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OMB No. 1545-0047 **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. Department of the Treasury Internal Revenue Service ▶ Information about Form 990 and its instructions is at www.irs.gov/form990. 2013, and ending For the 2013 calendar year, or tax year beginning 20 July 1 Jűne 30 Check if applicable: Doing Business As SDSM&T FOUNDATION Address change Number and street (or P.O. box if mail is not delivered to street address) Room/suite Name chance Initial return 306 EAST SAINT JOSEPH STREET 200 City or town, state or province, country, and ZIP or foreign postal code Terminated

Open to Public Inspection C Name of organization SOUTH DAKOTA SCHOOL OF MINES AND TECHNOLOGY FOUND DEMPloyer identification number 46-6011771 E Telephone number 605 394-6660 Amended return RAPID CITY, SD 57701-4016 G Gross receipts \$ Application pending F Name and address of principal officer: JOEL B. KINCART X(a) is this a group return for subordinates? 🔲 Yes 📝 No 306 EAST SAINT JOSEPH STREET, SUITE 200, RAPID CITY, SD 57701-4018 H(b) Are all subordinates included? Tyes Ves No If "No," attach a list. (see instructions) **✓** 501(c)(3) 501(c) () ◀ (insert no.) 🔲 4947(a)(1) or 🔲 527 Tax-exempt status: Website: ▶ foundation.sdsmt.edu H(c) Group exemption number > Form of organization: 🗸 Corporation 🔲 Trust ☐ Association ☐ Other ▶ L Year of formation: 1954 M State of legal domicile: Summary Part I Briefly describe the organization's mission or most significant activities: THE SDSM&T FOUNDATION SHALL BE OPERATED EXCLUSIVELY FOR CHARITABLE AND EDUCATIONAL PURPOSES. THE GENERAL OBJECTIVE SHALL BE SOLICIT AND MANAGE GIFTS FOR EDUCATIONAL, SCIENTIFIC, AND CULTURAL PURPOSES FOR SDSM&T. Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 42 Number of independent voting members of the governing body (Part VI, line 1b) 42 Total number of individuals employed in calendar year 2013 (Part V, liner9a). 5 17 Total number of volunteers (estimate if necessary) . . . 6 50 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, line 34 0 Prior Year Current Year Contributions and grants (Part VIII, line 1h) . 56,724,341 9,863,788 Program service revenue (Part VIII, line 2g) 316,756 510,248 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 4,014,386 2,291,972 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . 237,352 <u>272,134</u> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 61,292,835 12,938,142 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 13 55,551,485 3,727,768 Benefits paid to or for members (Part IX, column (A), line 4) . 14 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 989.099 1,003,448 Professional fundraising fees (Part IX, column (A), line 11e) 16a 29,987 67,500 Total fundraising expenses (Part IX, column (D), line 25) ▶ Other expenses (Part IX, column (A), lines 11a-11d, 11 17 523,944 626,825 Total expenses. Add lines 13-17 (must equal Part IX column 18 57,094,515 5,425,541 Revenue less expenses. Subtract line 18 from lin 19 4,198,320 7,512,601 MAY 2 6 2015 Beginning of Current Year 20 Total assets (Part X, line 16) 64,942,806 77,437,461 21 Total liabilities (Part X, line 26) . OGDEN. 9,555,209 9,813,621 Net assets or fund balances. Subtract line 21 from line 20 22 55,387,597 67,623,840 Part II Signature Blook Under penalties of perjury, I declare that I have true, correct, and complete Declaration of pa examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is are (over than officer) is based on all information of which preparer has any knowledge. Sign Signature of effice 5 - 13-201 Here Type or print name and title Print/Type preparer's name Preparer's signature Date Check | if Paid self-employed Preparer Firm's name Firm's EIN ▶ Use Only Firm's address ▶ May the IRS discuss this return with the preparer shown above? (see instructions) Yes No For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2013) Cat No. 11282Y

CIS IMAGE DO NOT CORRESPOND FOR SIGNATURE

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Form 99	0 (2013) Page
Part	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	The SDSM&T Foundation's mission is to assist the University in providing exceptional intellectual, professional, and personal
	development opportunities. We seek the required resources to enhance those opportunities to enrich and empower the individual's
	attainment of outstanding educational experiences, professional accomplishments, and lifetime learning experiences to address
	society's needs through technology.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured be expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 1,934,365 including grants of \$ 1,934,365) (Revenue \$ 0)
	Provide scholarships and fellowships to students attending the South Dakota School of Mines and Technology (SDSM&T).
	Scholarship recipients are selected by the SDSM&T Scholarship Committee.
	Prizes and awards to students, faculty and staff according to specific award criteria.

4b	(Code:) (Expenses \$ 1,793,403 including grants of \$ 1,793,403) (Revenue \$ 510,248)
	,
	General support to SDSM&T, its departments and its students.
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶ 3,727,768
	Form 990 (201)

Part	Checklist of Required Schedules						
			Yes	No			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	1				
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2	✓				
4	candidates for public office? If "Yes," complete Schedule C, Part I	3	ļ	/			
-	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		1			
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		1			
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	,				
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		1			
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III						
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		1			
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	1				
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	1				
Þ	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	_				
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		1			
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		1			
f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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.	116	1				
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	1				
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	1				
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		7			
14 a	· · · · · · · · · · · · · · · · · · ·	14a		1			
ь	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		1			
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		1			
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		√			
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	1	_			
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	<u> </u>				
19	Did the organization report more than \$15,000 of gross income from garning activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		•				
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a		/			
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		_			
~	in 160 to line 202, die tile organization attach a copy of its addition interioris attentions to tris returns		990	2012			

Part	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 Schedule I, Parts I and II	21	1	
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		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	1	
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		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		1
ь	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		1
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		1
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		1
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):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
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		√
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30	✓	✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		<u>√</u>
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		<u> </u>
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	√	·-
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	7	 -
	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	•	1
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		1
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,			_
38	Part VI	37		1
	19? Note. All Form 990 filers are required to complete Schedule O	38	√ 1990	-
		FOR	n Systil	(2013)

Form 99	· · ·			Page 6
Part '		and t	for a	"No"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	ee ins	tructi	ons.
	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>		Ø
Section	on A. Governing Body and Management			
4-	Catacable and a state and a state and a state and a state at the state		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 42			
	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	1		
	committee, explain in Schedule Q.	1 1		1
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 42	1 1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1 1		
	any other officer, director, trustee, or key employee?	2	1	
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		✓_
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		<u> </u>
6 7a	Did the organization have members or stockholders?	6		<u> </u>
	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?			
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7a		
_	stockholders, or persons other than the governing body? ,	7ь		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	<u> </u>		
	the year by the following:			
a	The governing body?	8a	1	
þ	Each committee with authority to act on behalf of the governing body?	8b	1	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
Gooti	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	ليوا	لببا	<u> </u>
Secu	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co	ode.) Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		<u> </u>
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	100	-	
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10ь		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	_	1
Ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	
Ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓_	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	l l		
13	describe in Schedule O how this was done	12c	/	
14	Did the organization have a written document retention and destruction policy?	13	✓_	1
15	Did the process for determining compensation of the following persons include a review and approval by	 		7
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			'
	The organization's CEO, Executive Director, or top management official	15a	V	
	Other officers or key employees of the organization	15b	✓	
46	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	(7		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	ليبا	لــِــا	
_	with a taxable entity during the year?	16a	✓_	 ,
D	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?	16ь		
Secti	on C. Disclosure	100		<u> </u>
- 17	List the states with which a copy of this Form 990 is required to be filed ▶ none			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	1 501(c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply.	·	-	
	Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest (policy	, and
200	financial statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the		
	organization: ► Lana Thom, SDSM&T Foundation, 306 East Saint Joseph St, Suite 200, Rapid City, SD 57701 605 39	4-6660)	

