

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



SCANNED JAN 0 7 2010

Department of the Treasury Internal Revenue Service,

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

➤ The organization may have to use a copy of this return to satisfy state reporting requirements

2008
Open to Public Inspection

A	For the 20	108 calendar year, or tax year beginning 7/01/08, and ending 6/30/09			
	Check if applic		AL	D Emp	oloyer identification number
	Address chang	ge use IRS FOUNDATION, INC.			
$\bar{\Box}$	Name change	label or print or Doing Business As		46	-0340050
\equiv	Initial return	type. Number and street (or P O box if mail is not delivered to street address) Room/suite	ı	E Tele	phone number
二		See Specific 800 MICKELSON DRIVE		60	5-718-3061
\square	Termination	Instruc- City or town, state or country, and ZIP + 4	L	G Gross re	eceipts 512,001
Ш	Amended retur	tions. RAPID CITY SD 57703-2736			
	Application per	nding F Name and address of principal officer	- 1	H(a) Is th	is a group return for
		JOHN PENCE		affili H(b) Are	ates? Yes X No
		SAME		inclu	uded? Yes No
_			-	If "N	lo," attach a list (see instructions)
_	Tax-exemp	t status	\dashv	LIV-\ 0	
		uzation X Corporation Trust Association Other ► L Year of formatio			w exemption number ► M State of legal domicile SD
*******	art I	Summary	<u></u>	7.0	N State of legal doffliche DD
		efly describe the organization's mission or most significant activities:			
m		THE PURPOSE OF THE FOUNDATION IS TO PROMOTE, ASSIST AND			
Governance		EXTEND FINANCIAL SUPPORT TO WESTERN DAKOTA TECHNICAL			
J.	l	NSTITUTE AND THE STUDENTS THEREOF BY PROVIDING			
Š	2 Che	eck this box 🕨 🔲 if the organization discontinued its operations or disposed of more than 25% of its	assets	s	·
95 O	3 Nun	nber of voting members of the governing body (Part VI, line 1a)		3	11
es	4 Nun	nber of independent voting members of the governing body (Part VI, line 1b)		4	11
Activities &	5 Tota	al number of employees (Part V, line 2a)	,	5	0
Act	6 Tota	al number of volunteers (estimate if necessary)		6	11
	1	al gross unrelated business revenue from Part VIII, line 12, column (C)		7a	
	b Net	unrelated business taxable income from Form 990-T, line 34	or Year	7b	Current Year
	8 Con			,604	
Revenue	1	gram service revenue (Part VIII, line 2g)		, , , , ,	
Ver	1	estment income (Part VIII, column (A), lines 3, 4, and 7d)		,146	4,355
æ		er revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		7 =	
			331	,750	512,001
				,374	
		nefits paid to or for members (Part IX column (A) line 4)			
S	15 Sala	aries, other compensation, employee benefits (Part IX, colum) A), lines 5–10)			
enses	16a Prof	fessional fundraising fees (Ret IX column (D) line 35)	<u> 3</u>	,550)
Expe	b Tota	al fundraising expenses (Part IX, column (D), line 25) ▶ 💯 48,080			
Ш		er expenses (Part IX, column (A), mes 11241d, 111, 24t)		,523	
				,447	
<u> </u>	19 Rev	venue less expenses. Subtract line 18 from line 12	ning of	, 303	10,348 End of Year
ets c	20 Tota			,296	
Ass	21 Tota	al liabilities (Part X, line 26)		,793	
Net Assets or Fund Balances	22 Net			,503	
	art II	Signature Block			
		Under penalties of perjury, Leclare that I have examined this return, including accompanying schedules and statement	nts, an	nd to the b	est of my knowledge
		and belief, it is frue, correct, and complete. Declaration of preparer (other than officer) is based on all information of w	nich pr	eparer ha	as any knowledge
Sig		Jan 10 Com			2122109
He	re	Signature of officer		Dat	е
		John A. Carlson Iveusuror			
		Type or print name and title			Preparer's identifying number
Pai	id	Preparer's Significant Signifi	heck ıf elf-	. 5	(ego instructions)
	eparer's	1 1010 1	mploye	T	<u> </u>
	e Only	Firm's name (or yours DO DOY 1770		EIN	<u> </u>
	-	if self-employed), PO BOX 1719 address, and ZIP+4 RAPID CITY, SD 57709-1719		Phone	605-348-8870
May	the IRS 4	discuss this return with the preparer shown above? (see instructions)		no 🕨	Yes No
			7		
		\mathcal{A}	و ا	-24	ĺ
		\supset 1	-	•	!

