Department of the Treasury

Internal Revenue Service

Extended to November 15, 2019

# Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

Go to www.irs.gov/Form990 for instructions and the latest information. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No 1545-0047

•	A F	or th	e 2018 calendar year, or tax year beginning and	ending		
i	<b>B</b> c	heck if	C Name of organization		D Employer identif	ication number
		Addr	ge   ANOTELII DAKOLA SLACE UNIVERSITY FOUNDAL.		]	
	<u>X</u>	]Name	Doing business as NDSO FOURIGACTOR; NDSO FOURIG	dation	<del></del>	120898
		]Initial returi ]Final returi	Number and street (of P.U. DOX if mail is not delivered to street address)	Room/suite	E Telephone numbe (701	
		termi ated Amer	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	84,026,833.
	는	_Ireturr ∏Appli	raigo, ND 30102		H(a) Is this a group r	
_		tion tion	same as C above	172	for subordinates  H(b) Are all subordinates	
			xempt status X 501(c)(3) 501(c) ( ) ( (Insert no.) 4947(a)(1) c	or <b>527</b>	If "No," attach a	a list (see instructions)
			te: ▶ www.ndsufoundation.com		H(c) Group exemption	
, ,			forganization: X Corporation Trust Association Other	L Year	of formation: 1971	M State of legal domicile; ND
<u>,</u> [	Pa	rt I	Summary	5 J	<del> 3 7</del>	- <del> </del>
り	8	1	Briefly describe the organization's mission or most significant activities: Build	ing e	enduring rel	ationships
/	Activities & Governance		that maximize advocacy and philanthropy t			
	ē	2	Check this box  If the organization discontinued its operations or dispos	sed of more	1	
	<u>ا</u> ۾	3	Number of voting members of the governing body (Part VI, line 1a)		3	11
	ब्ह	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	11
	ies	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)		5	57
	Ĭ	6	Total number of volunteers (estimate if necessary)		6	345
	<u>ا</u> چ		Total unrelated business revenue from Part VIII, column (C), line 12		7a	328,257.
-	_	b	Net unrelated business taxable income from Form 990-T, line 38	1	7b	255,358.
	ı			<u> </u>	Prior Year	Current Year
	2 (Revenue	8	Contributions and grants (Part VIII, line 1h)	<u> </u>	46,535,740.	40,384,574.
	ē	9	Program service revenue (Part VIII, line 2g)	<u> </u>	560,758.	719,293.
Ç	短	10	Investment income (Part VIII, column (A), The section of the secti	<u> </u>	11,047,430.	16,439,761.
Č	ا 5	11	Other revenue (Part VIII, column (A), Ines 5, 6d, 8c, 9c, 10c, and 11e)	<u> </u>	-765,474.	169,939.
r.	_	12	Total revenue - add lines 8 through (must equal Part VIII, column (A), line 12)		57,378,454.	57,713,567.
+	1	13	Grants and similar amounts paid ( IX, NO um (A), [MPP] 1-3)	⊢	8,319,075.	14,445,602.
(	۱۲	14	Benefits paid to or for members (Part IX, column (A), line 4)		3,308,661.	3,912,517.
č	<u> </u>	15	Salaries, other compensation, employer benefits (Part IX, column (A), lines 5-10)	-	130,984.	115,209.
C	" "Expenses"	тьа	Professional fundraising fees (Part IX, column (A), line Te)	. H	130,304.	113,209.
Щ	いい		Total fundraising expenses (Part IX, column (D), line 25) 2,768,36	<del>)                                    </del>	2 627 655	3,569,145.
ź			Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	⊢	2,627,655.	22,042,473.
Y			Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		14,386,375.	
S	도양	19	Revenue less expenses Subtract line 18 from line 12		42,992,079.	f—————
- e	Fund Balances	^^	Total access (Dark V. Inc. 4C)		eginning of Current Year 322, 704, 523.	End of Year 333, 463, 251.
ç	闣	20	Total assets (Part X, line 16)		34,781,558.	29,627,047.
3	를		Total liabilities (Part X, line 26)	<del>  5</del>	287,922,965.	303,836,204.
ŕ	Ba Pa	<u>22</u> rt	Net assets or fund balances Subtract line 21 from line 20  Signature Block		101, 722, 703.	303,030,204.
			alties of perjury, I declare that I have examined this return, including accompanying schedules	and statem	ents, and to the best of m	v knowledge and belief, it is
		-	ct, and complete. Declaration of preparer (other than officer) is based on all information of whi			y knowledge and boller, it is
-	uo,	00110	T	ion propuror	1 2 1	er 21,2019
•	Sign		Signature of Officer	-	Date	<u> </u>
	dere		Allyson Peterson, CFO			
•	iei e	7	Type or print name and title			
_			Print/Type preparer's name Preparer's signature	11	Date Check	PTIN
F	aid		Deb Nelson, CPA Deb Nelson, CPA	1	.0/02/19 of self-employ	
	repa	arer	Firm's name Eide Bailly LLP		Firm's EIN	45-0250958
١.	Jse (		Firm's address 800 Nicollet Mall, Ste. 1300			
1	•		Minneapolis, MN 55402-7033		Phone no.61	2-253-6500
1-		the II	RS discuss this return with the preparer shown above? (see instructions)		1 110110 110.0 2	X Yes No
		1 12-3		ns.		Form <b>990</b> (2018)

