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Return of Organization Exempt From Income Tax

2013

OMB No 1545-0047

Department of the Treasury

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.

Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

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<u>A</u>	For the	2013 calend	ar year, or tax year beginning 07-01, 2013, and endu	ng	06-3	0 ,2014
В	Check if a	pplicable	C Name of organization ALUMNI ASSOC OF UNIVERSITY OF SOUTH DAKOTA		□□□	Employer identification no.
	Address o	hange	Doing Business As		4	6-6001196
	Name cha	ange	Number and street (or PO box if mail is not delivered to street address)	oom/suite	E	Telephone number
	Initial retu	m	414 EAST CLARK		10	605) 677-6734
	Terminate	d	City or town, state or province, country, and ZIP or foreign postal code			371,435
	Amended	return	VERMILLION, SD 57069		G	Gross receipts \$
Ī.	Applicatio	n pending	F Name and address of principal officer			
_	.,	,	,,	H(a) Is this a gro subordinate	up return	for Yes No
	Tax-exem	nt status	501(c)(3)			5 5
	Website		PALUMNI . COM	If "No," atta	ch a list (included? Yes No see instructions)
		rganization	Corporation ☐ Trust ☒ Association ☐ Other ► L Year of formation 195			
	rt I	Summar		3 M State	or legal do	omicie SD
	1			O		
	'	-		ON AND SUI	PORT	FOR
ce		UNIVERSI	TY OF SOUTH DAKOTA'S ALUMNI.			
Governance						
ver			▶ □ (1)			
Ó	2		ox I if the organization discontinued its operations or disposed of more than 25% of its	s net assets	_ 1	
	3		oting members of the governing body (Part VI, line 1a)		3	16
ies	4		ndependent voting members of the governing body (Part VI, line 1b)		4	0
<u>₹</u>	5	Total numbe	r of individuals employed in calendar year 2013 (Part V, line 2a)		5	<u> </u>
Activities &	6		r of volunteers (estimate if necessary)		6	
•	7a	Total unrelate	ed business revenue from Part VIII, column (C), line 12		7a	0
	b	Net unrelate	d business taxable income from Form 990-T, line 34		7b	0
•			<u></u>	Pnor Year		Current Year
	8	Contributions	s and grants (Part VIII, line 1h)	289	031	351,188
Revenue	9	Program ser	vice revenue (Part VIII, line 2g)			0
, e	10	Investment i	ncome (Part VIII, column (A), lines 3, 4, and 7d)	24	164	20,247
2 8	11	Other revenue	ue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			0
	12	Total revenu	e - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	313	195	371,435
-	13	Grants and s	sımılar amounts part (2 at 12			0
D	14	Benefits paid	to or for members-realizing column (A) Inte 4)			0
ી!પડ es	15	Salaries, oth	er compensation, employee benefits (Ran, X, column (A), lines 5-10)			0
∜. Expenses	16a		fundrais fieg (Part IX, Columnia), line (1e)			0
ē	Ь		sing expenses (Part IX, column (D), line 25)	-		
ă	17		ses (Parl IX column (A), lines 11a 14rd, 11f-24e)	236	543	187,378
	18	Total expens	ses Add mes 19 7 mestedual Part IX, column (A), line 25)		543	187,378
	19		ss expenses Subtract line 18 from line 12 · · · · · · · · · · · · · · · · · ·		652	184,057
				ginning of Current		End of Year
Net Assets or	[20	Total assets	(Part X, line 16)	1,139		1,323,666
Ass	ຫຼື 21		es (Part X, line 26)	1,133	,005	0
Net	Ē 22		or fund balances Subtract line 21 from line 20	1,139	600	
	art II		ire Block	1,133	, 009	1,323,666
			lare that I have examined this return uncluding accompanying schedules and statements, and to the best of my know	dedge and belief, it	ıs	
			laration of preparer (other than officer) is pased on all information of which preparer has any knowledge			
		/(Man Hill		10	1-11-14
Sig	ın	Signatu	re of officer		Date	
He		!			D0.0	
116			ETTE PORTER, BOARD CHAIR print name and title			
		<u> </u>			-	
D-	id		riepaier s right.	Check 📙	If PT	
Pa		MARK CI	100000	self-employe		P00187179
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US	e Onl	Firm's addres		hone no		
			VERMILLION SD 57069	60)5- <u>62</u>	4-4425
May	the IR	discuss this	return with the preparer shown above? (see instructions)			· · ☐ Yes 🔀 No