P	art IV Checklist of Required Schedules			
	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	_
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			7.7
_	Schedule C, Part II	4	-	X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	1 _		
_	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			v
_	Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	1 _		~
	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,"			X
	complete Schedule D, Part III	8_		
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part	1		
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"	٠ _		X
40	complete Schedule D, Part IV	9	x	
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	-	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,			x
12	Parts VI, VII, VIII, IX, or X as applicable	11		
12	Did the organization receive an audited financial statement for the year for which it is completing this return	12	x	
13	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	13		X
14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	14a		X
b	Did the organization maintain an office, employees, or agents outside of the U.S.?	140		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	145		- 25
13	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	13		
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16]	x
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total 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 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Х
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			
	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 questions			
	24b-24d and complete Schedule K If "No," go to question 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year		}	
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		ļ
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified			
	person from a prior year? If "Yes," complete Schedule L, Part I	25b	<u> </u>	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	- 1		

disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III

Form 990 (2008)

27

Part IV Checklist of Required Schedules (continued)

	•		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			
	employee), or an indirect business relationship through ownership of more than 35% in another entity			
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			
	Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
	complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
	professional corporation) doing business with the organization? 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	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			!
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35	<u> </u>	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related		1	
	organization? 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			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37_		X

Form **990** (2008)

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1	1			
	U S Information Returns Enter -0- if not applicable	1a		_		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0	4		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	oortab	le			
	gaming (gambling) winnings to prize winners?	r	1	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax					
	Statements, filed for the calendar year ending with or within the year covered by this return	2a		4		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?		2b	 	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see					
	instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covere	d by				v
	this return?			3a	_	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	_	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a					
	over, a financial account in a foreign country (such as a bank account, securities account, or other fin	anciai		140		x
	account)?			4a		
b	If "Yes," enter the name of the foreign country	Dool				
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign	Dalik				
_	and Financial Accounts			5a	1	x
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction.	tion?		5b		X
b	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity			100		
С	Regarding Prohibited Tax Shelter Transaction?			5c		
6a	Did the organization solicit any contributions that were not tax deductible?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or				
D	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more	than				
_	\$75?			7a		X
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as.				
	required to file Form 8282?			7c	<u> </u>	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	<u> </u>	_		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	erson	al			
	benefit contract?			7e	<u> </u>	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control			7f	-	X
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7 <u>g</u>	-	X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0	C as		İ		.
	required?			7h	ļ	X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sec					
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a spor	rsoring	9		1	x
	organization, have excess business holdings at any time during the year?			8	 	<u> </u>
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.				1	x
а	Did the organization make any taxable distributions under section 4966?			<u>9a</u> 9b	<u> </u>	X
ь	Did the organization make a distribution to a donor, donor advisor, or related person?			30	 	
10	Section 501(c)(7) organizations. Enter	10a	1			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a		7		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	100	<u> </u>	\dashv		
11	Section 501(c)(12) organizations. Enter	11a				
a	Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against	· · · · ·				
b	amounts due or received from them)	11b				
					1	1
122				12a	L	
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form If "Yes," enter the amount of tax-exempt interest received or accrued during the year		?	12a		

Form 990 (2008) WESTERN DAKOTA VOCATIONAL TECHNICAL 46-0340050 Page 6 Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.) Section A. Governing Body and Management Yes No For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions 11 1a Enter the number of voting members of the governing body 11 1b Enter the number of voting members that are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 2 any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct 3 X 3 supervision of officers, directors or trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4 X 5 Did the organization become aware during the year of a material diversion of the organization's assets? 6 Does the organization have members or stockholders? 6 Does the organization have members, stockholders, or other persons who may elect one or more members 7a of the governing body? 7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Яa X a The governing body? X 8b Each committee with authority to act on behalf of the governing body? X 9a Does the organization have local chapters, branches, or affiliates? If "Yes," does the organization have written policies and procedures governing the activities of such chapters, 9b affiliates, and branches to ensure their operations are consistent with those of the organization? Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations 10 X 10 must describe in Schedule O the process, if any, the organization uses to review the Form 990 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies Yes No X 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give X 12b rise to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c describe in Schedule O how this is done 13 Does the organization have a written whistleblower policy? 13 14 Does the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision X The organization's CEO, Executive Director, or top management official? 15a X 15b Other officers or key employees of the organization? 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 X 16a with a taxable entity during the year? b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard 16b the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > SD Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website | Another's website | Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the 20 800 MICKELSON DRIVE SCOTT SCHAIBLE organization >

605-348-4900

SD 57703

RAPID CITY

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- 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 <u>compensated employees</u>, and former such persons

Check this box if the c	organization did not compe	nsate	e an	y offi	icer,	dire	ctor,	trustee, or key employee		
(A)	(B) Average	Dani	tion (C)	that a	nnlu	(D) Reportable	(E) Reportable	(F) Estimated
Name and Title	hours per week	harres and		Former Highest compensated employee Key employee Officer Institutional trustee Individual trustee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations		
CRAIG UHRE DIRECTOR		x						0	0	0
CHERYL CHAPN	IAN	<u></u>		_		┰				
DIRECTOR		x					ļ	0	0	0
ROBIN MILLER									<u>.</u>	
VICE CHAIR		X		X				0	0	0
JEFF PARTRII	GE									
DIRECTOR		X				$oxed{oxed}$		0	0	0
JOHN PENCE										_
CHAIR		X		X		↓		0	0	0
MATTHEW KONE	NKAMP	<u>-</u>								•
DIRECTOR		X	_	_		 	_	0	0	0
ROBIN STAMBA	NUGH	₹.						0		^
DIRECTOR TERRI HAVERI		X				┼─	┢	0	0	0
DIRECTOR	† *	$ \mathbf{x} $						0	o	0
JOHN CARLSON	<u></u>	-		\vdash		+				
SCE/TREASURE		x		\mathbf{x}				O	o	0
WES STORM							\vdash			
DIRECTOR		x						0	0	0
GREG OLESON										
DIRECTOR		X						0	0	0
		_			\vdash	-				
					_					
		\vdash			\vdash					

