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990

# **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)

2012

OMB No 1545-0047

Department of the Treasury

Open to Public Inspection

					c a copy or triis return	to satisfy state repo	rung rec	uncincino		
<u>A I</u>	or the	2012 calend	ar year, or tax year begin	ning	07-	-01 , 2012, and e	ending		06	-30 ,2013
В	Check if ap	pplicable	C Name of organization ALUM	NI ASSOC OF	UNIVERSITY OF	F SOUTH DAKOT	A			D Employer identification no.
$\Box$ /	Address ch	nange	Doing Business As							46-6001196
_	lame char	Ĭ	Number and street (or P O bo	y if mail is not dolumen	d to otroot address)	<del>-</del>	D		_	
_		_			d to street address)		Room/	suite	l'	E Telephone number
=	nitial retur		414 EAST CLARK				_l_			(605) 677-6734
$\equiv$	erminated		City, town or post office, state						ŀ	313,195
∐ ′	Amended i	return	VERMILLION, SD	57069						G Gross receipts \$
$\sqcup$ '	Application	pending	F Name and address of princi	pal officer			u,,	\		um for
								ls this a gro affiliates?	oup rec	Yes X No
	ax-exemp	ot status 🔀	501(c)(3) 501(c) (	) <table-cell-columns> (insert no )</table-cell-columns>	4947(a)(1) or	527	н(ь		ates in	ncluded? Yes No
J 1	Vebsite	▶ USD	ALUMNI.COM				H(c	If "No," atta Group exer	ich a li: nption	st (see instructions) number
K	orm of or	ganization	Corporation Trust X Ass	ociation Other	<b>•</b>	L Year of formation	1953			al domicile SD
Pa	rt I	Summar			_ <del></del>			1		
L	1		ibe the organization's miss	on or most signific	cant activities DD/	OVIDE INFORMA	TTON	AND CITI	2001	
	1		TY OF SOUTH DAKOT			OVIDE INFORMA	TITOM	AND SUI	POF	KI FOR
್ಗಳಿರ್tivities & Governance		ONIVERSI	II OF SOUTH DARO.	A S ALUMNI.	·					
Шa			<del>-</del> ·							
Ver		Ob1. 4b b	. 🗆	<del></del>	<del></del>					·
Ô			ox ▶ ☐ If the organization					ı		1
ଦ୍ଧ			oting members of the gove	• • •	•	• • • • • • • • •			3	16
es			ndependent voting membei			)			4	0
Ϋ́	5	Total numbe	r of individuals employed ii	n calendar year 20	)12 (Part V, line 2a)				5	0
<del>1</del> 5	6	Total numbe	r of volunteers (estimate if	necessary) -					6	16
<b>∑</b>	7a	Total unrelat	ed business revenue from	Part VIII, column	(C), line 12 · · · ·				7a	0
-	b	Net unrelate	d business taxable income	from Form 990-T	. line 34				7b	0
, <del>a</del> ∹1		7			<u></u>			Prior Year		Current Year
	8	Contributions	s and grants (Part VIII, line	1h)				145	207	
<u>=</u>			vice revenue (Part VIII, line	•		}		143	, 29	289,031
<b>≥</b> ₹	1	_	•	0,		· · · · · · · · · · · · · · · · · · ·				0
<u>`</u> }ĕ			ncome (Part VIII, column (		•			23	, 380	24,164
Revenue V			ue (Part VIII, column (A), lu							0
<u> </u>			e - add lines 8 through 11					168	,677	313,195
意思	13	Grants and s	similar amounts paid (Part	IX, column (A), lın	es 1-3) · · · · · ·					0
$\langle \rangle \rangle$	14	Benefits paid	to or for members (Part I)	K, column (A), line	: 4)					0
<b>99</b>	15	Salaries, oth	er compensation, employe	e benefits (Part IX	(, column (A), lines 5-1	10)				0
Expenses 🕾			fundraising fees (Part IX,							0
ber	b	Total fundral	Ising expenses (Part IX) co	lumn (D), line 25)	<b>&gt;</b>	0				
X	17	Other expen	ses (Part IX, column A), li	nes 11a-11d, 11f-	24e)			215	. 604	236,543
	18	Total exidens	ses (Add libes 33-17 mus	egual Part IX. co	lumn (A), line 25)			215		<del></del> _
	19	Revenue les	s expenses Subtractime	18 from line 12					, 927	<del></del>
<u>s</u> _		1		10 110111 1110 12			D			
ince ts o	20		EDEN, UT				Beginni	ng of Current		End of Year
Fund Blances Net Assets or	21		(Part X, line 16) · · · ·			• • • • • • • • • •	,	1,062		
E A	21		es (Part X, line 26)						470	
			r fund balances Subtract	line 21 from line 2	20			1,043	<u>, 485</u>	5 1,139,609
	rt II		re Block							
true, o	penalties correct, an	s of perjury, I dec ad complete. Dec	lare that I have examined this retu laration of preparer (other than off	rn, ineluding accompan icer) is based on all infi	lying schedules and stateme ormation of which preparer h	ents, and to the best of my has any knowledge	knowledg	e and belief, it	IS	
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Sig	n	Signatu	re of afficer	, ,					Date	e
Hei	·e	JEAN	ETTE PORTER, BOAI	RD CHAIR						
		Type or	print name and title					_		
	Щ.	Print/Type nr	eparer's name	Preparer's signature	/)	Date		Check		PTIN
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	parer			The Con	- www.	·403-21-2013	T	self-employe	20	P00187179
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	41 - 15 -	<del></del>		ON SD 57069		<del></del>		60	<u>05−€</u>	524-4425
			return with the preparer sh	<del></del>		• • • • • • • • •	<u>· · · ·</u>	<u>····</u>	· · ·	· · · ☐ Yes 🖾 No
For	Paperw	ork Reducti	on Act Notice, see the se	parate instruction	ns.					Form 990 (2012)

orm	990 (2012) ALUMNI ASSOC OF UNIVERSITY OF SOUTH DAKOTA 46-6001196 Page
Pa:	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
	Briefly describe the organization's mission
	PROVIDE INFORMATION AND SUPPORT FOR UNIVERSITY OF SOUTH DAKOTA'S ALUMNI.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services? · · · · · · · · · · · · · · · · · · ·
	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported
4a	(Code) (Expenses \$2,353 including grants of \$) (Revenue \$)
	PROVIDE INFORMATION AND SUPPORT FOR UNIVERSITY OF SOUTH DAKOTA'S ALUMNI.
4b	(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )
4D	(Code) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code ) (Expenses \$ including grants of \$ ) (Revenue \$)
•	(Odde) (Expenses #
	Other program services (Describe in Schedule O )
4d	
4d	(Expenses \$ including grants of \$ ) (Revenue \$ )