'ar	990 (2013) ALUMNI ASSOC OF UNIVERSITY OF		46-6001196 Pa
	t III Statement of Program Service Accord	•	
		any line in this Part III	
	Briefly describe the organization's mission		
	PROVIDE INFORMATION AND SUPPORT FOR UN	IVERSITY OF SOUTH DAKOTA'S ALUMN	Ι,
	Did the organization undertake any significant program service	ces during the year which were not listed on the	
	prior Form 990 or 990-EZ?	·	· · · · · · · · · · · · · Yes 😾 No
	If "Yes." describe these new services on Schedule O		
	Did the organization cease conducting, or make significant cl	hanges in how it conducts, any program	
	services?		· · · · · · · · · · · · Yes 🛣 No
	If "Yes," describe these changes on Schedule O		
	Describe the organization's program service accomplishmen	ts for each of its three largest program services, as r	measured by
	expenses Section 501(c)(3) and 501(c)(4) organizations are		
	the total expenses, and revenue, if any, for each program ser		
a	(Codo) (Evnopos ¢	uncluding greats of C	DUODUO F
	(Code) (Expenses \$		
	PROVIDE INFORMATION AND SUPPORT FOR UN	IIVERSITY OF SOUTH DAKOTA'S ALUMN	1
			
			
r.,	10.1		<u> </u>
b	(Code) (Expenses \$	including grants of \$) (Re	evenue \$
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c			
	(Code) (Expenses \$	including grants of \$) (Re	

Form 990 (2013)
Part IV . C

			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	Χ	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
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	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III · · · · · · · · · · · · · · · · ·	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		<u>X</u>
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		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
_	complete Schedule D, Part III	8		X
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			
4.4	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			3.7
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		<u>X</u>
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,"	44.		v
.	complete Schedule D, Part VI	11a		<u>X</u>
b	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С		110		
·	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	Х	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	110	<u> </u>	
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е		11e		X
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		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Χ
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		X
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		Χ
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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes" complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>

Form 990 (2013)

ALUMNI ASSOC OF UNIVERSITY OF SOUTH DAKOTA

Part IV . Checklist of Required Schedules (continued)

			Yes	No
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 Scheudle I, Parts I and II	21		<u>X</u>
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		_X_
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			1
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			İ
	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		<u>X</u> _
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		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
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		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Χ
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			İ
	or IV, and Part V, line 1 · · · · · · · · · · · · · · · · · ·	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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		X_
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_		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			1.
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	<u></u>

Form 990 (2013)

ALUMNI ASSOC OF UNIVERSITY OF SOUTH DAKOTA

Part V Statements Regarding Other IRS Filings and Tax Compliance

^	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			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	Ì		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		_X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		<u>X</u> _
b	If "Yes," enter the name of the foreign country		1	
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Χ
С	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			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		<u>X</u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	l		
	and services provided to the payor?	7a		<u>X</u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	_		
	required to file Form 8282?	7c		<u>X</u>
d	If "Yes," indicate the number of Forms 8282 filed during the year	_		
e •	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	+		
g h		7g 7h		
8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	711		
•	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		Χ
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		Χ
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter		- 1	
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)			
12a	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 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	_		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Χ
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body at the end of the tax year 16 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are independent n 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Χ any other officer, director, trustee, or key employee? 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 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Χ Did the organization have members or stockholders? 6 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 Χ Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Χ stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? X Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) 10a Did the organization have local chapters, branches, or affiliates? 10a 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? 10h 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a X b Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 12a 12b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c 13 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 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 **b** Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, physical address, and telephone number of the person who possesses the books and records of the organization 20 *KERSTEN JOHNSON (605)677-6734, 414 EAST CLARK, VERMILLION, SD 57069

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	290	(2013)	

ALUMNI ASSOC OF UNIVERSITY OF SOUTH DAKOTA

46-6001196

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

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

(0)

(A)	(B)	(B) (C)			(D)	(E)	(F)			
Name and Title	Average hours per week (list any	(do no	Position (do not check more than one				Reportable compensation from	Reportable compensation from related	Estimated amount of other	
	hours for	box, u	nless	perso	on is i	both an		the organizations		compensation
	related organizations	officer	and a	a dire	ctor/t	rustee)		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
•	below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(1033-111130)		and related organizations
(1) BRAD FOWLER	1.00									
DIRECTOR		Χ						0	0	0
(2) JENIFER HALLE DIRECTOR	1.00	Х						0	0	0
(3) MAREN COLON	1.00									
DIRECTOR		Χ						0	0	0
(4) TOM FRONING	1.00									
DIRECTOR	ļ	X						0	0	0
(5) CINDI MAREK POCHOP DIRECTOR	1.00	Х						o	0	o
(6) JEANEE STAPLETON	1.00									<u>-</u>
DIRECTOR		X						0	0	0_
(7) RICK HELLER	1.00									
DIRECTOR		X						0	0	0
(8) CHELSEY KRULL DIRECTOR	1.00	X						o	0	o
(9) BRYAN BENSEN	1.00									
DIRECTOR		X						0	o	o
(10)JAFAR KARIM	1.00									
DIRECTOR		X							0	0
(11)BUSH_FULLERTON_ REP FOUNDATION BOARD	_ 1.00_	Х						C	0	0
(12)LORELEI HEISINGER	1.00									
DIRECTOR		Х		L				<u> </u>	0	o_
(13)CHASE ANDERSEN	1.00									
DIRECTOR		Χ						c	0	0
(14)JEANETTE PORTER	5.00			}				}		
BOARD CHAIR				X	L				0	0
EEA										Form 990 (2013)

