527 If "No," attach a list. (see instructions)										
	J Website: ► N/A H(c) Group exemption num									
			organization: X Corporation Trust Association Other	L Year	of formation: 1984 A	M State of legal domicile: CO				
Ľ	a	rt I	Summary		1	- L1-1				
	ا۾		Briefly describe the organization's mission or most significant activities: TO]	positiv	ery impact i	the health,				
	티	•	education, and wellness of Weld County.		Al 050/ - 614 A					
	티		Check this box X if the organization discontinued its operations or disposition of the graph of the seven included (Next VI, line 12)	osea or more	1 1	sets.				
	၌		Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b)		3	10				
	9		Fotal number of individuals employed in calendar year 2019 (Part V, line 2a)		5	- 0				
	ctivities & Governance	6	Total number of volunteers (estimate if necessary)		6	12				
	촳	7 a '	Fotol unpolated business reviews from Dort VIII a 100 line 10		7a	0.				
	۲	ь	Net unrelated business taxable income from Form 990-T, line 39 EIVED	-	7b	0.				
	٦		4	NS L	Prior Year	Current Year				
		8	Contributions and grants (Part VIII, line 1h)		609,267.	59,714,460.				
	ᇍ	9	Program service revenue (Part VIII, line 2g)	J‱I ∟	37,396,851.	<u>27,335,899.</u>				
	Revenue	10	investment income (Part VIII, column (A), lines 3, 4, and 7d) GDFN UT	_	12,282,195.	113,582,396.				
	٦	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8d, 9c, 10c, and 1 e	—	111,444.	1,015,755.				
_	4	-12	rotal revenue and lines of through 17 (must equal Fart VIII, column M), line 12		50,399,757.	201,648,510.				
			Grants and similar amounts paid (Part IX, column (A), lines 1·3)	<u> </u>	6,080,000.	5,443,014.				
			Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		26,314.	21,930.				
	Expenses		Professional fundraising fees (Part IX, column (A), line 11e)	· -	0.	0.				
			Total fundraising expenses (Part IX, column (D), line 25)	0. T						
	짋		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		32,978,908.	25,497,572.				
	J		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	-	39,085,222.	30,962,516.				
	-		Revenue less expenses. Subtract line 18 from line 12		11,314,535.	170,685,994.				
7	Sec				eginning of Current Year	End of Year				
400	羂	20	Total assets (Part X, line 16)		17,076,662.					
٠ *	d Bala		Total liabilities (Part X, line 26)		219,287,177.	37,298,238.				
	3		Net assets or fund balances. Subtract line 21 from line 20		297,789,485.	473,628,877.				
_		rt II	Signature Block // //			 				
,			ties of perjury, I déclare that y travé examined this return, including accompanying schedul			knowledge and belief, it is				
tr	ue,	correc	t, and complete beclaration of reparer (other than officer) is based on all information of v	wnich preparer	nas any knowledge.					
	:		Signature of officer		Date 1.3/2	<u> </u>				
	ign Iere		Jeffrey Carlson, Board Executive							
-	er e	•	Type or print name and title							
_			Print/Type preparer's name Preparer's signature		Date Check	PTIN				
Paid Kim Hunwardsen, CPA Kim Hunwardsen, CPA 11/13/20 sell-employed P0048456										
		arer	Firm's name Eide Bailly LLP			45-0250958				
U	se (Only	Firm's address 800 Nicollet Mall, Ste. 1300							
_			Minneapolis, MN 55402-7033		Phone no. 61	2-253-6500				
N	lay	the IF	S discuss this return with the preparer shown above? (see instructions)			X Yes No				
93	3200	1 01-20	LHA For Paperwork Reduction Act Notice, see the separate instruct	ions.		Form 990 (2019)				

Form 990 (2019)

Form	990	(2019)	

Yes No

Form 990 (2019) The Weld Trust
Part IV | Checklist of Required Schedules

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_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_	<u> </u>	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	!	ł	
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
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		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	ļ	l	l
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? # "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	<u> </u>	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.		l	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	ł	{	ŀ
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total		İ	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	L	Х
C	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	Į.		l
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	<u> </u>	X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			ľ
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	_X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			İ
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	_X_	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	<u> </u>	
þ	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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
p	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		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			3,5
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	_16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			w
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	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 12, if "Ves." complete Schedule I, Parts I and II	21	∖ X I	1

Form **990** (2019)

Pai	t IV Checklist of Required Schedules (continued)	-		<u>ugo</u>
L	<u> </u>		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	}	х
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		х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease		t	
·	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		
	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		х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and		\vdash	
_	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		х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	1	1	
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			<u> </u>
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):	i		
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	ŀ	1	ĺ
u	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes, " complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
Ĭ	"Yes," complete Schedule L, Part IV	28c	х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		х
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	X	
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	х	1
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	X	1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	-		
~	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	x	1
Pa				
	Check if Schedule O contains a response or note to any line in this Part V			
	· · · · · · · · · · · · · · · · · · ·		Yes	No
12	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			_
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
·	(gambling) winnings to prize winners?	1c	x	l

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2a Enter the number of employees reported on Form W.3, Transmittal of Wage and Tax Statements, led of or the celendary ear enforcing with or within the year covered by this return I led as the least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1 and 2 as is greater than 250, you may be required to e-file (see instructions) 3b I of the organization have unrelated business gross income of \$1,000 or more during the year? 3b II 'Yes,' has filled a Emm 190-7 for this year? If 'No' to line 3b, provide an explanation on Schedule O 3c				Yes	No				
bill taleast one is reported on line 28, did the organization file all required federal employment tax returns? Note: If the sum of lines 1 and 2 as greater than 250, you may be required to a-file (see instructions) 3 Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 Lines, I all a set of the company of the set of	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
Note: If the sum of lanes 1a and 2a is greater than 250, you may be required to _e-fig (see instructions) 3a		filed for the calendar year ending with or within the year covered by this return			İ				
3.8 Dd the organization have unrelated business gross income of \$1,000 or more during the year? 4.3 At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a floring in country (such as a bank account, securities account, or other financial account)? 5. Be instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5. Was the organization a party to a prohibited tax shetler transaction at any time during the tax year? 5. May the organization or aparty to a prohibited tax shetler transaction at any time during the tax year? 5. May the organization have the organization file Form 8886-T? 6. Does the organization have armual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions. 6. May the organization expects of \$5 male party is a contribution and party for goods and services provided to the payor? 7. Organizations that may receive deductible contributions under section 170(c). 8. If "Yes," did the organization only the donor of the value of the goods or services provided? 7. Organizations that may receive deductible contributions under section 170(c). 8. If "Yes," did the organization only the donor of the value of the goods or services provided? 7. Organizations that may receive a payment in excess of \$5 male party as a contribution and party for goods and services provided to the payor? 7. Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to the Form 8282? 8. If "Yes," all did organization only the donor of the value of the goods or services provided? 9. Did the organization of monthly the donor of the value of the goods or services provided? 9. Did the organization of the payor payment in excess business holdings at any time during the year? 9. Sponsoring organization sell, exchange,	Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b						
Section 2017 Section 30 S		Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	,						
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial accountly over, a financial account in a foreign country (when as a bank account, securities account, or other financial account); years are the name of the foreign country 1.5	За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X_				
funncial account in a foreign country See	b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3 <u>b</u>						
b If "Yes," enter the name of the foreign country. ▶ Sa enstructions 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? 5b X and any taxable party notify the organization file Form 8886-7. 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charable point fributions. 6b X organization share any receive deductible contributions under section 170(c). 6c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). 8d If "Yes," did the organization include with every solicitation and parity for goods and services provided? 9d If "Yes," indicate the number of Forms 875 made parity as contribution and parity for goods and services provided to the payor? 7a X by If "Yes," indicate the number of Forms 8282 filed during the year 9d If the organization during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 9d If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-07 8 Sponsoring organization and contribution of cars, boats, sirjance, or other vehicles, did the organization that in a form 1098-07 8 Sponsoring organization and contributions of cars, boats, arisingene, or other vehicles, did the organization that in a form 1098-07 8 Sponsoring organization make a contribution of outsified funds. 9 Dud the sponsoring organization make a distribution to advise of funds. 9 Sponsoring organization forms shoulded on Part VIII, line 12 9 Gross receipts, included on Form 90, Part VIII, line 12 9 Gross receipts, included on Form 90, Part VIII, line 12 9 Gross income from members or shareholders 9 Dud t	4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a							
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 In the province of the provinc		financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 <u>a</u>		X				
5.5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5.6 Did any taxable party nority the organization that it was or is a party to a prohibited tax shelter transaction? 5.6 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as chartable contributions? 6.8 A X 5.7 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6.8 A X 6.9 If Yes,* did the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible as chartable contributions were not tax deductible? 7. Organizations that may receive deductible contributions under section 170(c). a bid the organization that may receive deductible contributions under section 170(c). b If Yes,* did the organization notify the donor of the value of the goods or services provided? c bid the organization soll, exchange, or otherwise dispose of tangible personal property for which it was required to tile Form 8282? d If Yes,* indicate the number of Forms 8282 filed during the year b bid the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7. A X 9. If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 8. Sponsoring organization maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 9. Sponsoring organization maintaining donor advised funds. Did a donor advised funds. 1. Section 447(1) organizations maintaining donor advised funds. Did a donor advised funds. 1. Section 447(1) organizations maintaining donor advised funds. 1. Section 501(c)(12) organizations. Eriter 2. In this sponsoring orga	b	If "Yes," enter the name of the foreign country							
b Dd any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? if "Yes" to line 5 aor 5b, did the organization file Form 8886-T7 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charable contributions? b if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 mate party as a contribution and party for goods and services provided to the payor? b if "Yes," idd the organization notify the donor of the value of the goods or services provided? C Did the organization notify the donor of the value of the goods or services provided? To Uniform 8282? d if "Yes," indicate the number of Forms 8282 filed during the year D Lid the organization, during the year solicities of the provided of the payor? If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? Sponsorring organization received a contribution of cars, boats, alphanes, or other vehicles, did the organization file a Form 1098-C? Sponsorring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make access business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make a distribution to a donor, donor adviser, or related person? Sponsoring organizations maintaining donor advised funds. b C dross income from members or shareholders D did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Sponsoring organization have excess business sholdings at any time during the year? Sponsoring organization have a distributi		See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).							
c if "Yes" to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible of the schematic process of the schematic process of the schematic process of the schematic process of the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a bit the organization notify the donor of the value of the goods or services provided? bit "Yes," idid the organization notify the donor of the value of the goods or services provided? c bid the organization notify the donor of the value of the goods or services provided? bid the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to the Form 8282? d if "Yes," indicate the number of Forms 8282 filed during the year bid the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? f bid the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h if the organization received a contribution of acris, boats, airplanes, or other vehicles, did the organization that process of cars, boats, airplanes, or other vehicles, did the organization that process of cars, boats, airplanes, or other vehicles, did the organization and the form 1098-C? Sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 Sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter. a intuation fees and capital contributions michally donor advised funds. b If the organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(12) qualified nonprofit health insurance issuers. 10a Secti	5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>						
Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? If Yes,** did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a	b	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?							
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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? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	а	Gross income from members or shareholders			i				
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c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 X 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 18 X	D								
14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 X 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 18 X	_								
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Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? Is the organization and educational institution subject to the section 4968 excise tax on net investment income?									
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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 X			15		x				
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X									
	16		16		X				
	_								