Part IV

L		1		
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
•	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	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		Χ
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? If "Yes," complete Schedule C, Part II	4	Χ	
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		
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
_	complete Schedule D, Part III	8		Χ
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			37
10	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	10		Х
11	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V  If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	-10		
• •	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		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	Χ	
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 Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25° If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	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
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			.,
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Bid the digulated maintain an embel, employees, of agente balance of the embed entite	14a		X
b	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 assistance to any	140		21
	organization or entity located outside the United States? 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 assistance			
	to individuals located outside the United States? 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 (see instructions)	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," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
_ <u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	<u></u>	<u> </u>

Form 990 (2012)
Part IV C 2) ALUMNI ASSOC OF UNIVERSITY OF SOUTH DAKOTA
Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u>X</u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u>X</u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		<u>X</u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a		<u>X</u>
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		
d	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) 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		Χ
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 Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
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 of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
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)			1
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		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		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
٠.	Part I · · · · · · · · · · · · · · · · · ·	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			<u> </u>
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			<del>                                     </del>
00	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			<del></del>
J-7	or IV, and Part V, line 1 · · · · · · · · · · · · · · · · · ·	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a		<del> </del>	
b	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Х
26	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	- 555	_	1
36	related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
27	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	<del>  30</del>	-	122
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,		1	
	Part VI	37		X
20	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	31	<del> </del>	^ <u> </u>
38		38	X	
	19? Note. All Form 990 filers are required to complete Schedule O	30		Ь

Page 5

12) ALUMNI ASSOC OF UNIVERSITY OF SOUTH DAKOTA
Statements Regarding Other IRS Filings and Tax Compliance Part V

	Check if Schedule O contains a response to any question in this Part V			· 🔲
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		
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			
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	1		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<u>X</u>
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 authority	İ		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
b	If "Yes," enter the name of the foreign country			
_	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			37
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<u> </u>
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		v
	organization solicit any contributions that were not tax deductible as charitable contributions?	0a		X
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	- 05		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		:	
u	and services provided to the payor?	7a		Х
b	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			
	required to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			_
	organization, have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
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			1
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources	į,		
	against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		├
b 42	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	42-	-	ļ
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	<del> </del> -	<del> </del>
L	Note. See the instructions for additional information the organization must report on Schedule O			
Þ	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	1	1	
_				
C 1/1-a	· · · · · · · · · · · · · · · · · · ·	14a	<del> </del>	X
14a h	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b	<del>  -</del>	1-^-
b	THE TEST, THIS ILLINGULA I OTHER 720 TO REPORT THESE PAYMENTS ILLINO, PROVIDE ALL EXPIANATION III SCHEUURE COMPANIA PROVIDE ALL PROVIDE AL	עייון	i	1

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 Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body at the end of the tax year 16 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 Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Χ any other officer, director, trustee, or key employee? 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 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Χ one or more members of the governing body? 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 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a X Each committee with authority to act on behalf of the governing body? 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes 10a 10a Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 12b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 Did the organization have a written whistleblower policy? 14 14 Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official 15a ........... 15b Other officers or key employees of the organization 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 taxable entity during the year? 16a If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply ☑ Upon request Other (explain in Schedule O) Own website Another's website 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► KERSTEN JOHNSON (605) 677-6734 414 E CLARK VERMILLION, SD 57069

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ALUMNI ASSOC OF UNIVERSITY OF SOUTH DAKOTA

46-6001196

Page 7

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

Check if Schedule O contains a response to any question 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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A)	(B)			(0	<b>&gt;</b> )			(D)	(E)	(F)		
Name and Title	Average	Position						Reportable	Reportable	Estimated		
	hours per week (list any	(do no	ot che	ck mo	ore th	an one		compensation from	compensation from amount of related other			
	hours for	box, unless person is both an officer and a director/trustee)						the	organizations	compensation		
	related							organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the		
	organizations below dotted line)	I t d nrı duse v t e o u e o l r	nr su ts ite	f c e	e y e m	H omployeersee	F o r m e r	(W-2/1099-MISC)		organization and related organizations		
(1) BRYAN BENSEN							_					
DIRECTOR	1.00	X										
(2) CARLA TAPLETT THOMSEN										1		
DIRECTOR	1.00	X						}				
(3) CHASE ANDERSEN										-		
DIRECTOR	1.00	Х				1						
(4) CHELSEY KRULL												
DIRECTOR	1.00	X										
(5) CRAIG GOTH												
DIRECTOR	1.00	X										
(6) ERIK MUCKEY												
STUDENT REP	1.00	X				į						
(7) FULLERTON BUSH II										ļ		
REP FOUNDATION BOARD	1.00	X										
(8) JAFAR KARIM					ŀ					İ		
DIRECTOR	1.00	X										
(9) LORELEI HEISINGER						ŀ						
DIRECTOR	1.00	X					_					
(10)MAREN COLON												
DIRECTOR	1.00	X				<u> </u>						
(11)PATRICIA CROWLEY NASH			Ì					-				
DIRECTOR	1.00	X										
(12)RICK HELLER												
DIRECTOR	1.00	X	L									
(13)THOMAS HOLLAND			_									
DIRECTOR	1.00	X					L.					
(14)TOM FRONING												
DIRECTOR	1.00	X										

