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Form **990-EZ** 

# Short Form Return of Organization Exempt From Income Tax

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

2016

OMB No 1545-1150

▶ Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

		the Treasury ue Service	► Information about Form 990-EZ and its in	nstructions is at ww	vw.irs.gov/for	m990.		Inspec	lion	
A For	the 2	2016 calenda	r year, or tax year beginning January	1 , 2016,	and ending	Dec	ember :	31,2	0 16	
B Chec	ck of ap	plicable	C Name of organization			D Empl	oyer ide	ntification num	nber	
Add	Address change Mines Applied Technology Transfer Inc.									
☐ Nam	ne char	nge	Number and street (or P O box, if mail is not delivered to str	eet address)	Room/suite	E Telep	87-0715178 elephone number			
Initia	al retur	n .	1500 Illinois Street		234		303	-273-3262		
=		n/terminated	City or town, state or province, country, and ZIP or foreign p	ostal code	234	F Grou	ıp Exem			
_	ended i					1	ber ▶	iption		
		n pending ing Method	Golden, CO 80401  ☐ Cash	<del> </del>	- Lu	J		the organizat		
	bsite:	J	Cash Charles Other (Specify)	<del></del>	——   <b>"</b>			the organizat ch Schedule I		
			ok only one) [/] 504(-)(0) [] 504(-)(1)	+ \ \ \ \ 40.47/=\/4\ -		•		EZ, or 990-P	_	
			ck only one) — ✓ 501(c)(3) ☐ 501(c) ( ) ◀ (inser		r [_]527 [	(1 01111 3		LZ, 01 950°F	<del>"</del>	
		organization				1				
			7b to line 9 to determine gross receipts. If gross receipt		more, or ii tota	assets				
			) are \$500,000 or more, file Form 990 instead of Form				\$		122,000	
Par	t I		e, Expenses, and Changes in Net Assets			instruc	ctions	for Part I)	_	
			the organization used Schedule O to respond		in this Part I	<u> </u>	<del></del>			
	1		ns, gifts, grants, and similar amounts received .				1		122,000	
1	2	Program se	rvice revenue including government fees and co	ontracts			2			
	3	Membersh	p dues and assessments				3			
	4	Investment	ıncome				4			
.	5a	Gross amo	unt from sale of assets other than inventory .	5a			-	<u></u>		
'	b		or other basis and sales expenses	5b			'			
ł	C	Gain or (los	5c							
	6	,	d fundraising events		,		- (2			
	а	_	ome from gaming (attach Schedule G if gi	reater than			- ,			
စ္	u	\$15,000)		6a	1					
Revenue	b		me from fundraising events (not including \$	ــــــــــــــــــــــــــــــــــــــ	f contribution	16	, ·			
ě	U		aising events reported on line 1) (attach Sched		CONTINUE	13				
ا عم			h gross income and contributions exceeds \$15,		1					
· ]	_		_	<del></del>	<del> </del>		- 1			
·	C		t expenses from gaming and fundraising events		d 6b and au	htraat	1			
	d		e or (loss) from gaming and fundraising events	s (add lines ba an	u ob anu su	biraci				
		line 6c)					6d			
	7a		s of inventory, less returns and allowances .	<u>7a</u>	ļ. <b></b>					
1	þ		of goods sold	<u>. 7b</u>	<u> </u>					
	С	Gross prof	t or (loss) from sales of inventory (Subtract line	7b from line 7a) .			7c			
	8	Other reve	nue (describe in Schedule O)				8			
	9	Total reve	nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	DEA	<u> </u>	. ▶	9		122,000	
7	10	Grants and	similar amounts paid (list in Schedule O) .	- INCUEIV	ED 7		10		89,000	
1	11	Benefits pa	nd to or for members	[]			11			
တ္က 1	12	Salaries, o	her compensation, and employee benefits	NAY 7 0 3	187 · 100		12			
ΨI	13		al fees and other payments to independent con	tractors	(017 .   ぢ		13		27,000	
e l	14		rent, utilities, and maintenance	Comment	છે  .		14			
ਕੁੱ∣.	15	Printing, publications, postage, and shipping			15					
1	16	• • •	inses (describe in Schedule O)	Call			16		10	
	17	•	nses. Add lines 10 through 16			•	17		116,010	
	18		deficit) for the year (Subtract line 17 from line 9)		•		18	<u> </u>	5,990	
<b>\$</b>   .	19		or fund balances at beginning of year (from li		) (must agre	e with				
SS	. •		r figure reported on prior year's return)				19		27 505	
Net Assets	20	=		chedule ()\	· · ·	- •	20		27,585	
월 [	20 01		ges in net assets or fund balances (explain in S				-			
For P	21		or fund balances at end of year. Combine lines		No 10642	· •	21	Form <b>990-l</b>	33,575	