ra	T VII Section A	t. Officers, Directors, Trus	, lees	s, ne	;y ⊑ı	iibic	yees	, ai	iu nigliesi collipelisateu	Limployees (continued)				
	(A)	(B)	1		(0	C)			(D)	(E)	ŀ	(F)		
	Name and title	Average	Posit	tion (checl	k all t	hat ap	oply)	Reportable	Reportable	E	Estima	ted	
		hours per	익힌	Ins	읔	e e	me JiH	Fo	compensation	compensation	a	moun		
		week	divid	#	Officer	e e	ple	Former	from	from related		othe		
			cto	🙀		를	st c	ä	the	organizations (W-2/1099-MISC)	1	npens		
			72	a t	ŀ	Key employee	omp		organization (W-2/1099-MISC)	(VV-2/1099-WIGC)	I .	from ti ganıza		
			Individual trustee or director	Institutional trustee		"	ens		(** = *********************************		1	nd rela		
				6			Highest compensated employee		İ		oré	ganıza	tions	
			$\vdash\vdash$	<u> </u>	_	┝			<u> </u>		 			
	·		\vdash		_						 			
							_				<u> </u>			
			\vdash			<u> </u>	ļ	_			<u> </u>			
			 	ļ	_	<u> </u>	ļ				 			
			igsqcup		ļ		1				<u> </u>			
						ļ					<u> </u>			
			ш		<u> </u>				<u>.</u>				_	
						ļ.,					<u> </u>			
						_					<u> </u>			
							ļ							
					L			<u> </u>						
1b	Total													
2	Total number of indi	ividuals (including those in	1a) ۱	who	rece	ived	mor	e tha	an \$100,000 in reportable o	compensation from the				
	organization ▶ 0													
											- -		Yes	No
3									oyee, or highest compensati	ted	1			٠,,
		1? If "Yes," complete Sched									-	3		X
4	For any individual lis	sted on line 1a, is the sum	of re	port	able	com	ipens	atio	on and other compensation s," complete Schedule J fo	trom r auch		- 1		
	individual	related organizations grea	ater t	ınan	ΦIO	0,00	0711	16	s, complete schedule 3 to	i Sucii	ĺ	4		х
5		d on line 1a receive or acc	rue (comp	oens	atıor	n fron	n an	ny unrelated organization fo	ır		\neg		
		the organization? If "Yes,										5		X
Sec	tion B. Independent	Contractors												
1			ensa	ted i	nde	pend	lent o	onti	ractors that received more	than \$100,000 of				
	compensation from			_				_		(0)			(0)	
		(A) Name and business address				_			Descrip	(B) tion of services		Cor	(C) npensat	tion
				-										
								_						
								ĺ						
								L_	· · · · · · · · · · · · · · · · · · ·				_	
								1						
								L						
								1						
2	Total number of inde	ependent contractors (incli	ıdınc	tho	se in	1) v	vho r	ece	ived more than \$100,000 ir)		-		
_	compensation from		9	,		٠,٠						0		
DAA	- Simponounon noin	vigamenton P											agn	(2008)

Pa	rt V	III Statement of Rev	enue						
		*				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
S S		E-dd-d	4-						<u> </u>
	1a	Federated campaigns	1a						
Program Service Revenue Contributions, gifts, grants	þ	Membership dues	1b						
ts,	С	Fundraising events	1c						
igi	d	Related organizations	1d _						
S.E	е	Government grants (contributions)	1e						
tio F	f	All other contributions, gifts, grants,							
혈축		and similar amounts not included above	1f	5	07,646	1			
d t	q	Noncash contributions included in lines	la-1f \$		66,706				
a	9		ια-11 Ψ			507,646			
-	<u>h</u>	Total. Add lilles Ta-11			2.4	307,040			
Ž	_				Busn. Code				
eve	2a						 		
e R	b				L				
. <u>S</u>	C								
Ser	d								
톭	е								
g	f	All other program service rev	/enue						
Pr		Total. Add lines 2a-2f			•				
_		Investment income (including	n divider	nds intere		· · · · · · · · · · · · · · · · · · ·			
	3	·	g alviaei	ius, intere	sat, and	4,355			4,355
		other similar amounts)			· · ·	4,333			
	4	Income from investment of to	ax-exem	ipt bona p	roceeds -			··	
	5	Royalties			>				······································
		(ı) Real		(II) P	ersonal				
	6a	Gross Rents				`			
	b	Less rental exps							
	С	Rental inc or (loss)							
	d	Net rental income or (loss)			•	[
		Gross amount from (i) Securit	ies	(11)	Other				
		sales of assets		1					
		other than inventory		 					
	b	Less cost or other							
		basis & sales exps		 					
	С	Gain or (loss)		_		İ			
	d	Net gain or (loss)			•				,
	8a	Gross income from fundraising e	vents		Ì				
ne		(not including \$							
en		of contributions reported on line	1c)						
ev.		See Part IV, line 18	a						
Other Revenu	h	Less direct expenses	b						
Ĕ				. ovente	•	İ			
O				<u>j events</u>			· · · · · · · · · · · · · · · · · · ·		
	9a	Gross income from gaming activi							
		See Part IV, line 19	а	ļ					
	b	Less direct expenses	b	L					
	С	Net income or (loss) from ga	ımıng ad	tivities	<u> </u>				
	10a	Gross sales of inventory, les	s		į	ŀ			
		returns and allowances	а						
	b		b						
		Net income or (loss) from sa	_	venton	•	f			
	_ <u>-c</u>	Miscellaneous Reven		veniory	Busn. Code				
		wiscenatieous Reven	-			1			
	11a								<u> </u>
	b						.		
	С								
	d	All other revenue							
	е	Total. Add lines 11a-11d			▶ \				
	12	Total Revenue. Add lines 1	n, 2g, 3,	4, 5, 6d, 7	7d, 8c,				
		9c, 10c, and 11e			•	512,001	0	0	4,355

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) but are not required to complete columns (B), (C), and (D).