The Weld Trust 74-2358522 Form 990 (2019) Part VI | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 10 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 10 b Enter the number of voting members included on line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 X Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 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 b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. X The governing body? 8a_ Each committee with authority to act on behalf of the governing body? 8b X Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes X 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X 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. X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X in Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 X 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? X a The organization's CEO, Executive Director, or top management official 15a X b Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure None List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Another's website X Upon request Other (explain on Schedule O) 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records

80631

Jeff Carlson - 970-810-6052

16th Street, Greeley, CO

Form 990 (2019) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

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

X Check this box if neither the organization n	or any related	orga	ınıza	tion	con	nper	sate	ed any current officer, d	rector, or trustee.	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do	Position (do not check more than one		one	Reportable	Reportable	Estimated		
	hours per	box	box, unless person is both an officer and a director/trustee)			is both	n an	compensation	compensation	amount of
	week	-			I	77005	lee)	from	from related	other
	(list any hours for	Irecto	İ			l		the organization	organizations	compensation
	related	9 01 0	stee		ĺ	sate	ļ	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	truste	a tie		ge A	m m		(** 12) 1000 (**1100)		and related
	below	Individual trustee or director	Institutional trustee	-	Key employee	est co	<u> 5</u>			organizations
	line)	Indiv	firsti	Officer	Key	Highest compensated employee				
(1) Tom Grant	1.00									
President & Chair		Х		Х				0.	0.	0.
(2) Brandon Houtchens	1.00									
Vice Chair		X		X			ł	0.	0.	0.
(3) Robert E. Murphy	1.00				П					-
Treasurer		X		Х				0.	0.	0.
(4) Mark Lawley	1.00									
Secretary		X		Х				0.	0.	0.
(5) Vicki Wilson, PHD, RN	1.00				П					
Director		х						0.	0.	0.
(6) Mike P. Simone	1.00									
Director		Х						0.	0.	0.
(7) Rose Stoller	1.00									
Director		Х			İ			0.	0.1	0.
(8) Mike Bond	1.00									
Director		X						0.	0.	0.
(9) Travis Gillmore	1.00									
Director		Х						0.	0.	0.
(10) Jason Yeater	1.00								-	
Director		X						0.	0.	0.
(11) Jeffrey Carlson	35.00									
Board Executive				X				0.	0.	0.
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The Weld Trust

Page 8

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
	(A)	(B)	İ	(C)					(D)	(E)		(F)	
	Name and title	Average	(40	Position (do not check more than one				ana	Reportable	Reportable		Estimat	ted
		hours per	box	box, unless person is i			ls bot)	n an	compensation	compensation		amount	t of
		week		fficer and a director/tri			or/trus	tee)	from	from related		othe	r
		(list any	ector		ŀ		i		the	organizations		compens	
		hours for	ā	ا ا	[}	Ē	1	organization	(W-2/1099-MISC	3)	from the	he
		related	ste	reste		_	ag Sug	l	(W-2/1099-MISC)			organiza	
		organizations below	al tru	a t		g g) E 2					and rela	
		line)	Individual trustee or director	Institutional trustee	Officer	E C	Highest compensated employee	ig.			°	organizat	tions
		iiie)	luc	II.	₹	₹.	풀통	횬	 		+		
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1b	Subtotal							<u> </u>	0.	(o. l		0.
	Total from continuation sheets to Part VI	I. Section A						•	0.		0.1		0.
	Total (add lines 1b and 1c)	,						•	0.		0.		0.
2	Total number of individuals (including but n	ot limited to th	ose	liste	d ah	ove) wh	o re		000 of reportable			
-	compensation from the organization						,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ooo o, roportable			0
	bernpeneauer nom ure organization					-			·····			Yes	
3	Did the organization list any former officer,	director trusti	ee k	ev e	mnl	ove	e or	hia	hest compensated empl	lovee on		_	+
	line 1a? If "Yes," complete Schedule J for s		JU, N	, .	pi	Jya	o, o	· ···y	noor compensated emp	0,00 011		3	x
4	For any individual listed on line 1a, is the su		و دم	mne	nes	tion	and	oth	ner compensation from t	he organization	<u> </u>	- 	 ^
4	•	•							•	io organization		4	x
_	and related organizations greater than \$150									lual far agains	⊢ -	' 	+^-
5	Did any person listed on line 1a receive or a	•				-		aate	ed organization or individ	iuai ior services	- 1 .	_	v
	rendered to the organization? If "Yes," com	piete Schedule	J fo	or su	ich <u>r</u>	oers:	on				ئـــــــــــــــــــــــــــــــــــــ	5	X
Sec	Section B. Independent Contractors												

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

(A) Name and business address	(B) Description of services	(C) Compensation
Whiting-Turner Contracting		
300 E. Joppa Rd, Baltimore, MD 21286	General Contractor	893,215.
Innovative Mechanical & Design, Inc.	Commercial	
PO Box 272760, Fort Collins, CO 80527	Construction	785,143.
GH Phipps Construction Co, 5995 Greenwood		
Plaza Blvd, Suite 100, Greenwood Village,	General Contractor	292,958.
Spencer Fane, LLP		
PO Box 872037, Kansas City, MO 64187	Legal Services	236,881.
Parabola Corporation	Consulting &	
2909 68th Avenue, Greeley, CO 80634	Management Services	200,004.
2 Total number of independent contractors (including but not limited to those list \$100,000 of compensation from the organization ▶ 6	ted above) who received more than	

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded (B) (C) Unrelated Related or exempt Total revenue from tax under function revenue business revenue sections 512 - 514 1 a Federated campaigns 1a Grants Membership dues 1b Fundraising events 1c d Related organizations 1d 59,546,220. Government grants (contributions) 1e f All other contributions, gifts, grants, and 168,240 similar amounts not included above Noncash contributions included in lines, 14-1f | 1g|\$ Total. Add lines 1a-1f 59,714,460 **Business Code** 2 a Hospital Facility Rent 532000 27,335,899. 27,335,899 Program Service f All other program service revenue 27 335 899. Total, Add lines 2a-21 Investment income (including dividends, interest, and 9,905,833 other similar amounts) 9,905,833. Income from investment of tax-exempt bond proceeds 5 Royalties (ı) Real (ii) Personal 166,352. 6 a Gross rents 6a b Less: rental expenses 6h 166,352, c Rental income or (loss) 166 352 d Net rental income or (loss) 166 352 (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory 75,159,386.281,531,409, b Less: cost or other basis 63,557,339,189,456,893 Other Revenue and sales expenses 11,602,047. 92 074 516 c Gain or (loss) 103,676,563 103,676,563 d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ contributions reported on line 1¢) See Part IV, line 18 b Less direct expenses 8ь c Net income or (loss) from fundraising events 9 a Gross income from garning activities. See Part IV, line 19 b Less. direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances 10b b Less cost of goods sold Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 900099 449,403 LIBOR Rate Adjustment 449,403 Easement Sale 900099 400,000, 400,000 d All other revenue Total, Add lines 11a-11d 849,403. 201,648,510. 28,185,302 Total revenue. See instructions ٥. 113,748,748. 12 Form 990 (2019)

