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Form **990** 

Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

assets    Martin   State   University   State   University   State   University   State   University   State   University   University
ots \$ 28,737,538  urn for  Yes No es Yes No st (see instructions)  number M State of legal domicile SD  State University  assets  14 13 0 120 20,924
ots \$ 28,737,538  urn for  Yes No es Yes No st (see instructions)  number M State of legal domicile SD  State University  assets  14 13 0 120 20,924
sts \$ 28,737,538  urn for  Yes No es Yes No st (see instructions)  number IM State of legal domicile SE  State University  assets  14 13 6 0 120 20,924
Yes No  St (see Instructions)  number ►  M State of legal domicile SC  State University  assets  14 13 0 120 20,924
Yes No  St (see instructions)  number ►  M State of legal domicile Sc  State University  assets  14  13  13  14  13  14  13  14  13  14  15  16  17  18  19  19  10  10  10  10  10  10  10  10
Yes No  Yes No  St (see instructions)  Number   M State of legal domicile St  State University  assets  14  13  14  15  120  20,924
State University  assets  12  13  14  15  16  17  18  19  19  19  19  19  19  19  19  19
st (see instructions) number   M State of legal domicile SI  State University  assets  14 13 16 120 20,924
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1 13 5 0 6 120 a 20,924
6 0 6 120 a 20,924
120 a 20,924
20,924
Current Year
3,407,089
338,541
7,504,662
C
437,862
С
1,686,848
4,133,147
4,133,147
4,133,147
4,133,147 3,371,515
4,133,147 3,371,515 End of Year

**Use Only** 

Firm's address > 24 2ND AVE SW PO BOX 430

ABERDEEN, SD 574020430

May the IRS discuss this return with the preparer shown above? (see instructions)

Phone no (605) 225-8783

✓ Yes 厂No

Forn	n 990 (2013)					Page
Par		t of Program Serv edule O contains a resi			III	
1	Briefly describe the	e organization's mission				
		rsity Foundation is ded ursue other activities to		=	nern State University Its purpo	se is to solicit and
	Did the organization	n undertake anv signific	ant program s	ervices during the vea	r which were not listed on	
_	the prior Form 990	, 3	, ,			┌ Yes ┌ No
	If "Yes," describe t	hese new services on S	chedule O			
3		n cease conducting, or i		nt changes in how it co	onducts, any program	┌ Yes ┌ No
	If "Yes," describe t	hese changes on Sched	ule O			
4	expenses Section		) organization	s are required to repor	nree largest program services, a t the amount of grants and alloc	•
	(Code	) (Expenses \$	2,008,437	ıncludıng grants of \$	2,008,437 ) (Revenue \$	)
	Paid 529 athletic, 837	academic, and 278 departme	ental scholarships	to students and faculty att	ending Northern State University	
4b	(Code	) (Expenses \$	941,158	ıncludıng grants of \$	) (Revenue \$	226,349 )
	Funds used to support and Presidential suppo		ncluding commun	ication & alumni events, pu	ıblıcatıon of university newspaper, cam	pus projects, student housin <u>c</u>
4c	(Code	) (Expenses \$	507,364	ıncludıng grants of \$	) (Revenue \$	261,626 )
	Funds used to support	athletics at NSU - for recruit	ment, athletic de	partment salary, operating	support, and marketing of the Universit	Ey .
4d	Other program ser	vices (Describe in Sch	edule O )			
	(Expenses \$	ınc	uding grants o	of \$	) (Revenue \$	)

3,456,959

Total program service expenses ►

Part IV Checklist of Required Schedule
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			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	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		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		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 $IV^{\square}$	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	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		No
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	Yes	
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		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		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		No
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	Yes	
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	Yes	
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 or other assistance to any domestic organization or government 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 or 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? <i>If "Yes," complete Schedule J</i>	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 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, 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? <i>If "Yes," complete Schedule L, Part III</i>	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? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes	
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		No
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? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
_		F	orm <b>99</b> 0	(2013)

Par				_
	Check if Schedule O contains a response or note to any line in this Part V		Yes	.  No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   25		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable  1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	<b>1</b> 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?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
ь	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, 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		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		Νo
b	organization solicit any contributions that were not tax deductible as charitable contributions? 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	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	Yes	
d	If "Yes," indicate the number of Forms 8282 filed during the year	-	1 00	
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		No
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		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
Ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
LO	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
L2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
L3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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			
c	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
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	Yes	
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	Yes	
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	Yes	
	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	Yes	
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	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	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	even	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
		10b 11a		No
11a	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			No
11a b	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?		Yes	No
11a b 12a	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?	11a	Yes	No No
11a b 12a b	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?	11a	Yes	
11a b 12a b	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	11a 12a 12b		
11a b 12a b	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	11a 12a 12b	Yes	
11a b 12a b c	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  Did the organization have a written whistleblower policy?	11a 12a 12b 12c 13	Yes	No
11a b 12a b c 13 14	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  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by	11a 12a 12b 12c 13	Yes	No
11a b 12a b c 13 14 15	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  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	11a 12a 12b 12c 13	Yes	No No
11a b 12a b c 13 14 15	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?	11a 12a 12b 12c 13 14	Yes	No No
11a b 12a b c 13 14 15 a b	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  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization	11a 12a 12b 12c 13 14	Yes	No No
11a b 12a b c 13 14 15 a b	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  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	11a 12a 12b 12c 13 14 15a 15b	Yes	No No No
11a b 12a b c 13 14 15 a b	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?	11a  12a  12b  12c  13  14  15a  15b	Yes	No No No
11a b 12a c 13 14 15 a b	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  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	11a  12a  12b  12c  13  14  15a  15b	Yes	No No No
11a b 12a b c 13 14 15 a b 16a b	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  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?  Ection C. Disclosure  List the States with which a copy of this Form 990 is required to be filed  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.	11a  12a  12b  12c  13  14  15a  15b	Yes	No No No
11a b 12a b c 13 14 15 a b	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  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?  Ection C. Disclosure  List the States with which a copy of this Form 990 is required to be filed policy and 990-T (501(c))	11a  12a  12b  12c  13  14  15a  15b	Yes	No No No

▶Becky Mehlhoff 620 15th Avenue SE Beckman Bldg

Aberdeen, SD 57401 (605) 626-7744

# 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

( <b>A)</b> Name and Title	(B) A verage hours per week (list any hours for related organizations below	more pers and	than on is a dir	one bot ect	not box h ar or/ti	offic rustee	ess er	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related
	dotted line)	Individual trustee or director	Institutional Trustee	Φ	Key employee	Highest compensated employee	)er			organizations
(1) Thomas R Seyer	1 00	х		Х				0	0	0
Chair										
(2) Nathan Reede	1 00	х		Х				0	0	0
Vice Chair, Chair-Elect		`			L			<u>                                     </u>		
(3) Chad Lang	1 00									_
Secretary/Treasurer		Х		Х				0	0	0
(4) Chad Bergan	50									
		Х						0	0	0
Director										
(5) James Smith	1 00	х						0	0	0
Director		:						Ĭ	Ţ.	
(6) Steve Ford	50	.,								
Director		Х						0	0	0
(7) Glenna Fouberg	50									
		Х						0	0	0
Director (8) James P Koehler	50									
(6) James P Roemei	50	x						0	0	0
Director										
(9) Cındı Walsh	50							0	0	0
Director		Х						ı	U	U
(10) Kım W Jundt	50									
Director		Х						0	0	0
(11) Randy Knecht	50				$\vdash$					
		х						0	0	0
Director										
(12) James Kennedy	50	х						0	0	0
Director								Ů	J. Company	
(13) Julie Johnson	50									
Director		Х						0	0	0
(14) Todd Jordre	45 00									
		Х		Χ				104,996	0	13,144
President/CEO (15) Becky Mehlhoff	40.00									
(13) Decky Melillion	40 00			Х				36,557	0	9,779
Accountant								·		
					$\vdash$		$\vdash$			
					L	<u></u>	L			
										Form <b>990</b> (2013)