Form	990 (2018) North Dakota State University Foundation 23-7120898 Page 2
ĮŖа	t   III   Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
4	Briefly describe the organization's mission.
•	Building enduring relationships that maximize advocacy and
	philanthropy to support North Dakota State University.
	philanemopy to support Noten banded bedge oniversity.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
4	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code) (Expenses \$ 9,454,985. including grants of \$ 9,454,985. ) (Revenue \$)
	Grants to NDSU for buildings, equipment, research, lectures, faculty
	development, supplies, travel and other departmental needs and
	activities not funded through state appropriations or student tuition
	fees.
4b	(Code ) (Expenses \$ 4,990,617. including grants of \$ 4,990,617.) (Revenue \$)
	Scholarships and awards to students enrolled at North Dakota State
	University selected by independent scholarship committees.
	Oniversity Befeeted by Independent Benefitship Committees.
	1 112 765
4c	(Code ) (Expenses \$ 1,112,765. including grants of \$ 0.) (Revenue \$ 754,084.)
	Alumni records, newsletters and special events such as Homecoming, city
	alumni/student exchanges. Sponsor University programs such as Harvest
	Bowl and Celebration of Excellence.
AI	Other program convece (Decarbe in Schedule O.)
4d	Other program services (Describe in Schedule O)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ► 15,558,367.
	Form <b>990</b> (2018)

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Part IV.	Checklist	of Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors	2_	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	ᡰ᠊ᡱ		
4	during the tax year? If "Yes," complete Schedule C, Part II	4	х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	┝╌		<u> </u>
5	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8	X	<u> </u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?		7.7	
	If "Yes," complete Schedule D, Part IV	9	Х	
0	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	40	X	1
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	ODIES	Santa -
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
2	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		بنشقتين	135.
a	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	77	X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		x	
^-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	^	
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		х
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
J	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	х	
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			v
_	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		_X
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	46		Х
7	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	x	
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
_	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
-	complete Schedule G, Part III	19		X
0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
1	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	I	]	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	

North Dakota State University Foundation 23-7120898 Page 4 Form 990 (2018) |Part: IV| Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on X Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete X 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete X 24a Schedule K If "No," go to line 25a X b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease X any tax-exempt bonds? 24c 24d d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit 25a X transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete X 25b Schedule L. Part I 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," Х 26 complete Schedule L. Part II 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member X 27 of any of these persons? If "Yes," complete Schedule L, Part III 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) X a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a **b** A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, 28c director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

- 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M
- 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M
- Did the organization liquidate, terminate, or dissolve and cease operations? 31 If "Yes," complete Schedule N, Part I
- 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N. Part II
- 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I
- 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1
- 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
  - b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2
- Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2
- Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI
- Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 Note. All Form 990 filers are required to complete Schedule O

<b>PartV</b>	Statements Regarding Other IRS Filings and Tax Compliance
	Check if Schedule O contains a response or note to any line in this Part V

1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

;	Did the organization comply with backup withholding rules f	for reportable payments to vend	dors and reportable gaming
	(gambling) winnings to prize winners?		