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (A) Total expenses (B) Program service (D) Fundraising Do not include amounts reported on lines 6b, Management and 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations 5,443,014. 5,443,014. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals, See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages Pension plan accruals and contributions (include 21,930. 21,930. section 401(k) and 403(b) employer contributions) Other employee benefits 9 Payroll taxes 10 Fees for services (nonemployees) 200,004. 200,004. a Management 429,487. 429,487. **b** Legal 71,600. 71,600. c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 1,390,042. 1,390,042. Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, 138,337. 138,337. column (A) amount, list line 11g expenses on Sch O.) 12 Advertising and promotion 17,428. 17,428. Office expenses 13 Information technology 14 15 Royalties 201,063. 201,063. 16 Occupancy 2,456. 2,456. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 4,007. 4,007.19 Conferences, conventions, and meetings 5,316,694. 5,316,694. Interest 20 Payments to affiliates 21 17,610,870. 17,610,870 Depreciation, depletion, and amortization 22 23,379. 23,379 23 Insurance Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 86,104. Bond Fees 86,104. Staff Development and T 865. 865. 16. 16. Sales and use tax and C d 5,220. 5,220. e All other expenses 30,962,516. 28,370,578. 2,591,938. 0. Total functional expenses. Add lines 1 through 24e 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)

	•^	Check if Schedule O contains a response or note to any line in this Part X			
		Check is Confedure O contains a response of flote to any line in this Part X	(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments	11,258,889.	2	8,612,401.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	486,434.	4	515,795.
	5	Loans and other receivables from any current or former officer, director,		,	
		trustee, key employee, creator or founder, substantial contributor, or 35%		l _	·
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
ध	7	Notes and loans receivable, net		7	38,024,717.
Assets	8	Inventories for sale or use		8	
¥	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			· ·
		basis. Complete Part VI of Schedule D 10a 18, 217, 658.	* 8	-3.	graph of the second
	b	Less: accumulated depreciation 10b 5,743,282.	200,725,419.	10c	12,474,376.
	11	Investments - publicly traded securities .	299,040,515.	11	450,443,610.
	12	Investments - other securities. See Part IV, line 11	87,138.	12	
	13	Investments · program·related. See Part IV, line 11	3,670,929.	13	
	14	Intangible assets	1 2 2 2 2 2 2 2	14	
	15	Other assets. See Part IV, line 11	1,807,338.	15	856,216.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	517,076,662.	16	510,927,115.
	17	Accounts payable and accrued expenses	1,928,142.	17	151,875.
	18	Grants payable .		18	33,316,132.
	19	Deferred revenue	209,017,327.	19	
	20	Tax-exempt bond liabilities	209,017,327.	20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ies	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liat		controlled entity or family member of any of these persons Secured mortgages and notes payable to unrelated third parties	· · · · · · · · · · · · · · · · · · ·	22 23	
	23 24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third		24	
	23	parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	8,341,708.	25	3,830,231.
	26	Total liabilities. Add lines 17 through 25	219,287,177.	26	37,298,238.
		Organizations that follow FASB ASC 958, check here			
es		and complete lines 27, 28, 32, and 33.			
2	27	Net assets without donor restrictions	297,789,485.	27	473,628,877.
3af:	28	Net assets with donor restrictions		28	
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here]
Ξ		and complete lines 29 through 33.			
ĕ	29	Capital stock or trust principal, or current funds		29	
sets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
As	31	Retained earnings, endowment, accumulated income, or other funds		31	
Ę	32	Total net assets or fund balances	297,789,485.	32	473,628,877.
_	33	Total liabilities and net assets/fund balances	517,076,662.	33	510,927,115.

-orm	990 (2019) IIIE WEIG_II GSC	_ / 4 -	- <u>2 3 3 0</u>	<u> </u>	Pa	ıge I∠
Pa	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>, 64</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2		96		
3	Revenue less expenses. Subtract line 2 from line 1	3_	170	,68	5,9	94.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	297	<u>,78</u>	9,4	85.
5	Net unrealized gains (losses) on investments	5	41	<u>,11</u>	9,2	76.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9	<u>-35</u>	,96	<u>5,8</u>	<u>78.</u>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	473	,62	<u>8,8</u>	<u>77.</u>
Pa	rt XIII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					<u> </u>
					Yes	No
1	Accounting method used to prepare the Form 990 CashX Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.				
2a	· · · · · · · · · · · · · · · · · · ·			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a		,		`
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both.					
	X Separate basis Consolidated basis Both consolidated and separate basis					[]
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audıt,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch					لــــا
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Aud	irt			
	Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed aud	ıt			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3h	I	I

Form **990** (2019)

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

2019

Open to Public Inspection

Name of the organization **Employer identification number** The Weld Trust 74-2358522 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part T The organization is not a private foundation because it is (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 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, 4 5 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 33 1/3% 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 33 1/3% 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). 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 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. c X 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) 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 II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. 2 f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (II) EIN (i) Name of supported (III) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions)) Board of Trustees of North Colorado M84-6000813 6 X 23,410,248. Class of Entities 7 00-0000000 5,443,014. 0. Promoting Health X 5,443,014. 23,410,248. <u>Total</u>

	edule A (Form 990 or 990-EZ) 2019 T	he Weld T Organizations	rust Described in	Sections 170	(b)(1)(A)(iv) and	74-2358 170(b)(1)(A)(vi)	3522 Page 2
	(Complete only if you checke	-		· ·			
	fails to qualify under the tests	s listed below, plea	se complete Part	III.)			
Se	ction A. Public Support						,"
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Gifts, grants, contributions, and	- 		1-1-			
	membership fees received. (Do not	ŀ		1			
	include any "unusual grants.")					/	
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to		1			<i>X</i>	
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to]	İ	1			
	the organization without charge			<u> </u>			
4	Total. Add lines 1 through 3		<u> </u>				
5	The portion of total contributions		-	1	. ·		
	by each person (other than a		,	/	ľ		
	governmental unit or publicly	ļ	1		ļ	1	
	supported organization) included		1	1 / '	i	1	
	on line 1 that exceeds 2% of the				1		
	amount shown on line 11,			/			
	column (f)			/			
	Public support. Subtract line 5 from line 4	<u> </u>		<u> </u>	ž.	<u> </u>	
Se	ction B. Total Support			,			
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4			<u> </u>			
8	Gross income from interest,				•		
	dividends, payments received on		/	i]		
	securities loans, rents, royalties,		Y		ì	1	
	and income from similar sources				<u> </u>		
9	Net income from unrelated business	/					
	activities, whether or not the					1	
	business is regularly carried on		ļ	 	ļ	-	
10	Other income. Do not include gain	/	}	İ	i		
	or loss from the sale of capital	/]			1	
	assets (Explain in Part VI.)	/			<u> </u>	ļ	
	Total support. Add lines 7 through 10	Ľ	<u> </u>	<u> </u>	J		
	Gross receipts from related activities,					12	
13	First five years. If the Form 990 s fo	•	s first, second, thi	rd, fourth, or fifth to	ax year as a section	n 501(c)(3)	. —
<u> </u>	organization, check this box and storection C. Computation of Publi	p here	contago				
_			_			T I	
14	Public support percentage for 2019 (column (f))		14	%
15	Public support percentage from 2018				44 00 4/00*	15	<u>%</u>
16a	33 1/3% support test 2019. If the				14 IS 33 1/3% or r	nore, check this box	and
	stop here. The organization qualifies		_		1 45 - 00 4 (00	/	▶□
t	33 1/3% support test - 2018. If the	-			ı iine 15 is 33 1/3%	o or more, check this	. ποαχ
4-	and stop here. The organization qual	· · · · · · · · · · · · · · · · · · ·			- 40 46461	and line 44 : 4001	P
1/2	10% -facts-and-circumstances test	_	•				
	and if the organization meets the "fac			•	•	art vi now the organi	zation
	meets the facts-and-circumstances	-	•		•	47a and book 45 ! 4:	
t	10% -facts-and-circumstances test	_					U% OF
	more, and if the organization meets the				•		_
40	organization meets the "facts-and-circ				_		
<u>18</u>	Private foundation. If the organization	л ии пот спеск а	DOX OIT line 13, 16	oa, 100, 1/a, 01 1/1			N 000 E71 0040
,	/				Sch	edule A (Form 990 o	л 330- ⊑2) 20 19

or loss from the sale of capital

Part I

Schedule A (Form 990 or 990-EZ) 2019 T	he weld T	rust			74-235	8522 Page 3 1
Part III Support Schedule for C	Organizations	Described in S	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 Pa	art II. If the organiza	ition fails to
qualify under the tests listed b	elow, please comp	lete Part II.)				
Section A. Public Support					 -	<u>/</u>
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
 Gifts, grants, contributions, and 		ł			/	
membership fees received. (Do not					/	
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that		ļ	ļ		l l	
are not an unrelated trade or bus- iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to or expended on its behalf	1					
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge]	/	•	1	
6 Total. Add lines 1 through 5			<i>y</i>			
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6)		/				
Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2015/	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income	/					
(less section 511 taxes) from businesses	ľ					
acquired after June 30, 1975						
c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is						
regularly carried on						
12 Other income. Do not include gain	I	I	1		1	

assets (Explain in Part/VI.) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization,

check this box and stop here	
Section C. Computation of Public Support Percentage	
45 Duble commend to consider the 2010 (locally column (A) divided by local 10 column (A)	

% Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f)) Public support percentage from 2018 Schedule A, Part III, line 15 16 % Section D/Computation of Investment Income Percentage <u>%</u> 17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f))

18	Investment income percentage from 2018 Schedule A, Part III, line 17		. <u>[18 </u>	<u> </u>
19a	33 1/3% support tests - 2019. If the organization did not check the box on line	14, and line	15 is more than 33 1/3	%, and line 17 is not

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

		•	_				-
20	Private foundation. If the organization did not chec	k a box on line 1	4, 19a, o	r 19b, check t	this box a	ınd see inst	ructions

%

17

Part IV 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.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- 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 Part VI what controls the organization put in place to ensure such use.
- **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 Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c 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 Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- 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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in 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).
- 8 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.)

	Yes	No
	<u> </u>	
1		X
2	X	
3a	ļ	X
1		
3b		
	_]
Зс		
		لــــا
4a		X
4b		
4c		<u>1</u>
		}
	<u>x</u>	
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5b 5c		
5b		x
5b 5c		
5b 5c		X
5b 5c 6		X
5b 5c		x
5b 5c 6		X
5b 5c 6		X
5b 5c 6		x
5b 5c 6		x x x
5b 5c 5c 6 7 8		X X X
5b 5c 5c 6 7 8 9a		x x x
5b 5c 5c 6 7 8		X X X
5b 5c 6 7 8 9a 9b 9c		X X X
5b 5c 5c 6 7 8		x x x

1 Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the powering body of a supported organization? b A family member of a person described in (a) above? b A family member of a person described in (a) above? c A 395% controlled entify of a person described in (a) above? c A 395% controlled entify of a person described in (a) above? b A family member of a person described in (a) above? b A family member of a person described in (a) above? c A 395% controlled entify of a person described in (a) above? b A family member of a person described in (a) above. c a controlled the supporting organizations of the suppor	Pa	rt IV Supporting Organizations _(continued)			
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the powers to generation? b A family member of a person described in (d) above? c A 35% controlled entirely of a person described in (d) or (b) above? A 35% controlled entirely of a person described in (d) or (b) above? Did the directors, frustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe his year? If "No," describe his year? If "No," describe his year? If "No," describe his year of the organization or directors or trustees at all times during the tax year? If "No," describe his year of the powers to appoint and/or remove directors or trustees at all times during the tax year. 1 Out the organization's activities, If the organization and more than one supported organization, describe his the powers to appoint and/or remove directors or trustees were allocated among the supported organization, describe his the powers to appoint and/or remove directors or trustees were allocated among the supported organization? If "Yes," explain in Part VI how the powers to appoint and/or remove directors or trustees were allocated the supported organization? If "Yes," explain in Part VI how described the supporting Organizations. Section C. Type III Supporting Organizations 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 supported organizations. 1 Were a majority of the organization's supported organizations, by the last day of the fifth month of the organization is a supported organization or supported organization or supported organization or supported organization or elected by the supported organization or provided during the prior tax year, (i) a copy of the Form 990 that was most recently filed as of the date of notification, to the exte				Yes	No
below, the governing body of a supported organization? b A family member of a person described in (a) above? c. A 35% controlled entity of a person described in (a) or (b) above? d. A5% controlled entity of a person described in (a) or (b) above? D. Or the directors, inustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization directors or trustees at all times during the tax yea? If "No," describe in Part VI in the supported organization of encotrol and the supported organization and water controlled entity or the supported organization of the than the supported organization and what conditions or restrictions, if any, applied to supported organization of the than the supported organization and what conditions or restrictions, if any, applied to such powers during the tax year. D. If the organization operate for the benefit carried out the purposes of the supported organization (b) that operated, supervised, or controlled the supporting organization of the than the supported organization of the than the supported organization of the than the supported organization of the than the supported organization of the than the supported organization of the than the supported organization of the than the supported organization of the than the supported organization of the than the supported organization of the than the supported organization of the than the supported organization of the than the supported organization of the transition of the directors or trustees of each of the organization of directors or trustees of the supported organization of the than the supported organization of the than the supported organization of the than the supported organization of the supported organization of the than the supporting organization was vested in the same persons that controlled or managed this supported organization, and the controlled or managed this supported organization, by the last day of the fifth month of the organization ist	11	Has the organization accepted a gift or contribution from any of the following persons?			
b A family member of a person desched in (a) above? A 35% controlled entiry of a person desched in (a) or (b) above? If Yes' to a, b, or c, provide detail in Part VI. 10 bid the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect all less of a majority of the organizations directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organizations directors or trustees at all sures during the tax year? If "No," describe the Part VI how the supported organizations placetively operated, supervised, or controlled the organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 1 Did the directors, trustees, or membership of one or more supported organization, describe how the powers to apport and for member directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 2 Did the organization operated for the bernefit of any supported organization of the trust the supported organization(ii) that operated, supervised, or controlled the supporting organization of the supported organization(ii) that operated, supervised, or controlled the supporting Organizations Section C. Type II Supporting Organizations 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 directors or trustees of each of the organization's supported organization's supported organization's powering documents or supported organization's limit organization's powering documents or the supported organization's powering documents or the supported organization's limit organization's powering documents or the supported organization's powering documents or the supported organization's powering documents or the supported organization's powering documents or the supported organization's powering documents or	а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)		l	
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	edule A (Form 990 or 990-EZ) 2019 The Weld Trust			74-2358522 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Suppo	rting Organ	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qua	lifying trust on	Nov. 20, 1970 (explain in	Part VI). See instructions. Ai
	other Type III non-functionally integrated supporting organizations mu	ist complete Se	ctions A through E.	
Sect	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
	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			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	tion 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)			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d_		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
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	nt,		
	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		
Sect	tion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
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	1 1		1
	emergency temporary reduction (see instructions).	6		<u> </u>
7	Check here if the current year is the organization's first as a non-funct	onally integrate	ed Type III supporting org	anization (see
	instructions).			

Schedule A (Form 990 or 990-EZ) 2019

Par	τν Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations _(continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	<u> </u>		
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.	<u> </u>		
8	Distributions to attentive supported organizations to which the	ne organization is responsive)	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1_	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
<u>. 3</u>	Excess distributions carryover, if any, to 2010		, 4- at a	*p (* *)
а	From 2014			
b	From 2015	,		,
С	From 2016			
<u>d</u>	From 2017			
<u>e</u>	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
_ <u>i_</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,	•		
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
_ с	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j and 4c.			
8	Breakdown of line 7:	,		
э	Excess from 2015	-		* •
	Excess from 2016	•	-	
	Excess from 2017			
	Excess from 2018			, , , , , ,
е	Excess from 2019	, ,	1 11	^ - 5

Schedule A (Form 990 or 990-EZ) 2019

Schedule A (Form 990 or 990-EZ) 2019 The Weld Trust 74-2358522	Page 8
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 B, lines 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 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.)	 С.
Part I, Line 11g, Column (v) and (vi):	
The Weld Trust provides grants to a class of organizations supporting	
the promotion of health and education in Weld County. Grants provided	
were in the amount of \$5,443,014. See Schedule I for details on the	
grant recipients who received funding. In addition to direct grants,	
the Weld Trust funded capital outlays totaling \$10,137,221 and funded	
net principal and interest payments of \$13,237,027 on long-term debt	
for the Board of Trustees of North Colorado Medical Center (The Board	
of Trustees).	
Part IV, Section A, Line 1:	
The Organizing documents indicate Weld Trust is operated to carry out	
the principles of the Board of Trustees of North Colorado Medical	
Center and to conduct activities for other organizations exempt under	
501(c)(3) for the purposes of health care and education. As such, the	·-
Weld Trust operates for the benefit of a class of organizations	
designated by purpose in addition to the Board of Trustees as a named	
supported organization.	
Part IV, Section A, Line 2:	
The organization supports the Board of Trustees, which is not required	
to obtain recognition of exempt status because it is considered to be a	
governmental entity.	
Part IV, Section A, Line 5a:	
Weld Trust has directly supported the Board of Trustees, the named	

supported organization by holding assets and an operating agreement for

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.)

the operation of a hospital. The organizing documents specifically

require the Weld Trust to carry out the principals of the Board of

Trustees. The purpose clause further provides the corporation may

conduct other activities for organizations exempt under 501(c)(3) in

furtherance of healthcare and educational purposes.