\$100,000 of compensation from the organization  $\blacktriangleright 0$ 

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

for related organizations below dotted line)  organizations dotted line)  organiza	d
c Total from continuation sheets to Part VII, Section A	
c Total from continuation sheets to Part VII, Section A	
c Total from continuation sheets to Part VII, Section A	
c Total from continuation sheets to Part VII, Section A	
c Total from continuation sheets to Part VII, Section A	
c Total from continuation sheets to Part VII, Section A	
c Total from continuation sheets to Part VII, Section A	
c Total from continuation sheets to Part VII, Section A	
d Total (add lines 10 and 10)	22,923
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization►1	
Yes  3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such	No_
Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	No_
Section B. Independent Contractors	
1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year	
(A) (B) (C Name and business address Description of services Comper	l .

Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f
Program Service Revenue	2a b c d e f
\evenue	9 9 3 4 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6
Other F	b 9a b (10a
	11a b c d e

Form 99								Page <b>9</b>
Part V	444	Statement o Check if Schedu	<b>f Revenue</b> ule O contains a respon	ise or note to any lir	ne in this Part VIII			<u> </u>
					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
s &	1a	Federated camp	paigns 1a					
ant	b	Membership du	es <b>1b</b>					
Gifts, Grants ilar Amounts	С	Fundraising eve	ents <b>1c</b>	185,299				
iffs ar /	d	Related organiz	ations 1d					
m:G	е	Government grants	s (contributions) <b>1e</b>					
Contributions, Giffs, Grants and Other Similar Amounts	f	All other contribution	ons, gifts, grants, and <b>1f</b> ot included above	3,415,586				
ntrib d Ot	g	1a-1f \$	ons included in lines	266,694	2 500 005			
<u>ပည် ခြေ</u>	h	Total. Add lines	s 1a-1f	· · · · •	3,600,885			
Program Service Revenue	2a	Wolves Club		Business Code 611710	158,147	158,147		
₽e∢	b							
JC 0	С							
Ser.	d							
Ē	e	A II a bla a a a a a a a						
្តិ	f		im service revenue					
	g		s 2a – 2f		158,147			
	3		ome (including dividend ar amounts)		499,160			499,160
	4	Income from inves	tment of tax-exempt bond p	proceeds 🕨				
	5	Royalties						
	6a	Gross rents	(ı) Real 352,649	(II) Personal				
	ь	Less rental	105,376					
	c	expenses Rental income	247,273					
	d	or (loss) Net rental incoi	ll me or (loss)		247,273	226,349	20,924	
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory	23,618,965					
	ь	Less cost or other basis and	20,698,536	12,500				
	c	sales expenses Gain or (loss)	2,920,429	-12,500				
	d		s)		2,907,929			2,907,929
Other Revenue	8a	Ψ	luding ,299 s reported on line 1c)					
Ģ		See rait IV, IIII	a a	200,601				
Other	ь		penses b	246,138				
	c		(loss) from fundraising (	events 🛌	-45,537			-45,537
	9a	Gross income fi See Part IV, lin	rom gaming activities le 19 a	09.405				
	ь	Less direct ex	penses <b>b</b>	98,405 65,079				
	С		י (loss) from gamıng actı) 		33,326			33,326
	10a	Gross sales of returns and allo	owances .	200 720				
	Ь	lecc costsf	a   oodssold b	208,726				
			oods sold . . <b>b</b> [ (loss) from sales of inve	105,247 entory <b>p</b> -	103,479	103,479		
		Miscellaneous		Business Code				
	11a							
	Ь							
	С	A.II						
	d e	All other revenue Total. Add lines	L	▶				
	12	lotal revenue.	See Instructions		7,504,662	487,975	20,924	3,394,878

Form	990 (2013)				Page <b>10</b>
	IX Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All	other organizat	ons must comp	lete column (A)	
	Check if Schedule O contains a response or note to any line in this	Part IX			
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	2,008,437	2,008,437		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	2,000,000			
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	163,936		81,238	82,698
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	273,926		273,926	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
ь	Legal				
С	Accounting	53,844		53,844	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	72,688		72,688	
		72,686		72,000	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	857		231	626
13	Office expenses	49,918		46,595	3,323
14	Information technology				
15	Royalties				
16	Occupancy	5,189		5,189	
17	Travel	8,471			8,471
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				· · · · · · · · · · · · · · · · · · ·
19	Conferences, conventions, and meetings	22,013		2,756	19,257
20	Interest	2,490		2,490	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	3,278		3,278	
23	Insurance	5,292		5,292	
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	University Support	1,448,522	1,448,522		
b					
c					
d					
e	All other expenses	14,286		8,069	6,217
25	Total functional expenses. Add lines 1 through 24e	4,133,147	3,456,959	<u> </u>	120,592
26	Joint costs. Complete this line only if the organization	7,133,147	3,430,839	333,390	120,392
20	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here F [ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Par	t X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			_
		eneck in Schedule & Contains a response of note to any line in this fare X	(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	Jegiiiiig ei yeur	1	
	2	Savings and temporary cash investments	854,621	2	1,185,341
	3	Pledges and grants receivable, net	7,288,386	3	4,716,315
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		_	
35	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 contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		5	
S	_			6	
Assets	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	9,105	8	30,797
	9 10a	Prepaid expenses and deferred charges	10,267	9	10,844
	Ь	Part VI of Schedule D Less accumulated depreciation	-	10c	3,794,972
	11	Investments—publicly traded securities	16,812,562	11	117,808
	12	Investments—other securities See Part IV, line 11	2,282,630	12	24,632,929
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	11,716,900	15	14,386,483
	16	Total assets. Add lines 1 through 15 (must equal line 34)	42,638,896	16	48,875,489
	17	Accounts payable and accrued expenses	2,024,228	17	1,817,646
	18	Grants payable	2,116,756	18	2,207,728
	19	Deferred revenue	82,650	19	98,892
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D	22,850	21	22,600
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			<u> </u>
аę		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	675,769	23	247,843
	24	Unsecured notes and loans payable to unrelated third parties	45,201	24	32,557
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			
		D	192,047	25	190,997
	26	Total liabilities. Add lines 17 through 25	5,159,501	26	4,618,263
ъ Ф		Organizations that follow SFAS 117 (ASC 958), check here ▶ ▽ and complete lines 27 through 29, and lines 33 and 34.			
ĕ	27	Unrestricted net assets	-4,511,983	27	-1,642,434
<u>8</u>	28	Temporarily restricted net assets	16,907,670	28	20,900,299
— —	29	Permanently restricted net assets	25,083,708	29	24,999,361
Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ┌ and	25,555,755		
5		complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net Net	33	Total net assets or fund balances	37,479,395	33	44,257,226
	34	Total liabilities and net assets/fund balances	42,638,896	34	48,875,489

