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Form 990-PF

Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

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OMB No 1545-0052 2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For car	endar year 2014, or tax year beginning		, and ending		, ,	
BLAC	K HILLS CORPORATION FOUNDATI	ON		Α	Employer identification num 75-2986866	nber
625	NINTH STREET, PO BOX 1400 D CITY, SD 57709-1400			В	Telephone number (see instr	uctions)
	,			С	If exemption application is	pending, check here
G Che	eck all that apply Initial return	Initial return of a form	ner public charity	D	1 Foreign organizations, chec	k here
	Final return Address change	Amended return			2 Foreign organizations meet	
H Ché		Name change (c)(3) exempt private f	oundation		here and attach computation	
	Section 4947(a)(1) nonexempt charitable t	trust Other taxable	private foundation	E	If private foundation status	was terminated
Fair	market value of all assets at end of year m Part II, column (c), line 16)	counting method: X C	ash Accrual		under section 507(b)(1)(A)	
, ,,,,		Other (specify)	n cash basis.)	F	If the foundation is in a 60- under section 507(b)(1)(B)	
Part I	Analysis of Revenue and	(a) Revenue and	(b) Net investmen	nt	(c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	income		ińcome	for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc, received (attach schedule)	872,376.				
	2 Ck ► if the foundn is not required to attach Sch B					
	3 Interest on savings and temporary cash investments	58.		8.	58.	
	4 Dividends and interest from securities 5 a Gross rents	160,604.	160,60)4.	160,604.	
	b Net rental income or (loss)					
R	6 a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all					
E Y	assets on line 6a. 7 Capital gain net income (from Part IV, line 2)				RECEIVED	
ພຂວ ເກີດ7	8 Net short-term capital gain			Ш		~-3
`Ē	9 Income modifications 10 a Gross sales less			09.5	War I was	
න [—] 1	allowances			15	1	<u>-1</u> ;
÷_	b Less Cost of goods sold			1	C	
	C Gross profit or (loss) (attach schedule) 11 Other income (attach schedule).			<u> </u>		
n ij						
· <u>·</u>	12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc.	1,033,038.	160,66	52.	160,662.	
<u>.</u> 5.	14 Other employee salaries and wages.	<u> </u>				
5 D	15 Pension plans, employee benefits					
A	16 a Legal fees (attach schedule) b Accounting fees (attach sch)					
M N	C Other prof fees (attach sch)					
O I	17 Interest					
OPERAT	18 Taxes (attach schedule)(see instrs) See Stm 1	10,611.		_		
l i	sch) and depletion.				, <u> </u>	
N V G E	20 Occupancy 21 Travel, conferences, and meetings				-	
A E N X D P	22 Printing and publications					
D P	23 Other expenses (attach schedule) See Statement 2	278.	25	78.	278.	278.
N S F	24 Total operating and administrative					
š	expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid Part XV	10,889. 243,572.	27	78.	278.	278. 243,572.
	26 Total expenses and disbursements.	-				
	Add lines 24 and 25 . 27 Subtract line 26 from line 12:	254,461.	27	78.	278.	243,850.
	a Excess of revenue over expenses and disbursements	770 577				
	b Net investment income (if negative, enter -0-)	778,577.	160,38	34		
	C Adjusted net income (if negative, enter -0-).		100,50		160,384.	
DAA E	or Panerwork Reduction Act Notice, see ins		TEE AGEON 1:			Form 990-PF (2014)

