Extended to May 15, 2019

990

Department of the Treasury

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.

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

A For the 2017 calendar year, or tax year beginning JUL 1, 2017 and ending JUN 30, and ending JUN 30, 2018 Open to Public Inspection

OMB No. 1545-0047

Pueblo School for Arts and Sciences 45-1559426	В	Check if applicable	C Name of organization		D Employer identific	cation number			
Cong business as Number and street (or P.O. box if mails not delivered to street address) Room/built E Telephone number 719 - 404 - 2680 City or town, state or province, country, and 2iP or foreign postal code Publish West CO 81007 High pu		∏Ąddre	Buoble Cabool for Arta and Caionaga						
Number and street (or P.D. box if mail is not delivered to Street address) Soundstate Pueblo P	H	□Name			1 15_1	550126			
Page	F	Initial	· ·	Daama/auita					
City or town, state or province, country, and 2IP or foreign postal code City or town, state or province, country, and 2IP or foreign postal code City or town, state or province, country, and 2IP or foreign postal code City or town, state or province, country, and 2IP or foreign postal code City or town, state or province, country, and 2IP or foreign postal code City or town, state or province, country, and 2IP or foreign postal code City or town, state or province, country, and 2IP or foreign postal code City or town, state or province, country, and 2IP or foreign postal code City or town, state or province, country, and 2IP or foreign postal code City or town, state or province, country, and 2IP or foreign postal code City or town, state or province, country, and 2IP or foreign postal code City or town, state or province, country, and 2IP or foreign postal code City or town, state or province, country, and 2IP or foreign postal code City or town, state or province, country, and 2IP or foreign postal code City or town, state or province, country, and 2IP or foreign post code City or town, state or province, country, and 2IP or foreign post code City or town, state or province, country, and 2IP or foreign post code City or town, state or province, country, and 2IP or foreign post code City or town, state or province, country, and 2IP or foreign post code City or town state or province City or town state City or	H	=		Room/suite					
Pueblo West., CO 81007 H(a) is this a group return for subordinates? Yes X No man and address of principal officer. James Olonia H(a) is this a group return for subordinates? Yes X No man and address of principal officer. Yes X No man and addr		—return termir	_						
Same and address of principal officer/James Olonia Months Mo					-				
Same as C above National Same as C above N	F	Applic		_					
Tax-exempt status: X 501(c)(3)	_	tion pendi		—					
Website: https://sites.google.com/psas.ws/main/home Hcj Group exemption number	_	Toy ov		r 527					
Part Summary					-				
Part Summary									
Briefly describe the organization's mission or most significant activities: Pueblo School for Arts and Sciences (PSAS) is a tuition-free charter school Through its 2 check this box Published the programation discontinued its operations or disposed of more than 26% of its net assets. 3 Number of independent voting members of the governing body (Part VI, line 1b)				L I Gai	oriorniation. ZOTI	State of legal dofficile.			
Sciences (PSAs) is a tuition-free charter school. Through its Check this box				lo Sch	ool for Art	s and			
B Net unrelated business taxable income from Form 990-T, line 34 To Unrelated Policy Page Current Year	nce	'	Sciences(PSAS) is a tuition-free charter	schoo	1. Through	its			
B Net unrelated business taxable income from Form 990-T, line 34 To Unrelated Policy Page Current Year	na	2							
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B Net unrelated business taxable income from Form 990-T, line 34 To Unrelated Policy Page Current Year	Ğ	1			·····	7			
B Net unrelated business taxable income from Form 990-T, line 34 To Unrelated Policy Page Current Year	တ္တ				·····	93			
B Net unrelated business taxable income from Form 990-T, line 34 To Unrelated Policy Page Current Year)ŧį				·····	300			
B Net unrelated business taxable income from Form 990-T, line 34 To Unrelated Policy Page Current Year	Ę					0.			
Prior Year Current Year 502,451. 476,896. 9 Program service revenue (Part VIII, line 2g) 3,271,262. 4,529,110. 10 Investment income (Part VIII, column (A), lines 3,4) and 7d) 7,359. 3,429. 10 their revenue (Part VIII, column (A), lines 5,60 & 50,970c, and 11e) 0. 89,393. 10 their revenue (Part VIII, column (A), lines 5,60 & 50,970c, and 11e) 0. 89,393. 13 Grants and similar amounts paid (Part IX, column (A), lines 613) 0. 0. 0. 0. 0. 0. 0. 0.	⋖					0.			
9						Current Year			
9	Φ	8	Contributions and grants (Part VIII, line 1h)		502,451.				
11 Other revenue (Part VIII, column (A), lines 5, 64 8c, 9c, 70c, and 11e) 3,781,072. 5,098,828.	'n	9			3,271,262.				
11 Other revenue (Part VIII, column (A), lines 5, 64 8c, 9c, 70c, and 11e) 3,781,072. 5,098,828.	eve	10			7,359.	3,429.			
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	Œ				-				
14 Benefits paid to or for members (Part IX, column (A), line 4) 0		12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,781,072.	5,098,828.			
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 2,406,363. 6,231,155. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 0. 17 Other expenses (Part IX, column (A), lines 13-17 (nust equal Part IX, column (A), line 25) 5,420,462. 8,095,828. 19 Revenue less expenses. Subtract line 18 from line 12 5,420,462. 8,095,828. 19 Revenue less expenses. Subtract line 18 from line 12 6,306,803. 6,713,873. 20 Total assets (Part X, line 16) 8eginning of Current Year End of Year 21 Total liabilities (Part X, line 26) 11,597,288. 15,303,431. 22 Net assets or fund balances. Subtract line 21 from line 20 -5,290,485. -8,589,558. Part II Signature Block Signature Block		13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			0.			
16a Professional fundraising fees (Part IX, Column (A), line 11e) 0 .		14	Benefits paid to or for members (Part IX, column (A), line 4)						
Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses. Subtract line 18 from line 12 Total assets (Part X, line 16) Total assets (Part X, line 16) Total assets (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Print/Type preparer's name Print/Type preparer's name Print/Type preparer's name Print/Type preparer's name Preparer Firm's name Hoelting & Company, Inc. Firm's name Hoelting & Company, Inc. Firm's address 31 E Platte Ave, Ste 300 Colorado Springs, CO 80903 Phone no.719-630-1091	es								
Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses. Subtract line 18 from line 12 Total assets (Part X, line 16) Total assets (Part X, line 16) Total assets (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Print/Type preparer's name Print/Type preparer's name Print/Type preparer's name Print/Type preparer's name Preparer Firm's name Hoelting & Company, Inc. Firm's name Hoelting & Company, Inc. Firm's address 31 E Platte Ave, Ste 300 Colorado Springs, CO 80903 Phone no.719-630-1091	èus				0.	0.			
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19 Revenue less expenses. Subtract line 18 from line 12 -1,639,3902,997,000.	ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)						
Beginning of Current Year End of Year 6,306,803. 6,713,873. 6,713,873. 6,306,803. 6,713,873. 11,597,288. 15,303,431. 15,303,431.		1							
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Here James Olonia , President Type or print name and title Print/Type preparer's name Thomas G. Sistare Preparer Firm's name	. (/	19	Revenue less expenses. Subtract line 18 from line 12						
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Sign Here James Olonia , President Type or print name and title Print/Type preparer's name Thomas G. Sistare Preparer Use Only Firm's address 31 E Platte Ave, Ste 300 Colorado Springs, CO 80903 Pate Date Check PTIN FIRM's Address 30 - 0514455 Firm's EIN 30-0514455 Phone no.719-630-1091						kilowieuge allu bellel, it is			
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Type or print name and title Print/Type preparer's name Thomas G. Sistare Preparer Firm's name Hoelting & Company, Inc. Firm's address 31 E Platte Ave, Ste 300 Colorado Springs, CO 80903 Proparer Type or print name and title Preparer's signature Date Check PTIN if self-employed P00356968 Firm's EIN 30-0514455 Phone no.719-630-1091									
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Use Only Firm's address 31 E Platte Ave, Ste 300 Colorado Springs, CO 80903 Phone no.719-630-1091									
Colorado Springs, CO 80903 Phone no.719-630-1091		•			THIII 3 LIN				
- • ·		,			Phone no. 71	9-630-1091			
	Ma	y the II			1	Yes X No			