5-				<u>'</u>	age = -
Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				▽
1	Total revenue (must equal Part VIII, column (A), line 12)	.		7 5	504,662
2	Total expenses (must equal Part IX, column (A), line 25)	-		/,=	04,002
_		2		4,1	33,147
3	Revenue less expenses Subtract line 2 from line 1	3		2 2	371,515
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))			٠,٠	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
•		4		37,4	179,395
5	Net unrealized gains (losses) on investments	5		5	016 40
6	Donated services and use of facilities	<b>'</b> —			316,434
Ū		5			82,642
7	Investment expenses	,			
8	Prior period adjustments	7			
0		в			
9	Other changes in net assets or fund balances (explain in Schedule O)			2.0	07.246
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	9		3,0	07,240
10		о		44,2	257,226
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
		_		Yes	No
1	Accounting method used to prepare the Form 990  Cash  Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
2a	Schedule O  Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
Lu	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed	<sub>d on</sub> F			110
	a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?	L	2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separat basis, consolidated basis, or both	te			
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	of the	2-		N.a
	audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in		2c		No
	Schedule O				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the		2.		
L	Single Audit Act and OMB Circular A-133?	F	3a		No
D	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

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DLN: 93493135032905

OMB No 1545-0047

#### **SCHEDULE A**

(Form 990 or 990EZ)

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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public **Inspection** 

Name	of	the	organiz	ation
lorther	n S	tate I	University	Foundation

**Employer identification number** 

	rt I			blic Charity Sta						nstructions	
ſhe	organı	zatıon ıs	not a privat	e foundation becaus	eıtıs (Forl	ınes 1 throu	ıgh 11, check	only one b	oox)		
1	Γ	A churc	ch, conventi	on of churches, or a	ssociation of	churches d	escribed in <b>s</b> e	ection 170(	b)(1)(A)(i).		
2	Γ	A scho	ol described	in <b>section 170(b)(1</b>	. <b>)(A)(ii).</b> (At	tach Sched	ule E)				
3	Γ	A hosp	ital or a coo	perative hospital se	rvice organiz	atıon descr	ıbed ın <b>sectio</b>	n 170(b)(1	)(A)(iii).		
4	Γ	A medi	cal research	n organization operat	ted ın conjun	ction with a	hospital des	cribed in <b>se</b>	ction 170(b)(	1)(A)(iii). E	nter the
_	_	hospita	l's name, cı	ty, and state							<del></del>
5	✓			erated for the benefi		or universi	ty owned or o	perated by	a governmen	tal unit desc	ribed in
	_			A)(iv). (Complete P	•						
6	<u> </u>	A federal, state, or local government or governmental unit described in <b>section 170(b)(1)(A)(v).</b>									
7	Г			at normally receives			support from	a governm	ental unit or f	rom the gen	eral public
8	Г			on 170(b)(1)(A)(vi). described in <b>sectior</b>			nplete Part II	)			
9			-	at normally receives			-	-	butions, mem	bership fees	, and gross
		receipt	s from actıv	ities related to its ex	xempt function	ons—subjec	t to certain e	xceptions,	and (2) no mo	re than 331,	/3% of
		ıts sup	port from gr	oss investment inco	me and unrel	lated busine	ss taxable ın	come (less	section 511	tax) from bu	ısınesses
		acquire	d by the org	janızatıon after June	30,1975 S	ee <b>section</b> !	<b>509(a)(2).</b> (C	omplete Pa	rt III )		
10	Γ	Anorga	anızatıon org	ganized and operated	d exclusively	to test for p	public safety	See <b>sect io</b>	n 509(a)(4).		
11	Γ	Anorga	anızatıon orç	ganized and operated	d exclusively	for the ben	efit of, to perf	orm the fun	ictions of, or t	o carry out t	the purposes of
				ly supported organiz						ee <b>section 5</b>	<b>609(a)(3).</b> Check
				bes the type of supp <b>b</b> Type II <b>c</b>						functions	.llv. imto avato d
_	Г			ox, I certify that the							
е	,	•		ox, I certify that the on managers and otl	_		,		, ,		•
			509(a)(2)				,				
f				received a written de	etermination	from the IR	S that it is a	Type I, Typ	oe II, or Type	III support	ing organizatio <u>n,</u>
_			his box	2006, has the organi		tad any auft	or contributi	on from on	, of the		J.
g			rugust 17, 2 ig persons?		ization accep	ited any gnt	or contributi	on nom any	or the		
			<b>.</b>	rectly or indirectly o	ontrols, eith	er alone or t	together with	persons de	scribed in (ii)	)	Yes No
		and (III	) below, the	governing body of th	e supported	organizatioi	n?			11g	(i)
		(ii) A fa	amıly memb	er of a person descr	bed in (i) abo	ove?				11g	(ii)
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı) a	above?			11g(	(iii)
h		Provide	the following	ng information about	the supporte	ed organızat	ıon(s)				
				<u> </u>			_				
•	i) Nam		(ii) EIN	(iii) Type of	(iv) Is t		(v) Did you	•	(vi) Is		(vii) A mount of
	suppor rganiza			organization (described on	organızatı col (i) lıst		the organiz		organizat col (i) org		monetary support
·	rgumz.	acion		lines 1- 9 above	your gove		suppor		in the U		Зарроге
				or IRC section	docume	_					
				(see							
				instructions))	Yes	No	Yes	No	Yes	No	
T-4-											

Schedule A (Form 990 or 990-EZ) 2013 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 **(e)** 2013 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 4,434,898 2,246,424 2,769,451 19,040,206 3,600,885 32,091,864 include any "unusual grants ") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 4,434,898 2,246,424 2,769,451 19,040,206 3,600,885 32,091,864 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 6,208,430 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column Public support. Subtract line 5 25,883,434 from line 4 Section B. Total Support Calendar year (or fiscal year (f) Total (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 beginning in) 🟲 2,769,451 4,434,898 2,246,424 19,040,206 3,600,885 32,091,864 Amounts from line 4 Gross income from interest, dividends, payments received on 384,068 389,697 461,089 419,362 499,160 securities loans, rents, royalties 2,153,376 and income from similar sources Net income from unrelated business activities, whether or 18,921 19,762 20,924 59,607 not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 7 11 34,304,847 through 10) Gross receipts from related activities, etc (see instructions) 12 12 4,601,092 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 this box and  $\operatorname{stop}$  here  $\ldots\ldots\ldots\ldots\ldots$ Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 75 450 % Public support percentage for 2012 Schedule A, Part II, line 14 15 15 76 230 % 16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box **▶**▽ and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2012. 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 - 2013. 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  $\vdash \Gamma$ organization b 10%-facts-and-circumstances test - 2012. 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) 2013

Schedule A (Form 990 or 990-EZ) 2013 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I 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

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	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						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						<u> </u>
5	furnished by a governmental unit to						
	the organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
7a	A mounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	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						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6 ) ction B. Total Support						
	ndar year (or fiscal year beginning	( ) 2000	(1) 2010	( ) 2011	(1) 2012	( ) 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	( <b>B)</b> 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	<b>(B)</b> 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	<b>(b)</b> 2010	(6) 2011	(4) 2012	(5,232	
9	in)  A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	<b>(b)</b> 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	( <b>b)</b> 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	( <b>b)</b> 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	( <b>b)</b> 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	( <b>b)</b> 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (	on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here  ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization  ic Support Performance (line 8, column ( 2 Schedule A, Paragraphic Performance)  colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or  13, column (f))  ge by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the second of the secon	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or  13, column (f)) <b>ge</b> by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. 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