Part VII Section A. Officers, Directors, Trustees,	Key Employ	ees, a	nd F	ligh	est	Comp	ensa	ated Employees (	ontinued)			
(A)	(B) (C)							(D)	(E)	(F)		
Name and title	Average	(do n	ot ch		ition	han one		Reportable	Reportable		Estimat	
	hours per week (list any					both an	1	compensation from	compensation from related	'	amount othe	
	hours for	office	er and	direc	tor/tn	ustee)		the	organizations	0	compensa	
	related	l t d	11	ļ	к	Нсе	F	organization (W-2/1099-MISC)	(W-2/1099-MISC)		from the organization	
	organizations below dotted	dur	n r s u		e y	g m p	r O	(W-2/1099-MISC)			and rela	
	line)	v t c	t s	C	e m	h p i e e o	e e				organiza	tions
		l e t d e o			p	s n y	ľ					
		u r a o	t i		,	a e						
		1 7	o n		e e	e d						
			a I			<u></u>						
(15)JEANETTE PORTER								•				
BOARD CHAIR	5.00		<u> </u>	X								
(16)KERSTEN JOHNSON			1									
SECRETARY	5.00	1	<u> </u>	X			<u> </u>					
(17)PAUL VAN BUREN				١			ĺ			ļ		
VICE CHAIR	5.00		L	X	<u> </u>	ļ						
(18)STACI KESLING STERN				١			1					
TREASURER	5.00			X	_	ļ						
(19)												
(20)		<u> </u>	$\vdash$	-	<del> </del>	<del> </del>						
(20)												
(21)	·····	<del>                                     </del>	$\vdash$		$\vdash$						<del></del>	
(21)								1				
(22)		<del> </del>	<del>                                     </del>									
<b>\</b> 1												
(23)												
(24)												
					ļ							
(25)									}			
					<u> </u>		<u>L</u> .		-	-		
1b Sub-total			• •	• •	• •							
c Total from continuation sheets to Part VII, Section 1		• • •	• •	• •	• •					_		
d Total (add lines 1b and 1c)						•		0	ļ	0		0
Total number of individuals (including but not limited		ed abo	ove)	wno	rece	eivea r	nore	than \$100,000 of		_		
reportable compensation from the organization									_	0	Yes	s No
3 Did the organization list any former officer, director	or trustee k	ev em	nlov	ee (	or bu	ahest (	comi	nensated			16.	3 110
employee on line 1a? If "Yes," complete Schedule					, m	91.031				. 3		X
4 For any individual listed on line 1a, is the sum of rep				and a	nthe	r com	hens	ation from the			<del></del>	<del>  ^``</del>
organization and related organizations greater than												
individual										. 4	.	X
5 Did any person listed on line 1a receive or accrue of	ompensation	from a	anv i	unre	lated	d orgai	nızat	ion or individual				<del>                                     </del>
for services rendered to the organization? If "Yes,"			-			_				. 5	.	X
Section B. Independent Contractors												
Complete this table for your five highest compensate	ed independ	ent cor	ntrac	ctors	that	t receiv	ved i	more than \$100,00	D of			
compensation from the organization Report compe	nsation for th	ne cale	ndai	r yea	ır en	nding w	vith c	or within the organiz	ation's tax			
year				-		_		_				
(A)								(B)			(C)	
Name and business address								Description of	services	C	ompensa	ition
	· · · · · · · · · · · · · · · · · · ·	_										
	<u> </u>											
2 Total number of independent contractors (including			iose ►	liste	ed at	oove) v	who					
THE PIVEO THOSE INSULATION OF COMPANSATION FRAN	01/12/017	au()(1										

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Form 990 (2012)
Part VIII

Statem	ent of	Revenu	e

		Check if Schedule O contains a response to any question	n in this Part VIII		· · · · · · · ·		
			Tota	(A) revenue	(B)  Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ats ts	1a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership dues · · · · · · · · 1b 5:	1,215				
Đ Ē	С	Fundraising events 1c				·	
ar /	d	Related organizations 1d					
ë. E	е	Government grants (contributions) · · 1e					
Sign	f	All other contributions, gifts, grants,					
the			7,816				
ĘŌ	g	Noncash contributions included in lines 1a-1f \$		i			
and	h	Total. Add lines 1a-1f	▶ 2	89,031			
		<del> </del>	s Code				
Program Service Revenue	2a						
ševe	b						
9	С						
e.v	d						
E	е			ĺ			
260	f	All other program service revenue · · · · · ·					
4	g	Total. Add lines 2a-2f					
	3	Investment income (including dividends, interest, and other similar amounts)	▶	24,164	24,164		
	4	Income from investment of tax-exempt bond proceeds	▶				
	5	Royalties	▶				
		(ı) Real (ıı) Pe	ersonal				
	6a	Gross rents · · · · · ·					
	ь	Less rental expenses · · · ·					
	c	Rental income or (loss)					
	d	Net rental income or (loss)	▶				
	l		Other				
	'"	assets other than inventory					
	ь	Less cost or other basis					
	~	and sales expenses · · · ·				i	
	С	Gain or (loss)					
	d	Net gain or (loss)	▶	ļ			
enne		Gross income from fundraising				<u> </u>	
e e	1	events (not including \$					
В		of contributions reported on line 1c)					
Other Rev		See Part IV, line 18 · · · · · · · · a					
\$	ь	Less direct expenses · · · · · · b					
_		Net income or (loss) from fundraising events · · · · ·	▶				
		Gross income from gaming activities					
		See Part IV, line 19 · · · · · · · · a					
	ь	Less direct expenses b					
		Net income or (loss) from gaming activities · · · · ·	▶				
	1	Gross sales of inventory, less	· ·				
	'04	returns and allowances · · · · · · · · a					
	Ь	Less cost of goods sold · · · · · · · b					
		Net income or (loss) from sales of inventory · · · · · ·	▶				
			s Code				, <del>-</del> 1
	11a						
	b				<del></del>	<del>-</del>	
	C				<del> </del>	-	
		All other revenue					
		Total. Add lines 11a-11d	▶ │				
		Total revenue. See instructions		313,195	24,164	0	0
	1		ı	,	/ - 0 -		