Part	11	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	
			(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest	_	688,384.	1,457,615.	1,457,615.
	2		ary cash investments			
	3	Accounts receivable	·			
		Less allowance for	doubtful accounts >		····	
	4	Pledges receivable	·			
	_	Less: allowance for	doubtful accounts			
	5	Grants receivable				
	6		cers, directors, trustees, and other ch schedule) (see instructions).			
	7	Other notes and loans rec				
S		Less: allowance for	doubtful accounts >			
5	8	Inventories for sale	or use			
ASSETS	9	Prepaid expenses a	nd deferred charges			
S	10:	a Investments – U S. obligations (attach s	and state government chedule)			
	1	b Investments — corporate	stock (attach schedule) Statement 3	630,000.	630,000.	1,060,800.
		c Investments — corporate	bonds (attach schedule)			
	11	Investments – land, equipment basis	buildings, and			
		Less: accumulated deprec (attach schedule)	iation			
	12	Investments – morte				
	13	Investments - other	(attach schedule) Statement 4	2,845,174.	2,854,520.	3,075,599.
	14	Land, buildings, and	equipment basis			
		Less accumulated deprec (attach schedule)	ration			
		Other assets (descri	completed by all filers '			
	17		Also, see page 1, item I)	4,163,558.	4,942,135.	5,594,014.
ן דָּ	17	, ,	nd accrued expenses			
B	18 19	Deferred revenue		<u> </u>		
ĭ	20		tors, trustees, & other disqualified persons.			
 	21	·	s payable (attach schedule)			
Ť	22	Other liabilities (des				
	22	Other habilities (des				
E	23	Total liabilities (add	lines 17 through 22)	0.	0.	
		Foundations that fo and complete lines	llow SFAS 117, check here. 24 through 26 and lines 30 and 31.			
NF	24	Unrestricted				
E U T N	25	Temporarily restricted	ed			
D !	26	Permanently restrict	ed			
A B S A L T A		Foundations that do and complete lines	not follow SFAS 117, check here X27 through 31.			
ĘĻ	27	Capital stock, trust r	orincipal, or current funds			
SN	28		or land, bldg, and equipment fund		<u> </u>	
C	29		ulated income, endowment, or other funds	4,163,558.	4,942,135.	
OERS	30		und balances (see instructions)	4,163,558.	4,942,135.	
	31		net assets/fund balances	4,163,558.	4,942,135.	
Part	111	Analysis of Chan	ges in Net Assets or Fund Balanc		-	
1	Tota	I net assets or fund ba	alances at beginning of year — Part II, coli d on prior year's return)	umn (a), line 30 (must ag	ree with	4 162 EE9
		er amount from Part I,			2	4,163,558. 778,577.
		increases not included in hi			3	110,311.
		lines 1, 2, and 3			-	4,942,135.
		ases not included in line 2 (itemize)		5	1,512,133.
			alances at end of year (line 4 minus line 5) – Part II, column (b), III		4,942,135.

(à) List and describ	the kind(s) of property sold (e.g., rese; or common stock, 200 shares ML	al estate, (b) +	ow acquired Purchase Donation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a N/A					
b					
С					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (e) plus (f) n	
a					
b					
С					
d					
				_	
Complete only for assets sho	wing gain in column (h) and owned by	the foundation on 12/31/69		(I) Gains (Col	umn (h)
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any		gain minus column (l nan -0-) or Losses (f	k), but not less
а					
b					
С					
d				 "	
е					
2 Capital gain net income or (n	et capital loss) If gain, also If (loss), ente	enter in Part I, line 7 er -0- in Part I, line 7	2		
3 Net short-term capital gain or	(loss) as defined in sections 1222(5)	and (6):			
If gain, also enter in Part I, III in Part I, line &	ne 8, column (c) (see instructions) If	(loss), enter -0-	3		
Part V Qualification Unde	er Section 4940(e) for Reduced	Tax on Net Investment	Income	;	
	ection 4942 tax on the distributable ar allify under section 4940(e) Do not co		period?	Yes	X No
1 Enter the appropriate amount in	each column for each year, see the ins	ructions before making any entr	es.		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(co	(d) Distribution lumn (b) divided	
2013	245, 261.	4,283,7	74.		0.05725
2012	266,545.	3,830,2	32.		0.06959
2011	331,998.	3,786,1	45.		0.08768
2010	331,465.	3,843,6	18.		0.08623
2009	464,473.	3,513,0	37.	_	0.13221
2 Total of line 1, column (d)			2		0.43298
3 Average distribution ratio for number of years the foundation	the 5-year base period — divide the to on has been in existence if less than	otal on line 2 by 5, or by the 5 years	3		0.08659
4 Enter the net value of noncha	aritable-use assets for 2014 from Part	X, line 5	4		4,751,014
5 Multiply line 4 by line 3			5		411,419
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b)		6		1,604
7 Add lines 5 and 6 .			7		413,023
8 Enter qualifying distributions	•		8	<u> </u>	243,850
If line 8 is equal to or greater th					