	All other organizations must t	complete column (A) but		(-), (-),	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1					_
	organizations in the U.S. See Part IV, line 21	311,775	311,775		
2					
	the U.S. See Part IV, line 22	85 <u>,</u> 918	85,918		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16			*****	
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	•				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management	4.0		10	
	Legal	10		10 371	
	Accounting	371		3/1	
	Lobbying			·	
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g					
12	• .				
13	Office expenses				
14	Information technology				
15	Royalties			.,	
16	Occupancy	7,199		1,080	6,119
17	Travel			1,000	- 0,220
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials Conferences, conventions, and meetings				
19					
20 21	Interest Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	1,120		1,120	
-5	mountaino				
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below)				
а	PROGRAM SUPPORT EXPENSES	32,277	32,277		
b	CONTRACTED SERVICES	24,768		3,715	
c	PUBLIC RELATIONS	15,389			15,389
d	OTHER	8,038		645	
e	MEETING EXPENSE	5,971		3,583	
f	All other expenses	8,817	2,444		
25	Total functional expenses. Add lines 1 through 24f	E01 650	439,181	14,392	48,080
26	Joint Costs. Check here ▶ If following				
	SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation			1	<u> </u>

<u>P</u>	art >	Balance Sheet					
		•		(A) Beginning of year		(B) End of year	
		<u> </u>	· 	1,321			0.41
	1	Cash—non-interest bearing		135,278	1	159,0	941
	2	Savings and temporary cash investments		210,746	2	196,	
	3	Pledges and grants receivable, net		210,740	3	196,	710
	4	Accounts receivable, net			4		
	5	Receivables from current and former officers, directors,	-		_		
	١.	employees, or other related parties Complete Part II of			_ 5	—	
	6	Receivables from other disqualified persons (as defined					
	İ	4958(f)(1)) and persons described in section 4958(c)(3)((B) Complete		•		
		Part II of Schedule L			6	1	
ets	7	Notes and loans receivable, net			7		
Assets	8	Inventories for sale or use			8	-	
Ä	9	Prepaid expenses and deferred charges	1 1		9_		
	10a		10a	-			
	Ь	Less accumulated depreciation Complete		1			
		Part VI of Schedule D	10b		_10c		
	11	Investments—publicly traded securities			11		
	12	Investments—other securities See Part IV, line 11		<u></u>	12	<u> </u>	
	13	Investments—program-related See Part IV, line 11			13		
	14	Intangible assets		2 051	14	10	626
	15	Other assets See Part IV, line 11		2,951	15	10,0 369,3	252
	16	Total assets. Add lines 1 through 15 (must equal line 34	4)	350,296	16		
	17	Accounts payable and accrued expenses		3,793	17	12,	<u> </u>
	18	Grants payable			18		
	19	Deferred revenue			19		
w	20	Tax-exempt bond liabilities	_		20		
tië	21	Escrow account liability Complete Part IV of Schedule I			21		
Liabilities	22	Payables to current and former officers, directors, truste					
ā		employees, highest compensated employees, and disqu	ualified	İ			
_		persons Complete Part II of Schedule L			22		
	23	Secured mortgages and notes payable to unrelated third	d parties		23		
	24	Unsecured notes and loans payable			24	·	
	25	Other liabilities Complete Part X of Schedule D		3,793	25	12,	502
	26	Total liabilities. Add lines 17 through 25	P 4	3,193	26	12,	<u> </u>
ces			K and				
ž	l	complete lines 27 through 29, and lines 33 and 34.		159,688	07	356,8	251
Balan	27	Unrestricted net assets		174,285	27	330,	<u> </u>
<u> </u>	28	Temporarily restricted net assets		12,530	28		
or Fund	29	Permanently restricted net assets	- []	12,330	29	-	
Ē		Organizations that do not follow SFAS 117, check he	re 🗾			,	
		and complete lines 30 through 34.			30		
Assets	30	Capital stock or trust principal, or current funds	t fund		31		
SS	31	Paid-in or capital surplus, or land, building, or equipmen			32		
¥	32	Retained earnings, endowment, accumulated income, or	other fullus	346,503	33	356,8	851
Net	33	Total net assets or fund balances		350,296		369,:	
_	art X	Total liabilities and net assets/fund balances Financial Statements and Reporting		330/230	<u> </u>		
						Yes	No
1	Acc	counting method used to prepare the Form 990	Cash 🕱 Accrual 🗍 🤇	Other			
28	a We	ere the organization's financial statements compiled or re-	viewed by an independent accou	untant?		2a	<u>X</u>
t		ere the organization's financial statements audited by an i				2b X	
		Yes" to lines 2a or 2b, does the organization have a comi		ty for oversight of			
		e audit, review, or compilation of its financial statements a				2c	<u> </u>
38		a result of a federal award, was the organization required				-	
		Single Audit Act and OMB Circular A-133?				3a	<u> </u>
t	<u> If "</u>	Yes," did the organization undergo the required audit or a	iudits?			3b	
						Form 990	/2008\