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Form 990 (2012)

ALUMNI ASSOC OF UNIVERSITY OF SOUTH DAKOTA

Part IX Statement of Functional Expenses

	Check if Schedule O contains a response to any question of include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
8b, 9	b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21 ·				
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22		<del></del>		<del></del>
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				<del></del>
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				
7	persons described in section 4958(c)(3)(B) · · · · · ·				<del></del>
7	Other salaries and wages			1	
8	Pension plan accruals and contributions (include				
0	section 401(k) and 403(b) employer contributions) · ·				
9 10	Other employee benefits		<u></u>		
10 11	Fees for services (non-employees)		<u> </u>		
	Management				
a b	Legal · · · · · · · · · · · · · · · · · · ·				·-
C	Accounting	1,458		1,458	
d	Lobbying	7,500	<u> </u>	7,500	
e	Professional fundraising services See Part IV, line 17	7,300		7,300	
f	Investment management fees	13,432		13,432	
g	Other (If line 11g amount exceeds 10% of line 25, column	13,432		13,432	
9	(A) amount, list line 11g expenses on Schedule O) · ·				
12	Advertising and promotion	182,879		182,879	
13	Office expenses	17,358		17,358	
14	Information technology	5,563		5,563	
15	Royalties · · · · · · · · · · · · · · · · · · ·	5,555			<del></del> -
16	Occupancy				
17	Travel		<del></del>		
18	Payments of travel or entertainment expenses	***	<u></u>		
-	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest		<u></u>		<del></del>
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not covered	-			
	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)				
а	POSTAGE & SHIPPING	2,353	2,353		
b	SCHOLARSHIP	6,000		6,000	
С					
ď					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	236,543	2,353	234,190	0
26	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				
	following SOP 98-2 (ASC 958-720)				

Form 990 (2012) 46-6001196 Page 11 ALUMNI ASSOC OF UNIVERSITY OF SOUTH DAKOTA Part X **Balance Sheet** Check if Schedule O contains a response to any question in this Part X (B) (A) Beginning of year End of year Cash - non-interest-bearing 80,239 1 29,044 2 2 32,067 38,022 3 Pledges and grants receivable, net ............. 3 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors trustees, key employees, and highest compensated employees 5 Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4985(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Notes and loans receivable, net 7 8 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D . . . . 10a Less accumulated depreciation . . . . . . . . . . . . . . . . 10b 10c h 11 11 Investments - other securities See Part IV, line 11 ....... 12 12 13 950,649 13 1,072,543 14 14 15 15 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 1,062,955 1,139,609 17 17 19,470 18 18 19 19 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and 22 disqualified persons Complete Part II of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X. 25 26 26 19,470 0 Organizations that follow SFAS 117 (ASC 958), check here > X and Net Assets of Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 411,519 366,301 28 28 677,184 728,090

Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

1,139,609 Form 990 (2012)

1,139,609

29

30

31

32

33

34

1,043,485

1,062,955

29

30

31

32

33

34

complete lines 30 through 34.

Form		46-60	01196	<u>;                                    </u>	Pa	ige 12
	t XI Reconciliation of Net Assets					
L	Check if Schedule O contains a response to any question in this Part XI	· · · ·	<u></u>		<u></u> .	. 🗆
1	Total revenue (must equal Part VIII, column (A), line 12)	. 1		3	13,1	.95
2	Total expenses (must equal Part IX, column (A), line 25)			2	36,5	43
3	Revenue less expenses Subtract line 2 from line 1	. 3			76,€	552
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	. 4		1,0	43,4	185
5	Net unrealized gains (losses) on investments	. 5				
6	Donated services and use of facilities	. 6				
7	Investment expenses	. 7				
8	Prior period adjustments	. 8			19,4	172
9	Other changes in net assets or fund balances (explain in Schedule O)	. 9				0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	. 10	<u> </u>	1,1	39,6	509
Pai	t XII Financial Statements and Reporting	_				
	Check if Schedule O contains a response to any question in this Part XII					$\cdot \Box$
			_		Yes	No
1	Accounting method used to prepare the Form 990 🛛 Cash 🔲 Accrual 🔲 Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in					
	Schedule O					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a	Χ	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b		Χ
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight					
	of the audit, 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					
	Schedule O					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in					
	the Single Audit Act and OMB Circular A-133?			3a		
b	·					
				3b		
EEA				Form	990 (	2012)
						•

#### **SCHEDULE A**

(Form 990 or 990-EZ)

# **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.

OMB No 1545-0047

2012

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

► See separate instructions.