Form	1990 (2017) Pueblo School for Arts and Sciences	45-1559426 Page 2
Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>
1	Briefly describe the organization's mission: None	
	Did the examination undertake any significant program convices during the year which were not listed on the	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	77
	prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	Tes [21] NO
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services.	ces? Yes X No
Ū	If "Yes," describe these changes on Schedule O.	100
4	Describe the organization's program service accomplishments for each of its three largest program service	es, as measured by expenses.
-	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	
	revenue, if any, for each program service reported.	, ,
4a	(Code:) (Expenses \$ 6,222,040 • including grants of \$) (Revenue \$ 4,618,503.
	The Pueblo School for Arts and Sciences is the 3rd ol	
	School in the state of Colorado, celebrating its 22nd	
	operation. Our vision is to be an exemplary education	
	teaches skills and provides opportunities, inspiring	
	creative, competent, productive, lifelong learners. P	
	an integrated K-8 curriculum based on Paideia princip	
	in the Arts and Sciences for the success of all stude	ents.
4h	(Code:) (Expenses \$ including grants of \$) (Revenue \$
TD.	(Code) (expenses \$	nevenue s
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$\frac{1000}{1000} \text{including grants of \$}\frac{1000}{1000} \text{(Revenue \$}\frac{1000}{1000} (Reve)
<u>4e</u>	Total program service expenses ► 6 , 222 , 040 .	- 222
		Form 990 (2017)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	•		Х
	public office? If "Yes," complete Schedule C, Part I	3		Λ
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>	4		х
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		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
•	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			l
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in		37	
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			37
	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		x
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	IZa		
D	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
-	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			177
	complete Schedule G, Part III	19		X