Abstrace Position Control technic more than one box, unless person is both an one person in the origination of person is both an one person is both an one person in the origination of person is both an one person in the origination of person is both an one person in the origination of person is both and one person is both an one person in the origination of person is both and one person in the o	Part VII Section A. Officers, Directors, Trustees		ees, ar	nd Hi			Comp	ensa					
Security Security	(A)	(B)				•			(D)	(E)	_	(F)	
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(16) PAUL VAN EUREN 5.00 X				İ	Х		1		0	0			0
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SECRETARY X 0 0 0	(17)KERSTEN JOHNSON	5.00											
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(20) (21) (22) (23) (24) (25) (25) (25) (25) (26) (27)													
(24) (25) 1b Sub-total 1 Total from continuation sheets to Part VII, Section A 1 Total (add lines 1b and 1c) 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 ist any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual and related organization and related organization and related organization and related organization and related organization and related organization and related organization is greater than \$150,000? If "Yes," complete Schedule J for such individual for services rendered to the organization? If "Yes," complete Schedule J for such person is ted on the 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 5 X 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) Compensation	(19)	_											
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1b Sub-total	(23)												
1b Sub-total	(24)	 	ļ				 -	-					
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Total from continuation sheets to Part VII, Section A Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from 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 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 individual for services rendered to the organization? If "Yes," complete Schedule J for such person													
d Total (add lines 1b and 1c)	1b Sub-total			• • •			• • •	•			<u> </u>		
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 0 Yes No	c Total from continuation sheets to Part VII, Sec	tion A .						.					
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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 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 individual 5 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 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 Compensation	2 Total number of individuals (including but not limite	ed to those liste	ed abov	/e) w	vho i	rece	eived n	nore	than \$100,000 of				
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organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	employee on line 1a? If "Yes," complete Schedule	J for such indi	vidual								3		X
Individual	· · · · · · · · · · · · · · · · · · ·												
5 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			"Yes,"	com	plet	e So	chedul	e J f	or such				
for services rendered to the organization? If "Yes," complete Schedule J for such person	1101110001			• •	• •	• •	• • • ·	• •			4		_X_
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 Compensation	• •	•					_	ıızat			_ :		3.7
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) (B) (C) Name and business address Description of services Compensation		complete Scr	nedule .	J for	suc	n pe	erson		• • • • • • • • • • • • • • • • • • • •		5		<u> </u>
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year (A) (B) (C) Name and business address Description of services Compensation	· · · · · · · · · · · · · · · · · · ·												
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Name and business address Description of services Compensation		-							(B)			(C)	
		SS								1			n
Total number of independent contractors (including but not limited to those listed above) who	name and pasmess board										2011		
2 Total number of independent contractors (including but not limited to those listed above) who		· <u>· · · · · · · · · · · · · · · · · · </u>											
Total number of independent contractors (including but not limited to those listed above) who								_					
Total number of independent contractors (including but not limited to those listed above) who													
Total number of independent contractors (including but not limited to those listed above) who													
	2 Total number of independent contractors (including	g but not limite	d to the	ose I	liste	d ab	ove) w	νho					

Form,990 (2013) 46-6001196 ALUMNI ASSOC OF UNIVERSITY OF SOUTH DAKOTA Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (A) (B) (D) Revenue excluded from tax Total revenue Related or Unrelated exempt business function revenue Contributions, Gifts, Grants and Other Similar Amounts Federated campaigns 1a h 1b 48,328 Fundraising events 1c 1d Government grants (contributions) . . 1e е All other contributions, gifts, grants, 1f and similar amounts not included above 302,860 Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f 351,188 **Business Code** Program Service Revenue 2a f All other program service revenue · · · · · · 3 Investment income (including dividends, interest, 20,247 20,247 Income from investment of tax-exempt bond proceeds Royalties (ı) Real (II) Personal b Less rental expenses · · · · c Rental income or (loss) · · · d Net rental income or (loss) (i) Securities (II) Other 7a Gross amount from sales of assets other than inventory **b** Less cost or other basis and sales expenses c Gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a b Less direct expenses b

6	Less cost of goods sold b		<u>J</u>	Į.	
С	Net income or (loss) from sales of inventory · ·				
<u> </u>	Miscellaneous Revenue	Business Code			
11a				<u> </u>	
b					
С					
d	All other revenue			T	

371,435

20,247

c Net income or (loss) from fundraising events

c Net income or (loss) from gaming activities · · · · · · · ▶

Total revenue See instructions

9a Gross income from gaming activities

10a Gross sales of inventory, less

b Loop post of goods cold

See Part IV, line 19 a b Less direct expenses b

returns and allowances

e Total. Add lines 11a-11d

0

Part IX | Statement of Functional Expenses

Do n	Check if Schedule O contains a response or note to any not include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
	b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21 .				
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22				
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				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	İ			
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
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				
b	Legal				
c	Accounting	1,458		1,458	
d	Lobbying	7,500		7,500	
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	13,765		13,765	
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	127,421		127,421	
13	Office expenses	29,680		29,680	
14	Information technology	1,554		1,554	
15	Royalties			<u> </u>	
16	Occupancy			<u> </u>	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials			<u> </u>	
19	Conferences, conventions, and meetings		· · · · · · · · · · · · · · · · · · ·	1	
20	Interest			<u> </u>	
21	Payments to affiliates		· · · · · · · · · · · · · · · · · · ·		
22	Depreciation, depletion, and amortization				
23	Insurance		i 	1	
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)				
a	SCHOLARSHIP	6,000		6,000	
b					
C				 	
d				 	
e	All other expenses		<u> </u>		
25	Total functional expenses. Add lines 1 through 24e	187,378	0	187,378	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs	1			
	from a combined educational campaign and	1			
	fundraising solicitation Check here ▶ ☐ if	.			
	following SOP 98-2 (ASC 958-720)		<u> </u>	1	

