



School of Enterprise Risk Management
August 13–16, 2018
Denver, Colorado

Where should I stay?

Embassy Suites by Hilton Denver Downtown Convention Center

1420 Stout Street
Denver, CO 80202
303.592.1000

Rates at the Embassy Suites by Hilton Denver Downtown Convention Center are \$189 per night for single/double occupancy. Please make your hotel reservations prior to Monday, July 23, 2018, by going [online](#) or calling 303.592.1000 and mentioning Credit Union Executives Society or CUES.

Staying within CUES' room block will help keep room rates down. Hotel arrangements are strictly between you and the hotel. The hotel will accept reservations after July 23rd based on availability; however, rooms may be gone before then so early reservations are recommended.

**Remember that all hotel arrangements are strictly between you and the hotel. In the event your flight is canceled; you are responsible for calling to cancel your room reservation.*

Check-in time is 4:00 p.m., and check-out is 12:00 p.m.

Embassy Suites Hotel provides a complimentary breakfast daily.

Embassy Suites Hotel provides a complimentary evening reception daily from 5:30–7:30 p.m. The reception is located on the 4th Floor Lobby.

Tax Exemption Information

Attendees coming from Federal Credit Unions are entitled to have the room tax waived. These attendees are responsible for presenting their own tax-exempt form at the time of check-in. Please have the form on the last page of this document filled out upon your arrival to receive exemption.

How do I get there?

Airport

Embassy Suites by Hilton Denver Downtown Convention Center is located approximately 27 miles from Denver International Airport ([DEN](#)). Approximate drive time is 40 minutes from the airport to the hotel.

Airport to Hotel

When requesting transportation services at the airport, please head to Level 6. Taxi service is approximately \$68 one way. Uber service is approximately \$40 one way. Lyft is approximately \$30 one way.

Air Travel

CUES conference participants may call Fox World Travel for airfare reservations at 888.691.9163 between 7:30 a.m. and 5:30 p.m. CST and reference Group Code **09FP1344**. Please note that a ticket processing fee of \$37 domestic or \$46 international will be added. CUES does not offer a discounted rate, but Fox World Travel will ensure the best pricing available.

Car Rental

Hertz is the official car rental company for this meeting. You can take advantage of their discounted rates by placing your reservation online at www.hertz.com or through the Hertz Meeting Sales Desk within the U.S. at 800-654-2240; from within Canada call 800-263-0600 refer to Meeting CV# 02ZG0014.

Parking

Valet parking is \$44 per day and self-parking is not available.

When should I arrive?

Registration will be Monday, August 13th from 8:00–8:30 a.m. Class starts at 8:30 a.m. and continues until 4:30 p.m. Monday through Wednesday. Class will conclude at noon on Thursday, August 16th.

What should I pack?

Suggested dress for this seminar is business casual. Although we try to keep meeting room temperatures comfortable, we suggest you bring a sweater or jacket. The temperature in Denver this time of year is in the mid-80s during the day and cools down to mid-50s in the evening.

What will I learn?

Speakers:

Vincent Hui
Senior Director
Cornerstone Advisors, Inc.

Brad Smith
Managing Director, Technology Solutions
Cornerstone Advisors, Inc.

Attendees will learn how to:

- Optimize risk management in key processes like product development, process design and project management
- Improve and inform strategic planning and capital management using ERM
- Provide alternative approaches to regulatory and control requirements without stifling member experience and innovation
- Combine risk, finance and planning to drive more robust business and capital plans, and improve financial performance, even the face of risk-based capital

Attendees will develop actionable steps to use at their credit union through small group exercises, presentations and classroom discussion.

CPEs

- Earn up to 35 CPE Credits
- Program Level: Overview
- Delivery Method: Group-Live
- Field of Study: Business Management & Organization
- Prerequisites: None

Credit Union Executives Society (CUES) is registered with the National Association of State Boards of Accountancy (NASBA) as a sponsor of continuing professional education on the National Registry of CPE Sponsors. State boards of accountancy have final authority on the acceptance of individual courses for CPE credit. Complaints regarding registered sponsors may be submitted to the National Registry of CPE Sponsors through its website: www.nasbaregistry.org.

CPE Credits subject to change without notice

What else do I need to know?

Registration Fee Includes

- All educational sessions and materials
- Lunch Monday–Thursday
- Morning and afternoon refreshments Monday–Thursday (morning refreshments only on Thursday)

If you have any allergies or dietary restrictions please contact Sara Dyer at sarad@cues.org.