6-14



Form	990-	F7	(2016)	

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_						rage 2
<sub>z</sub> .Pai						
	Check if the organization used Schedul	e O to respond to ar	ny question in this		<del></del>	<u> </u>
			1	(A) Beginning of year	<u> </u>	(B) End of year
22	Cash, savings, and investments			25,502	$\overline{}$	31,492
23	Land and buildings				23	
24	Other assets (describe in Schedule O)			2,083		2,083
25	Total assets			27,585		33,575
26	Total liabilities (describe in Schedule O)		[		26	
27	Net assets or fund balances (line 27 of colum			27,585	27	33,575
Par	<del></del>	•		,		_
	Check if the organization used Schedul		ny question in this	Part III . 🗸	(Day	Expenses
Wha	is the organization's primary exempt purpose?	see Schedule O				quired for section (c)(3) and 501(c)(4)
Desc	ribe the organization's program service accomp	lishments for each o	f its three largest p	orogram services,	orga	anizations, optional for
as m	leasured by expenses. In a clear and concise r	manner, describe the			othe	ers)
pers	ons benefited, and other relevant information for e	ach program title			1	
28	Five grants to support research of new technologie	<u>s</u>				1
	(Grants \$ ) If this amoun	t includes foreign gra	ints, check here .	<u> </u>	28a	89,000
29	Monitoring existing patent related technologies					
					1	
	(Grants \$ ) If this amoun	t includes foreign gra	ints, check here .	▶ □	298	27,000
30						
					}	}
	(Grants \$ ) If this amoun	t includes foreign gra	ints, check here .	▶ 🗀	30a	<b>,</b>
31	Other program services (describe in Schedule O)	, , ,				
		t includes foreign gra	ints, check here .	▶ 🗆	312	1
32	Total program service expenses (add lines 28a				32	116,000
Par	List of Officers, Directors, Trustees, and Ke				nstru	
	Check if the organization used Schedul	e O to respond to a	ny question in this	Part IV		🗆
		(b) Average	(c) Reportable	(d) Health benefits,		
	(a) Name and title	hours per week	compensation (Forms W-2/1099-MISC	contributions to employ  benefit plans, and		ther compensation
		devoted to position	(if not paid, enter -0-			
Will	Vaughan					
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					}	
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			1	1	- }	

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Part	(			
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	Part		
22	Did the experience experience in any experience to the transfer of the transfe		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	00	ı	,
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed	33		✓
J-4	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the			
	change on Schedule O (see instructions)	34		1
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business	5		<u> </u>
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a	i	1
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		Ż
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,			<u> </u>
	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		1
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets		_	
	during the year? If "Yes," complete applicable parts of Schedule N	36		1
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0			
b	Did the organization file Form 1120-POL for this year?	37b		1
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were		<u> </u>	
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a	L	1
b	If "Yes," complete Schedule L, Part II and enter the total amount involved		i	
39	Section 501(c)(7) organizations Enter  Initiation fees and capital contributions included on line 9			
a b	Initiation fees and capital contributions included on line 9			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:	1		
40a	section 4911 ► 0, section 4912 ► 0, section 4955 ► 0			
ь	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958			
D	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year			
	that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		1
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed			
	on organization managers or disqualified persons during the year under sections 4912,			
	4955, and 4958 ▶o			1
d				
	40c reimbursed by the organization			}
е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter		ļ	<del>ا </del>
	transaction? If "Yes," complete Form 8886-T	40e	L	
41	List the states with which a copy of this return is filed	102.07	2 220	
42a		303-27	3-326	
h	Located at ► 1500 Illinois Street, Golden CO 80401 ZIP + 4 ►  At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
_	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	103	110
	If "Yes," enter the name of the foreign country: ▶			<del>                                     </del>
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and		1	
	Financial Accounts (FBAR).			
С	At any time during the calendar year, did the organization maintain an office outside the United States? .	42c		1
	If "Yes," enter the name of the foreign country. ▶			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here			▶ [
	and enter the amount of tax-exempt interest received or accrued during the tax year			
			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be	<u> </u>	ļ	-
_	completed instead of Form 990-EZ	44a	<u> </u>	1
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		<del> </del>	<del>  _,</del>
_		44b		1
۲ C	Did the organization receive any payments for indoor tanning services during the year?	44c		<b>↓</b> ✓
d	explanation in Schedule O	44d		1
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	440 45a	<del>                                     </del>	1
45a b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	73a	<del> </del>	<del>                                     </del>
	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of		ł	
	Form 990-EZ (see instructions)	45h		17