Part IV		<b>formation.</b> Provide the explanations required by Part II, line 10; Part II, ne 12. Also complete this part for any additional information. (See instru						
Facts And Circumstances Test								
Return Reference Explanation								
		Schodulo A / Form 0	000 er 000 E7) 201					

Schedule A (Form 990 or 990-EZ) 2013

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#### DLN: 93493135032905

OMB No 1545-0047

Open to Public Inspection

### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

**Supplemental Financial Statements** ► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

Name of the organization

**Employer identification number** 

iort	nem state University Foundation		23-	7002314		
a	rt I Organizations Maintaining Donor Adv				its. Complete	e if the
	organization answered "Yes" to Form 990	<del>`</del>	<u> </u>			
	Tabal according to an electrical	(a) Donor advised funds		(b) Funds ar	nd other accour	nts
	Total number at end of year					
	Aggregate contributions to (during year)					
	Aggregate grants from (during year)					
	Aggregate value at end of year					
	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or		nor adv	ısed	☐ Yes	┌ No
	Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the beneft conferring impermissible private benefit?				┌ Yes	┌ No
ľ	t II Conservation Easements. Complete if	the organization answered "Yes"	to Forn	n 990, Part	IV, line 7.	
	Purpose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	or education)  Preservation of a	ı certifie	d historic str	ructure	
	easement on the last day of the tax year	•			he End of the	/oar
	Total number of conservation easements		2a	neiu at t	ne cha or the	rear
	Total acreage restricted by conservation easements		2b			
	Number of conservation easements on a certified history	oric structure included in (a)	2c			
	Number of conservation easements included in (c) acq historic structure listed in the National Register	• •	2d			
	Number of conservation easements modified, transferr	ed. released. extinguished. or termina	ted by th	ne organizatio	on durina	
	the tax year ►	. , , ,	•	,	5	
	Ni mala a of ababa a subara manantu a subarab ba a ana aman					
	Number of states where property subject to conservati			6 l = t		
	Does the organization have a written policy regarding t enforcement of the conservation easements it holds?	ne periodic monitoring, inspection, na	naiing oi	r violations, a	Yes	┌ No
	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation ease	ements	during the ye	ar	
	A mount of expenses incurred in monitoring, inspecting  \$\blue{\pi}\$	, and enforcing conservation easemen	ts durın	g the year		
	Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(II)?	d) above satisfy the requirements of se	ection 1	70(h)(4)(B)(ı	)	┌ No
	In Part XIII, describe how the organization reports corbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organization's financi				
1	Organizations Maintaining Collection Complete if the organization answered "Y	s of Art, Historical Treasures	, or Ot	her Simila	ır Assets.	
	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide, in Part XIII, the text of the footnote to	16 (ASC 958), not to report in its rev ts held for public exhibition, education	, or rese	earch in furth		c
	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				С
	(i) Revenues included in Form 990, Part VIII, line 1			<b>►</b> \$		
	(ii) Assets included in Form 990, Part X					
	If the organization received or held works of art, histor following amounts required to be reported under SFAS					
	Revenues included in Form 990, Part VIII, line 1	,		<b>►</b> \$		

**b** Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art,	Histo	rical Tı	reasu	res, or Ot	her Si	milar As	sets (c	ontınued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other records	s, chec	_		-	_	nificant use	ofits	
а	Public exhibition		d [	Loan	orexc	hange progra	ims			
b	Scholarly research		е Г	Othe	r					
c	Preservation for future generations									
4	Provide a description of the organization's co Part XIII	ollections and explain	how th	ney furthe	er the d	organization'	s exemp	t purpose (	n	
5	During the year, did the organization solicit								<b>-</b>	<b>–</b>
Dav	assets to be sold to raise funds rather than t <b>t IV</b> Escrow and Custodial Arrang	•							Yes	No
Fell	Part IV, line 9, or reported an an					i answered	1 165	to Fulli s	790,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					or other asse	ets not		┌ Yes	✓ No
b	If "Yes," explain the arrangement in Part XII	I and complete the fo	llowing	g table		_				
						-	-	An	nount	
с	Beginning balance					-	1c			
d	Additions during the year					<u> </u>	ld			
e	Distributions during the year					-	le			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line 3	21?						✓ Yes	□ No
ь	If "Yes," explain the arrangement in Part XII									
Pa	rt V Endowment Funds. Complete	f the organization (a)Current year	answe (b)Prio			Form 990, wo years back			(a)Four v	ears back
1a	Beginning of year balance	32,956,466		1,139,778		21,677,214	(u) mee	19,007,637		15,302,492
ъ	Contributions	242,265	1	0,301,357		745,774		1,411,346		3,156,114
c	Net investment earnings, gains, and losses	5 470 660		2 522 724		454.004		2 227 540		
d	Grants or scholarships	-5,179,668 1,467,826		2,607,781 1,144,718		164,984 1,396,764		3,207,648 1,863,864		1,680,363
e	Other expenditures for facilities	2,101,020				2,050,101		2,000,001		
_	and programs			12,710		51,430		85,553		53,552
f	Administrative expenses									
g	End of year balance	26,551,237	3	2,956,466		21,139,778		21,677,214		19,007,637
2	Provide the estimated percentage of the cur	· · · · · · · · · · · · · · · · · · ·	(line 1	.g, colum	nn (a))	held as				
а	Board designated or quasi-endowment 🕨	3 870 %								
b	Permanent endowment ► 94 160 %									
c	Temporarily restricted endowment ► 1 9 The percentages in lines 2a, 2b, and 2c sho	70 % uld equal 100%								
3a	Are there endowment funds not in the posses	ssion of the organizat	ıon tha	t are hel	d and a	dmınıstered	for the			
	organization by (i) unrelated organizations							3a(	Yes	No No
	(ii) related organizations		•					3a(		No
ь	If "Yes" to 3a(II), are the related organization		• • on Sch	edule R?	٠			31		<del>                                     </del>
4	Describe in Part XIII the intended uses of th	ne organization's endo	wment	t funds						
Par	t VI Land, Buildings, and Equipme		e orga	anızatıoı	n ansv	wered 'Yes'	to For	m 990, Pa	rt IV, l	ine
	11a. See Form 990, Part X, line :  Description of property	10.		(a) Cost or easis (inves		(b)Cost or ot basis (other		Accumulated	<b>(d)</b> B	ook value
1-	and									
	Land		-			3,685,	315	18,02	5	3,667,290
	Leasehold improvements		. ⊢			3,065,	212	10,02		3,007,290
	Equipment		<u> </u>			501,	680	373,99	8	127,682
	0 th					301,		2,3,5		
	I. Add lines 1a through 1e <i>(Column (d) must e</i>		columr	(B), line	10(c).)	)			1	3,794,972
	. , , , ,	. ,			. , ,			Schedule [	) (Form 9	

