

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



DLN: 93493021002074

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

Open to Public

Department of the Treasury

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection A For the 2012 calendar year, or tax year beginning 07-01-2012 , 2012, and ending 06-30-2013 D Employer identification number B Check if applicable COLORADO SCHOOL OF MINES FOUNDATION INC Address change 84-0509064 Doing Business As Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number Terminated (303) 273-3143 City or town, state or country, and ZIP + 4 GOLDEN, CO 80401 Amended return Application pending G Gross receipts \$ 94,439,214 Name and address of principal officer Is this a group return for LINDA LANDRUM ┌ Yes 🗸 No affiliates? PO BOX 4005 GOLDEN, CO 80401 **H(b)** Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) Tax-exempt status **▽** 501(c)(3) **□ H(c)** Group exemption number ▶ Website: ► N/A K Form of organization ✓ Corporation ✓ Trust ✓ Association ✓ Other ► **L** Year of formation 1951 **M** State of legal domicile CO Part I Summary Briefly describe the organization's mission or most significant activities TO PROVIDE FINANCIAL RESOURCE DEVELOPMENT AND SUPPORT TO THE COLORADO SCHOOL OF MINES Activities & Governance 2 Check this box 🛏 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . Number of independent voting members of the governing body (Part VI, line 1b) 4 7 89 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 6 137 Total number of volunteers (estimate if necessary) . . . -736,187 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a \boldsymbol{b} Net unrelated business taxable income from Form 990-T, line 34 $\,$ 7b -870,328 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . . 31,146,313 26,073,906 0 1,800,000 Program service revenue (Part VIII, line 2g) . . 5,112,821 8,681,235 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . -442,411 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -125,137 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 36,133,997 36,112,730 13 17,132,295 16,791,662 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 14 Benefits paid to or for members (Part IX, column (A), line 4) . . 0 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines **15 Expenses** 2,844,721 3,318,358 16a Professional fundraising fees (Part IX, column (A), line 11e) . 95,000 65,497 b Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright \frac{3,632,747}{}$ 1,885<u>,</u>783 2,173,883 **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 21,957,799 22,349,400 18 13,763,330 19 Revenue less expenses Subtract line 18 from line 12 14,176,198 t Assets or id Balances **Beginning of Current End of Year** Year 20 Total assets (Part X, line 16) . 241,355,627 278,816,738 21 Total liabilities (Part X, line 26) . . 26,303,196 33,312,620 22 Net assets or fund balances Subtract line 21 from line 20 215,052,431 245,504,118 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2014-01-14 Signature of office Sign Here LINDA LANDRUM EXECUTIVE DIRECTOR

Preparer's signature

Firm's address ► 7979 E TUFTS AVENUE SUITE 400

DENVER, CO 802372843 May the IRS discuss this return with the preparer shown above? (see instructions)

Type or print name and title

Paid

Preparer

Use Only

Print/Type preparer's name DORI J EGGETT

Firm's name FKS&H LLLP

Check

self-employed

Firm's EIN F 46-1497033

Phone no (303) 740-9400

P00645252

✓ Yes ☐ No

4d Other program services (Describe in Schedule O)

Total program service expenses ▶

(Expenses \$ including grants of \$

17,059,682

) (Revenue \$

art IV	Chec	klist	of Re	auired	Sche	dules

			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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 📆	2	Yes	
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^{\bullet}	3		No
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	Yes	
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,	5		No
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 1	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
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	Yes	
c	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		No
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	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part $X^{f color}$	11e	Yes	
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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		No
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		No
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	Yes	
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		No
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
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	Yes	
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		No
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	Yes	
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		No
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		No
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		No
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		No
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		No
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Par	Statements Regarding Other 1R5 Fillings and Tax Compliance			_
	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 1a 13			110
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
_	gaming (gambling) winnings to prize winners?	1 c	Yes	
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	36	V	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
ь	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			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
6-	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c 6a		No
oa	organization solicit any contributions that were not tax deductible as charitable contributions?	ба		INO
b	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).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
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?	7 c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
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	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		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
.0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
.4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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				

	ection A. Governing Body and Management			
			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ue Cod Yes	e.) No
	Did the organization have local chapters, branches, or affiliates?	evenu 10a		•
10a	Did the organization have local chapters, branches, or affiliates?			No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	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, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 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 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," describe in Schedule O how this was done	10a 10b 11a 12a 12b	Yes Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No No

- 17 List the States with which a copy of this Form 990 is required to be filed AK, AZ, CA, FL, MD, MA, MI, MN, NH, NJ, NY, OH, PA, SC, TN, UT, WA, WV, GA, MD, WI
- 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 made these available. Check all that apply
 - Own website Another's website Vpon request Other (explain in Schedule O)

 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
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►LINDA LANDRUM CO CSMF PO BOX 4005 GOLDEN, CO (303) 273-3143

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 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, or 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) Name and Title	(B) A verage hours per week (list any hours for related	more pers and	than on is	one bot ect	not box h ar or/tr	offic	ess er e)	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	MISC)	(W- 2/1099- MISC)	organization and related organizations
(1) F STEVEN MOONEY	1 00	х						0	0	0
AT LARGE								Ü	Ŭ	
(2) HUGH E HARVEY AT LARGE	1 00	×						0	0	0
(3) WILLIAM A PRESTON	1 00									
AT LARGE		X						0	0	0
(4) DAVID J WAGNER	1 00	х		х				0	0	0
PRESIDENT & CHAIR		_ ^						0	U	0
(5) PATRICK M JAMES	1 00	x		Х				0	0	0
TREASURER		_ ^						Ů	Ŭ	
(6) TERRANCE G TSCHATSCHULA	1 00	x		x				0	0	0
SECRETARY				<u> </u>				Ů	, and the second	
(7) MARSHALL C CROUCH III	1 00	×		×				0	0	0
VICE CHAIR										
(8) LINDA M LANDRUM	40 00			х				167,136	0	19,599
EXECUTIVE DIRECTOR								·		
(9) BRIAN L WINKELBAUER	40 00			х				167,798	0	19,844
EXECUTIVE VP										
(10) CHRISTOPHER WENGER SENIOR DIRECTOR	40 00					Х		145,554	0	5,385