Part X Balance Sheet

		Crieck if Scriedule O contains a response of note to any line in this Part X	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	29,044	1	35,806
	2	Savings and temporary cash investments	38,022	2	23,138
	3	Pledges and grants receivable, net		3	
	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		5	
	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		6	~
	7	Notes and loans receivable, net		7	1
Assets	8	Inventories for sale or use		8	29,565
Ass	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or			
		other basis Complete Part VI of Schedule D 10a			
	b	Less accumulated depreciation · · · · · · · · · · 10b		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11	1,072,543	13	1,235,157
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,139,609	16	1,323,666
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities	 	20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
S	22	Loans and other payables to current and former officers, directors,			
Liabilities		trustees, key employees, highest compensated employees, and			
abi		disqualified persons Complete Part II of Schedule L		22	•
	23	Secured mortgages and notes payable to unrelated third parties		23	1.00
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete Part X		1 1	
		of Schedule D		25	
	26	Total liabilities Add lines 17 through 25	0	26	0
		Organizations that follow SFAS 117 (ASC 958), check here ► 🛛 and			
ses		complete lines 27 through 29, and lines 33 and 34.			
au	27	Unrestricted net assets	411,519	27	618,973
Net Assets of Fund Balances	28	Temporarily restricted net assets	728,090	28	704,693
рu	29	Permanently restricted net assets		29	
Ē		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and			. —
ò		complete lines 30 through 34.			
ets.	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
et	32	Retained earnings, endowment, accumulated income, or other funds		32	
~	33	Total net assets or fund balances	1,139,609	33	1,323,666
	34	Total liabilities and net assets/fund balances	1,139,609	34	1,323,666
EEA					Form 990 (2013)

Form	orm 990 (2013) ALUMNI ASSOC OF UNIVERSITY OF SOUTH DAKOTA 46-6001196				age 12
Pai	rt XI Reconciliation 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)	. 1	3	371,4	435
2	Total expenses (must equal Part IX, column (A), line 25)	. 2	_ :	L87,:	378
3	Revenue less expenses Subtract line 2 from line 1	. 3		L84,(057
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	. 4	1,1	L39,6	609
5	Net unrealized gains (losses) on investments	. 5			
6	Donated services and use of facilities	. 6			
7	Investment expenses	. 7			
8	Prior period adjustments	. 8			
9	Other changes in net assets or fund balances (explain in Schedule O)	. 9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	. 10	1,3	323,6	666
Pa	rt XII Financial Statements and Reporting	<u> </u>			
	Check if Schedule O contains a response or note to any line in this Part XII				- 🗌
				Yes	No
1	Accounting method used to prepare the Form 990 🔲 Cash 🔲 Accrual 🔲 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on 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?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			1	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	}	X
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	and and another suite and another whom Cabadala O and describe and also be under a suite and another suite		3b		
EEA	· · · · · · · · · · · · · · · · · · ·		Form	990 (2013)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