See Form 990, Part X, line 12.	olete if the organization a	answered 'Yes' to Form 990, Part IV, line 1	1b.
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value	
(1)Financial derivatives		Social and an year market range	
(2)Closely-held equity interests			
(3)Other			
(A) Limited Partnership Interests	587,802	F	
(B) LLC Member Interests	1,016,184	F	
(C) Private Equity Real Estate Funds	990,756	F	
(D) Certificates of Deposit	2,500,920	F	
(E) Commingled Funds - Equities	13,287,008	F	
(F) Commingled Funds - Fixed Income	6,053,658	F	
(G) Endowment Cash and Money Markets	196,601	F	
	150,001		
Tabel (Column (h) contact for 200 Day (1977)	24.622.022		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)  Part VIII  Investments—Program Related. Con			110
See Form 990, Part X, line 13.	ipiete ii the organization	ranswered les to form 990, Part IV, line	IIC.
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )			
		, Part IV, line 11d See Form 990, Part X, line 15  (b) Book value	
(1) CSV Life Insurance	LIOII	254,	827
(2) Split Interest Agreements		14,076,	
(3) Other Receivables			140
(4) Financing Costs			171
(5) Gifted Assets			,203
(6) Accrued Interest Receivable			409
· ·		,	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.,		14,386,	483
Part X Other Liabilities. Complete if the organ	ızatıon answered 'Yes' to	Form 990, Part IV, line 11e or 11f. See	
Form 990, Part X, line 25.  1 (a) Description of liability	(b) Book value		
<del>-</del>	(b) Dook value		
Federal income taxes	125.000		
Due to Northern State University	125,000		
Obligations Under Split Interest Agreements	65,997		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	190,997		
2 Liability for uncertain toy positions In Day VIII provide t			

Part XII, Line 2d - Other

Adjustments

Part XI		evenue per Audited Financial Statements With Revenue p vered 'Yes' to Form 990, Part IV, line 12a.	ei k	etarii complete ii
<b>1</b> Tot	al revenue, gains, and othe	r support per audited financial statements	1	11,212,823
<b>2</b> Am	ounts included on line 1 bu	t not on Form 990, Part VIII, line 12		
<b>a</b> Net	t unrealized gains on invest	ments 2a 316,434		
<b>b</b> Dor	nated services and use of fa	acilities <b>2b</b> 82,642		
<b>c</b> Rec	coveries of prior year grants	2c		
<b>d</b> Oth	ner (Describe in Part XIII )	2d 3,007,240		
	d lines <b>2a</b> through <b>2d</b> .		2e	3,406,31
Sub	otract line <b>2e</b> from line <b>1</b> .		3	7,806,50
A m	ounts included on Form 99	0, Part VIII, line 12, but not on line <b>1</b>		
		uded on Form 990, Part VIII, line 7b . 4a		
	•			
	d lines <b>4a</b> and <b>4b</b>	<u> </u>	4c	-301,84
		4c. (This must equal Form 990, Part I, line 12)	5	7,504,66
art XII		xpenses per Audited Financial Statements With Expenses	_	
		swered 'Yes' to Form 990, Part IV, line 12a.		
Tot	al expenses and losses per	audited financial statements	1	4,434,99
A m	ounts included on line 1 bu	t not on Form 990, Part IX, line 25		
a Dor	nated services and use of fa	acilities		
<b>b</b> Prio	or year adjustments	2b	1	
c Oth	nerlosses		1	
<b>i</b> Oth	ner (Describe in Part XIII )		1	
	d lines <b>2a</b> through <b>2d</b>	<u> </u>	2e	301,84
			3	4,133,14
		0, Part IX, line 25, but not on line 1:		.,,-
		uded on Form 990, Part VIII, line 7b   4a		
	ner (Describe in Part XIII )		1	
	d lines <b>4a</b> and <b>4b</b>		4c	
		nd <b>4c.</b> (This must equal Form 990, Part I, line 18)	5	4,133,14
	I Supplemental Inf			7,133,14
Part V , lin nformatio	ne 4, Part X, line 2, Part XI, on	Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to		de any additional
	Return Reference	Explanation		
ırt IV, Lır	ne 2 b	FOHO I, LLC collects security deposits from the apartment complex ten		
ırt V, Lıne	n 4	completion of a satisfactory moveout at which point the money is returne Endowment funds are used to provide scholarships and university suppor		
IIC V , LIIIC	t <del>1</del>	University	L LO IN	orthern State
art X, Line		The Foundation is exempt from Federal income taxes under Section 501 (Service Code The Foundation is annually required to file a Return of Orgincome Tax (Form 990) with the IRS In addition, the Foundation is subjunced that is derived from business activities that are unrelated to its efoundation files an Exempt Organization Business Income Tax Return (Freport its unrelated business taxable income due to the rental of the Presuniversity and revenue earned on alternative investments held by the Foundanism immaterial amount of income tax expense for each of the years end As a single-member limited liability company, FOHO I, LLC is treated as income tax purposes. Therefore, FOHO I, LLC's financial activity is reposed for any tax positions taken affecting its annual filing requirements, and a uncertain tax positions that are material to the financial statements. The future accrued interest and penalties related to unrecognized tax benefits expense if such interest and penalties are incurred. The Foundation's Federal income tax interest and penalties are incurred.	anizati ect to i ect to i exempt orm 99 ident' ident' ident' ident' indati a "dis rted in t it has s such Founds and I deral F	on Exempt from ncome tax on net purpose The 90T) with the IRS to s home to the on, which has resulted e 30, 2014 and 2013 regarded entity" for conjunction with the s appropriate support does not have any lation would recognize labilities in income tax orm 990T filings are
art XI, Lin	ne 2d - Other	no longer subject to Federal tax examinations by tax authorities for years Change in Split Interest Agreements 3,007,240	, 50101	C 2010
djustmen		- · · · · · · · · · · · · · · · · · · ·		
art XI, Lin	ne 4b - Other	Rental Expenses -105,376 Special Events - Direct Expenses -78,722 Sold -105.247 Loss on Sale of Asset -12.500	Conce	ssions Cost of Goods
diustment	+c			

Special Events - Additional Direct Expenses 78,722 Rental Expenses 105,376 Concessions Cost of Goods Sold 105,247 Loss on Sale of Asset 12,500

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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DLN: 93493135032905

OMB No 1545-0047

Open to Public Inspection

**SCHEDULE G** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

**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. Attach to Form 990 or Form 990-EZ.

**Supplemental Information Regarding** 

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification number

Name of the organization						Employer iden	Employer identification number		
Northern State University Founda	ition					23-7002314			
Part I Fundraising Acti Form 990-EZ filers				on answered "Yes" part.	to Form	990, Part IV	, line 17.		
1 Indicate whether the organi	zation raised funds	through a	ny of the 1	following activities Che	eck all th	nat apply			
a Mail solicitations		-	e	Solicitation of nor	n-govern	ment grants			
<b>b</b> $\Gamma$ Internet and email solicitations <b>f</b> $\Gamma$ Solicitation of government grants									
<b>c</b> Phone solicitations			g	☐ Special fundraisin	ig events	5			
<b>d</b>									
<b>2a</b> Did the organization have a or key employees listed in F							Г <sub>Yes</sub> Г №		
<b>b</b> If "Yes," list the ten highest to be compensated at least			fundraıse	rs) pursuant to agreem	ents und	ler which the fu	ndraiser is		
(i) Name and address of Individual or entity (fundraiser)	(ii) Activity	fundrai cust cont contrib	Did ser have ody or crol of putions?	(iv) Gross receipts from activity	(or r	mount paid to etained by) aiser listed in col (i)	(vi) A mount paid to (or retained by) organization		
1		Yes	No						
1									
2									
3									
Š									
4									
5									
6									
7									
8									
9									
10									
Total			.▶						
3 List all states in which the oregistration or licensing	organization is regis	tered or lı	censed to	solicit contributions o	or has be	en notified it is	exempt from		