Part IV, Section A, Line 5c:

The Board of Trustees, the named supported organization dissolved as of

December 16, 2019. The dissolution of the named supported organization

was beyond the control of the Weld Trust. The language in the

organizing document allowing the corporation to conduct activities for

organizations exempt under 501(c)(3) in furtherance of healthcare and

educational purposes allows for the substitution of the class for the

named supported organization. The Weld Trust revised its Articles in

March 2020 to specifically designate a class of supporting

organizations that has the right to appoint the board.

Part IV, Section D, Line 3:

Until its dissolution in December of 2019, the Board of Trustees had a significant voice in the organization's investment policies and in directing the use of the organization's income or assets. All three of the representatives appointed by the Board of Trustees were voting members of the organization's board of directors and participated in the decision-making process at the highest level. In addition, one representative of the supported organization served on the Finance Committee, which generally oversees the operations and financial condition of the organization, including its investment policies. Two

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.)

representatives of the supported organization serve on an internal committee which monitors adherence to any qualitative contractual requirements. No new debt is incurred by the organization without the approval of the supported organization. Lastly, the supported organization is given a significant voice in the conduct of the organization's affairs by virtue of its operating sublease with the organization. After the dissolution of the Board of Trustees, the class of supported organizations had a significant voice in the operations of the Weld Trust as there is a close working relationship via share staff with the North Colorado Medical Center Foundation, one of the supported organizations.

Part IV, Section E, Line 2a:

The organization supports the Board of Trustees by contracting with

Banner Health (an Arizona 501(c)(3) organization) to operate the North

Colorado Medical Center. Under the terms of the contract, Banner Health

System pays an annual use charge to the organization for hospital

facilities, equipment and the business franchise. These funds, together

with other cash reserves, are used by the organization to provide the

North Colorado Medical Center with liquid working capital and funding

for major and routine capital expenditures. In addition, the

organization also provides grants to support local healthcare charities

including Banner Health System for indigent care and EMS Training and

North Colorado Medical Center Foundation for community outreach. These

activities directly further the exempt purpose of the organization,

which is to provide quality healthcare at a reasonable cost to the

North Colorado Medical Center service area.

Schedule A (Form 990 or 990-EZ) 2019 The Weld Trust	74-2358522 Page 8
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 10; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for an (See instructions.)	B, lines 1 and 2; Part IV, Section C, 1, Part V, Section B, line 1e; Part V,
Part IV, Section E, Line 2b:	
If the organization did not conduct the activities descri	ribed in Section
E, line 2a, the supported organizations would have to di	irectly
undertake the activities. The designated supported organ	nization was
formed to provide for healthcare needs of the region, wh	nich includes
the availability of hospital facilities. The supported of	organization is
providing for the healthcare needs of the region through	the Weld Trust
and its activities.	
	

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

The Weld Trust

Employer identification number 74-2358522

Pa	organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, lin	e 6	·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	ed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes N
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor of	r donor advisor, or for any other purpose	conferring
_	impermissible private benefit?		Yes N
Pa			Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	· · · · · · · · · · · · · · · · · · ·	
	Preservation of land for public use (for example, recrea	· <u> </u>	f a historically important land area
	Protection of natural habitat	Preservation of	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Yea
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic stri	' '	2c
d	Number of conservation easements included in (c) acquired a	after 7/25/06, and not on a historic structu	ıre
	listed in the National Register		
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the	organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per	iodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it		Yes N
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cons	servation easements during the year
			
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservat	tion easements during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	•	
	balance sheet, and include, if applicable, the text of the footn	ote to the organization's financial stateme	ents that describes the
D -	organization's accounting for conservation easements. † III Organizations Maintaining Collections of	Art Historical Traceruse an Ot	hau Cimilar Assats
Pa		•	ner Similar Assets.
	Complete if the organization answered "Yes" on Form		
та	If the organization elected, as permitted under FASB ASC 95	•	
	of art, historical treasures, or other similar assets held for pub		•
	service, provide in Part XIII the text of the footnote to its finar		
b	If the organization elected, as permitted under FASB ASC 95	•	
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furth	ierance of public service,
	provide the following amounts relating to these items:		. .
	(i) Revenue included on Form 990, Part VIII, line 1		\$
_	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art, historical treations are also as a second		gain, provide
	the following amounts required to be reported under FASB A	SC 958 relating to these items.	
а	Revenue included on Form 990, Part VIII, line 1		\$
h	Assets included in Form 990. Part X		P (

Sche	dule D (Form 990) 2019 The Weld						7	<u> 14-23</u>	<u>58522</u>	Page 2
Par	t III Organizations Maintaining Co	llections of Art	, Histo	orical Tre	asures, or C	ther S	<u>imilar</u>	Assets	S (continu	ed)
3	Using the organization's acquisition, accession	n, and other records	, check	any of the f	ollowing that ma	ake signi	ficant u	se of its		
	collection items (check all that apply):									
а	Public exhibition	d		Loan or excl	hange program					
b	Scholarly research	е		Other						
С	Preservation for future generations									
4	Provide a description of the organization's coll	ections and explain	how the	ey further th	e organization's	exempt	purpos	e in Part	XIII.	
5	During the year, did the organization solicit or	receive donations o	f art, his	storical treas	ures, or other s	ımilar as:	sets			
	to be sold to raise funds rather than to be main								Yes	No_
Par	t IV Escrow and Custodial Arrange		te if the	organizatioi	n answered "Ye	s" on Fo	rm 990,	Part IV,	line 9, or	
	reported an amount on Form 990, Part	X, line 21.								
1a	Is the organization an agent, trustee, custodiar	n or other intermedi	ary for c	ontributions	or other assets	not incl	uded		_	
	on Form 990, Part X?							L.	Yes	No
ь	If "Yes," explain the arrangement in Part XIII ar	nd complete the foll	owing ta	able:						
							$\sqcup \bot$		Amount	
С	Beginning balance				-		1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						<u>1f</u> _			
2a	Did the organization include an amount on For)		Yes	∐ No
	If "Yes," explain the arrangement in Part XIII. C									
Par	t V Endowment Funds. Complete if									
	 	(a) Current year	(b) P	nor year	(c) Two years b	ack (d)	Three ye	ars back	(e) Four y	ears back
1a	Beginning of year balance									
b	Contributions									
¢	Net investment earnings, gains, and losses			_						
d	Grants or scholarships								ļ	
е	Other expenditures for facilities	i								
	and programs									
f	Administrative expenses			_					 	
9	End of year balance								<u> </u>	
2	Provide the estimated percentage of the current	nt year end balance	-	, column (a)) held as.					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С	Term endowment									
_	The percentages on lines 2a, 2b, and 2c should	•	AL -A			6 Al				
За	Are there endowment funds not in the possess	sion of the organizat	tion that	are neid an	d administered	for the o	rganizat	lon	[.	
	by:									es No
	(i) Unrelated organizations								3a(i)	+-
	(ii) Related organizations If "Yes" on line 3a(ii), are the related organization	one heted on require	d on Ca	shodula D2					3a(ii)	
_	Describe in Part XIII the intended uses of the o								3b	
Par	t VI Land, Buildings, and Equipme		villejit it	ilius.						
	Complete if the organization answered		Part IV	line 11a Se	ee Form 990 Pa	art X line	10			
	Description of property	(a) Cost or ot		(b) Cost		(c) Accu		,	(d) Book	value
	bescription of property	basis (investm		basis (ciation	'	(u) Book	/alue
1-	Land	222.5 (3341)	,	340.5 (235.0		$\overline{}$		
_	Buildings	5,861,8	386.	· · · · · ·		4,49	4.47	6.	1,367	410.
Ь	Leasehold improvements	5,002,0				-,	-,-,	 -	_,,	,
d	Equipment							$\overline{}$		
_	Other	12,355,7	172.			1,24	8.80	6. 1	1,106	.966.
	Add lines 1a through 1e. (Column (d) must on			n /P) line 1/	<u></u>	_,	<u>-,</u>	1		376