Form 990 (201	3)		_								Page 7
Part VII	Compensation of Officers, Dir	ectors, Ti	ruste	es,	Ke	y E	mpl	oye	es, Highest	Compensated	Employees, and
	Independent Contractors Check if Schedule O contains a re	0000000 N	note	to.	201	lin	a in ti	nie I	Dart VIII		
Section A.	Officers, Directors, Trustees, Key										<u> </u>
1a Comple	te this table for all persons require n's tax year.										g with or within the
	I of the organization's current offici ion. Enter -0- in columns (D), (E), and								viduals or org	anizations), rega	rdless of amount of
	of the organization's current key er										
who receiv organizatio	ne organization's five current higher ed reportable compensation (Box 5 n and any related organizations.	of Form	W-2 a	and/	or i	Вох	7 of	Fo	rm 1099-MIS	C) of more than	\$100,000 from the
\$100,000 o	Il of the organization's former office freportable compensation from the	organization	n and	any	rel	atec	orga	niz	ations.		
• List al	I of the organization's former direct, more than \$10,000 of reportable c	ctors or tru	stee:	s tha	atro	ece	ived, nizati	in t	he capacity as	s a former direct	tor or trustee of the
List persor	ns in the following order: individual ed employees; and former such pers	ual trustee									employees; highest
☐ Check t	his box if nelther the organization no	r any relate	d org	aniz			ompe	nsa	ted any currer	t officer, directo	r, or trustee.
	(A) Name and Title	(B) Average hours per	box,	unles	Pos neck s pe	noan	e than o is both or/trus	an an	(D) Reportable	(E) Reportable compensation from	(F) Estimated amount of
		week (list any hours for related organizations below dotted line)	or directo		_		Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
				ide E	_	L	sated				
(1) See attu	nched data table										
(2)											
(3)											
(5)			-								
(6)											
(7)											
(8)											-
(9)										,	
(10)	· · · · · · · · · · · · · · · · · · ·										
(11)											
(12)											
(13)								-			
(14)		 		Н		-					

Form 99	0 (2013)													Page 8
Part	VII Section A. Officers, Directors, Trust	ees, Key E	mplo	yees	i, ar	id F	lighe:	st C	ompensated E	mployees (continue	ed)		
	(A) Name and title	(B) Average hours per week (list any	(do n bax, i	ot ch unles	Pos eck s pe la d	tion more rson irect	than on the state of the state	ona n en tee)	(D) Reportable compensation from	(E) Reportabicompensation				
			Individual trustee or director	Institutional trustee	Officer	Key emptoyee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizatic (W-2/1099-N		fro orga and	ensati m the nization relate nization	on id
(15)							4	┢						 ,
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(23)					_			-			_			
	***************************************	L						_	}					
(25)				-				-						
16	Sub-total							<u> </u>	-		-0-			-
c	Total from continuation sheets to Part							•	293,196		۰			27,507
<u>d</u> _	Total (add lines 1b and 1c)							<u>▶</u> 3) w	ho received m		<u>-0- </u> 00,000	of		<u> 27,507</u>
	reportable compensation from the organi	zation -				-			_				Yes	No
3	Did the organization list any former of employee on line 1a? If "Yes," complete a	ficer, direc S <i>chedule J</i>	tor, c	or tr	uste indi	e, vidu	keye <i>ıal</i>	mp	oloyee, or high	est compe	nsated	3		1
4	For any individual listed on line 1a, is the organization and related organizations	sum of re	portal an \$1	ble (150,	000	per	nsatio	n a s."	nd other comp	ensation from	om the			
5	individual				•							4	1	1
	for services rendered to the organization	? If "Yes," c	ompl	ete	Sch	edu	ile J f	or s	such person			5		17
Section 1	on B. Independent Contractors Complete this table for your five highest compensation from the organization. Repyear.	compensat cort compe	ed ind	depe	end or th	ent ie c	contra alend	acto ar y	ors that receive year ending wit	ed more that h or within t	n \$100, the orga	000 o	on's	tax
	(A) Name and business add	Iroca				_			(B) Description of s	andone		(C)		
No in	ependent contractor received more than \$10					_			- Cosciption or s	avices		Compens	RAUDEI	
								_						
						_								
	Total number of independent contractor received more than \$100,000 of compensations.							th:	ose listed abo	ove) who				

ain (VIII	Statement of Reve Check if Schedule C		nonse or note to	any line in this l	Part VIII		r
	•	Officer in Schedule C	Contains a res	porise or note to	(A) Total revenue	(8) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
罩	1a	Federated campaigns	3 1a					
and Other Similar Amounts	ь	Membership dues .	1b					
됩	C	Fundraising events .	1c	90,159	ì	1		1
<u>a</u>	đ	Related organizations	3 1d					1
Ē	e	Government grants (con	ntributions) 1e			ļ		1
င္စု	f	All other contributions, g			1			
۽ ا		and similar amounts not inc	cluded above 4	9,773,629				
윙	9	Noncash contributions Include	ded in lines 1a-1f: \$	3,422,851				
	h	Total. Add lines 1a-1	<u>f</u>	<u></u> >	9,863,788			
riogiam service nevenue				Business Code				
	2a	Administrative Fees			254,542	254,542		<u> </u>
	b	Campus Activities			166,602	166,602		<u> </u>
§	¢	SDSM&T Registration	Activities		B9,104	89,104		
5	d							
	0							
3	f	All other program ser		L				<u> </u>
-	_8_	Total. Add lines 2a-2 Investment income		D	510,248			γ
- 1	3	and other similar amo		ends, interest,				1
ı		Income from investmen	•		891,323			891,3
i	4	~		ond proceeds	0			
	5	Royalties	(i) Real	(ii) Personal	<u>0</u>	— <u> </u> -		 -
- [6.	Gross rents	544,887	 				
- 1	6a	=						
j	b	Less: rental expenses Rental income or (loss)	297,124		1			ļ
	d	Net rental income or			247.700		· · · · · · · · · · · · · · · · · · ·	
- 1	7a	Gross amount from sales of	(i) Securities	(ii) Other	247,763			247,7
- 1	, a	assets other than inventory	17,158,943			-		ł
ı	b	Less: cost or other basis	17,130,843	'		i		
		and sales expenses .	15 750 204			İ		
-	c	Gain or (loss)	15,758,294 1,400,649					
ļ	ď	Net gain or (loss) .			1,400,649			1,400,6
	•	recigalitor (1055) .			1,400,045			1,400,0
3	8a	Gross income from fu	ındraisino	1	1	1		ì
5		events (not including \$	111.273	1 1	1	l l		
		of contributions reporte						
-		•	а	90,159		ł		
oniei neveilue	ь	Less: direct expenses				\$		\$
۱ ۱	c				24,371	-		24,3
		Gross income from ga						
		See Part IV, line 19 .			1			İ
	ь	Less: direct expenses	s b					į
1	C	Net income or (loss) f		ivities 🕨	0			
- 1	10a	Gross sales of in						
		returns and allowance	es a			1		
ŀ	ь	Less: cost of goods s	sold b					
1	C	Net income or (loss) f	irom sales of inv	entory >	0			
Γ		Miscellaneous P	levenue	Business Code				
	11a							
	Ь							
1	C							
	d	All other revenue .						
	8	Total. Add lines 11a-	-11d	▶	0			
	12	Total revenue. See in	netructions	▶	12,938,142	510,248		2,564,1

Form 990 (2013) Page 10 Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (B) Program service expenses (C) Management and general expenses (D) Fundraising Do not include amounts reported on lines 6b, 7b, (A) Total expenses 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 3,727,768 3,727,768 Grants and other assistance to individuals in 2 the United States. See Part IV, line 22 . . . Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 . . . Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 320,703 121,739 198,964 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . Other salaries and wages 555,641 210,313 345,328 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 21,804 8,277 <u> 13,527</u> Other employee benefits 8 43,703 16,590 27,113 10 Payroll taxes 61,597 23,336 38,261 Fees for services (non-employees): 11 Management 32,616 12,381 20,235 Legal b 363 138 225 22,891 8,690 14,201 Professional fundraising services. See Part IV, line 17 67,500 67,500 f Investment management fees 196,230 196,230 Other, (If line 11g amount exceeds 10% of line 25, column g (A) amount, list line 11g expenses on Schedule O.) . . 12 Advertising and promotion 100,426 19,275 81,151 13 Office expenses 98,680 35,178 63,502 Information technology 14 15,492 5,881 9,611 15 16 Occupancy 34,864 13,234 21,630 17 Travel 73,126 73,126 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 21,622 8,103 13,519 20 21 22 Depreciation, depletion, and amortization . 23 10,346 3,927 **6,419** 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 Miscellaneous property expenses <u> 20,169</u> 20,169 b d All other expenses Total functional expenses. Add lines 1 through 24e 25 5,425,541 3,727,768 703,461 994,312 Joint costs. Complete this line only if the 26 organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)