Form 990 (2017) Pueblo School for Arts and Sciences Part IV Checklist of Required Schedules (continued)

			Yes	NO
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			l
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			l
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			١
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			3.7
	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):			v
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			l 🕶
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			l 🕶
0.4	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			x
00	If "Yes," complete Schedule N, Part I	31		
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
22		32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	22		x
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		
34		34		x
250		35a		X
35a h	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	33a		
D	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330		\vdash
30	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
<i>51</i>	and the trick and a constraint in factor and in a constraint and the trick and the Cabadada D. Dort VII.	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	"		 -
50	Note. All Form 990 filers are required to complete Schedule O	38	Х	
		,		

Form 990 (2017) Pueblo School for Arts and Sciences Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response of note to any line in this part v					Ш
					Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	11			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re					
	(gambling) winnings to prize winners?		 I	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	_	0.2			
	filed for the calendar year ending with or within the year covered by this return	2a	93		v	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns the control of t			2b	Х	
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions					v
				3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a		• •			х
	financial account in a foreign country (such as a bank account, securities account, or other financial a	accou	nt)?	4a		Λ
D	If "Yes," enter the name of the foreign country:		-t- (FDAD)			
E-0	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A			E.		Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a 5b		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa			5c		21
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			5C		
Va				6a		Х
h	If "Yes," did the organization include with every solicitation an express statement that such contributions.		or gifts	0a		
b	were not tax deductible?	10113	or girts	6b		
7	Organizations that may receive deductible contributions under section 170(c).			OD		
и а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices r	provided to the payor?	7a		X
			novidud to the payor.	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					
Ĭ	to file Form 8282?			7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c		ct?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr			7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained					
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:		ı			
	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		? 	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			40		
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the	40:	ı			
_	organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand	13c	l	44-		X
				14a		Λ
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	eυ		14b		

Form 990 (2017)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

				X
<u></u>	Check if Schedule O contains a response or note to any line in this Part VI			Δ
Sec	tion A. Governing Body and Management		.,	
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	-		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			,,,
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
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		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b		Х
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	•		•
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	- 10.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120		
·		12c	Х	
13		13	X	
14	Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?	14		Х
	Did the process for determining compensation of the following persons include a review and approval by independent			
15				
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45-	Х	
	The organization's CEO, Executive Director, or top management official	15a	21	Х
D	Other officers or key employees of the organization	15b		
40	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			х
	taxable entity during the year?	16a		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶CO			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	The Organization - 719-404-2680			
	2415 Jones Avenue, Pueblo, CO 81004			

Form 990 (2017)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

X Check this box if neither the organization n	or any related	orga	aniza	ation	cor	mpe	nsat	ed any current officer, o	director, or trustee.	
(A)	(B)	Ĭ		(0	C)			(D)	(E)	(F)
Name and Title	Average	(do	not c	Posi	ition) than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ess per	rson	is bot	h an	compensation	compensation	amount of
	week		Cer ai	lu a u	II ecit)/ ii us	1	from	from related	other
	(list any hours for	Individual trustee or director						the organization	organizations (W-2/1099-MISC)	compensation from the
	related	3e or 0	stee			ısatec		(W-2/1099-MISC)	(***271099*****100)	organization
	organizations	truste	al trus		yee	mper				and related
	below	idual	Institutional trustee	La l	Key employee	est co loyee	Je.			organizations
	line)	Indi	Insti	Officer	Key	Highest compensated employee	Former			
(1) James Olonia	3.00								_	_
President		Х		Х		1		0.	0.	0.
(2) Patrick Samora	3.00						—			
Vice President		Х		X				0.	0.	0.
(3) Joanne Ballard	3.00		\ \ \							
Treasurer		Х		X				0.	0.	0.
(4) Jennifer Chavez	3.00)				•	
Secretary	0.00	X		Х				0.	0.	0.
(5) Derrick Martinez	2.00								•	
Member	0 00	X		Ш				0.	0.	0.
(6) Kevin Parker	2.00	77						0	0	•
Member	2 00	Х						0.	0.	0.
(7) Troy Harris	2.00	٠,,						_	0	•
Member		Х		Ш				0.	0.	0.
				\vdash						
				Ш						