	•	
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46		organization engage, directly or in			on behalf o	f or in opposi	tion	es No
Part		idates for public office? If "Yes," of ection 501(c)(3) organizations		Part I	<u> </u>	<u> </u>	. 46	
Fait	— Al	I section 501(c)(3) organizations and 51.		stions 47-49b and	d 52, and	complete th	e tables for	lines
	CI	neck if the organization used Sci	nedule O to respond	to any question in	this Part	VI	<u> </u>	<u> 🛮</u>
47	year? If	organization engage in lobbying "Yes," complete Schedule C, Par	t II				tax . 47	res No
48 49a b 50	Did the If "Yes," Comple	rganization a school as described in organization make any transfers to "was the related organization a se te this table for the organization's ees) who each received more than	o an exempt non-cha ection 527 organization five highest compens	ritable related orgar n? sated employees (o	nization? . ther than c	officers, direct		
	(a) Na	me and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC	contributi benefit pla	ealth benefits, ons to employee ans, and deferred appensation	(e) Estimated other compo	
None								
					-			
			<del></del>		_[			
f 51	Comple	umber of other employees paid over the this table for the organization of compensation from the orga	s five highest compe		nt contract	_ tors who eacl	h received n	nore than
		ame and business address of each independ		(b) Type of se	ervice	(c	Compensation	ı
None								
			<del></del>			<del></del> -		
				1				
			·· ·	ļ				
						<del></del>		
d 52	Did the	umber of other independent contribe organization complete Scheduled in the contribution of the contributio		ection 501(c)(3) org	. ► ganizations 		h a .▶☑ Yes	
Under p	enalties of	perjury, I declare that I have examined this complete. Declaration of preparer (other that	return, including accompan n officer) is based on all info	ying schedules and state ormation of which prepare	ments, and to er has any kno	the best of my k owledge		
Sign Here		Signature of officer  W:11:a	han I	seasus-e	· C	4/27 / Date	17	
Paid	F	Print/Type preparer's name	Preparer's signature	-	Date	Check C	) If PTIN	
Prep		Firm's name			—	self-emple	byea	
Use	Only -	irm's address ▶				Phone no	<del></del>	
May t		iscuss this return with the prepare	r shown above? See	instructions .			► ☐ Yes	□No
							Form <b>990</b>	<b>-EZ</b> (2016)

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

▶ Attach to Form 990 or Form 990-EZ.

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Department of the Treasury Internal Revenue Service Name of the organization

Inspection Employer identification number

Mines Applied Technology Transfer Inc. Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is. (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state. 5 An organization 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 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) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations . . Provide the following information about the supported organization(s) (iii) Type of organization (i) Name of supported organization (ii) EIN (iv) is the organization (vi) Amount of (v) Amount of monetary (described on lines 1-10 listed in your governing support (see other support (see document? above (see instructions)) instructions) instructions) Yes No (A)(B) (C) (D) (E)

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

	n A. Public Support		γ	<del></del>		110010	(0 T-1-1
Calend	ar year (or fiscal year beginning in) 🕨	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
-	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	110,000	113,274	111,730	89,600	89,000	<u>513,604</u>
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
	The value of services or facilities furnished by a governmental unit to the organization without charge						540.004
4	Total. Add lines 1 through 3	110,000	113,274	111,730	89,600	89,000	513,604
	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	<u> </u>	<u> </u>			<u> </u>	513,604
Section	on B. Total Support	(-) 6040	(h) 0012	(c) 2014	(d) 2015	(e) 2016	(f) Total
Calend	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013 113,274		89,600		513,604
7	Amounts from line 4	110,000	113,274	111,730		00,000	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10				<u> </u>		513,604
12	Cross receipts from related activities, etc	c (see instruct	ions)			12	n 501(c)(3)
13	First five years. If the Form 990 is for to organization, check this box and stop h	the organization e <b>re</b>	in's first, seco	na, tnira, tourtr	i, or min tax y	· ·	. ▶ [
Sect	ion C. Computation of Public Suppo	rt Percenta	ge			<del></del>	
14	Public support percentage for 2016 (line	6, column (f) o	divided by line	11, column (f))		14	100 % %
15	D. I.I. Sent managed from 2015 St	shodulo A. Par	t II. line 14			15   21 more	
16a	331/3% support test—2016. If the orga	nization did no	ot check the bo	ox on line 13, a	ind line 14 is 3	3 73 76 OF ITIONS,	<b>&gt;</b> [7
	box and stop here. The organization qu	alifies as a pur	oliciy supporte	an line 12 or 1	 Sa and line 1		nore check
b	331/3% support test—2015. If the organization this box and stop here. The organization	n qualifies as a	a publicly supp	orted organiza	tion		
17a	10% or more, and if the organization reart VI how the organization meets the	neets the "fact "facts-and-cir 	s-and-circums cumstances"	test. The orgar	nization qualifi	es as a publicly	supported . ► [
b	15 is 10% or more, and if the organi Explain in Part VI how the organization	zation meets meets the "fa	the "facts-and acts-and-circur 	-circumstance: nstances" test	. The organiza	ation qualifies a	s a publicly
18	Private foundation. If the organization	did not check	a box on line 1	3, 16a, 16b, 17	a, or 17b, che	eck this box and	i see
	instructions	· · <u>· ·</u>		·			· · • [