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) A verage hours per week (list any hours	more t perso	tion (han d n is l	ne l both	box, an c	heck unless officer stee)	3	(E Repor comper from organiza	table sation the tion (W-	(E) Reportable compensation from related organizations (V	v-	(F) Estima amount o compens from t	ted fother ation he
		for related organizations below dotted line)	Individual trustiee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC) c	rganizati relate organiza	ed
1b	Sub-Total							<u> </u>				+		
c	Total from continuation sheet	s to Part VII, S	ection A	٠.	•	•		►						
d	Total (add lines 1b and 1c) .							۰		480,488		0		44,828
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) wl	ho receive	d more th	an			
													Yes	No
3	Did the organization list any fo on line 1a? <i>If</i> " <i>Yes,"</i> complete S					key •	emplo	yee, •	or highes	t compen	sated employee	3		No
4	For any individual listed on line organization and related organ individual											4	Yes	
5	Did any person listed on line 1 services rendered to the organ								_		or individual for	5		No
Se	ction B. Independent Co	ntractors												
1	Complete this table for your fix	/e highest comp												
	compensation from the organiz	zation Report co	mpens	atıon	for	the c	alenda	arye	ar ending	with or wi	thin the organiza	tıon's T	tax year (C	
		· · · /								_	\-	1	_ ,-	• .

(A) Name and business address	(B) Description of services	(C) Compensation
AMERICAN CAPITOL GROUP 101 CONSTITUTION AVE 525 EAST WASHINGTON DC 20001	LOBBY SERVICES	144,285
MONTICELLO ASSOCIATES 1800 LARIMER ST SUITE 2100 DENVER CO 80202	INVESTMENT CONSULTING	125,000
COLORADO LEGISLATIVE SERVICES 1410 GRANT ST D110 DENVER CO 80203	LOBBY SERVICES	107,462
GARROW COMPANY 6419 SOUTH GARFIELD AVENUE WILLOWBROOK IL 60527	CONSULTING	105,171
Total wimbou of independent contractors (including but not limited to those lighted show		<u> </u>

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►4

Part V		Statement o	ule O contains a respor	nse to any question i	n this Part VIII			
		Check if Series	are o contains a respon	ise to any question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
χs	1a	Federated cam	paigns 1a					
ant	b	Membership du	es 1b					
Gr	С	Fundraising eve	ents 1c					
iffs, ar £	d	Related organiz	zations 1d					
s, G mil	е	Government grants	s (contributions) 1e					
ons Sii	f	All other contribution	ons, gifts, grants, and 1f	26,073,906	ł	i		
Contributions, Gifts, Grants and Other Similar Amounts	-	sımılar amounts no	ot included above		ļ			
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contribute 1a-1f \$	ons included in lines	5,213,496				
Cot	h	Total. Add lines	s 1a-1f	🗼	26,073,906			
				Business Code				
enu	2a	DEVELOPMENT FEE	<u> </u>	900099	1,800,000	1,800,000		
Ве	b							
лсе	С							
Seri	d							
an	e	A II - 11						
Program Serwce Revenue	f	All other progra	am service revenue					
	g		s 2a-2f		1,800,000			
	3		ome (including dividendar amounts)		1,599,457			1,599,457
	4		stment of tax-exempt bond					
	5	Royalties		►	16,862			16,862
	6-	Cwara wanta	(ı) Real	(II) Personal				
	6a b	Gross rents Less rental						
	c	expenses Rental income						
	d	or (loss)	me or (loss)					
	u	Net relitar liico	(i) Securities	(II) Other				
	7a	Gross amount		(II) o ellel				
		from sales of assets other	65,408,262					
	ь	than inventory Less cost or						
		other basis and sales expenses	58,326,484					
	c	Gain or (loss)	7,081,778		7 004 770			7 004 770
	d 8a	Net gain or (los	i	· · · · •	7,081,778			7,081,778
<u>e</u>	Ga	Gross income f events (not inc						
Other Revenue		\$	s reported on line 1c)					
Rev		See Part IV, lin						
er	L		a					
oth Oth	b c		penses b (loss) from fundraising (events 🛌				
	9a	Gross income f	rom gaming activities	-				
		See Part IV, lin	ne 19 a					
	b	Less directex	penses b					
	С		(loss) from gaming activ	vities				
	10a	Gross sales of						
		returns and allo	owances . a					
	b	Less cost of g	oods sold b					
		=	(loss) from sales of inve	entory 🛌				
		Miscellaneous		Business Code		-		
		ADMINISTRAT	-	523000	270,717	270,717		
	b	OTHER INCOM	<u> </u>	900099 523000	6,197 -736,187	6,197	-736,187	
	c d	All other reven		323000	-/30,10/		-130,107	
	e		ue s 11a-11d	🛌				
	12		See Instructions	-	-459,273			
			Sec 1/130 decitions	· · · · •	36,112,730	2,076,914	-736,187	8,698,097 Form 990 (2012)

Part IX Statement of Functional Expenses

	IX Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All			lete column (A)	
	Check if Schedule O contains a response to any question in this Pa	rt IX			
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	16,791,662	16,791,662		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	413,390		202,635	210,755
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	Other salaries and wages	2,412,363		289,586	2,122,777
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	112,873		15,137	97,736
9	Other employee benefits	168,768	10,000	27,144	131,624
10	Payroll taxes	210,964		34,120	176,844
11	Fees for services (non-employees)				
а	Management	25,519		22,953	2,566
Ь	Legal	16,115		15,371	744
c	Accounting	54,688		54,688	
d	Lobbying	253,118	253,118		
e	Professional fundraising services See Part IV, line 17	65,497			65,497
f	Investment management fees	929,385		929,385	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	5,750			5,750
12	Advertising and promotion	147,831			147,831
13	Office expenses	200,696		27,405	173,291
14	Information technology	54,890			54,890
15	Royalties				
16	Occupancy				
17	Travel	159,008	4,902	3,077	151,029
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	10,565		495	10,070
23	Insurance	27,175		17,175	10,000
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	MEETINGS AND EVENTS	192,930		8,593	184,337
b	PREMIUMS	32,674			32,674
c	RESEARCH MATERIAL	13,435		260	13,175
d	RELOCATION/RECRUITING	12,523		500	12,023
e	All other expenses	37,581		8,447	29,134
25	Total functional expenses. Add lines 1 through 24e	22,349,400	17,059,682	1,656,971	3,632,747
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 ► ☐ if following SOP 98-2 (ASC 958-720)				<u> </u>