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

WESTERN DAKOTA VOCATIONAL TECHNICAL

Employer identification number

		FOUNDATION,_	INC.						46	-0340050
Part	I Reas	on for Public Charity	Status (All organizations	s must c	complet	e this	part.)	(see ii	nstruc	tions)
The orga	anization is not	a private foundation becaus	e it is (Please check only one	organızatı	on)					
1 [A church, cor	nvention of churches, or ass	ociation of churches described	ın sectior	170(b)(1	l)(A)(i).				
2	A school des	cribed in section 170(b)(1)(/	A)(ii). (Attach Schedule E)							
3	A hospital or	a cooperative hospital service	ce organization described in se	ction 170	(b)(1)(A)(iii). (Atta	ich Sch	edule H)	
4	A medical re	search organization operated	d in conjunction with a hospital	described	ın sectio	n 170(b)(1)(A)(i	ii). Ente	er the ho	spital's name,
_	city, and stat	е								
5	An organizati	on operated for the benefit of	of a college or university owned	or operat	ed by a g	overnme	ental un	t descri	bed in	
	-	b)(1)(A)(iv). (Complete Part								
6	1		overnmental unit described in s	section 17	'0(b)(1)(A)(v).				
7	1	•	substantial part of its support fr				from the	genera	al public	
		section 170(b)(1)(A)(vi). (Co		•						
8	1		70(b)(1)(A)(vi). (Complete Part	t II)						
9	1) more than 33 1/3 % of its sup		contribut	ions, me	embersh	ıp fees,	and gro	oss
	,	•	pt functions—subject to certain							
	•		nd unrelated business taxable in							
			0, 1975 See section 509(a)(2)							
10	,	•	exclusively to test for public saf				(see in	structioi	ns)	
11 X		•	exclusively for the benefit of, to							
	•	one or more publicly support	ed organizations described in s	ection 509	9(a)(1) or	section	509(a)(2	2) See	section	
	509(a)(3). Ch	eck the box that describes t	he type of supporting organizat	ion and co	omplete li	nes 11e	through	11h		
	a Type	I b Type II	c Type III-Function	ally Integr	ated	d	🗶 тур	e III–Ot	her	
e X	By checking		anization is not controlled direc	tly or indi	rectly by	one or m	ore disc	ualified	l	
		r than foundation managers	and other than one or more pu	blicly supp	orted org	janizatio	ns desc	ribed in	section	
	509(a)(1) or s	section 509(a)(2)								
f	If the organiz	ation received a written dete	rmination from the IRS that it is	s a Type I,	Type II,	or Type	III supp	orting		
	organization,	check this box								
g	Since Augus	t 17, 2006, has the organizat	tion accepted any gift or contrib	oution from	n any of tl	ne				
•	following per	sons?								
	(i) A persor	who directly or indirectly co	ontrols, either alone or together	with perso	ons descr	ibed in (II)			Yes No
	and (III)	below, the governing body of	f the supported organization?							11g(i) X
	(ii) A family	member of a person describ	ped in (i) above?							11g(ii) X
	(iii) A 35% c	ontrolled entity of a person of	described in (i) or (ii) above?							11g(m) X
h			he organizations the organization	on suppor	ts					
(i) Nan	ne of supported	(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Did	ou notify	(vi)	ls the	(vii) Amount of
	ganization	, ,	(described on lines 1-9		sted in your		nization in	organizat		support
			above or IRC section	governing	document?		of your port?		zed in the S ?	
			(see instructions))	Yes	No	Yes	No	Yes	No	
WEST	TERN DAR	OTA TECHNICAL	INSTITUTE	1	-					
WEG.	IBIM DAI	46-6002688	6	x		x		x		285,780
	_	40 0002000	<u>_</u>	† <u>* * * * * * * * * * * * * * * * * * *</u>	-					
				† · · · ·						
								ļ		
	<u> </u>		-			<u> </u>	<u> </u>			

285,780

<u>Total</u>

Sec	tion A. Public Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization'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			<u>.</u>			
4	Total. Add lines 1-3						
5	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			<u></u>	 	 	
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4						
8	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 11	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc	(see instructions)				12	
13	First five years. If the Form 990 is for the	•		urth, or fifth tax ve	ar as a section 50		
	organization, check this box and stop here		.,	,		· / /	▶ 🗌
Sec	tion C. Computation of Public Su		itage				
14	Public support percentage for 2008 (line 6			nn (f))	-	14	%
15	Public support percentage from 2007 Scho					15	%
16a	33 1/3 % support test—2008. If the organ			13, and line 14 is	33 1/3 % or more.	, check this box	
	and stop here. The organization qualifies	as a publicly supp	orted organization				▶ 🗌
b	33 1/3 % support test-2007. If the organ				15 is 33 1/3 % or i	more, check this	
	box and stop here. The organization quali	fies as a publicly	supported organiza	ation			▶ 🗌
17a	10%-facts-and-circumstances test—200	8. If the organizat	ion did not check a	box on line 13, 16	Sa, or 16b, and line	e 14 is 10% or	
	more, and if the organization meets the "fa						
	organization meets the "facts-and-circums						▶ ∐
b	10%-facts-and-circumstances test—200						
	more, and if the organization meets the "fa						. —
	organization meets the "facts-and-circums						<u>> </u>
18	Private foundation. If the organization did	I not check a box	on line 13, 16a, 16	b, 17a, or 17b, che	eck this box and s	ee instructions	▶ ∐

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

(Complete only if you checked the box on line 9 of Part I.)