(2) Closely held equity interests (3) Other (A) (B) (C) (D) (E) (F) (G) (H)	Schedule D (Form 990) 2019 The Weld Tr	ust		-2358522 Page 3
(a) Description of security or category (reclamp name of security) (i) Financial definitions (ii) Financial definitions (iii) Financial defini	L			
(1) Franceil derivatives (2) Closely held equity interests (3) Other (A) (B) (C) (C) (B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C		on Form 990, Part IV, line 1		
(2) Closely held equity interests (3) Other (4) (5) (6) (7) (8) (9) (9) (9) (1)	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(3) Other (A) (B) (B) (C) (C) (D) (E) (F) (G) (G) (F) (G) (G) (F) (G) (G) (F) (G) (G) (F) (G) (G) (F) (G) (G) (F) (G) (G) (G) (G) (G) (G) (G) (G) (G) (G	(1) Financial derivatives			
(G) (C) (D) (E) (F) (G) (G) (H) (F) (G) (G) (H) (F) (G) (G) (H) (F) (G) (G) (F) (F) (G) (G) (G) (F) (F) (G) (G) (G) (F) (F) (G) (G) (F) (F) (G) (G) (G) (F) (F) (G) (G) (F) (F) (G) (G) (F) (F) (G) (G) (F) (G) (G) (F) (G) (G) (G) (G) (G) (G) (G) (G) (G) (G	(2) Closely held equity interests			
(B) (C) (D) (E) (F)	(3) Other			
C C C C C C C C	(A)			
Discription Discription	(B)			
(E) (F) (F) (F) (F) (F) (F) (F) (F) (F) (F	(C)			
(F) (G) (H) (H) (F) (F) (F) (F) (F) (F) (F) (F) (F) (F	(D)			
(G) (H) (H) (H) (H) (H) (H) (H) (H) (H) (H	(E)			
Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11l. See Form 990, Part X, line 25. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11l. See Form 990, Part X, line 25. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11l. See Form 990, Part X, line 25. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11l. See Form 990, Part X, line 25. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11l. See Form 990, Part X, line 25. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11l. See Form 990, Part X, line 25. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11l. See Form 990, Part X, line 25. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11l. See Form 990, Part X, line 25. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11l. See Form 990, Part X, line 25. Complete if the org	(F)			
Total_ (Col., (b) must equal Form 990, Part X, col. (B) line 12.)	(G)			
Total Col. (b) must equal Form 990, Part X, col. (B) line 13.	(H)			
Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation. Cost or end-of-year market value (d) (e) (f) (e) (f) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g	Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		n y sew a run alle allera	15 s)
(a) Description of investment (b) Book value (c) Method of valuation. Cost or end-of-year market value (d) (e) (f) (f) (f) (f) (f) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g				
11				
(2) (3) (4) (5) (6) (7) (8) (9) (9) (7) (8) (9) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (9) (1) (1) (2) (1) (2) (2) (3) (4) (5) (6) (7) (8) (9) (9) (9) (9) (9) (10) (11) (12) (13) (14) (15) (15) (16) (17) (17) (18) (18) (19) (19) (10) (10) (10) (11) (11) (12) (13) (14) (15) (15) (16) (17) (17) (18) (19) (19) (10) (10) (11) (11) (12) (13) (14) (15) (15) (16) (17) (17) (18) (19) (19) (10) (10) (11) (11) (12) (13) (14) (15) (15) (16) (17) (17) (18) (18) (19) (19) (10) (10) (10) (11) (11) (12) (13) (14) (15) (15) (16) (17) (17) (18) (18) (19) (19) (10) (10) (10) (11) (11) (12) (12) (13) (14) (15) (15) (16) (17) (17) (18) (18) (18) (18) (18) (18) (18) (18	(a) Description of investment	(b) Book value	(c) Method of valuation. Cost or end	d-of-year market value
(3) (4) (5) (6) (7) (8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) \(\) (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) Total. (Column (b) must equal Form 990, Part X col. (B) line 15.) Part XX Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value (c) Book value (d) Google of the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (a) Description of liability (b) Book value (c) Federal income taxes (d) Interest Rate Swap (d) Google of the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (a) Description of liability (b) Book value (c) Interest Rate Swap (d) Google of the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (a) Description of liability (b) Book value (d) Federal income taxes (e) Interest Rate Swap (f) Federal income taxes (g) Interest Rate Swap (g) Google of the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (g) Google of the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (g) Google of the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (g) Google of the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (g) Google of the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.	(1)			
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Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) Interest Rate Swap 3,830,231. (3) (4) (5) (6) (7)	Part X Other Liabilities.	9 (5.)		<u> </u>
1. (a) Description of liability (b) Book value (1) Federal income taxes (2) Interest Rate Swap 3,830,231. (3) (4) (5) (6) (7)		on Form 990. Part IV. line 1	1e or 11f. See Form 990. Part X. line 25	
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(2) Interest Rate Swap 3,830,231. (3) (4) (5) (6) (7)	<u></u>			
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(4) (5) (6) (7)				
(5) (6) (7)				
(6) (7)				
(7)				
				

Total. (Column (b) must equal Form 990. Part X. col. (B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

3,830,231.

(9)

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

Part X, Line 2:

The Weld Trust is a Colorado nonprofit corporation and has been recognized by the Internal Revenue Service (IRS) as exempt from federal income taxes under Internal Revenue Code Section 501(c)(3), and is exempt from federal and state income taxes on related income pursuant to Section 509(a)(3) of the Code. The Weld Trust is annually required to file a Return of Organization Exempt from Income Tax (Form 990) with the IRS. In addition, the Corporation may be subject to income tax on net income that is derived from business activities that are unrelated to its exempt purpose. The Weld Trust has determined it is not subject to unrelated business income tax and has not filed an Exempt Organization Business Income Tax Return (Form 990-T). Normedco Care, LLC; Southside Investments, LLC; and Sheep

Part XII, Line 4b - Other Adjustments:

Charity Care Grant to Banner Health System

3,863,014. Schedule D (Form 990) 2019

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

2019
Open to Public Inspection

OMB No 1545-0047

2 [] Schedule I (Form 990) (2019) 74-2358522 Operational assistance (h) Purpose of grant or assistance Indigent Care/EMS X Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any and donation raining 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) 。 ö (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (d) Amount of 3,863,014, 1,580,000 cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section (if applicable) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 501(c)(3) 84-0718355 501(c)(3) Enter total number of other organizations listed in the line 1 table 45-0233470 General Information on Grants and Assistance (p) EIN The Weld Trust criteria used to award the grants or assistance? 1 (a) Name and address of organization Foundation - 1801 16th Street North Colorado Medical Center or government Banner Health System Name of the organization Greeley, CO 80631 Greeley, CO 80631 1801 16th Street Part Part

Page 2 (f) Description of noncash assistance 74-2358522 (e) Method of valuation (book, FMV, appraisal, other) There is currently no process in place that monitors the use of grant funds The Board of Directors Part IV | Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. It is the policy of the Board of Directors to (d) Amount of non-cash assistance (c) Amount of cash grant distribute grants only to not-for-profit entities. (b) Number of recipients vet recipients prior to making grants. The Weld Trust (a) Type of grant or assistance by the recipients. Part I, Line 2: Schedule I (Form 990) (2019) Part I

Schedule I (Form 990) (2019)

932102 10-26-19

SCHEDULE L

Transactions With Interested Persons

(Form 990 or 990-EZ)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

Open To Public Inspection

Name of th	e organization							_	Em	ploye	r ident	ificati	on nu	mber
The Weld Trust Part I Excess Benefit Transactions (section 501(c)(3), section 501											585	22		
Part I	Excess Bene	efit Transac	tions (section 5	01(c)(3	3), secti	ion 501(c)(4), and s	ectio	n 501(c)(29) orga	nizatio	ons on	ly).			
	Complete if the	organization an	swered "Yes" on	Form 9	990, Pa	art IV, line 25a or 25	5b, o	r Form 990-EZ, P	art V, I	<u>ine 40</u>	b			
1 (a) Name of disqualified person			(b) Relationship between disqualified person and organization			ified	(c) Description of transaction			n			Corre	cted?
(-7			person and or	ryaniza	ation								es	No
												+		
					_							╁╌	\dashv	
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		1						_				+	\neg	
2 Enter	the amount of tax	incurred by the	organization man	agers	or disc	ualified persons du	urina	the year under						
	n 4958		G			,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		▶ \$				
3 Enter	the amount of tax,	if any, on line 2	, above, reimburs	ed by	the org	ganization				▶ \$				
Part II	Loans to an	d/or From Ir	iterested Per	sons							-			
	Complete if the	organizatıon an	swered "Yes" on l	Form 9	990-EZ	, Part V, line 38a or	r Forr	n 990, Part IV, lin	e 26,	or If th	e orga	nızatıc	n	
	reported an amo		00, Part X, line 5, 6					·	-		Ir. v A.			
•	i) Name of ested person	(b) Relationshi with organization		froi	oan to or In the	(e) Original principal amount		(f) Balance due) in ault?	by bo	proved ard or	(i) W	ritten
intere	ested person	with organization	or loan	_	ization?	principal amount	١ ا				cómm		_	ment?
		 		To	From		+		Yes	No	Yes	No	Yes	No
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Part III	J		enefiting Inter											
,			swered "Yes" on I	Form 9	990, Pa									
(a) N	ame of interested	person	(b) Relationship interested pers			(c) Amount of assistance	f	(d) Type assistan		- {) Purpi assista		
		i	the organization		u	2333121100		233/3(2)	CE	ļ	•	2331310	1100	
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2019