		Check if Schedule O contains a response or note to any line in this Par		· · · , ·	
	•		(A) Beginning of year		(B) End of year
1	1	Cash—non-interest-bearing	189,401	1	546,120
	2	Savings and temporary cash investments	2,045,620		3,734,046
ı	3	Pledges and grants receivable, net	5,309,433	3	6,570,699
	4	Accounts receivable, net	219,706	4	283,52
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			
20	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.	0	6	
ğ	7	Notes and loans receivable, net		7	
Assets	7	· · · · · · · · · · · · · · · · · · ·	411,054	8	403,765
`	8	Inventories for sale or use	0	9	
	9 10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 6,181,670	45,844	-	51,784
- 1	ь	Less: accumulated depreciation 10b 756,931	5,416,569	10c	5,424,739
- 1	11	Investments – publicly traded securities	40,373,364		46,837,664
- 1	12	Investments—other securities. See Part IV, line 11	10,929,315		13,582,615
- 1	13	Investments—program-related. See Part IV, line 11	0,020,313		13,362,612
- 1	14	Intangible assets	0	14	
- 1	15	Other assets. See Part IV, line 11	2,500	15	2,500
- 1	16	Total assets. Add lines 1 through 15 (must equal line 34)	64,942,806		77,437,461
_	17	Accounts payable and accrued expenses		17	3,907,397
- 1	18	Grants payable	0	18	<u> </u>
- 1	19	Deferred revenue	19,050	19	11,580
- 1	20	Tax-exempt bond liabilities	0	20	.,,,,,,
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0	21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	٥	22	
9	23	Secured mortgages and notes payable to unrelated third parties	1,111,606	23	1,097,610
-	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	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			
-			4,568,395	25	4,797,034
5 82	26	Total liabilities. Add lines 17 through 25	9,555,209	26	9,813,621
	27	Unrestricted net assets	-611,094	27	1,762,889
읆	28	Temporarily restricted net assets	11,216,571	28	15,071,986
-	29	Permanently restricted net assets	44,782,120	29	50,788,965
Net Assets or Fund Balan		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.	11/102/120		00,700,000
<u>ğ</u>	30	Capital stock or trust principal, or current funds		30	———————— <i>—</i>
<u> </u>	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
2	32	Retained earnings, endowment, accumulated income, or other funds .		32	
	33	Total net assets or fund balances	55,387,597	33	67,623,840
<u> </u>	Ç.				

	0 (2013)			_ P	ige 12
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u>.</u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		12,9	38,142
2	Total expenses (must equal Part IX, column (A), fine 25)	2		5,4	25,541
3	Revenue less expenses. Subtract line 2 from line 1	3		7,5	12,601
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		55,38	37,597
5	Net unrealized gains (losses) on investments	5		4,7	23,642
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
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		67,6	23,840
Part	XII Financial Statements and Reporting			_	
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>	<u> </u>		
	- <u>-</u>			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," ex	plain in	1		1 1
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were com	piled or			
	reviewed on a separate basis, consolidated basis, or both:				1 1
	Separate basis Consolidated basis Both consolidated and separate basis				
þ	Were the organization's financial statements audited by an independent accountant?		2b	✓	
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on a			
	separate basis, consolidated basis, or both:		1	j	1 1
	☐ 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 o	versight			
	of the audit, review, or compilation of its financial statements and selection of an independent account		2c	✓	
	If the organization changed either its oversight process or selection process during the tax year, ex	plain in			
	Schedule O.			<u> </u>	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in	,'	i	
	the Single Audit Act and OMB Circular A-133?	· · ·	3a_		✓
þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	rgo the	•		1
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits.	3b		
			East	- <u>aar</u>	(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

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

Open to Public

Interna	emal Revenue Service Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.											
	of the organization						Ī	Employer i	identificatio	on number		
Sour			D TECHNOLOGY FOUR crity Status (All orga			oomplet.	o thio oc	#1 Coo	46-6	011771		
			ation because it is: (Fo						mstruca	ons.		
1			thes, or association of						73 3			
2			170(b)(1)(A)(ii). (Atta					(-)(-)(-)(-7-	•		
3	A hospital or	r a cooperative ho	spital service organiz	ation des	cribed in							
4			on operated in conjun	ction wit	h a hospi	tal descr	ibed in se	ection 17	O(b)(1)(A)(iii). Enter the		
_		ime, city, and stat										
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)											
6	A federal, st	ate, or local gover	nment or government	al unit de	escribed i	n sectio	n 170(b)([.]	1)(A)(v).				
7	An organization described in	tion that normally section 170(b)(1)	receives a substantia)(A)(vi). (Complete Pa	al part of rt II.)	its supp	ort from	a govern	mental u	nit or froi	m the general public		
8		•	in section 170(b)(1)(A		-	•						
9	9 An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2), (Complete Part III.)											
			d operated exclusively									
11	An organiza	tion organized a	nd operated exclusiv	ely for ti	he benefi	it of, to	perform	the funct	tions of,	or to carry out the		
	purposes of	one or more put	olicly supported organ describes the type of	nizations	describe	d in sect	tion 509(a	a)(1) or so	ection 50)9(a)(2). See section		
	a Type									tionally integrated		
e		— //	that the organization									
	other than fo	oundation manage	ers and other than on	e or mor	e publicly	support	ed organ	izations	described	d in section 509(a)(1)		
	or section 50	, , , ,					_					
f		ization received a , check this box	a written determination.			that it is	a Type	I, Type	II, or Typ	pe III supporting		
9	Since Augus following per		he organization acce	pted any	gift or c	ontributio	on from a	iny of the	,	_		
	(i) A persor	who directly or i	ndirectly controls, eit	her alone	or toget	her with	persons	describe	d in (ii) a	nd Yes No		
	(iii) below	, the governing b	ody of the supported	organizat	tion?					11g(i)		
	• •	•	on described in (i) abo							11g(ii)		
_			a person described in							11g(頃)		
<u>h</u>	Name of supported	(i) EIN	ion about the support		organization	r	ou notify			Term A		
10	organization	h) 2111	(described on lines 1-9 above or IRC section	in col. (i) li	sted in your document?	the organicol. (i)	nization in of your port?	organizat (i) organi	Is the tion in col. ized in the .S.?	(vii) Amount of monetary support		
			(see instructions))	Yes	No	Yes	No	Yes	No	1		
(A)										ļ		
(B)						<u>.</u>						
(C)												
(D)												
(E)	 											
										1		