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 **(b)** Event #2 (c) Other events (d) Total events (add col (a) through **Northern Night** Wachs 2014 col (c)) (event type) (event type) (total number) Revenue 199,569 44,746 141,585 385,900 Gross receipts Less Contributions 84,580 32,475 68,244 185,299 Gross income (line 1 minus line 2) 114,989 12,271 73,341 200,601 Cash prizes 18,829 18,829 Noncash prizes 62,988 8,508 70,496 5 141,992 Expenses Rent/facility costs Food and beverages Direct Direct Entertainment 13,003 Other direct expenses 40,510 31,804 85,317 (246,138)-45,537 Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than Part III \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/Instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) Gross revenue 98,405 98,405 65,079 65,079 Direct Expenses 2 Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Yes 65 560 % ┌ Yes % ✓ Yes % V olunteer labor □ No □ No 65,079 Direct expense summary Add lines 2 through 5 in column (d) . . . . . . . . . . . . . . 33,326 Net gaming income summary Subtract line 7 from line 1, column (d) . . . . . . . . . . . . . . . . . Enter the state(s) in which the organization operates gaming activities SD South Dakota does not require a gaming license for charitable organizations as long as they comply with the applicable South Dakota codified laws for qualified exempt organizations If "Yes," explain

formed to administer charitable gaming?  Indicate the percentage of gaming activity operated in  The organization's facility	
Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	
formed to administer charitable gaming?  Indicate the percentage of gaming activity operated in  The organization's facility	
Indicate the percentage of gaming activity operated in  The organization's facility	
The organization's facility	∣ Yes IY No
An outside facility	
Enter the name and address of the person who prepares the organization's gaming/special events books and records  Name Becky Mehlhoff  Address 620 15th Ave SE	%
Name ► Becky Mehlhoff  Address ► 620 15th Ave SE	100 000 %
Address 620 15th Ave SE Aberdeen, SD 57401  L5a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	
Address 620 15th Ave SE Aberdeen, SD 57401  L5a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	
Aberdeen, SD 57401  L5a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	
L5a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	
revenue?	
revenue?	
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the	i tes i no
amount of gaming revenue retained by the third party $\blacktriangleright$ \$	
C If "Yes," enter name and address of the third party	
Name 🏲	
Address 🟲	
.6 Gaming manager information	
Name Mame Todd Jordre	
Gaming manager compensation 🏲 \$	
Canning manager compensations of	
Description of services provided 🕨 Collects and records money received for raffles	
Description of services provided F Confects and records money received for rames	
□ Director/officer	
7 Mandatory distributions	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to	
retain the state gaming license?	┌ Yes ┌ No
<b>b</b> Enter the amount of distributions required under state law distributed to other exempt organizations or spent	
ın the organization's own exempt activities during the tax year ▶ \$	
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide additional information (see instructions).	
Return Reference Explanation	
Schodulo G /Form S	

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DLN: 93493135032905

Schedule I (Form 990)

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

2013

OMB No 1545-0047

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

Attach to Form 990

Open to Public

Department of the Treasury
Internal Revenue Service

Name of the organization

Attach to Form 990

Information about Schedule I (Form 990) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

Inspection

Employer identification number Northern State University Foundation 23-7002314 Part I 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 ✓ Yes 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 (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization section valuation non-cash assistance grant cash orassistance or government if applicable assistance (book, FMV, appraisal, other) See Additional Data Table Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . 

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

(a)Type of grant or assistance	( <b>b)</b> Number of recipients	<b>(c)</b> 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 Informa	<b>tion.</b> Provide the info	ormation required in Pa	irt I, line 2, Part III, col	umn (b), and any other a	dditional information.

Part IV Supplemental In	<b>iformation.</b> Provide the information required in Part 1, line 2, Part III, column (b), and any other additional information.
Return Reference	Explanation
,	The Foundation notifies NSU of the scholarships available, including amounts and criteria to be used for the selection process NSU selects recipients based on information provided by the Foundation. The Foundation receives a detailed scholarship list for the academic year from Northern State University prior to the scholarship grant award. For non-scholarship grants, payments made to NSU based on donor restrictions, i.e. Barnett Center Addition. Art Dept. Renovation

#### **Additional Data**

Software ID:

**Software Version:** 

**EIN:** 23-7002314

Name: Northern State University Foundation

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Northern State University 1200 South Jay Street Aberdeen,SD 57401	46-6000364	Government	2,008,437				Scholarships

Form 990,Schedule 1, Pa	rt II, Grants an	<u>id Otner Assistance</u>	to Governments	and Organizations	s in the United Sta	tes	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Northern State University 1200 South Jay Street Aberdeen,SD 57401	46-6000364	Government	254,303				Barnett Center A ddition

Form 990,Schedule 1, Pa	<u>rt II, Grants an</u>	<u>id Otner Assistance</u>	<u> to Governments</u>	and Organizations	s in the United Sta	tes	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Northern State University 1200 South Jay Street Aberdeen, SD 57401	46-6000364	Government	8,340				Free Application Month

Form 990, Schedule I, Pa	orm 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Northern State University 1200 South Jay Street Aberdeen,SD 57401	46-6000364	Government	6,544				Athletic Department Operating Support		

Form 990,Schedule I, Pa	form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Northern State University 1200 South Jay Street Aberdeen, SD 57401	46-6000364	Government	384,025				Atkins Funds & School of Education Consultant			

Form 990,Schedule 1, Pa	orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Northern State University 1200 South Jay Street Aberdeen, SD 57401	46-6000364	Government	37,895				Art Department Renovation		

Form 990,Schedule 1, Pa	orm 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Northern State University 1200 South Jay Street Aberdeen, SD 57401	46-6000364	Government	10,125				Warranty for equipment in Nora Staael room in Barnett Center			

Form 990,Schedule 1, Pa	rt II, Grants an	d Otner Assistance	to Governments	and Organizations	s in the United Sta	tes	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Northern State University 1200 South Jay Street Aberdeen, SD 57401	46-6000364	Government	9,939				School of Education Back to School Workshop

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States							
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Northern State University 1200 South Jay Street Aberdeen, SD 57401	46-6000364	Government	737,351				General University Support

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#### DLN: 93493135032905

## OMB No 1545-0047

#### Schedule J (Form 990)

Department of the Treasury

# **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions.

Internal Revenue Service

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

**Employer identification number** Name of the organization Northern State University Foundation 23-7002314 **Questions Regarding Compensation** Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Health or social club dues or initiation fees Tax idemnification and gross-up payments Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Νo Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Yes 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 Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 4a Νo 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo Participate in, or receive payment from, an equity-based compensation arrangement? **4**c 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. 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 The organization? Νo 5b Νo Any related organization? If "Yes," to line 5a or 5b, describe in Part III 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 The organization? 6a Νo Any related organization? Νo If "Yes," to line 6a or 6b, describe in Part III 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 Νo 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

If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

ın Part III

section 53 4958-6(c)?