732007 11-28-17 Form **990** (2017)

(A)	(B)			(C	•			(D)	(E)			F)
Name and title	Average hours per	Position (do not check more than one						Reportable	Reportable			nated
	week			ss pers ıd a dir				compensation from	compensation from related			unt of her
	(list any	ctor						the	organization			ensation
	hours for	or director	au au			ited		organization	(W-2/1099-MIS	SC)		n the
	related organizations	ustee	truste		9	suadı		(W-2/1099-MISC)				nization related
	below	Individual trustee or	Institutional trustee	_	Key employee	st con	<u>ش</u>					izations
	line)	Indivi	Institu	Officer	Key eı	Highest compensated employee	Former					
								4				
									•			
						1						
1b Sub-total				.)		0.		0.		0.
c Total from continuation sheets to Par		· · · · · ·					>	0.		0.		0.
d Total (add lines 1b and 1c) 2 Total number of individuals (including but							>		000 of reported			0.
compensation from the organization		iose	IISLE	eu ab	OVE	e) WI	10 16	eceived more than \$100	,000 or reportab	ie		0
<u> </u>	_										Y	es No
3 Did the organization list any former office			e, ke	y em	nplo	yee,	or l	highest compensated e	mployee on			
line 1a? If "Yes," complete Schedule J fo											3	X
For any individual listed on line 1a, is the and related organizations greater than \$											4	х
5 Did any person listed on line 1a receive											4	
rendered to the organization? If "Yes," c					-						5	Х
Section B. Independent Contractors												
1 Complete this table for your five highest the organization. Report compensation										npens	ation fro	m
(A)	ior trie caleridar y	ear	enai	ng w	illi (OI W	101111	(B)	year.		(C)	
Name and busine	ess address	N	ONE	3				Description of s	ervices	С	compens	ation
2 Total number of independent contractor		ot li	mite	d to t			sted	I above) who received m	nore than			
\$100,000 of compensation from the org	anization >)					- 0	20 (2017)

	IL VII	Check if Schedule O contains a response	or note to anv li	ne in this Part VIII			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns 1a					
Gra Iou	b	Membership dues1b					
ts, (С	Fundraising events1c					
Giff	d	Related organizations1d					
ıs,	е	Government grants (contributions) 1e	331,521.				
er S	f	All other contributions, gifts, grants, and					
ig K		similar amounts not included above 1f	145,375.				
ontr od C	g	Noncash contributions included in lines 1a-1f: \$		1=6.006			
<u>ā č</u>	h	Total. Add lines 1a-1f		476,896.			
		D D	Business Code		4 400 254		
ice		Per Pupil Revenue	611110	4,489,254.	4,489,254. 39,856.		
erv ue	b	Pupil Activties	911110	39,830.	39,000.		
m S	С						
gra Re	d						
Program Service Revenue	e	All allers are a series and a series and a series are a series and a series are a series and a series are a series are a series and a series are a s					
_	Τ	All other program service revenue		4,529,110.			
	<u>g</u> 3	Total. Add lines 2a-2f		4,525,110.			
	3	other similar amounts)		3,429.			3,429.
	4	Income from investment of tax-exempt bond		37.123.			3,123,
	5	Royalties			*		-
		(i) Real	(ii) Personal				
	6 a		(.,,	1			
		Less: rental expenses		-			
		Rental income or (loss)					
		Net rental income or (loss)					
		Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory					
	b	Less: cost or other basis					
		and sales expenses					
	С	Gain or (loss)					
	d	Net gain or (loss)	. <u></u>				
ne	8 a	Gross income from fundraising events (not					
/en		including \$ of					
Other Revenu		contributions reported on line 1c). See					
ЭĒ		Part IV, line 18	1	_			
₽		Less: direct expenses b	·				
		Net income or (loss) from fundraising events	>				
	9 a	Gross income from gaming activities. See					
	h	Part IV, line 19 at Less: direct expenses but the series at Less and the series at Less at Less and the series at Less and the series at Less at Le		_			
		Gross sales of inventory, less returns	D				
	10 4	and allowancesa					
	b	Less: cost of goods sold					
		Net income or (loss) from sales of inventory	—				
		Miscellaneous Revenue	Business Code				
	11 a	Insurance Recoveries	611110	57,609.	57,609.		
	b	Miscellaneous Revenue	611110	31,784.	31,784.		1
	С						
	d	All other revenue					
	е	Total. Add lines 11a-11d	>	89,393.			
	12	Total revenue. See instructions.		5,098,828.	4,618,503.	0.	3,429.