Schedul	le A (Form 990 or 990-EZ) 2013						Page 2
Part	(Complete only if you checked th	ne box on line	5, 7, or 8 of	Part I or if the	organization	n failed to qua	7
	Part III. If the organization fails to	qualify unde	r the tests lis	ted below, pl	ease comple	te Part III.)	,
Section	on A. Public Support						
Calen	dar 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.")	4,348,536	9.250.004		7.022.334		
2	Tax revenues levied for the organization's benefit and either paid	4,346,536	9,360,004	5,502,429	7,633,371	9,863,788	36,708,128
•	to or expended on its behalf The value of services or facilities						
3	furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	4,348,536	9,360,004	5,502,429	7,633,371	9,863,788	36,708,128
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.						
	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	4,348,536	9,360,004	5,502,429	7,633,371	9,863,788	36,708,128
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4 4 5 5 4 4					
9	Net income from unrelated business	1,166,943	1,140,979	1,339,808	937,441	1,139,086	5,724,257
3	activities, whether or not the business is regularly carried on	o	0	0	0	0	•
10	Other income. Do not include gain or						
	loss from the sale of capital assets (Explain in Part IV.)	0		o	0	o	
11	Total support, Add lines 7 through 10				-		42,432,385
12	Gross receipts from related activities, etc.	. (see instruction	ons) , , ,			12	1,542,784
13	First five years. If the Form 990 is for the	ne organization	's first, second	d, third, fourth.	or fifth tax ve	ear as a section	1 501(c)(3)
	organization, check this box and stop he						
Secti	on C. Computation of Public Suppor	t Percentage	9				
14	Public support percentage for 2013 (line 6	6, column (f) di	vided by line 1	1, column (f))		14	78.4 %
15	Public support percentage from 2012 Sch	nedule A, Part I	II, line 14 .			15	77.5 %
16a	331/3% support test—2013. If the organization qua	zation did not d lifies as a publi	check the box of icly supported	on line 13, and organization	line 14 is 331	3% or more, ch	eck this
b	331/a% support test—2012. If the organicheck this box and stop here. The organic	nzation did no	t check a box	on line 13 or	16a, and line	15 is 331/a% o	or more,
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me- Part IV how the organization meets the "forganization	013. If the orga ets the "facts-a acts-and-circu	nization did no and-circumstar mstances" tes	t check a box nces" test, che t. The organiza	on line 13, 16a ck this box an ition qualifies a	d stop here. Exas a publicly su	ine 14 is
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization of Explain in Part IV how the organization of	tion meets the leets the "facts	"facts-and-cir -and-circumst	cumstances" ances" test. Ti	test, check th	is box and sto n qualifies as a	and line p here. publicly
18	supported organization	d not check a l	box on line 13,	16a, 16b, 17a	or 17b, check	k this box and s	see
	instructions	• • • •	· · · · ·	· · · <u>· · · · · · · · · · · · · · · · </u>	· · · · ·	· · · · ·	<u> </u>

Part	Support Schedule for Organiza (Complete only if you checked the If the organization fails to qualify	ne box on line	e 9 of Part I o	r if the organ	ization failed		der Part II.
Secti	on A. Public Support			, p	piete i uit	,	
	dar 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			 	1	1.,	
	received. (Do not include any "unusual grants.")				1	!	
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the						
3	organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6 7a	Total. Add lines 1 through 5						
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						
8 8	Add lines 7a and 7b						
Secti	on B. Total Support						
Calen	dar 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.						
ь	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated 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 organization, check this box and stop her	re			, or fifth tax ye		* * * *
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2013 (line 8		•	3, column (f))		15	%
16	Public support percentage from 2012 Sch				<u> </u>	16	%
$\overline{}$	on D. Computation of Investment In		-			T I	
17	Investment income percentage for 2013 (I				* * * *	17	<u> </u>
18 19a	Investment income percentage from 2012 331/26% support tests—2013. If the organi 17 is not more than 331/26%, check this box a	zation did not	check the box	on line 14, ar	nd line 15 is m		
b	33'a% support tests—2012. If the organiz line 18 is not more than 33'a%, check this b	ation did not c	heck a box on	line 14 or line 1	9a, and line 16	is more than 3	3¹/s%, and
20	Private foundation. If the organization die	d not check a	box on line 14,	, 19a, or 19b, c	heck this box	and see instruc	ctions 🕨 🔲