8

Nο

### 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 (i) Base compensation	own of W-2 and/or 1099-MISC compensation  (ii) Bonus & (iii) Other reportable compensation  n compensation compensation		(C) Retirement and other deferred compensation	<b>(D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	<b>(F)</b> Compensation reported as deferred in prior Form 990
(1)Todd Jordre President/CEO	(i) (ii)	104,996 0	0	0	0	0	104,996 0	0
(2)Becky Mehlhoff Accountant	(i) (ii)	36,557 0	0	0	0	0	36,557 0	0

Schedule J (Form 990) 2013

#### Part III Supplemental Information

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

Return Reference	Explanation
Part I, Line 1a	Todd Jordre receives his country club membership as part of his compensation
Part I, Line 1b	The board of directors approved the membership as part of his annual salary package
	Todd Jordre and Becky Mehlhoff are compensated by an unrelated organization, Northern State University, for their services to the Foundation Compensation is based on the state of South Dakota's salary policy Salaries are approved by the Executive Committee

Schedule J (Form 990) 2013

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DLN: 93493135032905

OMB No 1545-0047

Department of the Treasury

**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** 

Open to Public Inspection

Internal Revenue Service Name of the organization Northern State University Foundation

▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990. **Employer identification number** 

				[23	-7002314			
Pa	rt I Types of Property							
		(a) Check If applicable	(b) Number of contributions or items contributed	<b>(c)</b> Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of o noncash contri		_	nts
1	Art—Works of art							
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
	Securities—Publicly traded .	X	8	113,275	A verage of high &	low		
10	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
	Other▶ ( tion - Nor )	X	120	53,932	Selling Price			
<b>26</b>	Other►( i)	Х	11	28,116	FMV			
	Other►( es for Sp)	Х	3	11,586	FMV			
28	Other ► (	Х	1	11,285	FMV			
) ffic	ce furnit )							
29	Number of Forms 8283 received by th				<b>a</b>			1
	for which the organization completed F	orm 8283,	Part IV, Donee Acknowle	dgement 2	<u> </u>			
20-	Duman the warm did the surrouncestion				+h	_	Yes	No
SUa	During the year, did the organization							
	it must hold for at least three years fr			, and which is not required	to be used			
_	for exempt purposes for the entire ho		·			30a		No
b	If "Yes," describe the arrangement in	Part II						
	Does the organization have a gift acc					31	Yes	
32a	Does the organization hire or use thir contributions?	a parties or	related organizations to s	olicit, process, or sell noi	ıcash	32a		No
b	If "Yes," describe in Part II							
33	If the organization did not report an a describe in Part II	mount in co	olumn (c) for a type of prop	erty for which column (a)	ıs checked,			

Part II Supplem

**Supplemental Information.** 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.

Return Reference

Explanation

Schedule M (Form 990) (2013)

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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.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
Northern State University Foundation

23-7002314

Return Reference	Explanation
Form 990, Part VI, Section A, line 1	Executive Committee, which shall consist of six (6) members, who are the Chair, Chair-Elect, Immediate Past Chair, Secretary, President/CEO of Northern State University Foundation, and President of Northern State University. The NSU Foundation President is a non-voting member of the Executive Committee. This committee will assist the Board of Directors by (a) Having oversight of the standing committees of the Board of Directors and calling upon standing committee chairperson(s) to report to the Executive Committee at their bi-monthly meeting, and (b) In situations where it is not practicable for the entire Board of Directors to address a matter by special meeting, the Executive Committee shall have the authority of the Board of Directors to conduct necessary business. The Executive Committee shall be chaired by the Chair of the Board of Directors.

Return Reference	Explanation
1 T	Nathan Reede & Tom Seyer - Business relationship Julie Johnson & Cindi Walsh - Business relationship Julie Johnson & Dr James Smith - Business relationship Julie Johnson & Todd Jordre - Business relationship

Return Reference	Explanation	
	Form 990, Part VI, Section A, line 4	Significant changes were made to the Foundation's Bylaws which were approved by the board on 9/19/13 Exempt Purpose wording was updated to the following. To engage in and enter in to such affiliations, alliances, joint ventures and other restoroships with governmental agencies, civic organizations, religious organizations, religious organizations, religious organizations and others in order to further the creation, promotion and operation of the Foundation's purpose or business, and To engage in all other activities permitted to be engaged in by nonprofit corporations pursuant to the laws of the State of South Dakota and for any other purpose within the meaning of Section 501(c)(3) of the Internal Revenue Code or the corresponding provision of any future law (the "Code"). These purposes include the making of distributions to organizations qualifying as exempt organizations under Section 501(c)(3) the Code, or for the corresponding prov sion of any future United States Internal Revenue law Board of Director Composition, Qualifications and were updated to Governing Powers. The business and charitable affairs of the Foundation will be managed by or under the direction of a Board of Directors elected by the Members ("Board"). The Board will have all the powers and duties necessary or appropriate for the administration of the affairs of the Foundation consistent with the law, the Articles of Incorporation and these Bylaws. Composition. The Board of Directors will be comprised as follows a Number. The Board will have no few or than 13 and no more than 17 members including ex-officio members ("Board Member") or "Director"). Be-efficio The ex-officio board members will be 1 University President. The Northern State University President will appoint one member of the Board in Foundation President will appoint on embers of the Northern State University Wolves Club to be a voting member of the Board Will refer as part of the Board in Foundation President will be non-voting member of the Board Cludifications. A Board Member

Return Reference	Explanation	
	Form 990, Part VI, Section A, line 4	hold the offices of Secretary and Treasurer Election and Term Every other year, at the board meeting following the Annual Member Meeting, the Board will elect a Chair-Elect, Sec retary and Treasurer to a two year term. At the completion of that term, the Chair-Elect will become the Chair and serve a two year term in that position. After completing the term as Chair, the Director will become the Past-Chair and serve two more years in that position. Duties The Board Officers' duties are as follows a Chair The Chair will preside at all Board and Member meetings, will execute, with the Secretary, all Foundation contracts and instruments as authorized by the Board of Directors, will appoint, subject to the approval of the Board, standing and ad noc committees, will perform all duties, incident to the office of Chair and such other duties as may be assigned by the Board, and will be an exofficio, non-voting member of all committees except as specified otherwise herein in the event the Foundation President is unable to perform the duties of that office, the Chair will serve as the Foundation President during the absence or until the Board appoints an interim replacement or hires a new person for the office b Chair-Elect The Chair-Elect will perform such duties as may be assigned by the Board of Directors. In case of the death, disability or absence of the Chair, the Chair-Elect will perform and be vested with all the duties and powers of the Chair or Past-Chair. The Past-Chair will serve in an advisor by capacity to the Chair and other Board Officers and will performsuch duties as may be a signed by the Board of Directors. Secretary The Secretary will keep the minutes of the Board meeting and Member meetings, will serve notice of all meetings, will execute, with the Chair, all Foundation contracts and instruments as authorized by the Board of Directors, will have charge of the books, papers and records of the Board all of which will at all reasonable times be open to the examination of any Director, will authenticate

Return Reference	Explanation
	The Foundation will have one class of Members Any person or entity who makes a contribution to the Foundation during the fiscal year will be a member for that year ("Member") Members will have the right to vote in the Board of Directors election. The Board of Directors may at any time create additional membership classifications.

Return Reference	Explanation
	The Members will elect Directors at the Annual Meeting from the slate of qualified candidates presented at the Annual Meeting Members will have the opportunity to nominate qualified Board candidates prior to the Annual Meeting. The election will be held in accordance with these Bylaws and procedures established by the Board. In addition, the members will consider such other business as may properly be brought before the meeting.

Return Reference	Explanation
Section B, line 11	The accountant at Northern State University Foundation will review the draft and provide questions to the preparer A draft will also be provided to the Audit and Compliance Committee for review. The Audit Committee will recommend approval of the Form 990 to full board where it will be voted on before it is filed.

Return Reference	Explanation
Form 990, Part VI, Section B, line 12c	Board members will abstain from decisions in which they have an interest. This is documented in the board/committee minutes. In addition, staff will prepare an annual report on the results of the conflict of interest disclosure questionnaire sent to board members to the Audit and Compliance Committee for review annually. Staff does sign an annual "Code of Ethics" document that requires them to disclose any conflicts of interest that arise through the year.