	1999-FF (2014) BLACK HILLS CORPORATION FOUNDATION 15-2966600			age 4
Pai		s)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here			
_	Date of ruling or determination letter: (attach copy of letter if necessary – see instrs)			
ı	Domestic foundations that meet the section 4940(e) requirements in Part V,		3,2	208.
	check here ► and enter 1% of Part I, line 27b			
•	: All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			
_	foundations only Others enter -0-)			0.
3	Add lines 1 and 2		3,2	208.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		3,2	208.
6	Credits/Payments			
	2014 estimated tax pmts and 2013 overpayment credited to 2014 Exempt foreign organizations — tax withheld at source 6 a 7,184.			
	: Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld 6d			
	Total credits and payments. Add lines 6a through 6d		7	104
8	Enter any penalty for underpayment of estimated tax. Check here		<u>',-</u>	<u> 184.</u>
9				
10	- 		2 (<u>0.</u> 976.
11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be. Credited to 2015 estimated tax 3,976. Refunded 10		٥,:	0.
	t VII-A Statements Regarding Activities			<u> </u>
		ГП	Yes	No
1 8	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1 a	163	X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	16		х
				 ^
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities			
	Did the foundation file Form 1120-POL for this year?	1 c		X
•	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation >\$ 0. (2) On foundation managers >\$ 0.	-		
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers •\$ 0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
_	If 'Yes,' attach a detailed description of the activities.			^
_	·			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3		Х
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a		X
	of If 'Yes,' has it filed a tax return on Form 990-T for this year?	4 b	N	/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If 'Yes,' attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			l
	By language in the governing instrument, or			
			-	ł
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 	6	X	1
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7	X	
8 8	Enter the states to which the foundation reports or with which it is registered (see instructions)			†
	SD			
1	of the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation.	8 b	Х	
_				-
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	9		X
10				<u> </u>
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	10		x
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			□.03
If 'Yes,' list the years ► 20	20 20	20	
20	, , ,	120	
- 6 11			
Are there any years listed in 2a	a for which the foundati	on is not applying the provisions of section	4942(a)(2)
		undertributed income? (If anniums section)	

(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement - see instructions.)

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?

b If 'Yes,' did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014)

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?

2 b

N/A

X No

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Part VII-B Statements Regarding Activiti		4720 May Be Requ	uired (continued)		
5 a During the year did the foundation pay or incu	-	- /k 404E/->>2			
(1) Carry on propaganda, or otherwise attemp	-		∐ Yes X	No	
(2) Influence the outcome of any specific publion, directly or indirectly, any voter registra	tion drive?		—	No	
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	Yes X	No	
(4) Provide a grant to an organization other the in section 4945(d)(4)(A)? (see instructions	nan a charıtable, etc, or)	ganization described	Yes X	No	
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	;, literary, or or animals?	Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of it described in Regulations section 53.4945 or in (see instructions)?	the transactions fail to d a current notice regard	qualify under the exceptions disaster assistance	tions	5 b	N/A
Organizations relying on a current notice rega	rding disaster assistanc	ce check here	▶ [
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response	the foundation claim ex sibility for the grant?	emption from the	N/A Yes	No	
If 'Yes,' attach the statement required by Regi	ulations section 53 4945	5-5(d)		' [[
6 a Did the foundation, during the year, receive ar on a personal benefit contract?			∐Yes X]No	
b Did the foundation, during the year, pay premi	iums, directly or indirec	tly, on a personal bene	fit contract?	6 Ь	X_
If 'Yes' to 6b, file Form 8870				,	1
7a At any time during the tax year, was the found b If 'Yes,' did the foundation receive any procee				No 7b	
Part VIII Information About Officers, D				17 22	
and Contractors	irectors, Trustees,	i oundation manaç	jers, riigiliy raid i	-inployees	•,
1 List all officers, directors, trustees, foundation	n managers and their o	compensation (see inst	ructions).		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		e account, llowances
See Statement 5			<u> </u>		
		0.	0.		0.
					<u> </u>
				<u> </u>	
2 Compensation of five highest-paid employees (of (a) Name and address of each employee	(b) Title, and average	(c) Compensation	(d)Contributions to	(e) Expens	e account
paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation		llowances
None			·		
		, , , , , , , , , , , , , , , , , , , ,			
			 	 	