Schedule A (F	(Form 990 or 990-EZ) 2013	Page 4
Part IV	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line Part III, line 12. Also complete this part for any additional information. (See instructions).	17a or 17b; and
		~~~~
••••••	•••••••••••••••••••••••••••••••••••••••	••••••
		•••••
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	i	
	Schedule A (F	orm 990 or 990-EZ) 2013

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047 2013

Department of the Treasury

Open to Public

	the organization		Employer identification number
	I DAKOTA SCHOOL OF MINES AND TECHNOLO	GY FOUNDATION	46-6001771
Par		r Advised Funds or Other Similar Fu	
	Complete if the organization answ	ered "Yes" to Form 990, Part IV, line 6	j
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	NONE	ONE
2	Aggregate contributions to (during year) .	NONE	NONE
3	Aggregate grants from (during year)	NONE	\$9,000
4	Aggregate value at end of year	NONE	\$79,531
5	Did the organization inform all donors and	donor advisors in writing that the assets	
_	funds are the organization's property, subject		
6	Did the organization inform all grantees, dor	nors, and donor advisors in writing that gr	ant funds can be used
	only for charitable purposes and not for the conferring impermissible private benefit? .	benefit of the donor or donor advisor, or	tor any other purpose
Dari	Conservation Easements.		· · · · · · · · · · · Yes 🗹 No
		ered "Yes" to Form 990, Part IV, line 7	•
1	Purpose(s) of conservation easements held be		•
•	Preservation of land for public use (e.g., r	recreation or education) Preservation	of an historically important land area
	Protection of natural habitat		of a certified historic structure
	Preservation of open space	_ ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
2	Complete lines 2a through 2d if the organization	tion held a qualified conservation contribut	tion in the form of a conservation
	easement on the last day of the tax year.		Held at the End of the Tax Year
а			
þ	Total acreage restricted by conservation eas		
C	Number of conservation easements on a cer	tified historic structure included in (a)	2c
d	Number of conservation easements include historic structure listed in the National Register	ed in (c) acquired after 8/17/06, and no	t on a
3	Number of conservation easements modified		
3	tax year	i, transferred, released, extinguished, or te	erminated by the organization during the
4	Number of states where property subject to	conservation easement is located	
5	Does the organization have a written poli	cy regarding the periodic monitoring in	spection handling of
	violations, and enforcement of the conservat	ion easements it holds?	· · · · · · · · · · · · · · · No
6	Staff and volunteer hours devoted to monitor		
	<b>&gt;</b>		
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation ea	sements during the year
	<b>▶</b> \$		
8	Does each conservation easement reported	on line 2(d) above satisfy the requirements	s of section 170(h)(4)(B)
_	(i) and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization repalance sheet, and include, if applicable, the	ports conservation easements in its revenu	ue and expense statement, and
	organization's accounting for conservation e	asements	inancial statements that describes the
Part		ctions of Art, Historical Treasures, o	or Other Similar Assets
		ered "Yes" to Form 990, Part IV, line 8	
1a	If the organization elected, as permitted und	ler SFAS 116 (ASC 958), not to report in i	ts revenue statement and balance sheet
	works of art, historical treasures, or other s	similar assets held for public exhibition, o	education, or research in furtherance of
	public service, provide, in Part XIII, the text of		
ь	If the organization elected, as permitted un	ider SFAS 116 (ASC 958), to report in its	s revenue statement and balance sheet
	works of art, historical treasures, or other		education, or research in furtherance of
	public service, provide the following amounts		
	(i) Revenues included in Form 990, Part VIII,	fine 1	<b>&gt; \$</b>
_	(ii) Assets included in Form 990, Part X		▶ \$
2	If the organization received or held works following amounts required to be reported up	of art, historical treasures, or other simil	ar assets for financial gain, provide the
_			
a	Revenues included in Form 990, Part VIII, line	g	
	Assets included in Form 990, Part X	<u> </u>	🕨 💲

Schedu	te D (Form 990) 2013							Page 2
Part	III Organizations Maintaining	Collections of	Art, His	torical 1	<b>Freasures</b>	or O	her Similar A	ssets (continued)
3	Using the organization's acquisition, collection items (check all that apply):		her reco	rds, chec	k any of the	ne follo	wing that are a	significant use of its
а	Public exhibition		d	☐ Loan	or exchan	ae proa	rams	
ь	Scholarly research							
C	Preservation for future generations	5						
4	Provide a description of the organization	tion's collections a	and expla	ain how t	hey further	the org	ganization's exe	mpt purpose in Part
5	During the year, did the organization							
	assets to be sold to raise funds rather		uneo as i	part of the	e organizai	ion's co	Direction?	☐ Yes ☐ No
Par	Escrow and Custodial Arra		" to For	000 D	)	- 0		
	Complete if the organization 990, Part X, line 21.							
1a	Is the organization an agent, trustee included on Form 990, Part X?							ot 🔲 Yes 🗌 No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	ete the fo	llowing ta	able:			
							A	mount
C	Beginning balance					10		
đ	Additions during the year					10	·	
e	Distributions during the year	<i></i> .				1e		
f	Ending balance					<u>_1f</u>		
2a	Did the organization include an amoun	nt on Form 990, Pa	art X, line	21? .				☐ Yes ☐ No
b	If "Yes," explain the arrangement in P	art XIII. Check here	e if the ex	xplanatio	n has been	provide	ed in Part XIII .	<u>.                                  </u>
Par								
	Complete if the organization						,	
		(a) Current year	(b) Pri	or year	(c) Two yea	rs back	(d) Three years bac	k (e) Four years back
1a	Beginning of year balance	48,300,926	4	2,670,413	42,	504,607	32,679,05	9 30,552,633
b	Contributions	1,714,724		2,922,579	2,	127,808	5,249,23	8 1,042.558
C	Net investment earnings, gains, and							
	losses	5,793,776	:	3,573,173		810,011	6,341,89	1 2,621,731
d	Grants or scholarships			-640,000	• <b>!</b>	938,364	-966,36	2 -1,045,851
e	Other expenditures for facilities and							
	programs			-225,239		213,627	-799,21	9 -492,012
f	Administrative expenses							
9	End of year balance	54,892,075	41	9,300,926	42,0	570,413	42,504,60	7 32,679,059
2	Provide the estimated percentage of t	he current year en	d balanc	e (line 1g.	, column (a	ı)) held a	35:	
а	Board designated or quasi-endowmer	nt ▶1.;	2%					
ь	Permanent endowment ▶9	2.5%						
C	Temporarily restricted endowment							
	The percentages in lines 2a, 2b, and 2							
3a	Are there endowment funds not in the	possession of the	e organiz	zation tha	at are held	and ad	ministered for th	
	organization by:							Yes No
	(i) unrelated organizations							3a(i) ✓
	(ii) related organizations							3a(ii) ✓
ь	If "Yes" to 3a(ii), are the related organi							3b
_ 4	Describe in Part XIII the intended uses		n's endo	wment fu	ınds.			
_Part								
	Complete if the organization							Part X, line 10.
	Description of property	(a) Cost or oth (Investme			r other basis i		Accumulated epreciation	(d) Book value
1a	Land	1	,857,189		61,374			1,918,563
b	Buildings	3	,554,293				692,401	2,861,892
c	Leasehold improvements				192,893		19,934	172,959
d	Equipment				46,155		44,596	1,559
	Other		469,766					469,766
Total.	Add lines 1a through 1e. (Column (d) m	nust equal Form 99	00, Part X	(, column	(B), line 10	)(c).) .	▶	5,424,739

Schedule D (Fo					Page Page
Part VII	Investments—Other Securities				
	Complete if the organization ans				
•	(a) Description of security or categor (including name of security)	<b>'</b>	(b) Book value		hod of valuation: -of-year market value
• •	derivatives				
• •	neld equity interests				
(3) Other					
(B) Defices	orrelated Hedge Fund			Market Value	
(C) Post 5	e Equity			Market Value	
(D) Miguie	state Funds 1 Credit '			Market Value Market Value	
(E)			033,373	Market Value	
(F)					
(G)					
(H)					
	b) must equal Form 990, Part X, col. (B) fine 12.)		13,582,615	<u></u>	
Part VIII	Investments—Program Relate Complete if the organization and		a OOO Doet IV line	. 11a Caa Farra	000 Dard V II-a 40
	(a) Description of investment	Weled Tes to Fon	(b) Book value		990, Part X, IIDE 13.
	to, personal and an analysis		(b) Dook Value		of-year market value
(1)					
(2)					<del></del>
(3)					
(4)					
(5)					
<u>(6)</u>					
<u>(7)</u> (8)					
(9)					
	b) must equal Form 990, Part X, col. (B) line 13.)	-			·
Part IX	Other Assets.	<del></del> 1		<u> </u>	
	Complete if the organization ans	wered "Yes" to Form	n 990, Part IV, line	11d. See Form	990, Part X, line 15.
		(a) Description			(b) Book value
(1)					
(2)					
(3)					<del></del>
(4) (5)				<del>,</del>	
(5) (6)					
(7)	<del> </del>				<del></del>
(8)		<del></del>	····		
(9)					
Total. (Colu	mn (b) must equal Form 990, Part X, o	ol. (B) line 15.)	<u> </u>	<u></u> ▶	
Part X	Other Liabilities.		_		
	Complete if the organization ans	swered "Yes" to Forn	n 990, Part IV, line	11e or 11f. See	Form 990, Part X,
	line 25.	At Backwalus			<del></del>
(1) Federal in	(a) Description of liability	(b) Book value			
		470			
(3)	on Trust, Charitable Gift Annuitles	4,/9	7,034		
(4)					
(5)		<del>                                     </del>			
(6)					
(7)					
(8)					
(9)					
	b) must equal Form 990, Part X, col. (B) line 25.)		7,034	<b></b>	
2. Liability fo	r uncertain tax positions. In Part XIII, prov	ride the text of the footno	te to the organization	s financial stateme	nts that reports the
organization'	s liability for uncertain tax positions unde	r FIN 48 (ASC 740). Che	k here if the text of the	he footnote has bee	provided in Part XIII