Yes No

Form **990** (2018)

X

X

X

X

Х

X

X

Х

Х

X

X

29

30

31

32

33

34

35a

35b

36

37

a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b 11 Section 501(c)(12) organizations. Enter. a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 13b 13c 14a X  If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b					TV	T No.
field for the calendar year ending with or within the year covered by this return  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-fiel (see instructions)  3a. Did the organization have unrelated business gross incorred of \$1,000 or more duming the year?  1b. If Yea, I was titled a form 990 of 15 or they year? If You're in the your review an explanation in Schedule 0  4a. At any time duming the calendar year, did the organization have an interest in, or a signature or other authority over, a financial accountily Such as a bank account, secretives account, or other financial accounts (FBAR).  5b. Was the organization a party to a prohibited tax shelter fransaction at any time during the tax year?  5c. If Yes, enter the name of the foreign country be seen structions for fining requirements for FinCEN Form 114. Report of Foreign Bank and Financial Accounts (FBAR).  5c. Was the organization a party to a prohibited tax shelter fransaction at any time during the tax year?  5c. If Yes, or interest the any ordity the regimentation of the tax year?  5c. If Yes, or interest the any ordity the regimentation of the organization has the was or a party to a prohibited tax shelter transaction?  5c. If Yes, or interest the any ordity the vasor or a party to a prohibited tax shelter transaction?  5c. If Yes, or interest the any ordity the vasor or a party to a prohibited that shelter than \$100,000, and did the organization solution and party to a prohibited tax shelter transaction?  5c. If Yes, or interest the organization miles excelled the organization shelt was required to the organization receive applient in excess of \$5 made party as a contribution of party for ordity organization shelt was required to the organization organization shelt party and the organization file Form 8990 as required?  6c. If Yes, organization shelt party time organization files for matery to pay prem	2a	Enter the number of employees reported on Form W.3. Transmittal of Wage and Tax Statements.	1 1	544-0234 57-0234	Yes	No
b If at least one is reported on line 2a, did the organization file all required feederal employment tax returns?  Note. If the sum of lines 1 and 2a sy grater than 250, you may be required to Are (see instructions)  3a Data the organization have unrelated business gross income of \$1,000 or more during the year?  b If "Yes," has it filed a Form 990 T for this year? If "No" to line 3b, provide an explanation in Schedule 0  4a. At any time during the Calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country business. We will be organization from the country of the properties account, or other financial accounts?  5b If "Yes," and the mane of the foreign country business. Was the organization for progregory and the foreign group and the foreign country business. Was the organization party to a prohibitor tax shelter transaction at any time during the tax year?  6c Dest the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles of calentable contributions?  6c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles of calentable contributions?  7c granizations that may receive deductible on this promote that the contributions of the state of the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles of calentable contributions on the state of the organization may receive deductible on this promote of the state of the goods or services provided to the payor?  7b If "Yes," indicate the number of Forms 9282 filed during the year of the organization receives a contribution of qualified reliectual property, did the organization file a Form 1098 C?  7d If the organization received a contribution of a donor, donor adversor or leasted person?  7d Section 501(c)(X) organizations. Enter:			2a	57	A COTABLE A	# PER 1
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-fiel (see instructions) 3	b	• • • • • • • • • • • • • • • • • • • •	<u> </u>	2b	X	J.ASJ KRASE
38 Dd the organization have unrelated business gross income of \$1,000 or more during the year?  41 A lary time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, or other financial account in a foreign country.)  52 Was the organization a foreign country.  53 Was the organization and the foreign country.  54 Was the organization of the foreign country.  55 Was the organization of the organization free has helter transaction at any time during the tax year?  56 Was the organization and the organization free from 888-17.  56 Was the organization have annual gross recepts that are normally greater than \$100,000, and did the organization solicit any contributions have annual gross recepts that are normally greater than \$100,000, and did the organization solicit any contributions that may receive deductible as charitable contributions?  56 Dash Was the organization have annual gross recepts that are normally greater than \$100,000, and did the organization solicit any contributions that may receive deductible contributions under section 170(c).  57 Day the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?  58 Day the organization receive any tunds, directly or indirectly, to pay premiums on a personal benefit contract?  59 Did the organization received a contribution of qualified intellectual property, did the organization file a Form 108-02 to the organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds.  50 Did the organizations maintaining donor advised funds.  50 Did the organizations maintaining donor advised funds.  51 Did the organizations maintaining donor advised funds.  52 Section \$501(x)(12) organizations. Enter.  53 Section \$501(x)(12) organizations. Enter.  54 Section \$501(x)(12) organizations. Enter secured to ma	_	· · · · · · · · · · · · · · · · · · ·		ARLINESES LETTATES REAL CONTR	TERRITA I	ALL TRACE