OMB No 1545-0047

2013

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Maille	OI THE	organization							Employer	taentificatio	n number
		ASSOC OF UNIV								001196	
Pa	rt I	Reason for P	ublic Charity	Status (All organiz	ations m	ust com	plete this	s part) S	See instr	uctions	
The	o <u>rg</u> ar	ization is not a private	e foundation becaus	se it is (For lines 1 throu	ugh 11, che	ck only one	box)				
1		A church, convention	of churches, or as	sociation of churches de	escribed in s	section 17	0(b)(1)(A)(i).			
2		A school described in	section 170(b)(1)	(A)(ii). (Attach Scheduk	eE)						
3		A hospital or a coope	rative hospital serv	rice organization describ	ed in sec tio	on 170(b)(1)(A)(iii).				
4		A medical research of	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the								
		hospital's name, city, and state									
5		An organization oper	ated for the benefit	of a college or university	y owned or	operated b	y a govern	mental un	it describe	d ın	
		section 170(b)(1)(A)	(iv). (Complete Pa	rt II)							
6		A federal, state, or lo	cal government or	governmental unit descr	ibed in sec	tion 170(b)(1)(A)(v)				
7	X	An organization that i	normally receives a	substantial part of its si	upport from	a governm	ental unit	or from the	e general p	ublic	
		described in section	170(b)(1)(A)(vi). (Complete Part II)							
8		A community trust de	escribed in section	170(b)(1)(A)(vi). (Comp	olete Part II)					
9		An organization that	normally receives	(1) more than 33 1/3% o	of its suppor	t from cont	ributions, r	nembersh	ıp fees, an	d gross	
		receipts from activitie	es related to its exe	mpt functions - subject t	o certain ex	ceptions, a	and (2) no	more than	33 1/3% o	fits	
		support from gross in	vestment income a	and unrelated business t	taxable inco	me (less s	ection 511	tax) from l	ousinesses	S	
		acquired by the organ	nization after June	30, 1975 See section 5	509(a)(2). ((Complete P	art III)				
10		An organization orga	nized and operated	exclusively to test for p	ublic safety	See secti	on 509(a)	(4).			
11		An organization orga	nized and operated	exclusively for the bene	efit of, to pe	rform the fo	unctions of	, or to carr	y out the		
		purposes of one or m	nore publicly suppo	rted organizations descr	nbed in sect	ion 509(a)	(1) or secti	on 509(a)(2) See se	ction	
		509(a)(3). Check the	box that describes	the type of supporting of	organization	and comp	lete lines 1	1e through	n 11h		
		a 🗌 Typel	b 🗌 Туре	ell c 🗌 Type	III-Function	ally integra	ated	d []	Type III-	Non-funtio	nally integrated
е		By checking this box	, I certify that the or	ganization is not control	led directly	or indirectly	y by one oi	more disc	qualified pe	ersons	
		other than foundation	n managers and oth	ner than one or more put	blicly suppo	rted organ	ızatıons de	scribed in	section 50	9(a)(1)	
		or section 509(a)(2)									
f		If the organization re-	ceived a written def	termination from the IRS	that it is a	Type I, Typ	e II, or Typ	e III suppo	orting		_
		organization, check t							• • • • •	• • • • •	
g		Since August 17, 200	06, has the organiza	ation accepted any gift o	r contribution	on from any	y of the				
		following persons?									
		(i) A person who d	irectly or indirectly	controls, either alone or	together wi	th persons	described	ın (ıı) and			Yes No
		(III) below, the g	overning body of th	ne supported organizatio	ın? .	• • • • •			• • • • •		11g(ı)
		•	*	ribed in (i) above? • •					• • • • •		11g(n)
		•		n described in (i) or (ii) a		• • • • •	• • • • •		• • • • •	• • • • •	11g(m)
<u>h</u>		Provide the following	information about	the supported organizati	ion(s)				1		
	(i) N	ame of supported organization	(n) EIN	(iii) Type of organization (described on lines 1-9	(iv) is the or		(v) Did yo		(vi) li organizati		(vii) Amount of monetary support
		J		above or IRC section	governing o		col (ı) c	of your	(ı) organız	ed in the	Заррогі
				(see instructions))	<u> </u>		ļ .	port?	U		
					Yes	No	Yes	No	Yes	No	-
(A)										1	
					<u> </u>	1				-	
(B)											
						 	-		-		
(C)											
					<u>- </u>	ļ			 	-	
(D)								İ	1		
/E\						ļ	 	 	-	-	-
(E)											
			-		-				-		
Tota	al .										
			i	1					1		1

Page 2

Section A. Public Support

ALUMNI ASSOC OF UNIVERSITY OF SOUTH DAKOTA 46-6001196

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III)

Caler	idar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	178,680	280,278	145,297	289,031	351,188	1,244,474
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	178,680	280,278	145,297	289,031	351,188	1,244,474
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6	Public support Subtract line 5 from line 4 · ·						1,244,474
Sec	tion B. Total Support	.	·				
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4 · · · · · · · · ·	178,680	280,278	145,297	289,031	351,188	1,244,474
8	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties and income from similar						
	sources	25,780	21,691	23,380	24,164	20,247	115,262
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets						
11	(Explain in Part IV)						1 250 526
12	Gross receipts from related activities, etc. (s	oo inetaletione)				12	1,359,736
13	First five years. If the Form 990 is for the oil	rganization's first, s	econd, third, fourth	, or fifth tax year as	a section 501(c)(3)	
500	organization, check this box and stop here tion C. Computation of Public Su				· · · · · · · · · · · · · · · · · · ·		▶∐
	•		- 		· - ··· ·-···	44	01 50 0/
14 15	Public support percentage for 2013 (line 6, c						91.52 %
16a	Public support percentage from 2012 Sched 33 1/3% support test - 2013. If the organiza				/20/ or more check	L	90.94 %
IVa	box and stop here. The organization qualifie						▶ 🔯
b	33 1/3% support test - 2012. If the organization						
_	check this box and stop here. The organiza			•	•		▶ □
17a	10%-facts-and-circumstances test - 2013.	•	•	-			
	10% or more, and if the organization meets	_					
	Part IV how the organization meets the 'fact		•				
	organization		•	•			▶ □
b	10%-facts-and-circumstances test - 2012.						
_	15 is 10% or more, and if the organization m	•		•	•	-	
	Explain in Part IV how the organization mee				•	lv	
	supported organization			-		-	▶ □
18	Private foundation. If the organization did r						_
	instructions			•			▶ 🔲
		·					