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 (D) Do not include amounts reported on lines 6b. Total expenses Program service expenses Management and general expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 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) 2,552,119. 1,914,089. 638,030. 7 Other salaries and wages Pension plan accruals and contributions (include 718,649. 2,874,595. 2,155,946. section 401(k) and 403(b) employer contributions) 804,441. 603,331. 201,110. Other employee benefits 9 10 Payroll taxes Fees for services (non-employees): a Management 77,262. 77,262. Legal 35,291. 35,291. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other, (If line 11g amount exceeds 10% of line 25, 20,000. 20,000. column (A) amount, list line 11g expenses on Sch O.) 3,875. 3,294. 581. Advertising and promotion 12 39,565. 33,630. 5,935. Office expenses 13 Information technology 14 Royalties 15 159,753. 28,192. 187,945. 16 Occupancy 52,386. 44,528. 7,858. Travel 17 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 21 Payments to affiliates 63,254. 63,254. Depreciation, depletion, and amortization 22 38,872. 33,041. 5,831. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 533,368. Purchased Services 627,492. 94,124. 224,952. Small Equipment 224,952. 220,940. 220,940. Instructional Supplies 16,355. d Educational Services 109,031. 92,676. 24,570. 139,238. 163,808. e All other expenses 8,095,828. 6,222,040. 1,873,788. 0. Total functional expenses. Add lines 1 through 24e 25 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)

Form 990 (2017)
Part X Balance Sheet

	(B) End of year
L. 1	1,030,175.
2	
3	62,046
5 4	0.
5	
6	
7	
8	
9 9	
3 • 10c	773,285
11	
12	
13	
14	
15	4,848,367
3 • 16	6,713,873
j • 17	438,182
18	05.445
L • 19	27,445
20	
21	
22	
23	
24	
2. 25	14,837,804.
	15,303,431
3 • 26	13,303,431
5 . 27	-8,734,208.
) • 28	144,650
29	144,030
29	
20	
-	+
_	1
	-8,589,558
	6,713,873
5 .	

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI				Ш	
1 2 3 4 5 6 7 8 9	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain in Schedule O)	1 2 3	5,09 8,09 -2,99 -5,29	8,8 5,8 7,0 0,4	28. 00. 85.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	40	-8,58	a 5	5.8	
Pai	rt XII Financial Statements and Reporting	10	-0,50	9,5	50.	
ı u	Check if Schedule O contains a response or note to any line in this Part XII				X	
	Officer if Octredule O Contains a response of flote to any line in this flat Air			Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.				
2a						
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	d on a				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х		
С	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat consolidated basis, or both: Separate basis Consolidated basis X Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the					
•	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si					
	Act and OMB Circular A-133?	-	За		Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired audit				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b			

Form **990** (2017)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

Name of the organization

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Pueblo School for Arts and Sciences 45-1559426 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 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, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 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 university: 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.) 11 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 12 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. 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 III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
	tion B. Total Support					•	
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4						
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instructi	ons)			12	
13	First five years. If the Form 990 is for	the organization's	s first, second, thi	rd, fourth, or fifth t	ax year as a section	on 501(c)(3)	
	organization, check this box and stop	here					>
Sec	tion C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2017 (I					14	%
15	Public support percentage from 2016	Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2017. If the o	-					
	stop here. The organization qualifies						
b	33 1/3% support test - 2016. If the o						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac			=	=	-	
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances tes	_					
	more, and if the organization meets the						e
	organization meets the "facts-and-circ						▶∐
18	Private foundation. If the organizatio	n did not check a	box on line 13, 16	6a, 16b, 17a, or 17	b, check this box	and see instructior	ns ▶Ш