#### Part III

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

	The organization ratio to quality	andor the to	oto notou boic	,, picade et	Jilipicto i art	<u>'''/                                   </u>	
	on A. Public Support	<del></del>	<del>,</del>		<del></del>		
	dar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees	ı	]				
_	received (Do not include any "unusual grants.")				<u> </u>		
2	Gross receipts from admissions, merchandise sold or services performed, or facilities		1		•		
	furnished in any activity that is related to the		1		İ		
	organization's tax-exempt purpose		}				
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513		] }		]		l
4	Tax revenues levied for the						
	organization's benefit and either paid		{		1		'
	to or expended on its behalf		(		4	1	
5	The value of services or facilities		<u> </u>		<del> </del>		
-	furnished by a governmental unit to the		ļ		Į		
	organization without charge		)		]	j ,	ı
6	Total. Add lines 1 through 5		<u> </u>		<del>                                     </del>		
7a	Amounts included on lines 1, 2, and 3	<del></del>		<del></del>	<del> </del>		
	received from disqualified persons		j l		1		ı
l.		<del></del>	<del>   </del>		<del></del>	<del> </del>	
b	Amounts included on lines 2 and 3	}			}		l
	received from other than disqualified persons that exceed the greater of \$5,000		}		}		l
	or 1% of the amount on line 13 for the year	,	}		}	]	
_	Add lines 7a and 7b				-	<del> </del>	<del></del>
C	Public support. (Subtract line 7c from		[i		<del></del>		<del></del>
8		-	, , , ,				
C4:	on B. Total Support	<u> </u>	<u> </u>	<del></del>	-	<u> </u>	
		(=) 0040	(-) 0010	(-) 0014	(4) 2015	(a) 0010	(0 T-1-1
	dar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9							
10a	Gross income from interest, dividends,	}	ļ			}	
	payments received on securities loans, rents, royalties and income from similar sources		Į i				
_	•		<del> </del>		<del></del>	<del></del>	
b	Unrelated business taxable income (less		į i	•		[	
	section 511 taxes) from businesses		}	ı	ł	}	•
	acquired after June 30, 1975 .		<u> </u>	·		ļ	<del></del>
С	Add lines 10a and 10b	<u> </u>	<del> </del>	L	ļ	ļ	<del></del>
11	Net income from unrelated business		)		}	]	
	activities not included in line 10b, whether	]	1				
	or not the business is regularly carried on				L		l
12	Other income Do not include gain or	}	1		l		
	loss from the sale of capital assets	}	1		l		
	(Explain in Part VI.)		<u> </u>	·	ļ.,		
13	Total support. (Add lines 9, 10c, 11,		-	·	]		
	and 12)	L					
14	First five years. If the Form 990 is for the	ne organization	n's first, secon	d, third, fourth	n, or fifth tax y	ear as a section	n 501(c)(3)
	organization, check this box and stop he	re	<u> </u>			_ · _ · ·	▶ □
Secti	on C. Computation of Public Suppor	rt Percentag	je				
15	Public support percentage for 2016 (line	8, column (f) d	ivided by line 1	3, column (f))		15	%
16	Public support percentage from 2015 Sci	hedule A, Part	III, lin <u>e</u> 15	·_ ·		16	%
Secti	on D. Computation of Investment In	come Perce	ntage				
17	Investment income percentage for 2016 (	line 10c, colur	nn (f) divided b	y line 13, colu	mn (f))	17	%
18	Investment income percentage from 2019					18	%
19a	331/3% support tests - 2016. If the organ					nore than 331/39	%, and line
	17 is not more than 331/3%, check this box						
b	331/3% support tests - 2015. If the organiz	-	-			_	
_	line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization di	-	_		•		

### Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Sect	ion	ΔΔ	11 5	upport	ina (	)raai	nizati	one
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			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).			
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer	2		
b	(b) and (c) below.  Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3a 3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
þ	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI.</b>	9c		
0a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	iva		<del> </del>
	determine whether the organization had excess business holdings.)	10b		

Part I	V Supporting Organizations (continued)			
			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)		<u>.</u> .	
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	<u> </u>	
Secur	on B. Type I Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	$\overline{}$	163	140
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
	organizations and what conditions of restrictions, if any, applied to such powers during the tax year.	1_		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	rganization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	<b>VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.			
Cootie		2	L	
Section	on C. Type II Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		163	140
•	or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control		ļ	
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	,		
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	†		
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	1		
	significant voice in the organization's investment policies and in directing the use of the organization's			(
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	<u> </u>		ļ
<u> </u>	on E. Type III Functionally Integrated Supporting Organizations	3	L	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see it	nstru	ction	<b>s</b> ).
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	<ul> <li>☐ The organization is the parent of each of its supported organizations. Complete line 3 below.</li> <li>☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (</li> </ul>	lega ir	etnici	lonel
С		500		
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		1	ļ
	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b> those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	1	Ī	
	that these activities constituted substantially all of its activities	2a	<del> </del> -	<del> </del>
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	-	<del> </del> -	
_	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these		<u> </u>	
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			1
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		<del> </del>	ļ
_	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b	<del> </del> -	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical	aniz	ations	an in Dort VIII Con
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organic	trusi zatıc	t on Nov. 20, 1970 (expl ons must complete Sect	ions A through E.
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	L.,		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI).			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	<u> </u>	
6 Multiply line 5 by 035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to	6		
7 Check here if the current year is the organization's first as a non-functional instructions)	lly ir	ntegrated Type III suppo	rting organization (se

Part '	Type III Non-Functionally Integrated 509(a)(3)	Supporting Organiz	ations (continued)	Compant Vana		
Section	on D - Distributions			Current Year		
1	Amounts paid to supported organizations to accomplish e					
2	Amounts paid to perform activity that directly furthers exempt purposes of supported					
	organizations, in excess of income from activity					
3	Administrative expenses paid to accomplish exempt purpose					
4	Amounts paid to acquire exempt-use assets					
5	Qualified set-aside amounts (prior IRS approval required)					
6	Other distributions (describe in Part VI) See instructions.					
7	Total annual distributions. Add lines 1 through 6					
8	8 Distributions to attentive supported organizations to which the organization is responsive					
	(provide details in <b>Part VI</b> ). See instructions.					
9	Distributable amount for 2016 from Section C, line 6					
10	Line 8 amount divided by Line 9 amount		(ii)	(iii)		
S	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2016	Distributable Amount for 2016		
1	Distributable amount for 2016 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required—explain in Part VI). See instructions					
3	Excess distributions carryover, if any, to 2016					
а						
b						
С	From 2013					
<u>-</u> d	From 2014					
e	From 2015					
f	Total of lines 3a through e					
g	Applied to underdistributions of prior years					
h	Applied to 2016 distributable amount		<del> </del>			
i	Carryover from 2011 not applied (see instructions)		<u> </u>			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.					
4	Distributions for 2016 from					
	Section D, line 7.					
а	Applied to underdistributions of prior years					
b	Applied to 2016 distributable amount					
C	Remainder. Subtract lines 4a and 4b from 4					
5	Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2 For result greater than zero, explain in Part VI. See instructions.					
6	Remaining underdistributions for 2016. Subtract lines 3t and 4b from line 1. For result greater than zero, explain Part VI. See instructions.	n n				
7	Excess distributions carryover to 2017. Add lines 3j and 4c.					
8	Breakdown of line 7			<del></del>		
	Excess from 2013					
	Excess from 2014					
	Excess from 2015					
	Excess from 2016					

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
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#### SCHEDULE O (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

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

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

Open to Public Inspection

Name of the organization	Employer identification number					
Mines Applied Technology Transfer Inc.	87-0715178					
Form 990-EZ, Part I, Line 10 - Grant amounts paid \$89,000 Proof of concept research grants.						
form 990-EZ, Part I, Line 16 - Colorado Secretary of State Registration Fee \$10.						
10111 330-L2, Farth, Line 10 - Colorado Secretary of State Registration Fee \$10.						
Form 990-EZ, Part II, Line 24 - prepaid expense \$2,083.						
Form 990-EZ, Part III, Organization's primary exempt purpose - To further the transfer of newly created technologies from the						
Colorado School of Mines to the private sector						
Odd Bao Science of Mines to the private Sector						