Sec	tion A. Public Support	CRCG the BOX	011 11110 0 0111 0				
	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	, ,					
2	Gross receipts from admissions, merchandise sold or services performed, 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 business under section 513						
4	Tax revenues levied for the organization'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						
6	Total. Add lines 1-5					-	
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000			-			
_	Add lines 7a and 7b					 	
8	Public support (Subtract line 7c from line 6)						
Sec	tion B. Total Support		ł	<u> </u>	.t		
	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6		(4,55			1	
-	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					-	
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,					<u> </u>	
	and 12)	<u> </u>		<u></u>	<u> </u>		
14	First five years. If the Form 990 is for the organization, check this box and stop here	e		urth, or fifth tax ye	ar as a section 50	1(c)(3)	> [
Sec	tion C. Computation of Public Su						
15	Public support percentage for 2008 (line 8			nn (f))		15	<u>%</u>
16	Public support percentage from 2007 Scho					16	%
Sec	tion D. Computation of Investme						
17	Investment income percentage for 2008 (I			3, column (f))		17	%
18	Investment income percentage from 2007					18	%
19a	33 1/3 % support tests—2008. If the orga						, _
	17 is not more than 33 1/3 %, check this b						
b	33 1/3 % support tests—2007. If the orga						. □
	line 18 is not more than 33 1/3 %, check the						₹ }-
20	Private foundation. If the organization did	not check a box	<u>on line 14, 19a or 1</u>	196, ch <u>eck this bo</u>	x and see instructi	ons	<i>V</i>

Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. OMB No 1545-0047

Open to Public Inspection

Name of the organization Employer identification number WESTERN DAKOTA VOCATIONAL TECHNICAL 46-0340050 FOUNDATION, INC. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of an historically important land area Preservation of land for public use (e.g., recreation or pleasure) Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year 2a a Total number of conservation easements 2b b Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ __ _ _ Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section Yes 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

<u>Sche</u>		AKOTA VOCATIO							age 2		
Pa	rt III Organizations Maintaining					ssets	(contin	ued)			
3	Using the organization's accession and other items (check all that apply)	records, check any of the	following that are a	significant use of its	collection						
а	Public exhibition	d 🗌 Loan o	or exchange program	ns							
b	Scholarly research	e Other	0 1 0								
C	Preservation for future generations										
4	Provide a description of the organization's co	llections and explain how t	they further the orga	ınızatıon's exempt pı	ırpose ın						
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to	r receive donations of art, l	historical treasures, the organization's ci	or other similar			Yes		No		
Pa	ert IV Trust, Escrow and Custod				ed "Yes" t						
	Part IV, line 9, or reported a										
1a	Is the organization an agent, trustee, custodia		_				_				
	included on Form 990, Part X?	•					Yes		No		
b	If "Yes," explain the arrangement in Part XIV	and complete the following	table								
							Amoun	t			
c	Beginning balance				1c						
	Additions during the year				1d		-				
	Distributions during the year				1e				_		
e f	Ending balance				1f				_		
	Did the organization include an amount on Fo	orm 900 Part Y line 212				\Box	Yes	Π,	Mo		
	-	Jili 330, Fait A, line 21.				Ш	162	ш,	110		
	b If "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.										
	Lite Lindowinient i dinds. Comp	(a) Current year	(b) Pnor year	(c) Two years back	(d) Three yea		(e) Fou	r years i	back		
4.	Decument of week belongs	12,530	(5) 1101)001	(e) the years such	(-,		(0). 11	,			
	Beginning of year balance	12,330						•••••	······································		
	Contributions										
	Investment earnings or losses										
	Grants or scholarships										
е	Other expenditures for facilities										
_	and programs		<u></u>					·····			
f	Administrative expenses	12 520									
g	End of year balance	12,530		<u> </u>	L						
2	Provide the estimated percentage of the year	end balance held as									
	Board designated or quasi-endowment	%									
	Permanent endowment ▶ %										
	Term endowment ▶ %	4		4 45 46 4							
3a	Are there endowment funds not in the posses	ssion of the organization tr	nat are neid and adn	ninistered for the				Yes	N.		
	organization by						2=(1)	res	No X		
	(i) unrelated organizations						3a(i)	\vdash	X		
	(ii) related organizations						3a(ii)	$\vdash\vdash\vdash$			
b	If "Yes" to 3a(ii), are the related organizations	· ·					3b				
4_	Describe in Part XIV the intended uses of the			0 Dart V II 4							
Pa	rt VI Investments—Land, Build						(4) 01				
	Description of investment	(a) Cost or other basis (investment)	(b) Cost or ot basis (other	I	preciation		(d) Book	value			
1a	Land										
b	Buildings					\perp _					
С	Leasehold improvements										
d	Equipment										
	Other		1						_		
Tota	I. Add lines 1a-1e (Column (d) should equal F	orm 990, Part X, column ((B), line 10(c))			<u> </u>			-		