				 	
	<u> </u>		L	 	
Total number of other employees paid over \$50,000				<u> </u>	0

Form 990-PF (2014) BLACK HILLS CORPORATION FOUNDATION 75-29	
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid I and Contractors (continued)	Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None	
Total number of others receiving over \$50,000 for professional services.	0
Parit MA Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 The Foundation has no direct charitable activities as it merely provides contributions to recipients.	
2	_
	-
3	
	_
4	†
	_
Part X-B Summary of Program-Related Investments (see instructions)	-
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	7 11100111
N/A	-! -
2	
	_ _
All other program-related investments See instructions	
3	
	_
Total. Add lines 1 through 3	<u> </u>
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see instructions.)		
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a Average monthly fair market value of securities	1 a	4,204,254.
b Average of monthly cash balances	1 b	619,110.
c Fair market value of all other assets (see instructions)	10	
d Total (add lines 1a, b, and c)	1 d	4,823,364.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)		
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	4,823,364.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	72,350.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,751,014.
6 Minimum investment return. Enter 5% of line 5	6	237,551.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operations	ating for	ındatıons
and certain foreign organizations check here ▶ □ and do not complete this part.)		
1 Minimum investment return from Part X, line 6	1	237,551.
2a Tax on investment income for 2014 from Part VI, line 5.	.}	
b Income tax for 2014 (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2 c	3,208.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	234,343.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	234,343.
6 Deduction from distributable amount (see instructions).	6	
7 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	234,343.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes:		
a Expenses, contributions, gifts, etc – total from Part I, column (d), line 26.	1 a	243,850.
b Program-related investments — total from Part IX-B	1 b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the.	<u> </u>	
a Suitability test (prior IRS approval required).	3 a	
b Cash distribution test (attach the required schedule)	4	242 050
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	243,850.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	243,850.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the for qualifies for the section 4940(e) reduction of tax in those years.	undation	-
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Part XIII Undistributed Income (see instructions)

	(2)	(b)	(6)	(d)
	(a) Corpus	Years prior to 2013	(c) 2013	2014
1 Distributable amount for 2014 from Part X	<u></u>			
line 7	',			234,343.
2 Undistributed income, if any, as of the end of 2014:				
a Enter amount for 2013 only			0.	
b Total for prior years: 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2014:]		
a From 2009 64,65				
b From 2010 142, 25		1		
c From 2011 146, 85		i		
d From 2012 78, 78				
e From 2013 38, 25				
f Total of lines 3a through e	470,816.			
4 Qualifying distributions for 2014 from Part XII, line 4 > \$ 243.850.				
XII, line 4 \$ 243,850. a Applied to 2013, but not more than line 2a	. 1			
			0.	
b Applied to undistributed income of prior ye (Election required – see instructions)	ears	0.		
c Treated as distributions out of corpus				
(Election required – see instructions)	0.			
 d Applied to 2014 distributable amount e Remaining amount distributed out of corp 	0.507			234,343.
5 Excess distributions carryover applied to 2014	3/001.		·	
(If an amount appears in column (d), the	0.			0.
same amount must be shown in column (a))			
6 Enter the net total of each column as indicated below:			,	
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	480,323.			
b Prior years' undistributed income. Subtractine 4b from line 2b	t	0.		
c Enter the amount of prior years' undistribu	uted			
income for which a notice of deficiency habeen issued, or on which the section 4942 tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable amount — see instructions		0.		
e Undistributed income for 2013. Subtract line 4a from				
line 2a. Taxable amount — see instructions			0.	
f Undistributed income for 2014 Subtract III 4d and 5 from line 1. This amount must be distributed in 2015.				0.
7 Amounts treated as distributions out of				 -
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)	0.			
8 Excess distributions carryover from 2009 i	not			
applied on line 5 or line 7 (see instruction	s) 64,658.			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	415,665.			
10 Analysis of line 9:				
a Excess from 2010 142, 25				
b Excess from 2011 146, 85				
c Excess from 2012 78,78				
d Excess from 2013 38, 25				
e Excess from 2014 9, 5()/.	1		1

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Form **990-PF** (2014)

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Part XIV Private Operating Foundat					N/A
1 a If the foundation has received a ruling or dete is effective for 2014, enter the date of the	rmination letter that ruling	t it is a private operatii	ng foundation, and the	ruling -	
b Check box to indicate whether the foundation	-	erating foundation de	escribed in section	4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year	Τ	Prior 3 years		<u> </u>
income from Part I or the minimum investment return from Part X for	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					<u></u>
 Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c 					
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter					
(1) Value of all assets	ļ	-			
(2) Value of assets qualifying under section 4942(j)(3)(B)(i).					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test - enter:					
 Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) 					
		+			
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income	L				
PantXV Supplementary Information assets at any time during the	(Complete this	s part only if the	foundation had	\$5,000 or more	in
1 Information Regarding Foundation Mana	<u> </u>	instructions.)			
a List any managers of the foundation who hav	e contributed more	than 2% of the total co	ontributions received b	y the foundation before	re the
close of any tax year (but only if they have	e contributed more	e than \$5,000). (See	section 507(d)(2))		
None					
b List any managers of the foundation who own	10% or more of the	e stock of a corporatio	n (or an equally large	nortion of the owners	hin of
a partnership or other entity) of which the	foundation has a	10% or greater interes	est	portion of the officers	inp or
None					
2 Information Regarding Contribution, Gra	nt Gift Loan Sch	olarchin etc Progra		_ _	
Check here ► ☐ if the foundation only ma				oes not accept unsoli	cited
requests for funds. If the foundation make					
a The name, address, and telephone number o	r e-mail address of	the person to whom a	nolications should be	addressed:	
The hame, dadress, and telephone hamber o	r c man address or	the person to whom a	pplications should be	addressed	
See Statement 6					
b The form in which applications should be	submitted and info	ormation and materia	ils they should includ	de·	
See Statement for Line 2a					
c Any submission deadlines.					
See Statement for Line 2a					
d Any restrictions or limitations on awards,	such as by geogra	phical areas, charita	ble fields, kinds of in	nstitutions, or other t	actors:
See Statement for Line 2a					
RAA		EEA03101 05/17/14			900 PE (2014)