Open to Public Inspection

Name	lame of the organization Employer identification number								number		
ALU	MNI ASSOC OF UNIVERSITY OF SOUTH DAKOTA 46-6001196										
Pa	rt I	Reason for P	ublic Charity	Status (All organiza	ations m	ust comp	olete this	part) S	ee instri	uctions.	
The	orgar	nization is not a private	foundation becaus	se it is (For lines 1 throu	gh 11, ched	ck only one	box )				
1		A church, convention	of churches, or as	sociation of churches de	scribed in s	ection 170	0(b)(1)(A)(	i).			
2		A school described in	section 170(b)(1)	(A)(ii). (Attach Schedule	E)						
3		A hospital or a coope	rative hospital serv	rice organization describe	ed in <b>sectio</b>	n 170(b)(1	I)(A)(iii).				
4		A medical research o	rganization operate	ed in conjunction with a h	nospital des	cnbed in s	ection 170	(b)(1)(A)(i	iii). Enter tl	he	
		hospital's name, city, and state									
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in									
		section 170(b)(1)(A)	(iv). (Complete Par	rt II )							
6		A federal, state, or lo	cal government or	governmental unit descri	bed in sect	ion 170(b)	)(1)(A)(v).				
7	X	An organization that r	normally receives a	substantial part of its su	pport from	a governm	ental unit d	or from the	general pu	ublic	
		described in section	170(b)(1)(A)(vi). (	Complete Part II)							
8		A community trust de	scribed in section	170(b)(1)(A)(vi). (Comp	lete Part II	)					
9		An organization that r	normally receives	(1) more than 33 1/3% of	f its suppor	t from cont	ributions, n	nembershi	p fees, and	d gross	
		receipts from activitie	s related to its exe	mpt functions - subject to	certain ex	ceptions, a	and (2) no r	nore than	33 1/3% of	its	
		support from gross in	vestment income a	and unrelated business to	axable inco	me (less s	ection 511	tax) from l	ousinesses	,	
		acquired by the organ	nization after June	30, 1975 See section 5	09(a)(2). (C	omplete P	art III )				
10		An organization organ	nized and operated	exclusively to test for pu	ublic safety	See secti	on 509(a)(	4).			
11		An organization organ	nized and operated	exclusively for the bene	fit of, to per	form the fu	unctions of	or to carr	y out the		
		purposes of one or m	ore publicly suppo	rted organizations descri	bed in sect	ion 509(a)(	(1) or section	on 509(a)(	2) See <b>se</b> e	ction	
		509(a)(3). Check the	box that describes	the type of supporting o	rganization	and compl	lete lines 1	1e through	11h		
		a 🗌 Type I	<b>b</b> 🗌 Туре	ell <b>c</b> ☐ Type	III-Function	ally integra	ated	d 🗌	Type III-l	Non-funtio	nally integrated
e		• ·	I certify that the or	rganization is not controll	ed directly	or indirectly	y by one or	more disc	ualified pe	rsons	
				ner than one or more pub							
		or section 509(a)(2)	•		,						
f		If the organization red	ceived a written de	termination from the IRS	that it is a	Type I, Typ	e II, or Typ	e III supp	orting		
		organization, check to									
g		Since August 17, 200	06, has the organiz	ation accepted any gift o	r contribution	on from any	y of the				
_		following persons?	-								
		(i) A person who d	rectly or indirectly	controls, either alone or	together wi	th persons	described	ın (II) and			Yes No
				ne supported organizatio							11g(ı)
		(ii) A family member	er of a person desc	ribed in (i) above?							11g(n)
		•		n described in (i) or (ii) al							11g(m)
h		Provide the following	information about	the supported organizati	on(s)						
	(i) N	ame of supported	(II) EIN	(iii) Type of organization	(IV) Is the or	ganization	(v) Did yo	u notify	(vi) Is	the	(vii) Amount of monetary
		organization		(described on lines 1-9	in col (i) listed in your the organization in governing document? col (i) of your			organizatio		support	
				above or IRC section (see instructions))	governing o	ocument		oort?	(i) organizi U S		
					Yes	No	Yes	No	Yes	No	
(A)											
(B)		•									
(C)											
• •											
(D)					1					i	
. ,											
(E)							<u> </u>	·		-	
. ,											
					T				1	-	
Tot	al									1	
_			·								

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

(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 )

Section A. Public Support

Sec	tion A. Public Support				<del></del>		<del></del>
Calen	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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	94,330	178,680	280,278	145,297	289,031	987,616
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	94,330	178,680	280,278	145,297	289,031	987,616
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 Sec	Public support. Subtract line 5 from line 4 · · · tion B. Total Support						987,616
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4 · · · · · · · · ·	94,330	178,680	280,278	145,297	289,031	987,616
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,417	25,780	21,691	23,380	24,164	98,432
9	Net income from unrelated business activities, whether or not the business is regularly carned on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10 -				_		1,086,048
12	Gross receipts from related activities, etc. (s	see instructions)				12	
13	First five years. If the Form 990 is for the o organization, check this box and stop here		<u>.</u>				▶□
Sec	tion C. Computation of Public Su						
14	Public support percentage for 2012 (line 6,		-		• • • • • • • • •		90.94 %
15	Public support percentage from 2011 Scheo		•				92.56 % _
16a	33 1/3% support test - 2012. If the organize						<b>.</b> 53
	box and stop here. The organization qualification			•			▶ 🛚
b	33 1/3% support test - 2011. If the organization check this box and stop here. The organization						▶ 📋
17a	10%-facts-and-circumstances test - 2012	. If the organization	did not check a bo	ox on line 13, 16a, o	or 16b, and line 14	ıs	
	10% or more, and if the organization meets	the "facts-and-circu	ımstances" test, ch	neck this box and s	top here. Explain i	n	
	Part IV how the organization meets the "fac	ts-and-circumstanc	es" test The organ	ization qualifies as	a publicly supporte	ed	
	organization						▶ 📋
b	10%-facts-and-circumstances test - 2011	. If the organization	did not check a bo	x on line 13, 16a,	16b, or 17a, and lin	е	
	15 is 10% or more, and if the organization in	neets the "facts-and	l-circumstances" te	est, check this box	and stop here.		
	Explain in Part IV how the organization mee					ly	
	supported organization						▶ 📋
18	Private foundation. If the organization did	not check a box on	line 13, 16a, 16b, 1	17a, or 17b, check	this box and see		
_	instructions	<u></u> .	· · · · · · · · · ·	<u> </u>	<u></u>	<u></u>	<u> </u> □
EEA							990 or 990-F7\ 2012