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

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

Se	qualify under the tests listed be ction A. Public Support	low, please comp	olete Part II.)				
	endar year (or fiscal year beginning in)	(a) 2012	(b) 2014	(a) 2015	(4) 2016	(a) 2017	(f) Total
	Gifts, grants, contributions, and	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
٠	membership fees received. (Do not						
	include any "unusual grants.")						
•							
2	Gross receipts from admissions, merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the						
_	organization's tax-exempt purpose	-					
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
_	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 5						
7	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
t	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						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support				•		
	endar year (or fiscal year beginning in) 🖊	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources						
ŀ	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
(Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization's	s first, second, thi	rd, fourth, or fifth t	ax year as a section	on 501(c)(3) organiz	zation,
	check this box and stop here						<u></u>
Se	ction C. Computation of Publi	c Support Pe	rcentage				
15	Public support percentage for 2017 (lii	ne 8, column (f) d	ivided by line 13,	column (f))		15	%
16	Public support percentage from 2016	Schedule A, Part	III, line 15			16	%
Se	ction D. Computation of Inves	tment Incom	e Percentage)			
17	Investment income percentage for 20	17 (line 10c, colur	nn (f) divided by li	ne 13, column (f))		17	%
18	Investment income percentage from 2	016 Schedule A,	Part III, line 17			18	%
	a 33 1/3% support tests - 2017. If the					33 1/3%, and line	17 is not
	more than 33 1/3%, check this box an						
ŀ	33 1/3% support tests - 2016. If the						
	line 18 is not more than 33 1/3%, chec						
20	Private foundation. If the organization						

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 (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
	1		
	2		
	3a		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5с		
	6		
	7		
	8		
	9a		
	9b		
	0.0		
	9с		
	10a		
	.54		
	10b		
n 9	90 or 99	90-EZ)	2017

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

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			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally	integr	ated Type III supporting orga	anization (see

instructions).

Schedule A (Form 990 or 990-EZ) 2017

	and 4c.		
3	Breakdown of line 7:		
а	Excess from 2013		
b	Excess from 2014		
С	Excess from 2015		
d	Excess from 2016		

Schedule A (Form 990 or 990-EZ) 2017

Part VI. See instructions.

e Excess from 2017

Excess distributions carryover to 2018. Add lines 3j

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

Name of the organization

Employer identification number

Pueblo School for Arts and Sciences

45-1559426

Organization type (check one):						
Filers of:	Section:					
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
Note. Only a section sorte	((/), (o), or (10) organization can check boxes for both the General Auteand a Special rule. See instructions.					
General Rule						
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special Rules						
sections 509(a)(1) any one contribute	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from or, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; I, line 1. Complete Parts I and II.					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
year, contributions is checked, enter purpose. Don't co	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the seculusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box here the total contributions that were received during the year for an exclusively religious, charitable, etc., mplete any of the parts unless the General Rule applies to this organization because it received nonexclusively le, etc., contributions totaling \$5,000 or more during the year					
but it must answer "No" or certify that it doesn't meet	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), a Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					
LHA For Paperwork Red	uction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)					

Name of organization Employer identification number

Pueblo School for Arts and Sciences

45-1559426

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	R.M. Watts Foundation 37 Calle Del Sol Pueblo, CO 81008	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Garone-Nicksich Foundation	1	Person X Payroll
	37 Calle Del Sol Pueblo, CO 81008	\$ 10,000.	Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	Daniels Fund 101 Monroe Street Denver, CO 80206	\$ 76,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Denver Foundation 55 Madison Street, 8th Floor Denver, CO 80206	\$ 20,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	El Pomar 10 Lake Circle Colorado Springs, CO 80906	\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Pueblo School for Arts and Sciences

45-1559426

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	990 990.E7 or 990.PE\ (2017)

Name of organization Employer identification number 45-1559426 Pueblo School for Arts and Sciences Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations Part III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (b) Purpose of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