3 Grants and Contributions Paid During the Y	ear or Approved for Fut	ure Paymen	it	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient	CONTRIBUTION	
a Paid during the year				
a Paid during the year See Attached Statement ,		NP	Scholarship/Capital	243,572.
Total		<u> </u>	► 3a	243,572.
b Approved for future payment		<u> </u>	T	
See Statement 7			► 3b	944.667

Form **990-PF** (2014)

Part XVI-A Analysis of Income-Producing Activities

BAA

Enter gross amounts unless otherwise indicated	Unrelated	business income	Excluded by	section 512, 513, or 514	(a)
Program service revenue:	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (See instructions)
a	 +		code		
b	++		+		
c	+		_		
d	+				
e	+				
1			-		
g Fees and contracts from government agencies	1 1				
2 Membership dues and assessments.					
3 Interest on savings and temporary cash investments			14	58.	 -
4 Dividends and interest from securities			14	160,604.	
5 Net rental income or (loss) from real estate.					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b					
С					
d					
e					
12 Subtotal Add columns (b), (d), and (e)				160,662.	
13 Total. Add line 12, columns (b), (d), and (e)	 			13	160,662
13 Total. Add line 12, columns (b), (d), and (e)	tions)			13	160,662
13 Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculated		hment of Exen	ıpt Purpose	·	160,662
13 Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities to the	e Accomplis		<u> </u>	<u>.</u>	
13 Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities to the	e Accomplis		<u> </u>	<u>.</u>	
Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplis		<u> </u>	<u>.</u>	
13 Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities to the	e Accomplis		<u> </u>	<u>.</u>	
Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplis		<u> </u>	<u>.</u>	
Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplis		<u> </u>	<u>.</u>	
Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplis		<u> </u>	<u>.</u>	
13 Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplis		<u> </u>	<u>.</u>	
13 Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplis		<u> </u>	<u>.</u>	
Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplis		<u> </u>	<u>.</u>	
13 Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculated a Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplis		<u> </u>	<u>.</u>	
13 Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplis		<u> </u>	<u>.</u>	
Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplis		<u> </u>	<u>.</u>	
13 Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplis		<u> </u>	<u>.</u>	
Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplis		<u> </u>	<u>.</u>	
Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplis		<u> </u>	<u>.</u>	
Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplis		<u> </u>	<u>.</u>	
Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplis		<u> </u>	<u>.</u>	
13 Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplis		<u> </u>	<u>.</u>	
13 Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculated a Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplis		<u> </u>	<u>.</u>	
13 Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculated Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplis		<u> </u>	<u> </u>	
13 Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculated a Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplis		<u> </u>	<u> </u>	
13 Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculated a Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplis		<u> </u>	<u> </u>	
13 Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculated Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplis		<u> </u>	<u> </u>	

TEEA0502L 06/17/14

BAA

			ATION FOUNDATION		75-2986866		age 13
Part XV	II Information Reg Exempt Organiz	arding Transferations	ers To and Transaction	ons and Relationshi	ps With Noncharitable	9	
	Exempt Organiz	ations				Yes	No
1 Did t desc relat	the organization directly cribed in section 501(c) of ting to political organizat	or indirectly engage of the Code (other lions?	ge in any of the following v than section 501(c)(3) org	vith any other organization anizations) or in section	on 527,	1.03	
a Tran	sfers from the reporting	foundation to a ne	oncharitable exempt organ	ization of			L
` '	Cash				1a(X
	Other assets				. <u>1a (</u>	2)	X
	er transactions:	.1					
	Sales of assets to a non		-		1b(X
	Purchases of assets from Rental of facilities, equip		. •		1 b (X
	Reimbursement arrange	•	3013		1b($\frac{1}{x}$
	Loans or loan guarantee				1b(X
• •	-		r fundraising solicitations		16(X
c Shar	ring of facilities, equipme	ent, mailing lists, o	other assets, or paid emplo	yees	1c		X
d If the gany	e answer to any of the a goods, other assets, or ser transaction or sharing ai	bove is 'Yes,' com vices given by the i rrangement, show	nplete the following schedu reporting foundation If the fo in column (d) the value of	le. Column (b) should all undation received less tha the goods, other assets,	ways show the fair market value in , or services received	value of	
(a) Line no.	. (b) Amount involved	(c) Name of nor	ncharitable exempt organization	(d) Description of tra	nsfers, transactions, and sharing a	rrangemer	ıts
<u>N/A</u>							
	 			 			