Schedule D (Form 990) 2008 WESTERN DAKOTA VOCATI		46-0340050	Page 3
Part VII Investments—Other Securities. See Form 99			
(a) Description of security or category	(b) Book value	(c) Method of valuation	
(including name of security)		Cost or end-of-year market va	lue
Financial derivatives and other financial products			
Closely-held equity interests			
Other	-		
	-		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See Form 99	00, Part X, line 13.		
(a) Description of investment type	(b) Book value	(c) Method of valuation	
		Cost or end-of-year market va	lue
	 		
	-		
	 		
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, line 15	<u> </u>		
(a) Description		(b) E	Book value
			-
Total. (Column (b) should equal Form 990, Part X, col (B) line 15)		b	
Part X Other Liabilities. See Form 990, Part X, line 2	25		
(a) Description of liability	(b) Amount		
Federal income taxes			
			
	 		
	 		
Total. (Column (b) should equal Form 990, Part X, col. (B) line 25.) In Part XIV, provide the text of the footnote to the organization's financial status certain tax positions under FIN 48.	atements that reports the organization	anızatıon's liability for	

Sche	dule D (Form 990) 2008 WESTERN DAKOTA VOCATIONAL TE		<u> 50 </u>	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 t	o Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	512,001
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	501,653
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	10,348
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV)		8	
9	Total adjustments (net) Add lines 4-8		9	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		10	10,348
Pa	rt XII Reconciliation of Revenue per Audited Financial Statem	ients With Revenue per R	eturn	
1	Total revenue, gains, and other support per audited financial statements		1	512,001
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains on investments	2a	 	
b	Donated services and use of facilities	2b	_	
С	Recoveries of prior year grants	2c	_	
d	Other (Describe in Part XIV)	2d	_	
е	Add lines 2a through 2d	-	2e	
3	Subtract line 2e from line 1		3	512, <u>001</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b		
C	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12)		5	512,001
Pa	rt XIII Reconciliation of Expenses per Audited Financial Stater	ments With Expenses per	Retur	n
1	Total expenses and losses per audited financial statements		1	501,653
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a	1	
	Prior year adjustments	2b	7	
c	Losses reported on Form 990, Part IX, line 25	2c	7	
d	Other (Describe in Part XIV)	2d	7	
	Add lines 2a through 2d	<u></u>	7 2e	
3	Subtract line 2e from line 1		3	501,653
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	[]		
	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part XIV)	4b		
	Add lines 4a and 4b		4c	
	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)		5	501,653
	rt XIV Supplemental Information	<u>.</u> , , , , , , , , , , , , , , , , , , ,	1 - 1	
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III,	lines 1a and 4 Part IV lines 1h		
	th, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2			
	PART V, LINE 4 - INTENDED USES FOR ENDOWME			
_				
_'	THE_FUNDS_ARE_USED_TO_PROVIDE_SCHOLARSHIPS	S <u></u>		
_				
			_ _ -	
_				
_				
- -			 	
_ _ _			 	

Schedule D (F	orm 99	0) 2008	W.	EST:	ER1	1 D	/KO	TA	VOC	CAT	IO	<u>NAI</u>	TI	<u>ECH</u>	INI	CA	L_	<u>46</u>	<u>-03</u>	400)5 <u>0</u>)				Page 5
Part XIV	Sup	pleme	ental	Info	rmat	tion (contir	nued)																		
•		•																								
					_					_	_				_	_	_			_	_	_		 	_	
					_		_			_	_			_	_	_	_			_	_	_		 	_	
					_						_			_		_	_			_	_			 	_	
					_		. <u> </u>			_	_			_	_	_				_	_	_		 	_	
					_					_	_			_	_	_	_			_	_	_		 - —	_	
	-				_		-			_	_			_	_	_	_	-		_	_	_		 	_	
					_		-			_	-			_	_	_	_			_	_	_		 - –	_	
					_		-			_	_			_	-	-	_			_	_	_		 - –	_	
					_		· –			_	_			_	_	-	_			_	_	_		 	_	
	- -				_		· –			_	_			_	_	_	_	- :		_	_	_		 - –	_	
					_		_			_	_			_			_				_	_		 	_	
																	_	_			_					
					_		_			_	_			_						_		_		 _		
					_		_			_	_			_	_	_	_			_	_	_		 		
					_					_	_			_	_	_	_			_	_	_		 	_	
_					_					_	_			_	_	_	_			_	_	_		 	_	
					_		_			_	_			_	_	_	_			_	_	_		 	_	_ _
							· –			_	_			_	_		_			_	_	_		 	_	– –
					_		-			_	_			_	_	_	-			_	_	_		 	_	
	- -				_		· –			_	-			_	_	_	_			_	_	_		 - –	_	
		- -		- -	_		-			_	_			_	_	_	-			_	-	-		 	-	
					_		_			_	_			_	_	_	_			_	_	_		 	_	
					_					_	_			_	_	_	_			_	_	_		 _	_	
											_			_	_	_	_			_	_	_	_	 _		
							_			_																
					_		_			_	_			_	_	_	_			_		_		 	_	
	_			_			_	_		-																
					_		_			_	_			_		_	_			_	_	_		 	_	
					_		_			_	_			_	_	_				_	_			 	_	
					_		_			_	_			_	_	_	_			_	_	_		 . –	_	

SCHEDULE 1 (Form 990)

Grants and Other Assistance to Organizations,

Governments, and Individuals in the U.S.