Part X Balance Sheet

Par	't X	Balance Sheet Check if Schedule O contains a response to any question in this Part X .				
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		1,422,128	1	1,610,833
	2	Savings and temporary cash investments		1,229,688	2	9,413,133
	3	Pledges and grants receivable, net		12,947,481	3	12,402,641
	4	Accounts receivable, net		103,218	4	159,719
	5	Loans and other receivables from current and former officers, directors, trust key employees, and highest compensated employees. Complete Part II of Schedule L	tees,		5	
<u>.x</u>	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contribute employers and sponsoring organizations of section 501(c)(9) voluntary emplementary organizations (see instructions) Complete Part II of Schedule L	butıng		_	
ल्					6	
Assets	7	Notes and loans receivable, net	•		7	
_	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a	515,552			
	b	Less accumulated depreciation 10b	500,007	22,933	10 c	15,545
	11	Investments—publicly traded securities		107,025,992	11	151,339,223
	12	Investments—other securities See Part IV, line 11		88,533,262	12	72,761,720
	13	Investments—program-related See Part IV, line 11		1,757,500	13	1,755,014
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		28,313,425	15	29,358,910
	16	Total assets. Add lines 1 through 15 (must equal line 34)		241,355,627	16	278,816,738
	17	Accounts payable and accrued expenses		1,513,668	17	2,660,309
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
S	21	Escrow or custodial account liability $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$			21	
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified				
qе		persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	_
	24	Unsecured notes and loans payable to unrelated third parties			24	_
	25	Other liabilities (including federal income tax, payables to related third parti and other liabilities not included on lines 17-24) Complete Part X of Schedu				
		D		24,789,528	25	30,652,311
	26	Total liabilities. Add lines 17 through 25		26,303,196	26	33,312,620
ين طا		Organizations that follow SFAS 117 (ASC 958), check here ► 🔽 and comple	te			
Ĕ	27	lines 27 through 29, and lines 33 and 34. Unrestricted net assets		21,348,650	27	24,364,971
<u>ର</u>	28	Temporarily restricted net assets		67,126,096	28	77,560,197
<u> </u>	29	Permanently restricted net assets		126,577,685	29	143,578,950
or Fund Balances	29	Organizations that do not follow SFAS 117 (ASC 958), check here ► and		120,577,085	23	140,070,900
Ξ.		complete lines 30 through 34.				
0	30	Capital stock or trust principal, or current funds			30	
φ	31	Paid-in or capital surplus, or land, building or equipment fund			31	
Assets	32	Retained earnings, endowment, accumulated income, or other funds			32	
Net /	33	Total net assets or fund balances		215,052,431	33	245,504,118
Ź	34	Total liabilities and net assets/fund balances		241,355,627	34	278,816,738
		,		,,-21		=: -,, . 30

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				৮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		36,:	112,730
2	Total expenses (must equal Part IX, column (A), line 25)	2		22,3	349,400
3	Revenue less expenses Subtract line 2 from line 1	3			763,330
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			52,431
5	Net unrealized gains (losses) on investments	5			388,224
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-1,:	199,867
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		245,5	504,118
Par	t XII Financial Statements and Reporting			•	•
	Check if Schedule O contains a response to any question in this Part XII				. $ abla$
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	ewed or	ו		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	arate			
	▼ Separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
За	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?	ne	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	require	d 3b		

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493021002074

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

COLORADO SCHOOL OF MINES FOUNDATION INC

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

Open to Public Inspection

									84-05090		
	rt I			blic Charity Sta						nstruction	S
	rganı		•	te foundation becaus	•			•	•		
1		A chur	ch, convent	on of churches, or a	ssociation of	f churches c	lescribed in s	ection 170	(b)(1)(A)(i).		
2	Г	A scho	school described in section 170(b)(1)(A)(ii). (Attach Schedule E)								
3	Γ	A hosp	ital or a cod	perative hospital se	rvice organiz	zatıon descr	ıbed ın sectio	n 170(b)(1	L)(A)(iii).		
4	Γ	A medi	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the							Enter the	
_	_			ty, and state							
5	굣	_	•	erated for the benefi	_	or universi	ity owned or o	perated by	a governmen	tal unit des	cribed in
	_	section 170(b)(1)(A)(iv). (Complete Part II)									
6	<u> </u>			local government o	-			• •			
7				at normally receives			support from	a governm	nental unit or f	rom the ge	neral public
8	_			on 170(b)(1)(A)(vi). : described in sectio i			mplete Part II	r \			
9	<u>'</u>		•	at normally receives	. , . , .	, , , ,	•	•	ibutions mom	harchin fac	s and gross
9	,	_		rities related to its e					· ·	-	
		•		oss investment inco	•	=		-			
		•		ganızatıon after June				•		cax) nom c	,4311163363
10	\vdash	•	,	ganized and operate	•			•	•		
11	<u>'</u>	_		•	•		•		. , , ,	to carry out	the nurnoses of
	'	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check									
			he box that describes the type of supporting organization and complete lines 11e th <u>ro</u> ugh 11h								
		a	Type I	b Type II c	Type II	I - Functior	nally integrate	ed d	Type III - N	on-functior	ally integrated
e	Γ			ox, I certify that the							
				on managers and ot	her than one	or more pul	blicly support	ed organiza	atıons descrıb	ed in secti	on 509(a)(1) or
f			1509(a)(2)	received a written d	etermination	from the IP	C that it is a	Type I Ty	ne II or Tyne	III suppor	ting organization
•			this box	received a written a	cccimmacion	nom the m	Co chac ic is a	турс 1, ту	pc 11, 01 1 ypc	III Suppoi	
g		Since A	ugust 17, 2	2006, has the organ	ızatıon accep	oted any gift	t or contributi	on from an	y of the		·
			ng persons?								
		., .		rectly or indirectly o	•		5	persons d	escribed in (ii		Yes No
		•		governing body of th	• •	•	n?				.g(i)
			•	er of a person descr							g(ii)
				lled entity of a perso						11	g(iii)
h		Provide	e the followi	ng information about	the supporte	ed organizat	tion(s)				
(i) Nan	ne of	(ii) EIN	(iii) Type of	(iv) Is	the	(v) Did you	ı notıfy	(vi) Is	the	(vii) A mount of
		opported organization (described on			organizati		the organi	zation	organizat	ion in	monetary
organiz				ization		,	col (i) lis		ın col (i) d		col (i) org
				lines 1-9 above or IRC section	your gove docume		suppor	τ,	ın the U	S7	
				(see	docume	ווני					
				instructions))	V	N-		NI-	V	T NI=	\dashv
					Yes	No	Yes	No	Yes	No	
						-	+			1	
Total	<u> </u>								+		