							
	 		-	 			
							
							
	 						
	 -						
desc	e foundation directly or inc cribed in section 501(c) o es,' complete the followi	of the Code (other	h, or related to, one or more than section 501(c)(3)) or	tax-exempt organizations in section 527?		Yes X	No
	(a) Name of organization		(b) Type of organization	on 6	c) Description of relationship		
N/A			(4)),	····		<u></u>	
	·						
Sign		of preparer (other than	this return, including accompanying taxpayer) is based on all informatio		May	the IRS dis	cuss
Here	X Denx 1	Bush	1 5/6/2	Treasurer	prepa	eturn with arer shown instructions	below
3	Signature of officer or trustee		Date	Title	(see	Yes	No.
	Print/Type preparer's nan	ne	Preparer's signature	Date	Check of PTIN		
Paid			Non-Paid Prepa	rer	self-employed		
Prepare	Firm's name				Firm's EIN		
Use Onl							

Phone no

Form **990-PF** (2014)

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

name of the organization		Employer Identification number
BLACK HILLS CORPORATION FO	UNDATION	75-2986866
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) or	ganization
	4947(a)(1) nonexempt charitable	trust not treated as a private foundation
	527 political organization	·
	T and becomes a germanical	
Form 990-PF	X 501(c)(3) exempt private foundat	ion
	4947(a)(1) nonexempt charitable	trust treated as a private foundation
	501(c)(3) taxable private foundati	on
Check if your organization is covered by t	he General Rule or a Special Rule	
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the	General Rule and a Special Rule. See instructions
General Rule		
X For an organization filing Form 990, 9 property) from any one contributor Co	90-EZ, or 990-PF that received, during the somplete Parts I and II. See instructions for the some sections.	year, contributions totaling \$5,000 or more (in money or determining a contributor's total contributions
Special Rules		
For an organization described in section under sections 509(a)(1) and 170(b)(1)(A received from any one contributor, du	(vi), that checked Schedule A (Form 990 or 9	met the 33-1/3% support test of the regulations 90-EZ), Part II, line 13, 16a, or 16b, and that the of (1) \$5,000 or (2) 2% of the amount on (i)
during the year, total contributions of	on 501(c)(7), (8), or (10) filing Form 990 or more than \$1,000 <i>exclusively</i> for religious, elty to children or animals. Complete Parts	990-EZ that received from any one contributor, charitable, scientific, literary, or educational I, II, and III
during the year, contributions exclusive \$1,000. If this box is checked, enter high charitable, etc., purpose. Do not compare the compared to	rely for religious, charitable, etc., purposes,	· · · · · · · · · · · · · · · · · · ·
990-PF), but it must answer 'No' on Part	red by the General Rule and/or the Special IV, line 2, of its Form 990; or check the box set the filing requirements of Schedule B (F	Rules does not file Schedule B (Form 990, 990-EZ, or on line H of its Form 990-EZ or on its Form 990-PF, form 990, 990-EZ, or 990-PF)

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Sabadula	P (Form 000, 000 E7, or 000 DE) (2014)	Pone	1 of 1 of David
Name of org	B (Form 990, 990-EZ, or 990-PF) (2014)	Page Employer	1 of 1 of Part 1
BLACK	HILLS CORPORATION FOUNDATION	75-29	86866
Padle	Contributors (see instructions). Use duplicate copies of Part I if additional space	s needed	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BLACK HILLS SERVICE CO, LLC 625 NINTH STREET RAPID CITY, SD 57709-1400	\$872 <u>,</u> 37 <u>6</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
÷		\$	Person Payroll Onncash Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			i

Person Payroll Noncash

(Complete Part II for noncash contributions.)