b if Yes,* instal filed a Form 990-T for this year? If 'No* to live 3b, provide an explanation on Schedule O  A rary time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  b if Yes,* ineter the name of the foreign country Securities. See instructions for filing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  55 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  56 Was the organization and the organization file Form 8888-1?  57 Urganization shall have annual gross receipts that are normally greater than \$100,000, and did the organization solicial any contributions that were not tax deductible as charitable contributions?  58 If Yes,* indict the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible as charitable contributions?  59 If Yes,* indicate the number of Forms 8282 filed during the year  50 If the organization receive a pyment in excess of \$75 made party sa a confribution and party for goods and services provided?  50 If the organization received a contribution of cars, boats, amplanes, or other vehicles, did the organization fellowers any funds, directly or indirectly, to pay premiums on a personal benefit contract?  70 If the organization received a contribution of cars, boats, amplanes, or other vehicles, did the organization file a Form 1098 C?  71 Sponsoring organizations maintaining donor advised funds.  72 If the organization received a contribution of cars, boats, amplanes, or other vehicles, did the organization file a Form 1098 C?  73 Sponsoring organizations maintaining donor advised funds.  74 If the organization received an ontribution of cars, boats, amplanes, or other vehicles, did the organization file a Form 1098 C?  75 Section 501(c) 17 organizations inclu	За		•	3a	X	
4. A Any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts (FBAR).  5. If 'Yes, 'enter the name of the foreign country ▶  5. Was the organization a party to a prohibete tax whether transaction at any time during the tax year.  5. B of any texable party notify the organization that it was or is a party to a prohibete tax shelter transaction?  6. C os the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible is charitable contributions?  7. D reganizations have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that the war for tax deductible is charitable contributions?  7. D reganizations that may receive deductible contributions under section 170(c).  8. Did the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible as charitable contributions and party for goods and services provided to the payor?  7. D reganizations that may receive deductible contributions under section 170(c).  8. Did the organization norbity the donor of the value of the goods or services provided?  9. If 'Yes,' indicate the number of forms 2822 filed during the year  1. Did the organization received a contribution of qualified intellectual property, did the organization file 7 forms 2822 filed during the year  1. Did the organization received a contribution of a pushfectual property, did the organization file 3 form 1088 c?  8. Did the sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds.  9. Sponsoring organizations maintaini			o	3b	X	
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b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  6 If "Yes" to line Sa or 55, did the organization file Form 8886-T7  8 Does the organization has annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  8 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  9 Organizations that may receive deductible contributions under section 170(c).  10 If the organization receive apyment in excess of \$75 made party is a contribution and party for goods and services provided to the payor?  10 If "Yes," idid the organization notity the donor of the value of the goods or services provided?  11 If "Yes," indicate the number of Forms 8282 filed during the year  12 Lot the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  12 Lot the organization received a contribution of qualified infellectual property, did the organization file Form 8989 as required?  13 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 899 as required?  14 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 899 as required?  15 If the organization serior were excess business biolidings at any time during the year?  16 Job the sponsoring organizations maintaining donor advised funds.  17 Job the organization serior were excess business biolidings at any time during the year?  18 Job this possoring organization make at distribution to a donor, donor advised fund maintained by the sponsoring organization make at distribution to a donor, donor advised fund maintained by the sponsoring organization make at distribution to a donor, donor advised fund the maintained property did the organization to the secti		See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	Accounts (FBAR).	EVELETIES RYELFINE LEGISTORY MENERALITY LLEIERGE		
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If "Yes," complete Form 4720, Schedule O.			at income?		ENIMACES.	THE T
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		II Tes, complete Form 4720, Scriedule O.		Forn		(2018)