Employer identification number 74-2358522 OMB No 1545-0047 Liquidation, Termination, Dissolution, or Significant Disposition of Assets ► Complete if the organization answered "Yes" on Form 990, Part IV, lines 31 or 32, or Form 990-EZ, lir ▶ Attach certified copies of any articles of dissolution, resolutions, or plans. ► Go to www.irs.gov/Form990 for the latest information. ► Attach to Form 990 or 990-EZ. The Weld Trust Name of the organization (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service SCHEDULE N

	2019	Open to Public Inspection	
2000	ne 36.		

licated if additional	(g) IRC section of recipient(s) (if tax-exempt) or type of entity					
Liquidation, Termination, or Dissolution. Complete this part if the organization answered "Yes" on Form 990, Part IV, line 31, or Form 990-EZ, line 36. Part I can be duplicated if additional space is needed.	(f) Name and address of recipient					
90, Part IV, line 31, o	(e) EIN of recipient					
nswered "Yes" on Form 90	(d) Method of determining FMV for asset(s) distributed or transaction expenses			,		
part if the organization ar	(c) Fair market value of asset(s) distributed or amount of transaction expenses					
ution. Complete this	(b) Date of distribution	6				
Liquidation, Termination, or Dissoli space is needed.	(a) Description of asset(s) distributed or transaction expenses paid					
Part	-					

Did or will any officer, director, trustee, or key employee of the organization:

- Become a director or trustee of a successor or transferee organization?
- Become an employee of, or independent contractor for, a successor or transferee organization?
 - c Become a direct or indirect owner of a successor or transferee organization?
- d Receive, or become entitled to, compensation or other similar payments as a result of the organization's liquidation, termination, or dissolution?
- e If the organization answered "Yes" to any of the questions on lines 2a through 2d, provide the name of the person involved and explain in Part III.

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

Schedule N (Form 990 or 990-EZ) 2019

8 2c Yes

4a

4

74-2358522		2
The Weld Trust	n (continued)	ll of ite a
Schedule N (Form 990 or 990-EZ) 2019	Part I Liquidation, Termination, or Dissolutic	Moter If the organization distributed a
Scheduk	Part I	N

Note: If the organization distributed all of its assets during the tax year, then horn you, Mart A, column (b), line 10 (10)

Did the organization distribute its assets in accordance with its governing instrument(s)? If "No," describe in Part III

4a is the organization required to notify the attorney general or other appropriate state official of its intent to dissolve, liquidate, or terminate?

b If "Yes," did the organization provide such notice?

Did the organization discharge or pay all of its liabilities in accordance with state laws? 2

6a Did the organization have any tax-exempt bonds outstanding during the year?

9 b If "Yes" to line 6a, did the organization discharge or defease all of its tax-exempt bond liabilities during the tax yr in accordance with the Internal Revenue Code and state laws? Part II Sale, Exchange, Disposition, or Other Transfer of More Than 25% of the Organization's Assets. Complete this part if the organization answered "Yes" on Form 990, Part IV, line 32, or

c If "Yes" on line 6b, describe in Part III how the organization defeased or otherwise settled these liabilities. If "No" on line 6b, explain in Part III.

Form 990-EZ, line 36. Part II can be duplicated if additional space is needed.
(b) Date of distribution
10/09/19
, 1

Did or will any officer, director, trustee, or key employee of the organization:

Become a director or trustee of a successor or transferee organization?

b Become an employee of, or independent contractor for, a successor or transferee organization?

Become a direct or indirect owner of a successor or transferee organization?

Receive, or become entitled to, compensation or other similar payments as a result of the organization's significant disposition of assets?

e If the organization answered "Yes" to any of the questions on lines 2a through 2d, provide the name of the person involved and explain in Part III.

8

2

Schedule N (Form 990 or 990-EZ) 2019 The Weld Trust	74-2358522 Page :
Part III Supplemental Information. Provide the information required by Part I, lines 2e and 6c, and Part II, I Also complete this part to provide any additional information.	ine 2e.
Schedule N, Part II, Line 1 Column, (d):	
Management of the Weld Trust analyzed and reviewed market dat	a and
comparable sales, including review of prior appraisals of the	assets,
to determine the reasonable fair market value of the assets s	sold. In
addition, the Asset Purchase Agreement between The Weld Trust	and
Banner Health was reviewed by the Colorado Attorney General's	office
and the transaction was allowed to proceed without further re	eview.
	-

SCHEDULE 0

(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.

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

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

The Weld Trust

Employer identification number 74-2358522

The Weld Trust

Employer identification number 74-2358522

Form 990, Part VI, Section A, line 1:

The Organization has an Executive Committee which is able to exercise authority of the Board when the Board is not in session except as such authority is limited by statute or by resolution creating or otherwise controlling the Executive Committee. The membership of the Executive Committee shall include the Chair and President of the Board of the Corporation, the Chair of the Finance Committee, the Chair of the External Committee, the Chair of the Internal Committee and the Vice Chair of the Board. The Chair and President of the Board of the Corporation shall serve as Chair of the Committee. The Executive Committee shall not have the authority of the Board in reference to (i) appointing, removing or filling vacancies in the membership of the Board, Board Committees or Officers of the Corporation; (ii) amending the Articles of Incorporation; (iii) restating the Articles of Incorporation; (iv) adopting a plan of merger or consolidation with another corporation; (v) authorizing the sale, lease, exchange or mortgage of all or substantially all of the property and assets of the Corporation; (vi) authorizing the voluntary dissolution of the Corporation or revoking proceedings therefor; (vii) adopting a plan for the distribution of the assets of the Corporation or (viii) amending, altering or repealing any resolution of the Board which by its terms provides that it shall not be amended, altered or repealed by such Committee.

Form 990, Part VI, Section A, line 3:

The Board Executive role is a service purchased by The Weld Trust and supervises all of their operations. Parabola Corporation is solely owned by the Board Executive. Payments made to Parabola Corporation for professional fees in 2019 were \$200,004.

The Board of Directors approves the contract with the management company Schedule O (Form 990 or 990-EZ) (2019)

Form 990, Part VI, Section B, Line 15:

VIII, line 7(ii) has been increased by the \$35 million commitment,

resulting in the reconciliation between financial statements and tax

Schedule O (Form 990 or 990-EZ) (2019)	
Name of the organization The Weld Trust	Employer identification number 74-2358522
reporting. Additional reconciliations will occur in fut	ure years as
the grant is reported for tax purposes.	
	· .

SCHEDULE R (Form 990)

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

2019

OMB No 1545-0047

Open to Public Inspection

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

Employer identification number 74-2358522

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Parti

The Weld Trust

Name of the organization Department of the Treasury Internal Revenue Service

(a)	(g)	(0)	(p)	(e)	(6)
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets	Direct controlling entity
Sheep Draw Farms LLC - 68-0540676					
1801 16th Street	Holds title to farm rent				
Greeley, CO 80631	income	Colorado	412,000.	10,686,414.	10,686,414. The Weld Trust
Southside Investments - 68-0611503					
1801 16th Street	Owns houses adjacent to the				
Greeley, CO 80631	hospital	Colorado	121,680.	419,432.	419,432. The Weld Trust
Normedco Care LLC - 74-2354112	Owns facility leased to a				
1801 16th Street	Federally Qualified Health				
Greeley, CO 80631	Center for \$1 per year	Colorado	1.	1,367,410.	1,367,410. The Weld Trust

Part II Identification of Related Tax-Exempt Organizations. Complete If the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a)	(q)	(0)	(p)	(e)	(£)	(6)	
	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	Section 512(b)(13) controlled	(0)(13) led
		roreign country)		501(c)(3))	Sinit	Yes	٤
North Colorado Medical Center Board of					Weld County Board		
Trustees - 84-6000813, 1801 16th Street,	Governmental activity -				of County		
	Hospital	Colorado		Line 6	Commissioners		×
				1			١

74-2358522

Page 2

The Weld Trust Schedule R (Form 990) 2019

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

(e)	(q)	0	(p)	(e)	6	(6)	Ξ	(0)	s	3
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets	ᅟᇐᇎ	Code V-UBI amount in box 20 of Schedule	General or managing partner?	Perc
	!	country)		Sections 5 (2-5 14)			Yes No		Yes No	
NCMC+BH Greeley I, LLC -	, —									
90-0824175, 1801 16th Street,										
Greeley, CO 80631	Land Investment	CO	The Weld Trust	Related	2,434.	.0	×	N/A	×	50.008
NCMC+BH Greeley II, LLC -										
90-0824173, 1801 16th Street,				_						
Greeley, CO 80631	Land Investment	လ	The Weld Trust Related	Related	0.	0.	×	N/A	×	50.00%
							-			
						•				
Control of the contro										

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

(a)	(Q)	(0)	(p)	(e)	(£)	6)	ε	€	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	(C)	Sha	Share of end-of-year	훓읃	Section 512(b)(13) controlled entity?	(13) ed /2
		country)		655		20000		Yes	S.
NMSI dba Northcare - 74-2354291									
1801 16th Street	Medical Claims							_	
Greeley, CO 80631	Processing	8	The Weld Trust	C CORP	0.	0	1008	×	
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Schedule R (Form 990) 2019

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1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II:1V? Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