Schedule A (Form 990 or 990-EZ) 2012 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do 36,929,805 13,605,141 11,383,543 31,146,313 26,073,906 119,138,708 not include any "unusual grants ") 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 36,929,805 13,605,141 11,383,543 31,146,313 26,073,906 119,138,708 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 30,712,010 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 88,426,698 from line 4 Section B. Total Support Calendar year (or fiscal year **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (a) 2008 (f) Total beginning in) 🟲 36,929,805 31,146,313 26,073,906 Amounts from line 4 13,605,141 11,383,543 119,138,708 Gross income from interest, dividends, payments received on securities loans, rents, royalties 1,986,572 2,202,012 1,795,247 1,727,610 1,616,319 9,327,760 and income from similar sources Net income from unrelated business activities, whether or -464,535 897,611 433,076 not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of 199,260 185,127 178,766 146,133 276,914 986,200 capital assets (Explain in Part IV) 11 Total support (Add lines 7 129,885,744 through 10) 12 Gross receipts from related activities, etc (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14 68 080 % Public support percentage for 2011 Schedule A, Part II, line 14 15 65 560 % 16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ►V and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this ►□ box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

supported organization

instructions

Schedule A (Form 990 or 990-EZ) 2012 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (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.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> a	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)						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	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						
11	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, and 12)			Liberal Counties and	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					<u> </u>
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 20:	1 2
-------------------------------------	-----

Page **4**

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME OTHER INCOME - 2008 AMOUNT \$ 14,596 2009 AMOUNT \$ 9,542 2010 AMOUNT \$ -48,703 2011 AMOUNT \$ -98,024 2012 AMOUNT \$ 6,197 ADMINISTRATION FEES - 2008 AMOUNT \$ 184,664 2009 AMOUNT \$ 175,585 2010 AMOUNT \$ 227,469 2011 AMOUNT \$ 244,157 2012 AMOUNT \$ 270,717

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493021002074

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

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.

Political Campaign and Lobbying Activities

Inspection 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 Name of the organization **Employer identification number** COLORADO SCHOOL OF MINES FOUNDATION INC 84-0509064 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 Was a correction made? ☐ Yes ┌ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 4 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

section 4911 tax for this year?

┌ Yes ┌ No

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

Check	▶ □	ıf the filing	organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, E	ĪN,
		expenses	and share of excess lobbying expenditures)	

B Check ► If the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	253,118	
c	Total lobbying expenditures (add lines 1a and 1	o)	253,118	
d	Other exempt purpose expenditures		21,101,400	
е	Total exempt purpose expenditures (add lines 1	c and 1d)	21,354,518	
f	Lobbying nontaxable amount Enter the amount columns	rom the following table in both	1,000,000	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lir	ne 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, ent	er -0 -	0	
i	Subtract line 1f from line 1c If zero or less, ente	er-0-	0	
j	If there is an amount other than zero on either lii	ne 1h or line 1i, did the organization file Form 472	O reporting	□ Yes □ No

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expendit	ures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a	Lobbying nontaxable amount	830,843	1,000,000	1,000,000	1,000,000	3,830,843
b	Lobbying ceiling amount (150% of line 2a, column(e))					5,746,265
c	Total lobbying expenditures	231,327	247,460	250,008	253,118	981,913
_d	Grassroots nontaxable amount	207,711	250,000	250,000	250,000	957,711
e 	Grassroots ceiling amount (150% of line 2d, column (e))					1,436,567
f	Grassroots lobbying expenditures					

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has Notice filed Form 5768 (election under section 501(h)).	ОТ			7 0	ge S
	Week Week was a second of the	(6	a)		(b)	
activ	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying vity.	Yes	No	1	Amoun	t
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					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	O ther activities?					
j	Total Add lines 1c through 1:					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 505(c)(6).	01(c)(5), (or s		
_			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			3		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?					
Pa	t III-B Complete if the organization is exempt under section 501(c)(4), section 505(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N line 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).					
	Current year	2a				
b	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				

Part IV Supplemental Information

Complete 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 group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Identifier Return Reference Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493021002074

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

► 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

Supplemental Financial Statements

Open to Public

emai R	evenue Service F- Attach to For	m 990. F See separate instructions.		Inspection
	e of the organization RADO SCHOOL OF MINES FOUNDATION INC		Emp	loyer identification number
				0509064
Par'	Organizations Maintaining Donor Advorganization answered "Yes" to Form 990		Funds	or Accounts. Complete if the
		(a) Donor advised funds		(b) Funds and other accounts
. 1	Total number at end of year			
. <i>I</i>	Aggregate contributions to (during year)			
. /	Aggregate grants from (during year)			
, A	Aggregate value at end of year			
	Did the organization inform all donors and donor adviso funds are the organization's property, subject to the or		nor adv	rsed Yes No
1	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the benef			r purpose
	conferring impermissible private benefit?	1 107 11		
	Conservation Easements. Complete if		to Forn	n 990, Part IV, line 7.
. J	Purpose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation	or education)		ıcally ımportant land area
ļ	Protection of natural habitat	Preservation of a	certifie	d historic structure
ļ	Preservation of open space			
	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	a qualified conservation contribution in	the forn	n of a conservation
				Held at the End of the Year
a ·	Total number of conservation easements		2a	
ь [.]	Total acreage restricted by conservation easements		2b	
c	Number of conservation easements on a certified histo	oric structure included in (a)	2c	
	Number of conservation easements included in (c) acc historic structure listed in the National Register	juired after 8/17/06, and not on a	2d	
	Number of conservation easements modified, transferr	red. released. extinguished. or termina	ted by th	ne organization during
	the tax year ▶	,	,	
.	Number of states where property subject to conservat	ıon easement ıs located ▶		
	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?	the periodic monitoring, inspection, ha	ndling of	violations, and Yes No
. :	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation ease	ements o	during the year
	Amount of expenses incurred in monitoring, inspecting \$ \$	g, and enforcing conservation easemen	its durin	g the year
.	Does each conservation easement reported on line 2(a and section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of se	ection 17	7 0 (h)(4)(B)(ı)
) ;	In Part XIII, describe how the organization reports col balance sheet, and include, if applicable, the text of th			nse statement, and
	the organization's accounting for conservation easeme	-	ar stater	ments that describes
art	Organizations Maintaining Collection Complete if the organization answered "Y		, or Ot	her Similar Assets.
,	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	16 (ASC 958), not to report in its revits held for public exhibition, education	, or rese	arch in furtherance of public
	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to thes	ts held for public exhibition, education		
	(i) Revenues included in Form 990, Part VIII, line 1			► \$
	(ii) Assets included in Form 990, Part X			► \$
<u>.</u> :	If the organization received or held works of art, histor following amounts required to be reported under SFAS			
а	Revenues included in Form 990, Part VIII, line 1			▶ \$
	·			