46-6001196

ALUMNI ASSOC OF UNIVERSITY OF SOUTH DAKOTA

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

(Complete only if you checked the box on line 9 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	ction A. Public Support	admy amade t		selett, pieces	<u> </u>		<del></del>
Cale	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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 bus under sec 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 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b · · · · · · · · · ·						
8	Public support (Subtract line 7c from line 6)	•					
	ction B. Total Support					· · · · · · · · · · · · · · · · · · ·	
Cal	endar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 10a	Amounts from line 6						
	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 carned on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12) · · · · · · · · · · · ·						
14	- 3						▶ 🗍
_	ction C. Computation of Public Su	<del>``</del>		6)		. 15	0/
15 16	Public support percentage for 2012 (line 8, co Public support percentage from 2011 Schedu		•				<u>%</u>
	ction D. Computation of Investmen					· 1 · • ·	
17	Investment income percentage for 2012 (line			olumn (f)) · ·		. 17	%
18	Investment income percentage from 2011 Sci	hedule A, Part III	, line 17 · · · ·			. 18	%
19a	33 1/3% support tests - 2012. If the organization of the thing test and the support tests - 2012. If the organization of the support tests - 2012. If the organization of the support tests - 2012. If the organization of the support tests - 2012. If the organization of the support tests - 2012. If the organization of the support tests - 2012. If the organization of the support tests - 2012. If the organization of the support tests - 2012. If the organization of the support tests - 2012. If the organization of the support tests - 2012. If the organization of the support tests - 2012. If the organization of the support tests - 2012. If the organization of the support tests - 2012. If the organization of the support tests - 2012. If the organization of the support tests - 2012. If the organization of the support tests - 2012. If the organization of the support tests - 2012. If the organization of the support tests - 2012. If the organization of the support tests - 2012. If the support tests - 2012. If the support tests - 2012. If the support test - 2012.						▶ 🗀
b	33 1/3% support tests - 2011. If the organization 18 is not more than 33 1/3%, check this b	ox and stop he	e. The organization	qualifies as a pub	licly supported orga	anization	• 📮
20	Private foundation. If the organization did no	ot check a box or	line 14, 19a, or 19	b, check this box a	nd see instructions	• • • • • •	· · · · · <b>&gt;</b> []

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

## Political Campaign and Lobbying Activities

nd section 527

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

► See separate instructions.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

#### If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

	Section 501(c)(4), (5), or (6) organizations	Complete Part III						
Nam	e of organization			Employer	identification number			
AI	UMNI ASSOC OF UNIVERSITY OF	SOUTH DAKOTA		46-600				
Pa	rt I-A Complete if the organ	ization is exempt under secti	on 501(c) or is	a section 527 orga	anization.			
1	Provide a description of the organization's							
2	Political expenditures			<b>&gt;</b> \$				
3	Volunteer hours			<u> </u>				
Pa		ization is exempt under secti						
1	Enter the amount of any excise tax incurre							
2	Enter the amount of any excise tax incurre							
3	If the organization incurred a section 4955	tax, did it file Form 4720 for this year?			· 🗌 Yes 📗 No			
4a	Was a correction made?		· · · · · · · · · · ·		· 🗌 Yes 📗 No			
b	If "Yes," describe in Part IV							
Pa		ization is exempt under secti		ept section 501(c)(	3).			
1	Enter the amount directly expended by the							
	activities · · · · · · · · · · · · · · · · · · ·			<b>&gt;</b> \$				
2	Enter the amount of the filing organization							
	527 exempt function activities · · · · ·			<b>&gt;</b> \$				
3	Total exempt function expenditures Add I							
	line 17b · · · · · · · · · · · · · · · · · · ·							
4	Did the filing organization file Form 1120-POL for this year?							
5	Enter the names, addresses and employe	er identification number (EIN) of all section	n 527 political orga	inizations to which the filin	g			
	organization made payments. For each or	rganization listed, enter the amount paid	from the filing orga	nization's funds. Also ente	r			
	the amount of political contributions receive	ved that were promptly and directly delive	ered to a separate	political organization, such				
	as a separate segregated fund or a politic	al action committee (PAC) If additional	space is needed, p	rovide information in Part I	V			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political			
	(-)	(,	<b>(-,</b>	filing organization's	contributions received and			
				funds If none, enter -0-	promptly and directly delivered to a separate			
					political organization If			
					none, enter -0-			
/4\								
(1)								
(2)								
(2)								
/2\	···········							
(3)								
	<del></del>							
(4)								
(5)	_							
(6)								

	rt II-A Complete if the organization	OF UNIVERSIT 1 is exempt un	Y OF SOUTH DA	кота I(c)(3) and filed	46-60011 I Form 5768 (elec			
	section 501(h)).	•						
Α	Check   If the filing organization belongs to a	an affiliated group (a	and list in Part IV eac	h affiliated group me	mber's			
	name, address, EIN, expenses, and							
В	Check   (If the filing organization checked bo	x A and "limited coi	ntrol" provisions appl	1				
		ying Expenditures		<del></del>	(a) Filing	(b) Affiliated		
	(The term "expenditures" m	eans amounts pai	d or incurred.)		organization's totals	group totals		
1a	Total lobbying expenditures to influence public opi	nion (grass roots lo	bbying) · · · ·					
b	Total lobbying expenditures to influence a legislati							
С	Total lobbying expenditures (add lines 1a and 1b)							
d	Other exempt purpose expenditures							
е	Total exempt purpose expenditures (add lines 1c	and 1d)						
f	Lobbying nontaxable amount. Enter the amount fr							
	columns	_						
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amount	is:				
	Not over \$500,000	20% of the am	ount on line 1e					
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess o	ver \$500,000				
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess o	ver \$1,000,000				
	Over \$1,500,000 but not over \$17,000,000	er \$1,500,000						
	Over \$17,000,000							
Over \$17,000,000   \$1,000,000								
h	h Subtract line 1g from line 1a If zero or less, enter -0-							
i	Subtract line 1f from line 1c If zero or less, enter -0-							
j	j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720							
	reporting section 4911 tax for this year?			. <u></u>		Yes No		
	(Some organizations that r	nade a section 50°	eriod Under Section I(h) election do not ions for lines 2a thr	have to complete a				
	Lobby	ing Expenditures	During 4-Year Aver	aging Period	T			
	Calendar year (or fiscal year	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) Total		
	beginning in)							
2a	Lobbying nontaxable amount							
b	Lobbying ceiling amount (150% of line 2a, column (e))			•				
С								
d	Grassroots nontaxable amount							
е	Grassroots ceiling amount (150% of line 2d, column (e))							
f	Grassroots lobbying expenditures							