Return Reference	Explanation
Form 990, Part VI, Section B, line 15	For Northern State University Foundation employees, compensation increases are based on what the state of South Dakota provides to University employees

Return Reference	Explanation						
Form 990, Part VI, Section C, line 19	These documents are made available upon approval by the President/CEO						

Return	Explanation	
Reference	LAPIANALION	
	Form 990, Part VI, Line 4	Continuation of Amendments to Bylaws. Provisions for a finance and audit committee were ad ded as follows. Finance & Audit. Assist the Board in overseeing accounting policies and au diting and reporting practices. The committee will, in conjunction with Treasurer, cause the Foundation's books and records to be audited by an independent certified public account and as often as required by statute or rule, or as required by the Board. The committee will in recommend to the Board and present the results to the Board. The committee will recommend a change of independent auditors or auditing practices when necessary or request additional inform ation or authorization to hire additional auditing resources. The committee will periodically meet with the independent auditors to discuss and determine the scope of the audit, the Foundation's internal accounting controls, and significant financial reporting matters. The committee will periodically review the Foundation's financial records, with respect to the audit results, changes in accounting principles or practices, areas of audit concern, contents of the independent auditors management letter and the Foundation's response the reto. A section regarding Foundation Officers was added. 7.1 Number The Foundation Officers will be Foundation President and one or more vice-presidents. The Board may, upon major ity vote, create the offices of secretary and any other office it deems necessary to prope ity operate the Foundation ("Foundation Officers"). 7.2 Hiring The Board will perform the acts necessary to locate and hire the Foundation President sith of chief executive officers' duties are so follows a Foundation President. The Foundation President will aversee the long-term goals and purposes of the Foundation The Foundation President will aversee the long-term goals and purposes of the Foundation in addition, the Foundation President will wersee the long-term goals and purposes of the Foundation President will aversee the long-term goals and purposes of the Foundation Presi

Return Reference	Explanation	
	Form 990, Part VI, Line 4	ably believes to be in the best interests of the Foundation, and with the care an ordinarily prudent person in a like position would exercise under similar circumstances. A conflict of interest is defined as referring only to personal, proprietary interests of the person is covered by this policy and their immediate families and not to philosophical or profess ional differences of opinion. Real and apparent conflicts of interest with Foundation affa irs may sometimes occur because the many persons associated with the Foundation have multiple interests and affiliations and various positions of responsibility within the community. It is likely that a person covered by this policy will owe identical duties to two or more organizations having similar activities. Conflicts of interest must be avoided because they place, or apparently place, the interests of others ahead of the Foundation's obligations to its corporate purposes and to the public interest. Conflicts of interest reflect adversely upon the persons involved and upon the institutions with which they are affiliated, regardless of the actual facts or motivations of the parties. However, it is decidedly not in the long-range best interests of the Foundation to terminate or cease all association with persons who may have real or apparent conflicts or dualities of interest if there is a prescribed and effective method of rendering such conflicts harmless to all concerned 9.9.1 Policy Statement. Recognizing the underlying basis, it is the policy of the Foundat ion not to preclude dealings with those having actual or apparent conflicts or dualities of interest so long as the same are promptly and fully disclosed whenever they occur and the Board determines that the conflict or duality of interest is harmless to the Foundation. Personal and all other Foundation employees and all of their immediate family members, it also includes independent confrictory providing services or materials to the Foundation, collectively all such individuals will be referred to as "Co

Return Reference	Explanation
Form 990, Part XI, line 9	Change in Split Interest Agreements 3,007,240

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

DLN: 93493135032905

OMB No 1545-0047

2013

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Schedule R (Form 990) 2013

**Employer identification number** 

# **Related Organizations and Unrelated Partnerships**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990. ► See separate instructions.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

(Form 990)

**SCHEDULE R** 

Name of the organization Northern State University Foundation

23-7002314 Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (b) (c) (d) (f) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity (1) FOHO I LLC Apartment buildings to SD 318,768 3,314,173 Northern State University 620 15th Ave SE provide additional housing Foundation Aberdeen, SD 57401 for NSU students 27-3836141 Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one Part II or more related tax-exempt organizations during the tax year. (c) (b) Name, address, and EIN of related organization Legal domicile (state Public charity status Direct controlling Section 512(b) Primary activity Exempt Code section or foreign country) (if section 501(c)(3)) (13) controlled entity entity? Yes No

Cat No 50135Y

Part III	<b>Identification of Related Org</b> because it had one or more rela						ation ansv	vered "Ye	es" on	Form	990, Part	IV, lu	ne 34	ļ
	<b>(a)</b> Name, address, and EIN of related organization		<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	al Direct cile controlling or entity gn	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets			(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	partner?		<b>(k)</b> Percentage ownership
						,			Yes	No		Yes	No	
												_		
													$\square$	
Part IV	<b>Identification of Related Org</b> line 34 because it had one or mo	ore related organız							wered	d "Yes				IV,
Na	( <b>a)</b> ame, address, and EIN of related organization	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)		<b>(d)</b> Direct controllir entity	ng (e) Type of entity (C corp, S corp, or trust)	y Share of incom	total Share	(g) e of end- -year ssets		(h) ercentage wnership	(i) Section 512 (b)(13) controlled entity?		No.
							1			-	ĺ	Yes	<u>*</u>	No
												ı		

Part '	Transactions With Related Organizations Complete if the organization answer	ered "Yes" on Form	n 990, Part IV, line	34, 35b, or 36.					
No	te. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Y	'es	No		
<b>1</b> Durir	g the tax year, did the orgranization engage in any of the following transactions with one or more re	lated organizations li	sted in Parts II-IV?						
a Re	a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity								
<b>b</b> G	ft, grant, or capital contribution to related organization(s)				1b				
<b>c</b> Gı	t, grant, or capital contribution from related organization(s)				1c				
<b>d</b> Lo	ans or loan guarantees to or for related organızatıon(s)				1d				
<b>e</b> Lo	ans or loan guarantees by related organization(s)				1e				
f Dividends from related organization(s)									
g Sa	le of assets to related organization(s)				1g				
h Pu	rchase of assets from related organization(s)				1h				
i Ex	change of assets with related organization(s)				<b>1</b> i				
j Lease of facilities, equipment, or other assets to related organization(s)									
<b>k</b> Le	k Lease of facilities, equipment, or other assets from related organization(s)								
l Performance of services or membership or fundraising solicitations for related organization(s)									
m Performance of services or membership or fundraising solicitations by related organization(s)									
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)									
<b>o</b> Sl	aring of paid employees with related organization(s)				10				
p Re	ımbursement paıd to related organization(s) for expenses				1p				
<b>q</b> Re	ımbursement paıd by related organızatıon(s) for expenses				1q				
r Ot	her transfer of cash or property to related organization(s)				1r				
s Other transfer of cash or property from related organization(s)									
2 11	the answer to any of the above is "Yes," see the instructions for information on who must complete  (a)	_							
	Name of related organization	<b>(b)</b> Transaction type (a-s)	(c) Amount involved	<b>(d)</b> Method of determining amou	unt invo	olved			
-									

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on 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 regarding exclusion for certain investment partnerships

revenue) that was not a related organization. See instructions regarding exclusion for certain investment 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 sections 512- 514)		(e) all partners section 501(c)(3) anizations?	(f) Share of total Income	(g) Share of end-of-year assets	( <b>h)</b> Disproprtiona allocations <sup>7</sup>	_	(i) Code V <sup>2</sup> UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	_	(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1	
													_
			<u> </u>				l					<u> </u>	

Schedule R (Form 990) 2013

### Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2013