Schedule D (Form 990) 2013

	le D (Form 990) 2013				Page 4
Part				Return.	
	Complete if the organization answered "Yes" to Form 990,		line 12a.		
1	Total revenue, gains, and other support per audited financial statements	• • •		1	17,539,067
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 - 1			
a	Net unrealized gains on investments	2a	4,723,642	1 1	
b	Donated services and use of facilities	2b	7,725	1 1	
C	Recoveries of prior year grants	2c	0	1 1	
d	Other (Describe in Part XIII.)	2d	0	<del></del> -	
е 3	Subtract line 2e from line 1		• • • • • •	2e	4,731,367
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	i . i.	• • • • • •	3	12,807,700
a	Investment expenses not included on Form 990, Part VIII, line 7b		100 000		
b	Other (Describe in Part XIII.)	4a	196,230	1 1	
_	Add lines 4a and 4b		-65,788	4c	400.440
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	130,442
Part					12,938,142
	Complete if the organization answered "Yes" to Form 990, I			i itotaiii	I•
1	Total expenses and losses per audited financial statements			1	5,302,824
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			<del> </del>	3,302,024
a	Donated services and use of facilities	2a	7,725		
b	Prior year adjustments	2b	0		
c	Other losses	2c	0		
d	Other (Describe in Part XIII.)	2d	65,788		
	Add lines 2a through 2d		00,700	20	73,513
3	Subtract line 2e from line 1			3	5,229,311
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	ĹĹ			3,223,311
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	196,230		
b	Other (Describe in Part XIII.)	4b	0		
_	Add lines 4a and 4b			4c	196,230
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	e 18.) .		5	5,425,541
Part	XIII Supplemental Information.				3,723,341
Part V	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part  - 4 - Endowment funds will provide for scholarships and fellowships, faculty settlements.				
	- 4 - FIN 48 Footnote - At June 30, 2014, the Foundation believes no significant	uncerta	in tax positions or lia	hilitiac avi	
accord	ance with the applicable statue of limitations, the Foundation tax returns could				
********	I - 4b and part XII - 2d - Direct fundraising expenses were included as a deduct expense on the audited financial statements.	ion from	revenue on form 990	Part VII 81	and as

Schedule D (Fo	m 990) 2013	Page 5
Part XIII Supplemental Information (continued)		
	:	
***************************************		***************************************
		***************************************
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	·	
••••••		
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	***************************************	
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•••••		
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Schedule D (Form 990) 2013

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

Supplemental Information Regarding Fundraising or Gaming Activities Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer Identification number

SOUTH DAKOTA SCHOOL OF MINES AND TECHNOLOGY FOUNDATION Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations e Solicitation of non-government grants Internet and email solicitations f Solicitation of government grants Phone solicitations g Special fundraising events In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ✓ Yes □ No b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (or retained by) fundraiser listed in col. (i) (iii) Did fundralser have custody or control of contributions? (vf) Amount paid to (or retained by) (i) Name and address of individual (iv) Gross receipts from activity (ii) Activity or entity (fundraiser) organization No Feasibility Stud -0 The Garrow Company 67,500. 3 10 **Total** 67.500. List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Sche	dute G	(Form 990 or 990-EZ) 2013				Page 2
Pa	rt II∫	Fundraising Events. Conthan \$15,000 of fundraising gross receipts greater that	g event contributions	on answered "Yes" to and gross income on	Form 990, Part IV, line Form 990-EZ, lines 1 a	18, or reported more nd 6b. List events with
•	•		(a) Event #1 Mines Medal (event type)	(b) Event #2  Community Golf (event type)	(c) Other events three (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1	Gross receipts	82,926	44,130	80,419	207,475
	2 3	Less: Contributions Gross income (line 1 minus	74,126	39,841	7,425	121,392
_		line 2)	8,800	4,289	72,994	86,083
	4	Cash prizes				
	5	Noncash prizes		13,198	3,498	16,696
SUS	6	Rent/facility costs		8,000	12,548	20,548
Direct Expenses	7	Food and beverages	22,675	3,134		25,809
Direc	8	Entertainment				
	9	Other direct expenses .	8,937	164	762	9,863
	10 11	Direct expense summary. Ad Net income summary. Subtra				72,917
Pa	rt III		organization answer			eported more
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
æ	1	Gross revenue				
88	2	Cash prizes				
xpens	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
Δ	5	Other direct expenses .				
	6	Volunteer labor	☐ Yes% ☐ No	☐ Yes% ☐ No	☐ Yes %	
	7	Direct expense summary. Ad	d lines 2 through 5 in co	olumn (d)		
	8_	Net gaming income summary	y. Subtract line 7 from li	ne 1, column (d)	<u></u> <b>&gt;</b>	
٤	a Is		perate gaming activities	in each of these states	••••••••	🗌 Yes 🗌 No
10		Vere any of the organization's g	aming licenses revoked	, suspended or termina		. 🗆 Yes 🗀 No
			····			
					Schedule	G (Form 990 or 990-EZ) 2013

Schedu	le G (Form 990 or 990-EZ) 2013 Page 3
11	Does the organization operate gaming activities with nonmembers?
12	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?
13	Indicate the percentage of gaming activity operated in:
а	The organization's facility
	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Name ▶ .
	Address►
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?
h	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the
	amount of gaming revenue retained by the third party ► \$
C	If "Yes," enter name and address of the third party:
	Name ▶
	Address ►
16	Gaming manager information:
	Name ▶
	Gaming manager compensation ► \$
	Description of services provided ▶
	□ Director/officer □ Employee □ Independent contractor
17	Mandatory distributions:
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license?
	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).
Part I,	line 2b, columns (iii): Consultant worked with the Foundation to complete a campaign feasibility study. Consultant did not take
	ly of contributions.
	line 2b: Reimbursements for travel and other expenses are coded to another fund and paid upon presentation of an invoice:
Consu	Itant #1 - all payments were for services.
	Schedule C (Form 000 or 000 E7) 2012

**SCHEDULE 1** (Form 990) Department of the Treasury internal Revenue Service Name of the organization

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

OMB No. 1545-0047 2013

► Attach to Form 990.

Open to Public Inspection

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990. **%** □ (h) Purpose of grant or assistance Employer identification number one general support ✓ Yes 46-6011771 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance equipment, software Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. (f) Method of valuation (book, FMV, appreisal, other) 298,306 expert opinion Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of non-cash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (d) Amount of cash grant 3,429,7462 Enter total number of other organizations listed in the line 1 table **SOUTH DAKOTA** (c) IRC section if applicable SOUTH DAKOTA SCHOOL OF MINES AND TECHNOLOGY FOUNDATION the selection criteria used to award the grants or assistance? General Information on Grants and Assistance 46-6000364 S EIN 1 (a) Name and address of organization (1) SOUTH DAKOTA SCHOOL OF

MINES AND TECHNOLOGY

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or government

Part II

10	Ø,	B	13	ī	ñ	

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

Schedule I (Form 990) (2013)

Cat. No. 50055P

Page 2

Schedule I (Form 990) (2013)

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SCHEDULE J (Form 990)

OMB No. 1545-0047

2013

Department of the Treasury Internal Revenue Service

Compensation-Information

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

Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990. See separate instructions.

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

Open to Public Inspection Employer identification number

SOUTH DAKOTA SCHOOL OF MINES AND TECHNOLOGY FOUNDATION

46-6011771

Part	Questions Regarding Compensation					
1a	Check the appropriate box(es) if the organization p	muided any of the follo	During to or for a name listed in Farm		Yes	No
	990, Part VII, Section A, line 1a. Complete Part III to	provide any relevant inf	formation regarding these items.			
	☐ First-class or charter travel	_	ce or residence for personal use	1		1
	☐ Travel for companions		siness use of personal residence	1		1
	☐ Tax indemnification and gross-up payments		club dues or initiation fees	ŀ		ł
	☐ Discretionary spending account		s (e.g., maid, chauffeur, chef)	-	1	ł
				- [	1	1
b	If any of the boxes on line 1a are checked, did to	the organization follow	w a written policy regarding payment	<u> </u>	<u> </u>	Щ
	or reimbursement or provision of all of the expension		bove? If "No," complete Part III to		1	
	explain			1b	—	├
2	Did the organization require substantiation price	or to raimburcios or	ollowing avances in a sun of his all		├	├
-	directors, trustees, and officers, including the CE	EO/Executive Director	regarding the items checked in line		ł	ŀ
	1a?			2		l
				1	<del>                                     </del>	
3	Indicate which, if any, of the following the filing org	ganization used to est	ablish the compensation of the	i		
	organization's CEO/Executive Director. Check all t	that apply. Do not che	ck any boxes for methods used by a	1	1	ł