- a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- **b** Gift, grant, or capital contribution to related organization(s)
 - c Gift, grant, or capital contribution from related organization(s)
 - d Loans or loan guarantees to or for related organization(s)

 - e Loans or loan guarantees by related organization(s)
- f Dividends from related organization(s)

Sale of assets to related organization(s)

- Purchase of assets from related organization(s)
- Exchange of assets with related organization(s)
- j Lease of facilities, equipment, or other assets to related organization(s)
- k Lease of facilities, equipment, or other assets from related organization(s)
- Performance of services or membership or fundraising solicitations for related organization(s)
 - m Performance of services or membership or fundraising solicitations by related organization(s)
- n Shanng of facilities, equipment, mailing lists, or other assets with related organization(s)
- Sharing of paid employees with related organization(s)
- Reimbursement paid to related organization(s) for expenses ۵
- Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- s Other transfer of cash or property from related organization(s)

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(а) Name of related organization	(b) (c) (d) Transaction Amount involved type (a.s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(6)			
(4)			
(9)			
(9)			

Schedule R (Form 990) 2019

Schedule R (Form 990) 2019 The Weld Trust

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

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

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structions regarding exclusion for cert	ctivity Legal (state					
urat was not a related organization. See instructions regarding exclusion	Name, address, and EIN of entity					

Schedule R (Form 990) 2019

Scheo	lule l	R (Form !	<u>990)</u>	2019		The	мето	1 1.I	ust					/4-2358522	2 Page 5
Part	t VII	Sup													
		Provid	de ac	ditional	informat	ion for	response	es to q	uestions	s on Sche	dule R. See	e instruc	tions.		
Sch	edi	ule F	١,	Part	V:										
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ATTACHMENT TO THE THIRD

AMENDED AND RESTATED ARTICLES OF INCORPORATION

OF

NCMC, INC.

Pursuant to the provisions of the Colorado Non-Profit Corporation Act, the undersigned corporation, having filed its original Articles of Incorporation with the Colorado Secretary of State on November 28, 1984, and Amended and Restated Articles of Incorporation on January 13, 1986 and on September 21, 1987, and having filed Articles of Amendment to the Articles of Incorporation on December 30, 1994, hereby adopts the following Third Amended and Restated Articles of Incorporation amending the prior Articles of Incorporation, as amended. Such Third Amended and Restated Articles of Incorporation have been fully adopted as required by law and supersede the original Articles of Incorporation, the Amended and Restated Articles of Incorporation and all amendments thereto:

ARTICLE I NAME

The name of the Corporation is:

The Weld Trust

ARTICLE II DURATION

The Corporation shall have perpetual existence.

ARTICLE III PURPOSES AND POWERS

A. <u>Purposes</u>. The Corporation is formed exclusively for charitable, educational and scientific purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, as amended (the "Code"). Through responsible giving, the Corporation will meaningfully and continuously strive to improve the quality of life in Weld County, Colorado by making grants to promote excellence in health and education.

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B. <u>Powers</u>. In furtherance of the foregoing purposes and objects (but not otherwise) and subject to the restrictions in Section C. of this Article, the Corporation shall have and may exercise all such powers as are expressly or indirectly conferred upon nonprofit corporations organized under the laws of the State of Colorado, except as limited by the Articles of Incorporation and including, without limiting the generality of the foregoing, receiving from any source whatsoever, maintaining and dealing with, in any manner whatsoever, real or personal property or a fund or funds consisting of real or personal property provided, however, that such use be exclusively and irrevocably applied to the tax exempt purposes of the Corporation.

C. Restrictions Upon the Powers of Directors and Others.

- 1. No part of the net earnings of the Corporation shall inure to the benefit of any director or officer of the Corporation or any other private individual (except that reasonable payments may be paid for expenses incurred and services performed on behalf of the Corporation affecting one or more of its purposes), and no director or officer of the Corporation, or any other private individual shall be entitled to share in any distribution of any of the corporate assets on dissolution of the Corporation or otherwise. Any and all property, both real and personal, which may be owned by this Corporation at any time, is and shall always be exclusively and irrevocably dedicated to the exempt purposes of this Corporation. No substantial part of the activities of the Corporation shall consist of carrying on propaganda, or otherwise attempting to influence legislation. The Corporation shall not participate or intervene in (including the publication or distribution of statements) any political campaign on behalf of or in opposition to any candidate for public office.
- 2. No part of the assets of the Corporation shall be contributed to any organization whose net earnings or any part thereof inure to the benefit of any private individual or any substantial part of the activities of which consists of carrying on propaganda or otherwise attempting to influence legislation, if such contribution would not be permitted to be made (i) by a corporation exempt from Federal income tax under Section 501(c)(3) of the Code (or the corresponding provision of any future United States Internal Revenue law) and (ii) by a corporation described in Sections 170(c)(2), 2055(a)(2), 2106(a)(2)(A)(ii), 2522(a)(2) or 2522(b)(2) of the Code (or the corresponding provisions of any future United States Internal Revenue law).
- 3. Notwithstanding any other provision of these Articles, the Corporation shall not carry on any activities not permitted to be carried on (i) by a corporation exempt from Federal income tax under Section 501(c)(3) of the Code (or the corresponding provision of any future United States Internal Revenue law), and (ii) by a corporation described in Sections 170(c)(2), 2055(a)(2), 2106(a)(2)(A)(ii), 2522(a)(2) or 2522(b)(2) of the Code (or the corresponding provisions of any future United States Internal Revenue law).
- 4. Upon dissolution of the Corporation, the assets of the Corporation shall be disposed of according to the procedure outlined in the Colorado Revised Statutes Section ("C.R.S. §") 7-133-102(2) and Article 134 of the Colorado Revised Nonprofit Corporation Act.

After the liabilities of the Corporation have been discharged or provided for the Corporation's remaining assets shall be disposed of exclusively to such organization or organizations then qualified as exempt from taxation under Section 501(c)(3) of the Code or to a qualified governmental unit described in Section 170(c)(1) (or the corresponding provision of any future United States Internal Revenue law), as is determined by the then-acting Board of Directors. If such determination cannot be made for any reason, such determination shall be made by the District Court in and for Weld County, Colorado, exclusively for such purposes of the Corporation or to such organization or organizations or governmental unit or units as said court shall determine, which are organized and operated exclusively for such purposes.

- 5. Notwithstanding any other provision of these Articles of Incorporation, the Corporation shall:
- a. Distribute its income for each taxable year at such time and in such manner as not to subject the Corporation to tax under Section 4942 of the Code (or the corresponding provision of any future United States Internal Revenue law);
- b. Not engage in any act of self-dealing, as defined in Section 4941(d) of the Code (or the corresponding provision of any future United States Internal Revenue law);
- c. Not retain any excess business holdings, as defined in Section 4943(c) of the Code (or the corresponding provision of any future United States Internal Revenue law);
- d. Not make any investments in such manner as to subject the Corporation to tax under Section 4944 of the Code (or the corresponding provision of any future United States Internal Revenue law); and
- e. Not make any taxable expenditures, as defined in Section 4945(d) of the Code (or the corresponding provision of any future United States Internal Revenue law).

ARTICLE IV BOARD OF DIRECTORS

The control and management of the affairs of the Corporation and of the disposition of its funds and property shall be vested in a Board of Directors. The number of directors, their terms of office and the manner of their selection and election shall be determined according to the Bylaws of the Corporation from time to time in force.

ARTICLE V INITIAL PRINCIPAL OFFICE, REGISTERED OFFICE AND REGISTERED AGENT

- A. The address of the principal office of the Corporation is 1801 16th Street, Greeley, CO 80631.
- B. The address of the registered office of the Corporation is 1700 Lincoln Street, Suite 2000, Denver, CO 80203. The name of the registered agent at such address is Spenserv-RP, Inc., which has consented to such appointment.

ARTICLE VI MEMBERS STOCKHOLDERS AND VOTING

The Corporation shall have no voting members. The entire voting power for all purposes shall rest in the Board of Directors. The Corporation shall have no capital stock or stockholders.

ARTICLE VII BYLAWS

The Bylaws of the Corporation have been adopted by the Board of Directors. The Board of Directors shall have the power to alter, amend or repeal the Bylaws. Such Bylaws may contain any provisions for the regulation or management of the affairs of the Corporation which are not inconsistent with the law or these Articles of Incorporation, as the same may from time to time be amended. However, no bylaw at any time in effect, and no amendment to the Articles, shall have the effect of giving any director or officer of the Corporation any proprietary interest in its property or assets whether during the term of its existence or as an incident to its dissolution.

ARTICLE VIII INDEMNIFICATION AND LIMITATION ON DIRECTOR LIABILITY

A. <u>Indemnification; Generally</u>. The Corporation may indemnify its directors, officers, employees, agents, and fiduciaries for liabilities incurred by such directors, officers, employees, agents, or fiduciaries in their capacity as such to the fullest extent permitted by the Colorado Revised Nonprofit Corporation Act and as may further be set forth in the Bylaws of the Corporation.