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

Pueblo School for Arts and Sciences

Employer identification number 45-1559426

Pai			ds or Accounts.Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e o. (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 v	writing that the assets held in donor adv	rised funds
	are the organization's property, subject to the organization's	· · · · ·	
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpos	se conferring
	impermissible private benefit?		Yes No
Pai	rt II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990	, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	ducation) Preservation of a his	storically important land area
	Protection of natural habitat	Preservation of a ce	ertified historic structure
	Preservation of open space		•
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	n of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 7/25/06, and not on a historic struc	cture
	listed in the National Register		
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by t	he organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas		_
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing co	nservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserv	vation easements during the year
_	\$		
8	Does each conservation easement reported on line 2(d) abov	•	
_		to the second of	
9	In Part XIII, describe how the organization reports conservation	·	
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describe	s the organization's accounting for
Pai	conservation easements. rt III Organizations Maintaining Collections of	f Art Historical Treasures or	Other Similar Assets
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		ement and halance sheet works of art
	historical treasures, or other similar assets held for public exh	•	•
	the text of the footnote to its financial statements that describ		rance of public convice, provide, in a drawin,
b	If the organization elected, as permitted under SFAS 116 (AS		ent and balance sheet works of art, historical
-	treasures, or other similar assets held for public exhibition, ed		
	relating to these items:		and an income
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
			L A
2	If the organization received or held works of art, historical trea		
_	the following amounts required to be reported under SFAS 1:		J , p
а	Revenue included on Form 990, Part VIII, line 1	•	> \$
	Assets included in Form 990, Part X		

Par	rt III Organizations Maintaining Co	ollections of Ar	t, Hist	orical Tr	reasures, o	r Other	r Simila	r Asse	ts (contii	nued)	
3	Using the organization's acquisition, accession	n, and other record	s, check	any of the	following that	t are a sig	nificant u	se of its	collectio	n item	s
	(check all that apply):										
а	Public exhibition	d	<u> </u>	oan or exc	change progra	ıms					
b	Scholarly research	е		Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	llections and explair	n how the	ey further t	the organizatio	on's exem	npt purpos	se in Parl	t XIII.		
5	During the year, did the organization solicit or	receive donations of	of art, his	torical trea	asures, or othe	er similar a	assets		_		
	to be sold to raise funds rather than to be ma							L	Yes		No
Par	rt IV Escrow and Custodial Arrang reported an amount on Form 990, Part		ete if the	organizatio	on answered "	Yes" on F	Form 990,	Part IV,	line 9, oı		
1a	Is the organization an agent, trustee, custodia		liary for c	ontribution	ns or other as:	sets not ir	ncluded				
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII a										
									Amoun	t	
С	Beginning balance						1c				
	Additions during the year										
е	Distributions during the year										
f	Ending balance						1f				
2a	Did the organization include an amount on Fo						y?		Yes		No
<u>b</u>	If "Yes," explain the arrangement in Part XIII.										
Par	rt V Endowment Funds. Complete if	the organization an	swered '	Yes" on F	orm 990, Part	IV, line 10).				
		(a) Current year	(b) Pr	ior year	(c) Two years	s back (c	d) Three ye	ars back	(e) Four	years	back
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities			1							
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curre	ent year end balanc	e (line 1ç	յ, column (a)) held as:						
а	Board designated or quasi-endowment	$\overline{}$	_ %								
b	Permanent endowment	%									
С	Temporarily restricted endowment	%									
_	The percentages on lines 2a, 2b, and 2c should be a sh										
За	Are there endowment funds not in the posses	ssion of the organiza	ation tha	are held a	and administer	red for the	e organiza	ation	1	1	
	by:								[a (1)	Yes	No
	(i) unrelated organizations								3a(i)		
									3a(ii)		
b 4	(//	•			·				3b		
Par	Describe in Part XIII the intended uses of the rt VI Land, Buildings, and Equipment		wment ii	unus.							
ı uı	Complete if the organization answered) Part IV	line 11a	See Form 990	Part X li	ine 10				
	Description of property	(a) Cost or of			t or other		cumulated	4	(d) Boo	k valu	
	bescription of property	basis (investr		. ,	(other)		reciation	<u> </u>	(u) B00	value	
1a	Land										
b	Buildings			70	9,284.		61,99	4.	64	7,2	90.
С	Leasehold improvements										
d	Equipment			19	0,198.		64,20	3.	12	5,9	95.
	Other							_			~=
Total	I. Add lines 1a through 1e. (Column (d) must eq	jual Form 990, Part	X, colum	n (B), line	10c.)					3,2	
							_		D /F	0001	0047

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	Net Pension Liabilities	13,937,730.
(3)	Net OPEB Liabilities	318,279.
(4)	Deferred Inflows of Resources	581,795.
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	14,837,804.