Sched	ule C (Form 990 or 990-EZ) 2012 ALUMNI ASSOC OF UNIVERSITY OF SOUTH DAKOTA		6001		Page 3
Pa	t II-B Complete if the organization is exempt under section 501(c)(3) and has NOT f	iled F	orm	5768	
	(election under section 501(h)).				
For	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed	<u> </u>	a)		(b)
	ription of the lobbying activity.	Yes	No	Am	ount
	Duran the uses did the files are seen at the ordinary forms.	<del> </del>			
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or				
	referendum, through the use of	1			
а	Volunteers?		Х		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X		
C	Media advertisements?		X		
d	Mailings to members, legislators, or the public?		Х		<del></del>
е	Publications, or published or broadcast statements?		Х		
f	Grants to other organizations for lobbying purposes?		Х	•	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	X			7,500
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	L	X		
i	Other activities?		X		
j	Total Add lines 1c through 1ı · · · · · · · · · · · · · · · · · ·				7,500
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X		
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d D-	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	1		-4:	
Pa	complete if the organization is exempt under section 501(c)(4), section 501(c)	3)(5),	or se	ction	
	501(c)(6).		<del></del>	<del></del>	Vac Na
1	Were substantially all (90% or more) dues received nondeductible by members?			1	Yes No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	
Pa	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)				
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," (				ine 3, is
	answered "Yes."	•	•	·	
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of				
	political expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
þ	Carryover from last year		2b		
C	Total · · · · · · · · · · · · · · · · · · ·	• •	2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	• •	3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the				
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying				
	and political expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)	• •	5		
	rt IV Supplemental Information				
	plete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated of	group			
list),	Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information				
	<del></del>				

### SCHEDULE D (Form 990)

**Supplemental Financial Statements** 

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2012

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection

Employer identification number

46-6001196 ALUMNI ASSOC OF UNIVERSITY OF SOUTH DAKOTA Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (b) Funds and other accounts (a) Donor advised funds 1 Aggregate contributions to (during year) . . . . . Aggregate grants from (during 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? ...... Tyes Displayed by Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ..... Yes No Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 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 Tax Year 2a Total acreage restricted by conservation easements ................ Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) ..... Tyes No (i) and section 170(h)(4)(B)(ii)? In Part XIII, 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 If the organization elected, as permitted under SFAS 116 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), 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 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 (ASC 958) relating to these items Assets included in Form 990, Part X

	ule D (Form 990) 2012 ALUMNI ASSOC OF							46-60			Page 2
Par	t III Organizations Maintaining C								sse	ts (contin	uea)
3	Using the organization's acquisition, accession, a	and othe	r records, ch	heck any of	the follow	ing that are a	significa	nt use of its			
	collection items (check all that apply)										
а	Public exhibition	į	d 🗌 Loa	n or exchar	nge progra	ms					
b	Scholarly research		e 🗌 Oth	er							
С	Preservation for future generations										
4	Provide a description of the organization's collect	tions and	d explain ho	w they furth	er the ora	anızatıon's ex	empt pu	pose in Part			
	XIII		<b>-</b>	,	J 3						
5	During the year, did the organization solicit or re-	cewe do	nations of ar	t historical	treasures	or other sim	ılar				
•	assets to be sold to raise funds rather than to be									□ vos	□ No
Par	rt IV Escrow and Custodial Arran	namai	nte Com	nnlete if t	he orga	nization ar	swere	d "Yes" to F	orm	990 Part	
· ai	line 9, or reported an amount	on For	m 990 P	art X line	21	inzation ai	1011010	u 100 to 1	····	000, 1 011	. • ,
4-						that assats n				<del></del>	
1a	Is the organization an agent, trustee, custodian of									□ v <sub>22</sub>	
										∐ Yes	∐ No
b	If "Yes," explain the arrangement in Part XIII and	i compie	te the follow	ing table							
								· <del></del>	Amou	nt	
C	Beginning balance							<del></del>			
d	Additions during the year										
e	Distributions during the year						L				
f	Ending balance			• • • • •			· - 1f	1			<u></u>
2a	Did the organization include an amount on Form	990, Pa	rt X, line 21'	·						٠	=
b	If "Yes," explain the arrangement in Part XIII Ch										· 🗆
Pai	rt V Endowment Funds. Complete	o if the	organiza	tion ansv	vered "Y	es" to For	<u>m 990,</u>	Part IV, line	<u> 10</u>		
		(a) C	urrent year	(b) Prid	or year	(c) Two years	s back	(d) Three years be	ack	(e) Four year	s back
1a	Beginning of year balance								i		
b	Contributions										
С	Net investment earnings, gains, and										
	losses										
d	Grants or scholarships								$\neg$		
е	Other expenditures for facilities and										
•	programs						1		1		
f	Administrative expenses	<u> </u>							$\rightarrow$		
'	End of year balance		-					-	$\rightarrow$		
g 2	Provide the estimated percentage of the current	Vear en	d halance (lu	ne 1a colu	mn (a)) he	ld as		<del></del>			
	Board designated or quasi-endowment	year em	# Dalance (⊪ %	ne ig, colu	iiii (a)) iic	10 03					
a	Permanent endowment  %		/6								
b	<del></del>		0/								
С	Temporarily restricted endowment		. %								
•	The percentages in lines 2a, 2b, and 2c should	-		- 414 1-			- 41				
3a	Are there endowment funds not in the possession	on or the	organization	n that are no	eia ana aa	ministerea to	rtne			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	organization by									Yes	s No
	(i) unrelated organizations · · · · · · ·								• •	3a(i)	<del></del>
	(ii) related organizations · · · · · · · · ·								• •	3a(ii)	
b	If "Yes" to 3a(II), are the related organizations is				• • •					3b	
4	Describe in Part XIII the intended uses of the or				1 1 1	- 10					
Pa	rt VI Land, Buildings, and Equipr	nent.	See Form	1990, Pa	rt X, line	9 10.					
	Description of property		(a) Cost or oth			or other basis other)		Accumulated epreciation		(d) Book valu	ie
1a	Land								+		
b	Buildings						-		+		
c	Leasehold improvements			<del></del> :					+		
d	Equipment					· ···-		···	+		
							<del> </del>		+-		
e Tota	<del></del>		000 Part Y	column (D	l hpo 10/-	4.1	l	<u> </u>	+-		
ota	<ol> <li>Add lines 1a through 1e (Column (d) must equ</li> </ol>	iai rorm	əsυ, raπ X,	, column (B	, me ru(c	<i>"</i>	· · · · ·	· · · · · · · · · · · · · · · · · · ·	Ь		