b Assets included in Form 990, Part X

Par	Organizations Maintaining Co	llections of Ar	t, His	<u>storical i</u>	<u>reasur</u>	res, or O	<u>tner</u>	<u>r Similar As</u>	sets ((continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other reco	rds, cl	neck any of	the follo	wing that a	re a	sıgnıfıcant use	ofits	
а	Public exhibition		d	┌ Loan	or exch	ange progr	ams			
b	Scholarly research		e	┌ Othe	r					
c	Preservation for future generations									
4	Provide a description of the organization's co Part XIII	ollections and expl	aın hov	w they furth	er the or	rganızatıon	's ex	empt purpose	ın	
5	During the year, did the organization solicit								_	_
	assets to be sold to raise funds rather than t		-						┌ Yes	☐ No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an an					answere	a ∵Y€	es" to Form S	990,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					r other ass	ets n	ot	┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	e follov	wing table		_				
								Ar	nount	
C	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, Iır	ne 21?	•					┌ Yes	☐ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	e expla	anation has	been pr	ovided in P	art X	III		. Г
Pa	rt V Endowment Funds. Complete						_			
1-	Barunum of warmhalana	(a)Current year 167,544,418	(b)	Prior year 158,617,474		o years back 132,563,088		hree years back 118,298,434	(e)Four	years back 129,174,375
1a b	Beginning of year balance	11,734,285		14,940,978	ļ	2,431,253		2,328,954		12,050,854
C	Net investment earnings, gains, and losses	11,731,203		11,310,370		2, 131,233		2,320,331		
	wet investment earnings, gams, and losses	21,300,320		-2,973,166		28,707,486		15,255,877		-17,548,032
d	Grants or scholarships									
e	Other expenditures for facilities and programs	12,092,802		3,040,868		5,084,353		3,320,177		5,378,763
f	Administrative expenses									
g	End of year balance	188,486,221		167,544,418		158,617,474		132,563,088		118,298,434
2	Provide the estimated percentage of the cur	rent year end balan	ice (lir	ne 1g, colun	nn (a)) h	eld as				
а		10 240 %								
ь	Permanent endowment - 64 620 %									
С		140 %								
_	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%								
За	Are there endowment funds not in the posse organization by	ssion of the organiz	zatıon	that are hel	d and ac	dministered	fort	the 	Ye	s No
	(i) unrelated organizations							3a		
	(ii) related organizations							3a(No_
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the second or the seco	·			• •		•	3	D	
	t VI Land, Buildings, and Equipme				10.					
	Description of property		/	(a) Cost basis (inve	or other	(b)Cost or obasis (oth		(c) Accumulate depreciation) Book value
	Land									-
	Buildings									
	Leasehold improvements									
d	Equipment					51!	5,552	500,	007	15,545
e	Other					<u></u>				
	I. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part	X, colu	ımn (B), lıne	10(c).)			🕨		15,545

Part VII Investments—Other Securities. S		
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
		Cost of end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
(3)Other (A)PARTNERSHIPS INVESTMENTS	72,761,720	F
(A) FARTNERSHIPS INVESTMENTS	72,701,720	<u>'</u>
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	72,761,720	
Part VIII Investments—Program Related.		13.
(a) Description of investment type	(b) Book value	(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
		,
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	F	
Part IX Other Assets. See Form 990, Part X	line 15	
,	cription	(b) Book value
(1) TRUST CONTRIBUTIONS RECEIVABLE		3,785,373
(2) SPLIT INTEREST AGREEMENTS		15,263,233
(3) INTEREST IN ENDOWMENT		8,379,441
(4) INTEREST IN LONG-TERM TRUSTS		1,303,691
(5) PMC NET ASSETS		395,885
(6) OTHER ASSETS		171,520
(7) INVESTMENT IN COLORADO SCHOOL OF MINES	S TECHNOLOGY	59,767
(/) INVESTMENT IN COLORADO SCHOOL OF MINES	3 I L C III NO L O G I	39,707
Total. (Column (b) must equal Form 990, Part X, col.(B) line	= 15.)	29,358,910
Part X Other Liabilities. See Form 990, Pa		
1 (a) Description of liability	(b) Book value	
	(-,	
Federal income taxes		
SPLIT INTEREST OBLIGATIONS	5,605,656	
GIFT ANNUITY OBLIGATIONS	5,115,964	
ASSETS HELD IN TRUST	19,834,691	
REFUNDABLE ADVANCES	96,000	
KET OHDADLE ADVANCES	90,000	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	▶ 30,652,311	
2 Fin 48 (ΔSC 740) Footnote In Part XIII provide the	text of the footnote to the organ	oization's financial statements that reports the

	,		
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue	per R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	51,889,190
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	16,711,145
3	Subtract line 2e from line 1	3	35,178,045
4	Amounts included on Form 990, Part VIII, line 12, but not on line $oldsymbol{1}$		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 934,685		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	934,685
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	36,112,730
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses	<u>s per</u>	Return
1	Total expenses and losses per audited financial statements	1	21,437,503
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII) 2d 22,788		
e	Add lines 2a through 2d	2e	22,788
3	Subtract line 2e from line 1	3	21,414,715
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a 934,685		
b	Other (Describe in Part XIII)		
С	Add lines 4a and 4b	4c	934,685
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	22,349,400