990 or 990-EZ) 2013

ALUMNI ASSOC OF UNIVERSITY OF SOUTH DAKOTA

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

• •	•	1 /1 /	
(Complete only	, if you checked the box	on line 9 of Part I or if the organization failed to qualify under Pa	art II
If the organizat	tion fails to qualify under	the tests listed below inlease complete Part II \	

Sec	tion A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus under sec 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b · · · · · · · ·						
	Public support (Subtract line 7c from line 6)						
	ction B. Total Support						
Cale	endar year (or fiscal year beginning in) 🕒 🖢	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6 · · · · · · · · ·						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	····					
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12) · · · · · · · · · · · ·						
14	First five years. If the Form 990 is for the org organization, check this box and stop here		second, third, fourth				▶ 🗌
Se	ction C. Computation of Public Su	pport Perce	ntage				
15	Public support percentage for 2013 (line 8, co	lumn (f) dıvıded l	by line 13, column (f))		15	%
16	Public support percentage from 2012 Schedu			<u> </u>		. 16	<u>%</u>
Se	ction D. Computation of Investmen					1	
17 18	Investment income percentage for 2013 (line Investment income percentage from 2012 Sci		•				% %
	33 1/3% support tests - 2013. If the organiza	ition did not chec	k the box on line 14	I, and line 15 is mi	ore than 33 1/3%, a	nd line	
	33 1/3% support tests - 2012. If the organiza line 18 is not more than 33 1/3%, check this b	ition did not chec ox and stop her	k a box on line 14 o e. The organization	or line 19a, and line qualifies as a pub	e 16 is more than 3 licly supported orga	3 1/3%, and and anization	
20	Private foundation. If the organization did no	t check a box on	line 14, 19a, or 19	b, check this box a	ind see instructions		<u>▶ </u>

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2013

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. See separate instructions. Information about Schedule C (Form 990 or 990-EZ) and its Instructions is at www.irs.gov/form990.

Open to Public Inspection

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

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

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

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

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

Section 504(a)(4), (5), exceptivations, Complete Red III.

	Section 50 I(c)(4), (5), or (6) organizations	Complete Part III			
Nam	e of organization			Employer	identification number
AL	UMNI ASSOC OF UNIVERSITY OF			46-600	
Pa	rt I-A Complete if the organ	ization is exempt under section	on 501(c) or is	s a section 527 org	anization.
1	Provide a description of the organization's				
2	Political expenditures · · · · · · · ·	• • • • • • • • • • • • • • • • • • • •		▶ \$	
3	Volunteer hours	• • • • • • • • • • • • • • • • • • • •			
Pa		ization is exempt under section			
1	Enter the amount of any excise tax incurre				
2	Enter the amount of any excise tax incurre				
3	If the organization incurred a section 4955				
4a	Was a correction made?	• • • • • • • • • • • • • • • • • • • •	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	· · 🗌 Yes 🔲 No
b	If "Yes," describe in Part IV				
Pa	rt I-C Complete if the organ	ization is exempt under section	on 501(c), exc	ept section 501(c)	(3).
1	Enter the amount directly expended by the		•		
	activities · · · · · · · · · · · · · · · · · · ·			▶ \$	·····
2	Enter the amount of the filing organization				
	527 exempt function activities · · · ·			· · · · · · · • • •	
3	Total exempt function expenditures Add I				
	line 17b				
4	Did the filing organization file Form 1120-	POL for this year?			· · 🗌 Yes 📗 No
5	Enter the names, addresses and employe	er identification number (EIN) of all section	n 527 political orga	anizations to which the filir	ng
	organization made payments For each o	rganization listed, enter the amount paid	from the filing orga	inization's funds. Also ente	er
	the amount of political contributions received	ved that were promptly and directly delive	ered to a separate	political organization, such	1
	as a separate segregated fund or a politic	al action committee (PAC). If additional s	pace is needed, p	rovide information in Part	IV
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Pa	rt II-A Complete if the organization				Form 5768 (elec			
	section 501(h)).	ii ia eveilibt ai	idei section su	itoloj and med	1 31111 3700 (8180	Juon unuer		
Δ	Check (if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's							
••	name, address, EIN, expenses, ar				ilibel 5			
В	Check if the filing organization checked b			•				
_		bying Expenditures		<u>, </u>	(a) Filing	(b) Affiliated		
	(The term "expenditures" r				organization's totals	group totals		
1a	Total lobbying expenditures to influence public op							
b	Total lobbying expenditures to influence a legislat		· -					
С	Total lobbying expenditures (add lines 1a and 1b)	•						
d								
е	Total exempt purpose expenditures (add lines 1c							
f	Lobbying nontaxable amount Enter the amount f							
	columns							
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amoun	t is:				
	Not over \$500,000		ount on line 1e					
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess of	over \$500,000				
	Over \$1,000,000 but not over \$1,500,000		10% of the excess of					
	Over \$1,500,000 but not over \$17,000,000		5% of the excess ov					
	Over \$17,000,000	\$1,000,000						
g	Grassroots nontaxable amount (enter 25% of line							
h	Subtract line 1g from line 1a If zero or less, ente							
i	Subtract line 1f from line 1c If zero or less, enter							
j	If there is an amount other than zero on either lin	e 1h or line 1i, did th	e organization file Fo	orm 4720	,			
	reporting section 4911 tax for this year?		-			Yes No		
	(Some organizations that	made a section 50	• •					
	Lobb	ying Expenditures	During 4-Year Aver	aging Period				
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total		
2a	Lobbying nontaxable amount							
b	Lobbying ceiling amount (150% of line 2a, column (e))							
С	Total lobbying expenditures							
d	Grassroots nontaxable amount							
е	Grassroots ceiling amount (150% of line 2d, column (e))							
f	Grassroots lobbying expenditures							