Cancellation Policy

ALL CANCELLATIONS MUST BE IN WRITING (cues@cues.org)

- Prior to 60 days – full refund
- 31-60 days before start of event – 50% refund
- 0-30 days before start of event – no refund

Substitute attendees are welcome, subject to eligibility. CUES reserves the right to cancel or reschedule the event due to unforeseen circumstances, and will refund fees if the event is rescheduled or location is changed and you are unable to attend.

Questions

If you have any questions, call CUES Headquarters at 800.252.2664 or outside the U.S. call 608.271.2664, ext 340.



Sales Tax Exemption Certificate Multi - Jurisdiction

See page 2 for instructions

| | | | | |
|--|---------------------------------|--|---------------------------------|--|
| Last Name or Business Name | | First Name | | Middle Initial |
| Address | | | | |
| City | | | State | ZIP |
| I Certify That | | | | |
| Name of Firm (Buyer) | | | | |
| Address | | | | |
| City | | | State | ZIP |
| Qualifies As (Check each applicable item) | | | | |
| <input type="checkbox"/> Wholesaler | | <input type="checkbox"/> Retailer | | <input type="checkbox"/> Manufacturer |
| <input type="checkbox"/> Political Subdivision or Governmental Agency | | <input type="checkbox"/> Charitable or Religious | | |
| <input type="checkbox"/> Other (Specify) | | | | |
| If Other, specify here | | | | |
| 1) and is registered with the below listed states and cities within which your firm would deliver purchases to us | | | | |
| which are for resale or lease by us in the normal course of our business which is or | | | | |
| 2) that such purchases are exempt from payment of sales or use tax in such states and cities because our buyer is: | | | | |
| <input type="checkbox"/> Political Subdivision or Governmental Agency | | <input type="checkbox"/> Charitable or Religious | | <input type="checkbox"/> Otherwise Exempt By Statute (Specify) |
| If Otherwise Exempt By Statute, specify here | | | | |
| City or State | State Registration or ID Number | City or State | State Registration or ID Number | |
| City or State | State Registration or ID Number | City or State | State Registration or ID Number | |
| City or State | State Registration or ID Number | City or State | State Registration or ID Number | |
| If the list of states and cities is more than six(6), attach a list to this certificate. I further certify that if any property so purchased tax free is used or consumed by the firm as to make it subject to a Sale or Use Tax we will pay the tax due direct to proper taxing authority when state law so provides or inform the seller for added tax billing. This certificate shall be part of each order which we may hereafter give to you, unless otherwise specified, and shall be called until canceled by us in writing or revoked by the city or state. | | | | |
| General Description of products to be purchased from seller | | | | |
| Under penalties of perjury, I swear or affirm that the information on this form is true and correct as to every material matter. | | | | |
| Authorized Signature (owner, Partner or Corporate Officer) | | | Title | Date (MM/DD/YY) Ⓢ |



Standard Municipal Home Rule Affidavit of Exempt Sale

This form is provided by home rule municipalities within the State of Colorado to record supporting information for any transaction on which an exemption from tax is claimed. The form is maintained by the seller for tax-exempt sales.

Furnish this form to the seller. Do not return this form to the taxing jurisdiction.

| Purchase Details | | | |
|--|--|-----------------------------|--|
| <input type="checkbox"/> Purchase for resale - or - <input type="checkbox"/> Purchase for wholesale (Qualifications may vary by jurisdiction – see instructions) | | | |
| State license number (not FEIN number): _____ | | Expiration: _____ | |
| Local license number (if applicable): _____ | | Issuing municipality: _____ | |
| <input type="checkbox"/> I affirm items purchased are for resale/wholesale in the ordinary course of business. Initial: _____ | | | |
| <input type="checkbox"/> Purchase by religious or charitable organization (Exemptions may vary by jurisdiction) | | | |
| State tax-exempt number (not FEIN number): _____ | | Issuing municipality: _____ | |
| Local tax-exempt number (if applicable): _____ | | | |
| Payment information (required to meet one of the following): | | | |
| <input type="checkbox"/> Paid by cash and accompanied by a purchase order from the organization | | | |
| <input type="checkbox"/> Paid by check drawn on funds of the exempt organization | | | |
| <input type="checkbox"/> Paid by purchasing card bearing information of the exempt organization | | | |
| The embossed name of the card is: _____ | | | |
| <input type="checkbox"/> Paid by commercial card not a personal credit card - card's last four digits: _____ | | | |
| <input type="checkbox"/> Purchase for federal, state, or local government | | | |
| Credit card number (first six and last four only): _____ - _____ XX-XXXX- _____ | | | |
| Federal government (payment information – required to meet one of the following): | | | |
| <input type="checkbox"/> GSA SmartPay2 card – fleet card with picture of a road and flag | | | |
| <input type="checkbox"/> GSA SmartPay2 card – purchase card with picture of a keyboard and flag | | | |
| <input type="checkbox"/> GSA SmartPay2 card – travel card with picture of an airplane and flag | | | |
| <input type="checkbox"/> GSA SmartPay2 card – integrated card with picture of an eagle and flag | | | |
| <input type="checkbox"/> Dept of Interior agency issued card – agency name: _____ | | | |
| State and local government (payment information – required to meet one of the following): | | | |
| <input type="checkbox"/> Paid by cash and accompanied by purchase order issued by the government agency | | | |
| <input type="checkbox"/> Paid by check issued by and drawn on funds from the government agency | | | |
| <input type="checkbox"/> Paid by government purchase card as designated on the card | | | |
| State tax-exempt number printed on the card (Colorado only): _____ | | | |
| <input type="checkbox"/> Check if the card states "for official state use only" or "tax exempt" | | | |
| <input type="checkbox"/> Purchase for foreign and diplomatic exemptions (required to meet the following): | | | |
| <input type="checkbox"/> Purchaser presents a state department issued card with the name/photo of the bearer on the card. | | | |
| If presented with this card, documentation of form of payment is not required (excluding mission card). | | | |
| <input type="checkbox"/> Other qualified exemption | | | |
| Nature of exemption: _____ | | Exempt number: _____ | |