OMB No 1545-0047

▶ Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. ► Attach to Form 990. 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

WESTERN DAKOTA VOCATIONAL TECHNICAL

General Information on Grants and Assistance

Part

INC

FOUNDATION,

Department of the Treasury Internal Revenue Service Name of the organization

2002	Open to Public	Inspection

Employer identification number

46-0340050

% □ EDUCATION EQUIP/SUPP INVESTMENT, PRESERVA Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on VARIOUS EQUIPME non-cash assistance (g) Description of (e) Amount of non-cash (f) Method of valuation assistance other) 257,706 FMV (d) Amount of cash grant 26,069 28,000 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part IV and Schedule I-1 (Form 990) if additional space is needed (c) IRC section if applicable m 46-6002688 36-3608635 (p) EIN Enter total number of section 501(c)(3) and government organizations the selection criteria used to award the grants or assistance? WESTERN DAKOTA TECHNICAL INSTITUTE SD 57703 SD 57701 (a) Name and address of organization Enter total number of other organizations BH COMMUNITY CHAIRTABLE FO or government 825 ST JOSEPH STREET 800 MICKELSON DRIVE RAPID CITY RAPID CITY Part II

Schedule I (Form 990) 2008

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Page 2

Schedule I (Form 990) 2008 WESTERN DAKOTA VOCATIONAL TECHNICAL 46-0340050

Part III	Grants and Other Assistance to Individuals in the	to Individuals in the		nplete if the organiza	United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.	rm 990, Part IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is	if additional space is				
<u>ت</u>	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(f) Description of non-cash assistance
		recipients	cash grant	non-cash assistance	FMV, appraisal, other)	
SCHOLA	SCHOLARSHIPS	108	85,918			•
Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	complete this part to	provide the information	on required in Part I,	line 2, and any other additi	onal information.

THE AVAILABILITY OF THE SCHOLARSHIPS ARE DISPLAYED ON THE CAMPUS OF WESTERN DAKOTA TECHNICAL INSTITUTE, POSTED ON THE SCHOOLS WEBSITE AND INCLUDED IN THE SCHOOL COLLECTS THE APLLICATIONS, REVIEWS FOR PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS ELIGIBILITY AND THEN CONTACTS THE WESTERN DAKOTA VOCATIONAL TECHNICAL INSTITUTE FOUNDATION TO RELEASE THE FUNDS. THE NEWSLETTER.

Schedule I (Form 990) 2008

SCHEDULE M (Form 990)

NonCash Contributions

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

Open To Public Inspection

Name	of the organization WESTERN FOUNDATION		VOCATIONAL IC.	TECHNICAL	Employer ider 46-0340		umber	
Pa	rt I Types of Property							
		(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of deter revenues	mining		
1	Art—Works of art							
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household					_		
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded					,		
10	Securities—Closely held stock							
11	Securities—Partnership, LLC,							
	or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation							
	contribution (historic							
	structures)							
14	Qualified conservation							
	contribution (other)							
15	Real estate—Residential							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy					_		
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts		70	024 571	COMPARABLE SAL	DC C I	ZVDI	राज्य
25	Other ►(EQUIPMENT) X	73	234,571		ES & I	LAPI	SKI
26	Other ►(<u>}</u>		<u> </u>	OPINION	 _		
27	Other ►(<u>}</u>						
<u>28</u>	Other ►()		- 6				
29	Number of Forms 8283 received by				30			
	which the organization completed F	orm 8283,	Part IV, Donee Acknowl	eagement	29		Yes	No
	S the second did the second			thy reported in Dott Librar 1	1 20 that		103	110
30a	• •							
	it must hold for at least three years			ion, and which is not require	ed to be	30a		х
	used for exempt purposes for the e		g period?			304		
b	If "Yes," describe the arrangement		naliau that ramiuraa tha r	ower of any non standard				
31	Does the organization have a gift a	cceptance	policy that requires the in	eview of any non-standard		31		x
	contributions?		or rolated areasymatics	to collect process or sell a	on cach	31	 	 -
32a	-	niro parties	or related organizations	to solicit, process, or sell n	UII-0d5II	32a		x
	contributions?					344		<u> </u>
b	If "Yes," describe in Part II If the organization did not report rev	venues is s	olumn (c) for a type of n	roperty for which column (a) is checked			
33		venues in C	oranin (c) for a type of pr	operty for million column (a	, io oliophou,			
	describe in Part II							

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008 Open to Public Inspection

OMB No 1545-0047

Name of the organization

WESTERN DAKOTA VOCATIONAL TECHNICAL FOUNDATION, INC.

Employer identification number 46-0340050

FORM 990 - ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES SCHOLARSHIPS, GRANTS AND FINANCIAL AID.

FORM 990, PART VI, LINE 10 - ORGANIZATION'S PROCESS USED TO REVIEW FORM 990
THE FORM 990 IS REVIEWED BY TWO FOUNDATION OFFICERS. USUALLY BY THE
TREASURER AND THE CHAIRPERSON.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

THE DIRECTOR COMPENSATION WAS COMPARED WITH THREE EQUIVALENT POSITIONS WITH

SIMILAR RESPONSIBILITIES AND APPROVED BY THE FULL BOARD.