Schedule C (Form 990 or 990-EZ) 2013

EEA

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

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

2013

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990.

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

Open to Public Inspection

	of the organization	Employer identification number
ALU	UMNI ASSOC OF UNIVERSITY OF SOUTH DAKOTA	46-6001196
Pa	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Account	nts.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 6	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised	
	funds are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used	
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose	
	conferring impermissible private benefit?	
Pa	rt II Conservation Easements	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 7	
1	Purpose(s) of conservation easements held by the organization (check all that apply)	
	Preservation of land for public use (e.g., recreation or education)	y important land area
	Protection of natural habitat Preservation of a certified his	storic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a cons	servation
	easement on the last day of the tax year	Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
С	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a	
	historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization	zation during the
	tax year 🕨	•
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the	year
	•	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year	г
	▶ \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)
	(i) and section 170(h)(4)(B)(ii)?	
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statem	ent, and
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that	describes the
	organization's accounting for conservation easements	
Pa	organizations Maintaining Collections of Art, Historical Treasures, or Oth	ner Similar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and	balance sheet
	works of art, historical treasures, or other similar assets held for public exhibition, education, or research in fur	therance of
	public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these item	s
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and ba	lance sheet
	works of art, historical treasures, or other similar assets held for public exhibition, education, or research in fur	therance of
	public service, provide the following amounts relating to these items	
	(i) Revenues included in Form 990, Part VIII, line 1	▶ \$
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, p	
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	
а	Revenues included in Form 990, Part VIII, line 1	▶ \$
b		

	de D (Form 990) 2013 ALUMNI ASSOC OF						46-60011		
Par	Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)								
3	Using the organization's acquisition, accession, a	and other records,	check any o	the follow	ing that are a si	gnificant use o	of its		
	collection items (check all that apply)								
а	a 🔲 Public exhibition d 🔲 Loan or exchange programs								
b	Scholarly research	e 🗌 O	ther						
С	Preservation for future generations								
4	Provide a description of the organization's collect	tions and explain h	now they furtl	ner the orga	anızatıon's exen	npt purpose in	Part		
	XIII								
5	During the year, did the organization solicit or rec	eive donations of	art, historica	treasures,	, or other similar	r			
	assets to be sold to raise funds rather than to be	maintained as pa	rt of the orga	nization's c	collection?			Yes 🗌	No
Par	t IV Escrow and Custodial Arrang	ements.							
	Complete if the organization an	swered "Yes"	to Form 9	90, Part	IV, line 9, or	reported a	ın amount	on Form	
	990, Part X, line 21								
1a	Is the organization an agent, trustee, custodian o	or other intermedia	ry for contrib	utions or o	ther assets not				
	ıncluded on Form 990, Part X?							. 🗌 Yes 📗	No
b	If "Yes," explain the arrangement in Part XIII and	complete the follo	wing table						
							Amou	int	
С	Beginning balance					1 1			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f		,	
2a	Did the organization include an amount on Form	990, Part X, line 2	112					· 🗌 Yes 📗	No
b	If "Yes," explain the arrangement in Part XIII Che	eck here if the exp	lanation has	been provi	ded in Part XIII				
Pai	t V Endowment Funds.								
	Complete if the organization an	swered "Yes"	to Form 9	90, Part	IV, line 10				
		(a) Current year	(b) Pri	or year	(c) Two years ba	ack (d) Thre	e years back	(e) Four years back	
1a	Beginning of year balance								
b	Contributions								
c	Net investment earnings, gains, and								_
	losses								
d	Grants or scholarships								
е	Other expenditures for facilities and								
	programs								
f	Administrative expenses								
g	End of year balance	**							
2	Provide the estimated percentage of the current	vear end balance	(line 1a. colu	mn (a)) he	ld as				
а	Board designated or quasi-endowment	-		(- //					
b	Permanent endowment > %								
С	Temporarily restricted endowment	%							
	The percentages in lines 2a, 2b, and 2c should e								
3a	Are there endowment funds not in the possession	-	on that are h	eld and ad	ministered for th	ne			
	organization by							Yes	No
	(i) unrelated organizations							3a(i)	_
	(ii) related organizations					<i>.</i>		3a(ıi)	
b	If "Yes" to 3a(ii), are the related organizations list	ted as required on	Schedule R	·				3b	—
4	Describe in Part XIII the intended uses of the org	· ·						[
Pai	rt VI Land, Buildings, and Equipm						_		—
	Complete if the organization an		to Form 9	90. Part	IV. line 11a	See Form	990. Part	X. line 10	
	Description of property	(a) Cost or		1	or other basis	(c) Accumula		(d) Book value	—
		' '	tment)	1 ' '	other)	depreciation		(-)	
1a	Land							•	
b	Buildings								
С	Leasehold improvements							**	_
d	Equipment							* *	
е	Other								
Total	I. Add lines 1a through 1e (Column (d) must equa	al Form 990, Part	X, column (E), line 10(c	:))		>		_