Form 990 (2018) North Dakota State University Foundation 23-/120898 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

•	Check if Schedule O contains a response or note to any line in this Part VI						<u>X</u>					
Sec	tion A. Governing Body and Management											
						Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		11	×	it jakang	ux ¥					
	If there are material differences in voting rights among members of the governing body, or if the governing			27. 5:	114	J. China	, 1					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			T.	ka	17 (EP # 1)	, a					
b	Enter the number of voting members included in line 1a, above, who are independent	1b		11		120	1000					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other											
	officer, director, trustee, or key employee?											
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision											
_	of officers, directors, or trustees, or key employees to a management company or other person?											
4	Did the organization make any significant changes to its governing documents since the prior Form	990 w	as filed?		4	X						
5	Did the organization become aware during the year of a significant diversion of the organization's as				5		X					
6	Did the organization have members or stockholders?				6		X					
	Did the organization have members, stockholders, or other persons who had the power to elect or a	nioga	t one or									
-	more members of the governing body?				7a	X						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, or									
	persons other than the governing body?		•		7b		X					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye	ar by th	ne following:	150	je i		i di serit.					
	The governing body?	-			Ba	X						
	Each committee with authority to act on behalf of the governing body?				Bb		X					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ached	at the									
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9		X					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	Revenu	e Code )									
						Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?			<b>1</b>	0a		X					
	If "Yes," did the organization have written policies and procedures governing the activities of such c	hapte	rs, affiliates,									
	and branches to ensure their operations are consistent with the organization's exempt purposes?	-		1	οь							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	dy befo	ore filing the form	n? [1	1a	Х						
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			7*** ATA	.'' . <b></b> !	balker K	7 15° 1.50 1.00 1.00 1.00 1.00 1.00 1.00 1.00					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			1	2a	X						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	e to cor	ıflıcts?	1	2b	X						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," d	lescnbe									
	ın Schedule O how this was done			<u> 1</u>	2c	Х						
13	Did the organization have a written whistleblower policy?			L	13	Х						
14	Did the organization have a written document retention and destruction policy?			L	14	Х						
15	Did the process for determining compensation of the following persons include a review and approv	al by II	ndependent	11.2.		5 J. 19	läpi 5					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	)		, - 	 	- 186 						
а	The organization's CEO, Executive Director, or top management official			<u> </u>	5a	X						
b	Other officers or key employees of the organization			1	5b	X	11-					
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			1 1	PER I	Light Tark						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	with a	عبدا		Tre.	erigii d					
	taxable entity during the year?			<u> </u>	6a	5,	X					
þ	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate			142 ) 14 19 14 19	75							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organic	nızatıc	on's									
	exempt status with respect to such arrangements?	_			6b							
	tion C. Disclosure	(	IT MIL CO	TIM	173	NT T						
17	List the states with which a copy of this Form 990 is required to be filed MN, CA, AK, MD, M											
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and	nd 990	FI (Section 501	(c)(3)s (	only)	availa	ble					
	for public inspection. Indicate how you made these available. Check all that apply.		L - d. d - C)									
	X Own website Another's website X Upon request Other (explain					. 1						
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	inflict (	or interest policy	, and fi	nano	cial						
	statements available to the public during the tax year	1										
20	State the name, address, and telephone number of the person who possesses the organization's bo	oks a	na recoras -									
	Allyson Peterson, CFO - 701-231-6820											

Form 990 (2018)					Foundation	23-7120898	Page				
Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated											
Employe	es, and Indepe	ndent Con	tractors								