1 to

1 of Part II

BLACK HILLS CORPORATION FOUNDATION

Employer identification number 75-2986866

(a) No. from Part I Description of noncash property given (see instructions) N/A	(d) Date received
N/A	
(a) No. (b) (c) FMV (or estimate) (see instructions)	(d) Date received
s	
(a) No. (b) (c) FMV (or estimate) Part I (see instructions)	(d) Date received
 	
(a) No. (b) (c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Description of noncash property given FMV (or estimate) Part I (c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. (b) (c) FMV (or estimate) (see instructions)	(d) Date received

1 to

of Part III

Name of organization
BLACK HILLS CORPORATION FOUNDATION

Employer identification number 75-2986866

DITACK	HITTO CONFORMITON	LOUNDATION		13-230000
Parl III			butions to organizations describ	
	or (10) that total more t	han \$1,000 for the year fro	m any one contributor. Complete colum	ns (a) through (e) and
			art III, enter the total of exclusively relig	ious, charitable, etc.,
			nformation once. See instructions) .	► \$N/2
	Use duplicate copies of Pa	art III if additional space is ne	eded.	

	Use duplicate copies of Part III if additional	space is needed.	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to transferee
		·	
	· ·	l l	

2014	Federal Statements	Page 1
Client 1	75-2986866	
5/04/15		01:47PN
Statement 1 Form 990-PF, Part I, Line 18 Taxes		
	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Incom	
Income Taxes	Total \$ 10,611. \$ 0. \$	0. \$ 0.
Statement 2 Form 990-PF, Part I, Line 23 Other Expenses		
Bank Service Charge	(a) (b) Net (c) Expenses Investment Adjuste per Books Income Net Income \$ 278. \$ 278. \$ 278. Total \$ 278. \$ 278. \$ 278.	(d) d Charitable purposes 8. \$ 278. 8. \$ 278.
Statement 3 Form 990-PF, Part II, Line 10b Investments - Corporate Stoo	o cks	
Corporate Stocks	Valuation Book Method Value	Fair Market Value
BLACK HILLS CORPORATION		. \$ 1,060,800.
Statement 4 Form 990-PF, Part II, Line 13 Investments - Other		
	Valuation Book <u>Method</u> Value	Fair Market Value
Other Publicly Traded S	_	
Charles Schwab Investme	ent Portfolio Cost \$ 2,854,520 Total $\frac{$}{$}$ 2,854,520	

Federal Statements									
Client 1 BLACK I		75-2986866							
5/04/15									
Statement 5 Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Trustees, and Key Employees									
Name and Address	Title and Average Hours Per Week Devoted	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other					
Lori Rainwater 625 Ninth Street Rapid City, SD 57701	President 4.00	-	\$ 0.						
Linden R. Evans 625 Ninth Street Rapid City, SD	Vice President 1.00	0.	0.	0.					
Mark Stege 1301 W 24th Street Cheyenne, WY 82001	Director 1.00	0.	0.	0.					
Perry Krush 625 Ninth Street Rapid City, SD 57701	Treasurer 1.00	0.	0.	0.					
David Emery 625 Ninth Street Rapid City, SD 57701	Director 1.00	0.	0.	0.					
Jeff Sylvester 1600 Windhoek Dr Lincoln, NE 68512	Director 1.00	0.	0.	0.					
John Benton 1515 Wynkoop Street, Suite 500 Denver, CO 80202	Director 1.00	0.	0.	0.					
Jafar Karim 625 Ninth Street Rapid City, SD 57701	Secretary 2.00	0.	0.	0.					
Susan Bailey 7060 Allegre Street Fountain, CO 80817	Director 1.00	0.	0.	0.					
Todd Jacobs 601 N Iowa St Lawrence, KS 66044	Director 1.00	0.	0.	0.					

Director 1.00

Director 1.00

Jason Ketchum 625 Ninth Street Rapid City, SD 57701

Tracy Peterson 1205 SW 37th Street Grimes, IA 50111

Total <u>\$ 0.</u> <u>\$ 0.</u> <u>\$ 0.</u>

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Federal Statements

Page 3

Client 1

BLACK HILLS CORPORATION FOUNDATION

75-2986866

5/04/15

01:47PM

Statement 6 Form 990-PF, Part XV, Line 2a-d **Application Submission Information**

Name of Grant Program: Name:

Black Hills Corporation Foundation

Care Of: Street Address:

Kim Schneider P.O. Box 1400

City, State, Zip Code:

Rapid City, SD 57709-1400

Telephone: E-Mail Address:

Form and Content:

An application for funding must be requested. application must include general history; purpose of

grant; budget; other sources of funding; timeline; copy of

recent financial statements.