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

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Schools

► Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Pueblo School for Arts and Sciences

Employer identification number 45-1559426

		<u> </u>	420	
Pai	tl		YES	N
			TES	IN
ı	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,	١,	x	
	other governing instrument, or in a resolution of its governing body?	1		
	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,		x	
	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2		
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the			
	period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes			
	the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain.		х	
	If you need more space, use Part II The policy is publicized in student enrollment forms, which	3	Α.	
	can be found on the school's website.			
	can be round on the school's website.			
	Does the organization maintain the following?		х	
	Records indicating the racial composition of the student body, faculty, and administrative staff?		X	
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Α_	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student		x	
اہ	admissions, programs, and scholarships?		X	
a	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Α.	
	If you answered "No" to any of the above, please explain. If you need more space, use Part II.			
5	Does the organization discriminate by race in any way with respect to:			
	Students' rights or privileges?	5a		Σ
	Admissions policies?			Σ
c	Employment of faculty or administrative staff?	5c		X
ч	Scholarships or other financial assistance?	5d		X
٠ م	Educational policies?	5e		X
	Use of facilities?			X
G.	Athletic programs?	5g		X
э h	Other extracurricular activities?	5h		Σ
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	0		
	in you answered fires to any or the above, please explain. If you need more space, use Part II.			
3a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Х	
	Has the organization's right to such aid ever been revoked or suspended?	6b		2
-	If you answered "Yes" on either line 6a or line 6b, explain on Part II.			
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of			

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

Schedule E (Form 990 or 990-EZ) 2017

SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

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. Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

Pueblo School for Arts and Sciences

Employer identification number 45-1559426

Form 990, Part I, Line 1, Description of Organization Mission: mission, PSAS teaches a liberal arts education which includes Paideia Seminar, Arts, Foreign Language, and Technology for Kindergarten through 8th grade.

Form 990, Part VI, Section A, line 8b:

There are no committees with authority to act on behalf of the board.

Form 990, Part VI, Section B, line 11b:

Copies of the Form 990 are provided to a representative of the board for approval before filing.

Form 990, Part VI, Section B, Line 12c:

Annual Conflict of interest policies are distributed and signed by all board members. They are collected, reviewed, and filed by the executive director. The executive director reviews the policy annually at board and staff meetings.

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

The executive director's performance and compensation is reviewed annually by the board of director and contract accountant.

Form 990, Part VI, Section C, Line 19:

Documents are made available upon request.

Form 990, Part XII, Line 2c:

Name of the organization Pueblo School for Arts and Sciences	Employer identification number 45-1559426
The board of directors oversees audit services and select	ion of
independent auditors. This has not changed from the prior	year.

Form **8868**

(Rev. January 2017)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

OMB No. 1545-1709

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

	·			Enter file	er's identifying n	umber	
Туре	or Name of exempt organization or other filer, see instructions.			Employe	Employer identification number (EIN) or		
print		- 1			45 4550		
File by t	Pueblo School for Arts and Sciences				45-1559426		
due date filing you	te for Number, street, and room or suite no. If a P.O. box, see instructions. Our 922 E. Hailey Lane Ste B		Social se	Social security number (SSN)			
return. S instructi							
Enter 1	he Return Code for the return that this application is for (file	e a separa	te application for each return)			0 1	
Applic	eation	Return	Application			Return	
ls For		Code	Is For			Code	
Form 9	990 or Form 990-EZ	01	Form 990-T (corporation)			07	
Form 9	990-BL	02	Form 1041-A			08	
Form 4	1720 (individual)	03	Form 4720 (other than individual)			09	
Form 9	990-PF	04	Form 5227			10	
Form 9	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
Form 9	990-T (trust other than above)	06	Form 8870			12	
The Organization • The books are in the care of ▶ 2415 Jones Avenue - Pueblo, CO 81004 Telephone No. ▶ 719-404-2680 • If the organization does not have an office or place of business in the United States, check this box • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) • If this is for part of the group, check this box ▶ □ and attach a list with the names and EINs of all members the extension is for.							
	request an automatic 6-month extension of time until						
for the organization named above. The extension is for the organization's return for: Calendar year							
3a	f this application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069,	enter the tentative tax, less any			0.	
	nonrefundable credits. See instructions.	*					
b	f this application is for Forms 990-PF, 990-T, 4720, or 6069	, enter an	er any refundable credits and				
	estimated tax payments made. Include any prior year overp	ayment a	lowed as a credit.	3b	\$	0.	
	Balance due. Subtract line 3b from line 3a. Include your pa	,	, , ,			•	
	by using EFTPS (Electronic Federal Tax Payment System).	See instru	ctions.	3c	\$	0.	

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2017)