Part XIII Supplemental Information

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

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	SUPPORT COLORADO SCHOOL OF MINES
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	THE FOUNDATION APPLIES A MORE-LIKELY-THAN-NOT MEASUREMENT METHODOLOGY TO REFLECT THE FINANCIAL STATEMENT IMPACT OF UNCERTAIN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN AFTER EVALUATING THE TAX POSITIONS TAKEN, INCLUDING THE DETERMINATION OF THE FOUNDATION'S TAX-EXEMPT STATUS, NONE ARE CONSIDERED TO BE UNCERTAIN, THEREFORE, NO AMOUNTS HAVE BEEN RECOGNIZED AS OF JUNE 30, 2013 OR 2012 IF INCURRED, INTEREST AND PENALTIES ASSOCIATED WITH TAX POSITIONS ARE RECORDED IN THE PERIOD ASSESSED AS GENERAL AND ADMINISTRATIVE EXPENSES NO INTEREST OR PENALTIES HAVE BEEN ASSESSED AS OF JUNE 30, 2013 OR 2012 TAX YEARS THAT REMAIN SUBJECT TO EXAMINATION INCLUDE 2009 THROUGH THE CURRENT YEAR
PART XI, LINE 2D - OTHER ADJUSTMENTS		CHANGE IN NET PRESENT VALUE OF SPLIT INTEREST AGREEMENTS -2,246,423 CHANGE IN INTEREST IN NET ASSETS OF PROPERTY MANAGEMENT CORP 333,157 UNRELATED BUSINESS LOSS ON PASS-THROUGH ENTITIES 736,187
PART XII, LINE 2D - OTHER ADJUSTMENTS		UNCOLLECTIBLE PLEDGES 22,788

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493021002074

OMB No 1545-0047

SCHEDULE F (Form 990)

Department of the Treasury

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

Open to Public

	lepartment of the Treasury ► Attach to Form 990. ► See separate instructions. Itemal Revenue Service									
	e of the organization DRADO SCHOOL OF MINES F	OUNDATION INC	:			tification number				
Pa	rt I General Informati "Yes" to Form 990, P			ne United States. Co	84-0509064 omplete if the organi	zation answered				
1	For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?									
2	For grantmakers. Describe the United States.		·			unds outside				
3	Activites per Region (The following									
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region					
	CENTRAL AMERICA/CARIBBEAN	0	0	INVESTMENTS		11,605,011				
	SOUTH AMERICA	0	0	INVESTMENTS		3,931,828				
	Sub-total Total from continuation sheets	0	0			15,536,839				
	to Part I	0	0			,				
С	Totals (add lines 3a and 3b)	0	0		l	15,536,839				

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2				ted above that are r e or counsel has pro					
3	Enter total nur	mber of other or	ganizations or en	tities					

Schedule F (Form 990) 2012

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
							appraisal, other)

Part IV Foreign Forms

1	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	~	Yes	Г	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organizationmay be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Γ	Yes	দ	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	<u>\script</u>	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	<u> </u>	Yes	Γ	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	✓	Yes	Γ	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Г	Yes	<u> </u>	Νo

Schedule F (Form 990) 2012

Part V	Supplementa	al Information
Part V	Supplementa	ai intormatio

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Identifier	ReturnReference	Explanation

DLN: 93493021002074

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information Regarding

Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.

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

Open to Public Inspection

Internal Revenue Service **Employer identification number** Name of the organization COLORADO SCHOOL OF MINES FOUNDATION INC

							04-0309004	
Pa	rt I Fundraising Act	t ivities. Complete	ıf the oı	rganızat	ion a	nswered "Yes" t	o Form 990, Part IV	, line 17.
1	Indicate whether the organ	nization raised funds t	through a	ny of the 1	follow	ing activities Che	ck all that apply	
а	Mail solicitations			е	굣	Solicitation of non	-government grants	
b	✓ Internet and email soli	citations		f	Γ	Solicitation of gov	ernment grants	
c	Phone solicitations			g	Γ	Special fundraising	g events	
d	✓ In-person solicitations	5						
2a	Did the organization have a or key employees listed in							✓ Yes ✓ I
b	If "Yes," list the ten highes to be compensated at leas			undraisei	rs) pu	rsuant to agreeme	nts under which the fur	ndraiser is
Í	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or crol of outions?) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
			Yes	No				
	GARROW COMPANY 6419 SOUTH GARFIELD AVE	FUNDRAISING CONSULTING		No		0	65,497	C
	WILLO WBROOK, IL 60527							
ota							65,497	
	List all states in which the licensing	organization is regist	tered or li	censed to	solic	cit funds or has be		from registration or
		E, FL, GA, HI, ID, IL,	IN, IA, K	S, KY, LA	, ME,			-

Pa	rt II	Fundraising Events. Com more than \$15,000 of fundra events with gross receipts g	aising event contribu	cion answered "Yes" to tions and gross income	Form 990, Part IV, li e on Form 990-EZ, lin	ne 18, or reported es 1 and 6b. List			
		<u> </u>	(a) Event #1	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))			
_			(event type)	(event type)	(total number)	(3)			
Revenue	1	Gross receipts							
9. 9.	2	Less Contributions							
<u>~</u>	3	Gross income (line 1 minus line 2)							
	4	Cash prizes							
en.	5	Noncash prizes							
Expenses	6	Rent/facility costs							
ğ	7	Food and beverages .							
Direct	8	Entertainment							
ā	9	Other direct expenses .							
	10	Direct expense summary Add lin	es 4 through 9 ın colum	n (d)		()			
	11	Net income summary Combine Ii	ne 3, column (d), and Iır	e 10					
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	rt IV, line 19, or repo	orted more than			
<u>—</u>		\$13,000 ON TOTAL 330 EZ, III	(a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming (add			
Revenue				bingo/progressive bingo		col (a) through col (c))			
<u>_</u>	1	Gross revenue							
ses	2	Cash prizes							
Expenses	3	Non-cash prizes							
	4	Rent/facility costs							
Direct	5	Other direct expenses							
			☐ Yes	┌ Yes	┌ Yes				
	6	Volunteer labor	□ No	│ No	┌ No				
	7	Direct expense summary Add lines	s 2 through 5 ın column	(d)					
	8	Net gaming income summary Com	bine lines 1 and 7 in co	lumn (d)	🛌				
9	Ent	er the state(s) in which the organiza	ation operates gaming a	ctivities					
а		the organization licensed to operate				. 「Yes 「No			
b	If"	If "No," explain							
10a b		re any of the organization's gaming Yes," explain	icenses revoked, suspe	ended or terminated during	the tax year?				