** ***			Daniel Daniel
Part VII Investments - Other Securities.	OF UNIVERSITY OF SOUTH D See Form 990 Part X line 12	DAKOTA 46-600	1196 Page 3
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation  Cost or end-of-year market	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			-
(B)			
(C)			
(D)			
(E)			
(F)			
(G)	-		
(H)			
(I)  Total (Column (h) must equal Form 990, Part X, col. (R) line 12.)			
Part VIII Investments - Program Related.	1	3	
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market	
(1) INVESTMENT ACCT USD FOUNDATION	1,072,543	FMV	· · · · · · · · · · · · · · · · · · ·
(2)			
(3)			
(4)			<u></u>
(5)			
(6)			
(7) (8)	<del></del>		184,5,4
(9)			
(10)			
Total (Column (b) must equal Form 990, Part X, col (B) line 13 )	1,072,543		
Part IX Other Assets. See Form 990, Part	X, line 15.		
(a	a) Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			<u> </u>
(6)			-
(7) (8)			
(9)	<del></del>		<del></del>
(10)			
Total. (Column (b) must equal Form 990, Part X, col (B) line	15)		
Part X Other Liabilities. See Form 990, P.	art X, line 25		·
1. (a) Description of liability	(b) Book value		
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) (10)			
(11)			
V-7			

2. FIN 48 (ASC 740) Footnote 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 . . . . . . . . . . . . .

Total (Column (b) must equal Form 990, Part X, col (B) line 25)

	le D (Form 990) 2012 ALUMNI ASSOC OF UNIVERSITY OF SOUTH DAKOT	A		6-600		Page 4
Par				T -	m	
1	11 1			1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	ا ۔ ا				
a	Net unrealized gains on investments	2a				
b	Donated services and use of facilities	2b		-		
C	Recoveries of prior year grants	2c 2d		-		
d	Add lines 2a through 2d			2e		
e	Subtract line 2e from line 1			3		
3		 I		-3-		·
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	4.				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	<u>.</u>	-		
b	Other (Describe in Part XIII )	4b		┥╻│		
_C				4c		
5 Do:	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			por Po	turn	
	Total expenses and losses per audited financial Statem			1 1	stuffi	
1		• • • •	· · · · · · · · · · · · ·	1		<del></del>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	ا ما				
а	Donated services and use of facilities	2a		-		
b	Prior year adjustments	2b		-		
C	Other losses	2c		-		
d	Other (Describe in Part XIII )	2d		4 .		
е	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·			2e		
3	Subtract line 2e from line 1 · · · · · · · · · · · · · · · · · ·			3	· · · · · · · · · · · · · · · · · · ·	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		_		
b	Other (Describe in Part XIII )	4b		4		
С	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·			4c		
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	• • •		5		
Pa	t XIII   Supplemental Information					
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1					
Part '	/, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete	e this p	eart to provide any addit	tional		
ınforr	nation					
	<del></del>					

Schedule D (Form 990) 2012

EEA

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

# Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or 990-EZ.

Inspection
Employer identification number

ALUMNI ASSOC OF UNIVERSITY OF SOUTH DAKOTA	46-6001196
01. Members or stockholder classes and rights (Part V	I, line 6)
THE BOARD OF DIRECTORS OF THE ASSOCIATION CONSISTS OF (A) 15 DIRECTOR	S ELECTED FROM THE
MEMBERSHIP OF THE ASSOCIATION, (B) ANY OFFICERS OR REPRESENTATIVES TO	THE UNIVERSITYS
ATHLETIC BOARD OF CONTROL, (C) A REPRESENTATIVE OF THE UNIVERSITY OF S	OUTH DAKOTA
FOUNDATIONS BOARD OF DIRECTORS, (D) A REPRESENTATIVE OF THE STUDENT BO	DY, AND (E) UP TO 8
REPRESENTATIVES OF LOCAL OR REGIONAL ALUMNI ASSOCIATIONS.	
02. Member election for additional members (Part VI,	line 7a)
THE MEMBERS OF THE BOARD OF DIRECTORS SHALL BE ELECTED AT THE ANNUAL	MEETING OF THE
ASSOCIATION. 5 OF THE 15 ELECTED DIRECTORS ARE ELECTED EACH YEAR. A	VACANCY ON THE BOARD
OF DIRECTORS BETWEEN MEETINGS WILL BE FILLED BY A VOTE OF THE REMAINI	NG DIRECTORS.
03. Governing body decisions (Part VI, line 7b)	
THE BOARD OF DIRECTORS SHALL EXERCISE ALL OF THE AUTHORITY OF THE ASS	OCIATION.
04. Form 990 governing body review (Part VI, line 11)	
FORM 990 IS ELECTRONICALLY DISTRIBUTED AND REVIEWED BY THE GOVERNING	BODY BEFORE FILING.
05. Conflict of interest policy compliance (Part VI,	line 12c)
KEY PERSONNEL ARE REQUIRED TO DISCLOSE ANNUAL CONFLICT OF INTEREST.	
06. Governing documents, etc, available to public (Pa	ert VI, line 19)
THE BOARD OF DIRECTORS MAKES ITS GOVERNING DOCUMENTS CONFLICT OF INTE	REST POLICY AND
FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.	