	related organization to establish compensation of	the CEO/Executive Di	rector, but explain in Part III.			ŀ
	✓ Compensation committee	Written employm				ŀ
	Independent compensation consultant	✓ Compensation st		1	]	1
	✓ Form 990 of other organizations	Approval by the I	board or compensation committee		Ì	ŀ
	During the year did any matern listed in Form 000	. Damidu Castias A II			1	ŀ
4	During the year, did any person listed in Form 990 organization or a related organization:	, Part VII, Section A, II	ne 1a, with respect to the filing		1	l
а	Receive a severance payment or change-of-control	ol naument?		<u> </u>	<del> </del> -	-
ь	Participate in, or receive payment from, a supplem			4a 4b	—–	1
	Participate in, or receive payment from, an equity-			46 4c	├	7
_	If "Yes" to any of lines 4a-c, list the persons and p	provide the applicable	amounts for each item in Part III	40		<del>                                     </del>
	•			1		ĺ
	Only section 501(c)(3) and 501(c)(4) organization					l
5	For persons listed in Form 990, Part VII, Section A	, line 1a, did the orgar	nization pay or accrue any			
	compensation contingent on the revenues of:			L		
а	The organization?			5a	1	<u> </u>
b	Any related organization?		· · · · · · · · · · · · · · ·	5b	لـــــا	1
	If "Yes" to line 5a or 5b, describe in Part III.			:		
6	For persons listed in Form 990, Part VII, Section A	line to did the owner	vization now or seems	l i		
v	compensation contingent on the net earnings of:	, mic ra, did the organ	ization pay of accide any			
а	The organization?			6a		1
	Any related organization?			6b		7
_	If "Yes" to line 6a or 6b, describe in Part III.			<u> </u>		•
				i i		
7	For persons listed in Form 990, Part VII, Section	on A, line 1a, did the	organization provide any non-fixed			
	payments not described in lines 5 and 6? If "Yes,"			7	1	
8	Were any amounts reported in Form 990, Part VII,	paid or accrued pursu	ant to a contract that was subject			
	to the initial contract exception described in	Regulations section	53.4958-4(a)(3)? If "Yes," describe			١.
	in Part III			8		1
_	M Mace as the Control at a page desired at a few	Manage Alban 1- 44-4-4				
9	If "Yes" to line 8, did the organization also fol Regulations section 53.4958-6(c)?			1 (		
F P			· · · · · · · · · · · · · · · · · · ·	9		L
ror Pa	perwork Reduction Act Notice, see the Instructions for	r Form 990.	Cat. No. 50053T Sched	ute J (Fo	ırın 991	D) 2013

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Schedule J (Form 990) 2013

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

(F) Compensation reported as deferred in prior Form 990 applicable column (D) and (E) amounts for that individual. 186,893 (E) Total of columns (B)()+(D) (D) Nontaxable benefits Part VII, Section A, line 1a, (C) Retirement and other deterred compensation ᅙ Note. The sum of columns (B)(I)—(iii) for each listed individual must equal the total amount of Form 990,

(B) Breakdown of W-2 and/or 1099-MISC compensation (iii) Other reportable compensation instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII. 27,360 (ii) Bonus & incentive compensation 145,248 (I) Base compensation E EE EEEE e e EE ≘ ≘ E EE Œ EE E (A) Name and Title 1 Michael M. Selzer **9** 13 2 14 5 9 Ξ

Schedute J (Form 990) 2013

Page 3 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part y be eligible for a bonus supplement.							(Form 890) 2013
. Also comp							Schedule L
ind for Part							
b, 7, and 8, e							
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, an for any additional information.  For any additional information.					5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6		
4a, 4b, 4c, 5							
s 1a, 1b, 3, employee ma							
r Part I, line							
s required for	onus plan.						
descriptions	ganization's b						
formation lanation, or lanation, or stablished a b	e under the or						
Schedule J (Form 930) 2013  Part III Supplemental Information Provide the Information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, for any additional information.	#7 Non-fixed payments were made under the organization's bonus plan.				0 0 1 1 1 2 2 3 5 6 6 6 6		
Schedule J (Form 890) 2013  Part III Supplem Provide the Informat for any additional inf f5s The Foundation Bo	xed раушег						

### **SCHEDULE M** (Form 990)

### **Noncash Contributions**

OMB No. 1545-0047

2013

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

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

SOUT	H DAKOTA SCHOOL OF MINES AND	TECHNOLO	GY FOUNDATION			45-60117	71		
Part	Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1	g	Method noncash cor			
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		-		_	<del></del>			
8	Intellectual property					<u> </u>	_		-
9	Securities—Publicly traded	1	40	3.128	545 R	Mean of Hig	h & Le	ow Pri	CR
10	Securities-Closely held stock .				-				
11	Securities-Partnership, LLC,								
	or trust interests	1							
12	Securities - Miscellaneous								
13	Qualified conservation								
	contribution—Historic								
	structures								
14	Qualified conservation contribution—Other					<del>-</del>			
15	Real estate—Residential	<b></b>		~ <del>-</del>	+	<del></del>	-		
16	Real estate—Commercial			·	+	<del></del>			
17	Real estate—Other				$\dashv$				
18	Collectibles								
19	Food inventory				-				
20	Drugs and medical supplies				╅				
21	Taxidermy				$\dashv$				
22	Historical artifacts		-		$\dashv$				
23	Scientific specimens								
24	Archeological artifacts				_	<del></del>			
25	Other ► ( Lab Equipment )	1	4	287.5	39 c	omparable	price		
26	Other ► ( Promotions )	7	40			omparable			
27	Other ► ()								
28	Other ► (			_	$\neg$				
29	Number of Forms 8283 received	by the org	panization during the tax y	rear for contributions for	or				
	which the organization completed	Form 8283	, Part IV, Donee Acknowled	dgement	- 1:	29	on	e	
								Yes	No
30a	During the year, did the organizati	on receive	by contribution any proper	ty reported in Part I, lin	es 1	- 28, that			
	it must hold for at least three yea								
	used for exempt purposes for the	entire holdi	ng period?				30a		✓_
b	If "Yes," describe the arrangement								
31	Does the organization have a			s the review of any	non-	standard			لـــا
	contributions?						_31	<b>\</b>	
32a	Does the organization hire or use								
	contributions?						32a	<u> </u>	1
ь	If "Yes," describe in Part II.								
33	If the organization did not report ar describe in Part II.	amount in	column (c) for a type of pro	perty for which column	(a) is	checked,			

Schedule M (	Form 990) (2013) Page 2
Part II	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.
	The desiration of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of
Deed L. by T	he number of contributions is listed.
Part I - D	the number of Conditionions is dister.
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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 990-EZ 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	Employer identification number
SOUTH DAKOTA SCHOOL OF MINES AND TECHNOLOGY FOUNDATION	46-6011771
PART VI • #2 FAMILY RELATIONSHIP - Gary Dirks, Monte Dirks	
PART VI - #2 FAMILY RELATIONSHIP - Jeanne Hull, John Hull	•
PART VI - #2 FAMILY RELATIONSHIP - Scott Kenner, Todd Kenner	
PART VI - SECTION B - #11B - The form 990 is reviewed by the President of the Foundation and the Ch	airman of the Board prior to filing.
The form 990 is available to the Executive Committee of the Board.	
PART VI - SECTION B - #12 - We survey trustees every year. Any conflicts would be communicated to	the Board.
PART VI - SECTION B - #15 - A compensation committee made up of trustees meets annually to discus	s the salary/benefit package for
Foundation employees. The committee looks at comparable data, performance, costs and presents a r	ecommendation for salary and
fringe benefits to the Board for approval.	
PART VI - SECTION C - #19 - Governing documents and financial statements are available upon request	. General policy and proceedures
are available on our website.	•••••••••••••••••••••••••••••••••••••••
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Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization	Employer Identification number
SOUTH DAKOTA SCHOOL OF MINES AND TECHNOLOGY FOUNDATION	46-6011771
SOUTH DANGER SCHOOL OF MINES AND TECHNOLOGY TOUNDATION	1 40-0011771
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Schedule O (Form 990 or 990-EZ) (2013)

SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 38, or 37.

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

Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

SOUTH DAKOTA SCHOOL OF MINES AND TECHNOLOGY FOUNDATION

Part I

lo. 1545-0047	
8	

Open to Publi 2013

Inspection

Employer Identification number

46-6011771

(g) Section 512(b)(13) controlled entity? (f) Direct controlling entity Schedule R (Form 990) 2013 Yes No Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (f) Direct controlling entity (e) End-of-year assets (e)
Public chanty status
(if section 501(c)(3)) (d) Total income (d) Exempt Code section (c) Legal domicile (state or foreign country) Cat. No. 50135Y (c) Legal domicile (state or foreign country) (b) Primary activity (b) Primary activity For Paperwork Reduction Act Notice, see the Instructions for Form 990. (a) Name, address, and EIN (if applicable) of disregarded entity (a) Name, address, and EIN of related organization (6) Part II ଷ 9 5 ₹. € প্র 2 3 9 9

Part   Item	Schedule R (Form 990) 2013														Page 2
Trust Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept. 1 Corp. Sept	Part III Identification of Report III because it had one	elated Organizarion or more related	ations Tax   organizati	able as	a Partners ted as a par	thip Cor	mplete if the p during the	e organiza e tax year	ition answ	ered "Ye	s" on Form	n 990, F	art IV, li	ine 34	
Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No	(a) Name, address, and EiN of related organization	(b) Primary activity	· · · · · · · · · · · · · · · · · · ·	•	(d) ect controlling enuty	Predo Income unre exclud tax u		(f) share of total income				() e V—UBI nt in box 20 hedule K-1 rm 1065)			(k) mership
Treation of Related Organizations Faxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, t because it had one or more related organizations treated as a corporation or trust during the tax year.    National Complete if the organization answered "Yes" on Form 990, the cause it had one or more related organizations treated as a corporation or trust during the tax year.    National Complete if the organization answered "Yes" on Form 990, the cause it had one or more related organizations treated as a corporation or trust during the tax year.    National Complete if the organization answered "Yes" on Form 990, the cause it had one or more related organizations treated as a corporation or trust during the tax year.    National Complete if the organization answered "Yes" on Form 990, and 190, and										Yes	S.			2	_
incession of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, the causes it had one or more related organizations treated as a corporation or trust clufting the tax year.  (a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c				-										-	
fileation of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, 4 because it had one or more related organizations treated as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, and 6 in organization answered "Yes" on Form 990, and 6 in organization answered "Yes" on Form 990, and 6 in organization answered "Yes" on Form 990, and 6 in organization answered "Yes" on Form 990, and 6 in organization answered "Yes" on Form 990, and 6 in organization answered "Yes" on Form 990, and 6 in organization answered "Yes" on Form 990, and 6 in organization answered "Yes" on Form 990, and 6 in organization answered "Yes" on Form 990, and 6 in organization answered "Yes" on Form 990, and 6 in organization answered "Yes" on Form 990, and 6 in organization answered "Yes" on Form 990, and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in organization and 6 in org									ļ					-	_
fification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, 4 because it had one or more related organizations treated as a corporation or trust during the tax year.  (a) In the organization answered "Yes" on Form 990, 1 because it had one or more related organizations treated as a corporation or trust during the tax year.  (b) In the organization answered "Yes" on Form 990, 1 because it had one or more related organizations that it had one or more related organizations to the property of the organization answered "Yes" on Form 990, 1 because it had one or more related organizations that it had one or more related organizations that it had one or more related as a corporation or trust Companies if the organization answered "Yes" on Form 990, 1 because it had one or more related organizations that it had one or more related organizations that it had one or more related organization and the property of the organizations or more related organizations and the property of the organization of the organizations or more related organizations that it had one or more related organizations that it had one or more related organizations or more related organizations or more related organizations that it had one or more related organizations or more related organizations or more related organizations or more related organizations or more related organizations or more related organizations or more related organizations or more related organizations or more related organizations or more related organizations or more related organizations or more related organizations or more related organizations or more related organizations or more related organizations or more related organizations or more related organizations or more related organizations or more related organizations or more related organizations or more related organizations organizations organizations or more related organizations organizations organizations organizations organizations organizations org				-									_	<u> </u>	
fifeation of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, to because it had one or more related organizations treated as a corporation or trust during the tax year.  (a)  (b)  (c)  (c)  (c)  (c)  (c)  (d)  (d)  (d											-		-	-	_
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ffication of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, 4 because it had one or more related organizations treated as a corporation or trust during the tax year.  (a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c														+	-
Comp. State of lotarial and entity   Legal domustic   Comp. State of lotarial and entity   Comp. State of lotarial and e	Part IV Identification of Reline 34 because it h	elated Organizad one or more	ations Tax related or	rable as ganizatio	a Corporal	tion or as a cor	Trust Comproperation or	plete if the rrust duri	s organiza ing the tax	tion answ year.	rered "Yes	s" on Fc	nrm 990,	Part	<u>≥</u>
Size 200, Rapid City, SD 57701         Management         SD         SDSM&T FDN         C Corp         -160         4,499         100%         ✓	(a) Name, address, and EIN of related	organization	(b) Primary e	activity	(c) Legal dom (state or foreign		(d) Direct controlling entity			(f) Share of total income			(h) ercentage ownership		512(b)(13) trolled titly?
Ste 200, Rapid City, SD 57701         Management         SD         SDSM&T FDN         C Corp         -160         4,489         100%           Ste 200, Rapid City, SD 57701         Management         SDSM&T FDN         C Corp         -160         4,489         100%														¥e8	_
	(1) Tech Ventures, Inc. 306 E St. Joseph St. Ste 200, Rapid C (2) EIN #38-370415		Wanagement		SD		SDSM&T FDN	1		.16	0	4,499	100%		
														<u> </u>	
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Page 3

Schedule R (Form 990) 2013

Schedule R (Form 990) 2013										ı		ega.
Part VI Unrelated Organizations Taxab	Faxable as a	Partnership	le as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.	ıe organiza	tion answered	"Yes" on For	п 990	, Part	IV, line 37.			
Provide the following information for each entity taxed as a partnership through which the organization conducted more than find or certain investment partnerships.	entity taxed as	a partnership tinstructions re	taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets tion. See instructions regarding exclusion for certain investment partnerships.	he organization for certa	ion conducted in investment pa	nore than five partnerships.	ercent	of its	activities (meas	surec	by to	tal assets
(a) Name, eddress, and EIN of entrty	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under	(e) Are all partners section 501(c)(3) organizations?	Share of total income	(g) Share of end-of-year assets	(h) Disproportionate affocetions?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gen	© General or managing partner?	(k) Percentage ownership
			sections 512-514)	Yes No			Υes	2		χes	윋	
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Schedule R (	Form 990) 2013	Page 5
Part VII	Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions).	
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Schedule R (Form 990) 2013

* (A)		(B)	(do i		ck more tha		x, uniess pe		(D)	(E)	(F)
		_		both	an officer a	nd a dire	ctor/trustee	)	_	_	_
Name and Title		Average hours per week	Individual trustee	Institutional truste	Officer	Key Employee	Highest compensated employee	Former	Reportable Compensation from the organization (W-2/1099- MISC)	Reportable Compensation from related organizations (W 2/1099-MISC)	Estmated amount of other compensation from the organization and related organization
1 Banister, Gaurdie E.	Trustee	1	×								
2 Benson, Mark W.	Treasurer	i	â		х						
3 Bienert, Clifford J	Trustee	i	â		^						
4 Boucher, Diane	Trustee	i	â								
5 Brass, Lorin L	Chair	i	â		х						
6 Carver, Julie	Trustee	i	â		^						
7 Chiang, Willie C.W	Trustee	-	â								
8 Chordos, Sharon	Trustee	1	â								
9 Christensen, Robert R	Trustee	1	X								
10 Corwin, Ed	Trustee	i	â								
11 Dirks, Gery W.	Trustee	i	â								
12 Dirks, Monte S.	Trustee	i	â								
13 Dolan, Daniel F	Trustee	1	x								
14 Erickson, John Duff	Trustee	i	â								
15 Franzen, Victoria L	Trustee	i	â								
16 Freeman, Anna	Trustee	i	â								
17 Green, James A.	Trustee	i	â								
18 Himelspach, Daniel C	Trustee	i	â								
19 Huli, Jeane L	Trustee	i	â								
20 Hull, John C.	Trustee	i	â								
21 Jones, Walter	Member-at-Large	i	â		¥						
22 Kading, Lynn R	Secretary	i	x		X X						
23 Kenner, Scott J	Trustee	i	â		^						
24 Kenner, Todd J	Trustee	i	×								
25 Lebrun, Gene N	Trustee	i	×								
28 Miller, Kenneth R	Trustee	1	x								
27 Nelson, Tamera J	Trustee	1	x								
28 O'Rourke, Stephen T.	Trustee	1	X								
29 Palm, Owen A.	Trustee	1	X								
30 Parcel, Randy L.	Trustee	1	X								
31 Pearson, Larry V.	1st Vice-Chair	1	X		×						
32 Phelps, Stacy	Trustee	1	×								
33 Rathbun, Grove A	Trustee	1	X								
34 Rausch, Linda L.	2nd Vice-Chair	1	X		×						
35 Schmaltz, Lewrence G.	Trustee	1	х								
36 Scull, Robert C	Trustee	1	х								
37 Shefai, Hani A.F.	Trustee	1	X								
38 Taylor, Marcia	Trustee	1	×								
39 Tiustos, Patrick A	Trustee	1	X								
40 Truhe, Marvin D	Trustee	1	X								
41 Vosika, Janice	Trustee	1	×								
42 Wright, Jerry	Trustee	1	x								
43 Selzer, Michael M.	President	40	••			x			172,608	. 0	14,285
44 Johnson, Bradley	Vice-President Development	40					x		120,588		13,222
•							••		,20,000		19,222
Total to 990 Part VII, Sect	ion A 1c								293,196	. 0	27,507