Does	the organization operate gaming	j activities with nonmembers?	· · · · · · · · · · · · · · · · · Yes No							
12	Is the organization a grantor, be	eneficiary or trustee of a trust or	a member of a partnership or other entity							
	formed to administer charitable	gamıng?	· · · · · · · · · · · · · · · · · · ·							
13	Indicate the percentage of gam									
а	The organization's facility .		13a							
b	An outside facility		13b							
14	Enter the name and address of	the person who prepares the org	anization's gaming/special events books and records							
	Name 🟲									
	Address 🟲									
	revenue?		nom the organization receives gaming							
c	If "Yes," enter name and address									
	Name 🟲									
	Address 🟲									
16	Gaming manager information	Gaming manager information								
	Name 🟲									
	Gaming manager compensation	▶ \$								
	Description of services provide	Description of services provided 🟲								
	Director/officer	☐ Employee	☐ Independent contractor							
17	Mandatory distributions									
а			distributions from the gaming proceeds to							
		?	,							
b		·	buted to other exempt organizations or spent							
Dar		ot activities during the tax year l	t to provide the explanations required by Part I, line 2b,							
Pen-	columns (III) and (v),		b, 15b, 15c, 16, and 17b, as applicable. Also complete this							
	Identifier	Return Reference	Explanation							
	LANATION OF FUNDRAISING MENTS	SCHEDULE G, PART I, LINE 2 COLUMN (V)	FUNDRAISING CONSULTING PROVIDED BY GARROW COMPANY WAS INDIRECT AND STRATEGIC IN NATURE, GROSS RECEIPTS WERE NOT DIRECTLY RELATED TO A							

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Schedule I (Form 990)

Department of the Treasury

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990

OMB No 1545-0047

2012

DLN: 93493021002074

Open to Public

Inspection Internal Revenue Service Employer identification number Name of the organization COLORADO SCHOOL OF MINES FOUNDATION INC 84-0509064 **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (a) Name and address of (b) EIN (c) IRC Code section (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable valuation non-cash assistance grant cash or assistance or government assistance (book, FMV, appraisal, other) (1) COLORADO SCHOOL 84-6000551 501(C)(3) 16,611,662 GENERAL OF MINES 1500 ILLINOIS STREET GOLDEN, CO 80401 (2) CSM ALUMNI 84-0363288 501(C)(3) 180,000 **GENERAL** FOUNDATION INC PO BOX 1410 GOLDEN, CO 804021410

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

Enter total number of other organizations listed in the line 1 table

	,	
• • •	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Pa	art IV, line 22
	Part III can be duplicated if additional space is needed.	

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d) A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 ALL GRANTS ARE MADE TO COLORADO SCHOOL OF MINES AND ITS VARIOUS DEPARTMENTS

Schedule I (Form 990) 2012

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493021002074

OMB No 1545-0047

Schedule J (Form 990)

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990. ► See separate instructions.

Compensation Information

Name of the organization COLORADO SCHOOL OF MINES FOUNDATION INC **Employer identification number**

84-0509064

Par	t I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form			
	problem of the state of the sta			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or			
		1b		<u> </u>
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors trustees and the CEO/Executive Director regarding the items checked in line 132	_		
	unectors, trustees, and the CLO/Executive Director, regarding the items checked in line 1a	2		-
_	the appropriate box(es) if the organization provided any of the following to or for a person listed in Form Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items rst-class or charter travel Housing allowance or residence for personal use ravel for companions			
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods			
	used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	Form 990 of other organizations			
4	During the year did any percenticted in Form 990. Part VII. Section A. Jine 1a with respect to the filing organization			
7	or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of			
а	The organization?	5a		Νo
b	Any related organization?	5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		No
b	Any related organization?	6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations			
	section 53 4958-6(c)?	9		<u> </u>

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	•	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
		(i) Base compensation	(ii) Bonus & (iii) Other reportable compensation compensation		other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
	(i) (ii)	167,136 0	0 0	0	10,252	9,347 0	186,735 0	0
	(i) (ii)	167,798 0	0 0	0	6,750 0	13,094 0	187,642 0	0
	(i) (ii)	145,554 0	0 0	0	3,750 0	1,635 0	150,939	0

Schedule J (Form 990) 2012

Part IIII Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Identifier Return Reference Explanation

Schedule J (Form 990) 2012

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493021002074

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990.

Noncash Contributions

Name of the organization COLORADO SCHOOL OF MINES FOUNDATION INC

Employer identification number

84-0509064

Pa	rt I Types of Property				34 0303004			
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d Method of do noncash contrib	etermi		ts
1	Art—Works of art							
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
	Cars and other vehicles							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	X	52	5,213,496	AVERAGE HIGH/LO) W		
	Securities—Closely held stock .							
11	Securities—Partnership, LLC,							
12	or trust interests							
	Q ualified conservation contribution—Historic							
	structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential							
	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► ()							
26	O ther ▶()							
27	O ther ▶()							
28	Other ► ()							
29	Number of Forms 8283 received for which the organization comple				29		1	
20-	During the year, did the organiza	tion receive	a hu contribution and pro-	erty roportod in Dort I lease	1-20 that it		Yes	No
SUa								
	must hold for at least three year				a to be used			NI-
	for exempt purposes for the enti					30a		No
b	If "Yes," describe the arrangeme	ent in Part 1	.1					
31	Does the organization have a gif	t acceptano	ce policy that requires the r	review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us contributions?	e third part	es or related organizations	to solicit, process, or sell	noncash 	32a	Yes	
b	If "Yes," describe in Part II							
33	If the organization did not report	an amount	ın column (c) for a type of	property for which column (a) is checked,			
	describe in Part II							

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

namber of teems received, or a combination of both. This complete this part for any additional information.											
Identifier	Return Reference	Explanation									
THIRD PARTY USE	,	THE COLORADO SCHOOL OF MINES FOUNDATION USES VARIOUS INVESTMENT BROKERS AS THIRD PARTIES TO RECEIPT, PROCESS, AND SELL NON-CASH CONTRIBUTIONS, PRIMARILY FOR SECURITIES AND GIFTS OF STOCK									