| Purchaser Information | | | |
|--|--------------------------|--|---------|
| Legal Name of Company/Organization/Agency Name | | Purchaser Name (Printed) | |
| Address | City | State | Zip + 4 |
| Phone | State / Driver License # | Description of Normal Course of Business | |
| Under penalty of perjury, I swear or affirm that the information on this form is true and correct as to every material matter. I affirm that the items purchased tax-exempt will be used for official business of the above-named organization or agency. I accept that I remain directly liable for the taxes and any applicable penalty or interest if my purchase is found to not qualify for the exemption or if the information asserted in this form is deemed fraudulent. | | | |
| Signature | | Date | |

| Seller Verification | | | | |
|--|------------|------|-----------------------------|-------------------------|
| Seller Name | Location # | Date | Transaction ID | Employee ID# / Initials |
| Description of Items Purchased or Attach Duplicate Receipt/Invoice | | | Exempted Amount of Purchase | |



Affidavit of Exempt Event

This form is used by Denver exempt organizations to claim exemption from Denver sales, use or lodger's tax for an event held at a Denver hotel, motel or other event venue. The vendor (hotel, motel or restaurant) is required to maintain a completed form for each tax-exempt sale pertaining to the stated event.

**Furnish this form to the seller. Retain this completed form for your records.
DO NOT RETURN TO THE DENVER TREASURY DIVISION UNLESS REQUESTED.**

Organization/Agency Information

Legal Name of Organization or Agency _____ Website _____
Authorized Representative _____ Phone _____
Address _____ City _____ State _____ Zip _____

Event Information

Name of Event _____ Date of Event _____
Description of Event _____

Exemption Information

The exemption does not apply to food, beverage or lodging where the recipient of the food, beverage or lodging reimburses the organization in any way, such as by the purchase of a ticket, payment of a fee, or making an involuntary contribution.

Basis of Exemption Religious Charitable Governmental

ALL OF THE STATEMENTS BELOW MUST BE TRUE FOR THE PURCHASE TO QUALIFY FOR TAX EXEMPTION

Indicate if all of the following statements are true for this event:

- Yes No The purchase is included under, and is part of, the regular religious or charitable functions and activities of the organization, or is purchased in a governmental capacity.
- Yes No The transaction is billed directly to the organization and payment is made directly from organization funds. (Purchases of food or lodging by individuals do not qualify for the exemption even though the individual will be reimbursed by the organization or government.)
- Yes No The participants at the event have not and will not reimburse the organization in any way for the event such as by purchase of a ticket, payment of a registration fee, or by making an involuntary contribution.

Purchaser Information

Under penalty of perjury, I swear or affirm that the information on this form is true and correct as to every material matter. I affirm that the items purchased tax-exempt will be used for official business of the above-named organization or agency. I accept that I remain directly liable for the taxes and any applicable penalty or interest if my purchase is found to not qualify for the exemption or if the information asserted in this form is deemed fraudulent.

Purchaser's Signature _____ Date _____
Print Name _____ Driver's License # _____ State _____

For Use by Hotel/Motel/Restaurant or Other Vendor to Verify Exemption

This form should be completed in its entirety and retained, together with a completed "Standard Municipal Home Rule Affidavit of Exempt Sale" form and customer's letter of Denver exemption (issued to charitable organizations) for a minimum of four years to assist in documenting an exempt transaction.

Employee's Signature _____ Date _____

Denver Exemption Verified By _____
(Employee's Printed Name)