Schedule D (Form 990) 2013 ALUMNI ASSOC OF UNIVERSITY OF SOUTH DAKOTA 46-6001196 Part VII · Investments - Other Securities Complete if the organization answered "Yes" to Form 990, Part IV, line 11b See Form 990, Part X, line 12 (a) Description of security or category (b) Book value (including name of security) Cost or end-of-year market value (1) Financial derivatives (2) Closely-held equity interests (3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments - Program Related. Complete if the organization answered "Yes" to Form 990, Part IV, line 11c See Form 990, Part X, line 13 (a) Description of investment (b) Book value (c) Method of valuation Cost or end-of-year market value (1) INVESTMENT ACCT USD FOUNDATION 1,235,157 **FMV** (2) (3)(4) (5) (6) (7) (8) (9)Total (Column (b) must equal Form 990, Part X, col (B) line 13) 1,235,157 Part IX Other Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 11d See Form 990, Part X, line 15 (a) Description (b) Book value (1) (2) (3)(4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization 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
(1) Federal in	come taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total (Column (b) n	nust equal Form 990, Part X, col (8) line 25)	>

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

		16-6001196	Page 4
.Pa	rt XI • Reconciliation of Revenue per Audited Financial Statements With Revenue pe	r Return.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities	1	
С	Recoveries of prior year grants	-	
d	Other (Describe in Part XIII)	-	
е	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·		
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · · 4a		
b	Other (Describe in Part XIII)	-	
C	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses		
i a	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a	per Keturn.	
	· · · · · · · · · · · · · · · · · · ·		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	_	
b	Prior year adjustments	-	
С	Other losses	_	
d	Other (Describe in Part XIII)	<u> </u>	
е	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · · 4a	_	
b	Other (Describe in Part XIII)	_	
С	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
	rt XIII Supplemental Information		
Prov	ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Pa	rt X, line	
2, Pa	art XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information		
		- · · · - · · ·	
_			
			
			

SCHEDULE O (Forst 990 cr 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► 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

Open to Public Inspection Employer identification number

ALUMNI ASSOC OF UNIVERSITY OF SOUTH DAKOTA	46-6001196						
01. Members or stockholder classes and rights (Part VI	, line 6)						
THE BOARD OF DIRECTORS OF THE ASSOCIATION CONSISTS OF (A) 15 DIRECTORS	ELECTED FROM THE						
MEMBERSHIP OF THE ASSOCIATION, (B) ANY OFFICERS OR REPRESENTATIVES TO T	EMBERSHIP OF THE ASSOCIATION, (B) ANY OFFICERS OR REPRESENTATIVES TO THE UNIVERSITYS						
ATHLETIC BOARD OF CONTROL, (C) A REPRESENTATIVE OF THE UNIVERSITY OF SO	UTH DAKOTA						
FOUNDATIONS BOARD OF DIRECTORS, (D) A REPRESENTATIVE OF THE STUDENT BOD	Y, AND (E) UP TO 8						
REPRESENTATIVES OF LOCAL OR REGIONAL ALUMNI ASSOCIATIONS.							
02. Member election for additional members (Part VI, 1	ine 7a)						
THE MEMBERS OF THE BOARD OF DIRECTORS SHALL BE ELECTED AT THE ANNUAL M	EETING OF THE						
ASSOCIATION. 5 OF THE 15 ELECTED DIRECTORS ARE ELECTED EACH YEAR. A	VACANCY ON THE BOARD						
OF DIRECTORS BETWEEN MEETINGS WILL BE FILLED BY A VOTE OF THE REMAININ	G DIRECTORS.						
03. Governing body decisions (Part VI, line 7b)							
THE BOARD OF DIRECTORS SHALL EXERCISE ALL OF THE AUTHORITY OF THE ASSO	CIATION.						
04. Form 990 governing body review (Part VI, line 11)							
FORM 990 IS ELECTRONICALLY DISTRIBUTED AND REVIEWED BY THE GOVERNING B	ODY BEFORE FILING.						
05. Conflict of interest policy compliance (Part VI, 1	ine 12c)						
KEY PERSONNEL ARE REQUIRED TO DISCLOSE ANNUAL CONFLICT OF INTEREST.							
06. Governing documents, etc, available to public (Par	et VI, line 19)						
THE BOARD OF DIRECTORS MAKES ITS GOVERNING DOCUMENTS CONFLICT OF INTER	EST POLICY AND						
FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.							