Schedule M (Form 990) (2012)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493021002074

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

2012

Open to Public Inspection

Name of t	the orgar	nization		
COLORADO	SCHOOL C	OF MINES	FOUNDATION	IN

Employer identification number

84-0509064

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	A DETAILED REVIEW IS PERFORMED BY THE EXECUTIVE DIRECTOR AND ASSISTANT TREASURER PRIOR TO PRESENTATION TO THE EXECUTIVE COMMITTEE. A FULL SUMMARY PRESENTATION BY THE FOUNDATION'S INDEPENDENT TAX ACCOUNTING FIRM IS PROVIDED TO THE EXECUTIVE COMMITTEE OF THE BOARD OF GOVERNORS PRIOR TO FILING
	FORM 990, PART VI, SECTION B, LINE 12C	THE ORGANIZATION REQUIRES AN ANNUAL AFFIRMATION FROM MEMBERS OF THE EXECUTIVE COMMITTEE, INVESTMENT COMMITTEE, AUDIT COMMITTEE, GIFT ACCEPTANCE COMMITTEE AND TO APPOINTED OFFICERS OF THE FOUNDATION
	FORM 990, PART VI, SECTION B, LINE 15	THE EXECUTIVE COMMITTEE OF THE BOARD OF GOVERNORS ACTS AS THE FOUNDATIONS COMPENSATION COMMITTEE AND USES COMPARABILITY DATA, INCLUDING FORM 990 OF OTHER ORGANIZATIONS, COMPENSATION SURVEYS AND OTHER MARKET REVIEWS, TO DETERMINE AND APPROVE COMPENSATION FOR SENIOR MANAGEMENT POSITIONS THE DELIBERATION AND DECISION IS DOCUMENTED
	FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	CHANGE IN NET PRESENT VALUE OF SPLIT INTEREST AGREEMENTS -2,246,423 CHANGE IN INTEREST IN NET ASSETS OF PROPERTY MANAGEMENT CORP 333,157 UNRELATED BUSINESS LOSS ON PASS-THROUGH ENTITIES 736,187 UNCOLLECTIBLE PLEDGES -22,788

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - |
SCHEDULE R | Related Or

DLN: 93493021002074

Related Organizations and Unrelated Partnerships

2012

Open to Public Inspection

Employer identification number

84-0509064

Department of the Treasury Internal Revenue Service

Name of the organization

COLORADO SCHOOL OF MINES FOUNDATION INC

(Form 990)

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

Part I Identification of Disregarded Entities (Co	mplete if the organizatio	n answered "Yes" t	o Form 990, Pa	rt IV, line 33.)				
(a) Name, address, and EIN (If applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	D	(f) Pirect controlling entity		
Part II Identification of Related Tax-Exempt Org or more related tax-exempt organizations duri	anizations (Complete ring the tax year.)	f the organization a	answered "Yes"	to Form 990, P	art IV,	line 34 because it	: had o	ne
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code secti	Public charity (if section 501)	status (c)(3))	(f) Direct controlling entity	Section (13) co	ontrol tity?
(1) CSMF PROPERTY MANAGEMENT CORP	RE GIFTS	СО	501(C)(3)	11B			l res	No.
1232 W CAMPUS ROAD 4						N/A		
GOLDEN, CO 80401 84-1266930						1970		
For Paperwork Reduction Act Notice, see the Instructions for Form	990.		35Y			Schedule R (Forn	n 990) 2	012

(a) Name, address, and EIN o related organization	f	(b) Primary activit	(c) Legal domicile (state or foreign country)	entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512-	(f) Share of total income	(g) Share of end-of-yea assets	(h Disprop r allocat	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	ral or	(k) Percenta ownersh
					514)			Yes	No		Yes	No	
V Identification of Related Or line 34 because it had one or r	ganizations Taxa nore related organi	ble as a Corpo	ration is a cor	or Trust (poration or	Complete if trust during	the organı the tax ye	zatıon ar ar.)	iswere	d "Ye	s" to Form	990,	Part	:IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controll entity	(e) Type of enti (C corp, S corp, or trust)		total Share e of	(g) e of end- year ssets		(h) ercentage wnership	Section (b) conti	(13)	
											Yes		No

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule									
1 D	Ouring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?								
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	1			No				
b	Gift, grant, or capital contribution to related organization(s)	1	b		No				
C	Gift, grant, or capital contribution from related organization(s)	10	С		No				
d	Loans or loan guarantees to or for related organization(s)	10	d		No				
e	Loans or loan guarantees by related organization(s)	10	e		No				
f	Dividends from related organization(s)	11	f		No				
		19	g	_	No				
	Purchase of assets from related organization(s)	1	_		No				
	Exchange of assets with related organization(s)	1	i		No				
j Lease of facilities, equipment, or other assets to related organization(s)									
•									
k	Lease of facilities, equipment, or other assets from related organization(s)	1	k	<u> </u>	No				
	Performance of services or membership or fundraising solicitations for related organization(s)	1	1		No				
	n Performance of services or membership or fundraising solicitations by related organization(s)	1	m		No				
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1	n \	Yes					
	Sharing of paid employees with related organization(s)	10	0 1	Yes					
			1						
D	Reimbursement paid to related organization(s) for expenses	1	p		No				
-	Reimbursement paid by related organization(s) for expenses	10	+		No				
·			\top						
r	Other transfer of cash or property to related organization(s)	1	r		No				
	Other transfer of cash or property from related organization(s)	1:	s		No				
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction three	sholds							
	(a) (b) (c) Name of other organization Transaction Amount involved Method of determ type (a-s)	(d) nining amoun	it inv	olved					

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross)

revenue) that was not a related organization See instructions re	garding exclu	sion for ce		nent	partnerships				`	,		_	
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512- 514)	org	(e) all partners section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

Additional Data Return to Form

Software ID:

Software Version:

EIN: 84-0509064

Name: COLORADO SCHOOL OF MINES FOUNDATION INC

Schedule R (Form 990) 2012

Page **5**

Part VII Supplemental Information

Complete this part to pr	ovide additional information for responses to questions on Schedule R (see instructions)		
Identifier	Return Reference	Explanation	
•			