Submission Deadlines:

Restrictions on Awards:

None Sponsors must be 501(c)(3) exempt and nonpolitical. No awards are granted to individuals, endowments, memorials,

religious organizations for religious purposes, or for

advertising purposes.

Statement 7 Form 990-PF, Part XV, Line 3b **Recipient Approved for Future Payment**

Name and Address	Donee Relationship	Found- ation <u>Status</u>	Purpose of Grant	Amount
Asbury Community Service Campus 5080 Asbury Road Asbury, IA 52002		NC	Scholarship/Capi tal	\$ 5,000.
Catholic Social Services 529 Kansas City Street Rapid City, SD 57701		NC	Scholarship/Capi tal	8,000.
Cheyenne Regional Medical Center 214 E. 23rd Street Cheyenne, WY 82001		NC	Scholarship/Capi tal	20,000.
Fall River Health Services 1201 Highway 71 South Hot Springs, SD 57747		NC	Scholarship/Capi tal	5,000.
Guttenberg Municipal Hospital 200 Main Street Guttenberg, IA 52052		NC	Scholarship/Capi tal	2,500.
Mitchell Technical Institute 1800 E. Spuce Street Mitchell, SD 57301		NC	Scholarship/Capi tal	30,000.
Laramie County College Foundation		NC	Scholarship/Capi tal	5,000.

2014	Federal Statements					Page 4		
Client 1	1 BLACK HILLS CORPORATION FOUNDATION							
5/04/15 Statement 7 (continued) Form 990-PF, Part XV, Line 3b Recipient Approved for Future Payment								
Name and Address		Donee Relationship	Found- ation Status	Purpose of Grant		Amount		
1400 East College Driv Cheyenne, WY 82007	re							
Regional Health Servic Howard County 235 E Eighth St W Cresco, IA 52136	e of		NC	Scholarship/Capi tal	\$	7,500.		
University of South Da Foundation PO Box 5555 Vermillion, SD 57069	kota		NC	Scholarship/Capi tal		20,000.		
Theatre Lawrence Capit Campaign 4660 Bauer Farm Drive Lawrence, KS 66049	al		NC	Scholarship/Capi tal		10,000.		
United Way of the Blac Hills 621 6th Street Rapid City, SD 57701	:k		NC	Scholarship/Capi tal		500,000.		
Ogden Boone County Fam Medical Clinic 513 West Walnut Street Odgen , IA 50212	_		NC	Schloarship/Capi tal		2,500.		
First Nations Sculture Garden PO Box 9515 Rapid City, SD 57702	•		NC	Scholarship/Capi tal		30,000.		
Black Hills Habitat fo Humanity 925 St. Joseph Street Rapid City, SD 57701	or		NC	Scholarship/Capi tal		12,500.		
CSU Pueblo Foundation 2200 Bonforte Blvd Pueblo, CO 81001			NC	Scholarship/Capi tal		18,000.		
Cheyenne Boys and Girl Club 515 W Jefferson Cheyenne, WY 82007	.s		NC	Scholarship/Capi tal		50,000.		
City of Forest City Emergency Svc Center 305 North Clark St Forest City, IA 50436			NC	Scholarship/Capi tal		7,500		
Regional Medical Cente PO Box 359 Manchester, IA 52057	er		NC	Scholarship/Capi tal		7,500		

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2014	Federal Sta	tements		Page 5	
Client 1 BLA	BLACK HILLS CORPORATION FOUNDATION				
5/04/15 Statement 7 (continued) Form 990-PF, Part XV, Line 3b Recipient Approved for Future Pay	ment			01·47PM	
Name and Address	Donee <u>Relationship</u>	Found- ation <u>Status</u>	Purpose of Grant	Amount	
Rural American Initiatives 628 1/2 6th Street Rapid City, SD 57701		NC	Scholarship/Capi tal	\$ 75,000.	
Gillette College Foundation 300 W Sinclair Street Gillette, WY 82718		NC	Scholarship/Capi tal	15,000.	
Northeast Community College PO Box 469 Norfolk, NE 68702		NC	Scholarship/Capi tal	50,000.	
St Mary-Corwin Health Foundation 1008 Minnequa Avenue Pueblo, CO 81004		NC	Scholarship/Capi tal	12,000.	
Unity Point Health 350 N Grandview Ave Dubuque, IA 52001		NC	Scholarship/Capi tal	15,000.	
YMCA of Greater Omaha 430 South 20th Street Omaha, NE 68102		NC	Scholarship/Capi tal	26,667.	
Rapid City Local Charities Rapid City, SD 57701		NC	Scholarship/Capi tal	10,000.	
			Total	\$ 944,667.	