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

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

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

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

(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	(do		Pos heck		) than	one	Reportable	Reportable	Estimated
	hours per					ıs bot or/trus		compensation	compensation	amount of
	week (list any				Π		Ĺ	from the	from related organizations	other compensation
	hours for	direc						organization	(W-2/1099-MISC)	from the
	related	tee or	ustee			ensate		(W-2/1099-MISC)	,	organization
	organizations	a trus	nal tr		loyee	dwo:	ŀ			and related
	(list any hours for related organizations below line)	gwgn	Institutional trustee	Officer	Кеу етріоуее	Highest compensated employee	rmer.			organizations
(1) Michael Krueger	2.00	흐	드	10	\₹_	훈등	윤			
Chair of the Board	2.00	X		X				0.	0.	0.
(2) Gary Paulsrud	2.50			-	$\vdash$	<del>                                     </del>	_			
Vice Chair		x		х				0.	0.	0.
(3) Jenny Hopkins	2.00	<del>                                     </del>			$\vdash$					
Secretary		X		Х				0.	0.	0.
(4) John Erickson	2.00	T								•
Treasurer		X		X				0.	0.	0.
(5) Steven J. Swiontek	2.00									
EGB Member		X				_		0.	0.	0.
(6) Kathy Meagher	4.00								_	_
EGB Member		X						0.	0.	0.
(7) Robert E. Challey	7.50									
EGB Member		X	<u> </u>			<u> </u>		0.	0.	0.
(8) Connie Nicholas	2.00	,,			İ				•	•
EGB Member	1 00	Х	_			<u> </u>		0.	0.	0.
(9) Daniel J. Dunn	1.00							0.	0.	0.
EGB Member	1.00	Х	<u> </u>		┝	<u> </u>		0.	0.	
(10) Joel Honeyman EGB Member	1.00	x						0.	0.	0.
(11) James Hambrick	0.80	^	├─	_	├─				- 0.	
EGB Member	0.00	X						0.	0.	0.
(12) John Wold	1.50	<del> </del>	-		┢─		$\vdash$			
EGB Member (Jan-June)		x						0.	0.	0.
(13) John R. Glover	60.00									. –
President & CEO		1		Х				255,159.	0.	46,339.
(14) Allyson Peterson	40.00									
CFO		1		X				138,100.	0.	25,493.
(15) Monique Anderson	40.00									
VP of Development					L	Х		120,285.	0.	32,763.
<del></del> -		1			1					
		<u> </u>	Щ		<u> </u>	_	ļ			
	1		ı		l			1		

Form 990 (2018) North Da	kota Sta	ate	e l	Jn:	iv	ers	зi	ty Foundatio	n 23-7	1208	98 Page 8
Part VII Section A. Officers, Directors, Tru	stees, Key Em	ploy	/ees	, an	d H	ighe	st (	Compensated Employe	es (continued)		
(A)	(B)	1		_	C)			(D)	(E)		(F)
Name and title	Average	١		Pos	itior	1		Reportable	Reportable	e	Estimated
	hours per					than is bot			compensati		amount of
	week	offi	cer ar	nd a c	irecto	or/trus	tee)	from	from relate	d [	other
	(list any	흜				1		the \	organizatioi	ns 🖟	compensation
	ISC)	from the									
	related	e e	uste			E SS	l	(W-2/1099-MISC)			organization
	organizations	를	nalt		oğ	lig a	l				and related
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				organizations
	line)	르	Su	통	ş	돌	逐				
		1			ľ						
		<u> </u>	$ldsymbol{ld}}}}}}$	$ldsymbol{ld}}}}}}$	╙	$oxed{oxed}$					
		<u> </u>	_	L	╙	Щ				<b>—</b> ↓	<del></del>
		L			_	L.	L				
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		_	<u> </u>	L.	_	_	L				
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		_	lacksquare	ļ	_						
	<u> </u>										
	l		L	L	<u> </u>	Ш		F45 F44			104
1b Sub-total							<b>&gt;</b>	513,544.			104,595.
c Total from continuation sheets to Part \u220b	/II, Section A							0.		0.	0.
d Total (add lines 1b and 1c)							<u> </u>	513,544.			104,595.
2 Total number of individuals (including but	not limited to th	ose	liste	ed a	bove	e) wh	o r	eceived more than \$100	,000 of reportat	ole	_
compensation from the organization											3
										_	Yes No
3 Did the organization list any former office	r, director, or tru	uste	e, ke	y er	nplo	yee,	or	highest compensated ei	mployee on	ـــًا	
line 1a? If "Yes," complete Schedule J for											3 X
4 For any individual listed on line 1a, is the s									the organization		
and related organizations greater than \$1											4 X
5 Did any person listed on line 1a receive or	accrue compe	nsat	on f	rom	any	unr	elat	ted organization or indivi	dual for services	3 <u> </u>	
rendered to the organization? If "Yes," con	nplete Schedul	e J f	or su	ıch	pers	on			<u> </u>		5 X
Section B. Independent Contractors											
1 Complete this table for your five highest c	ompensated in	depe	ende	nt c	ontr	acto	rs t	that received more than	\$100,000 of cor	npensatı	on from
the organization Report compensation fo	the calendar y	ear e	endi	ng v	vith	or w	thir	n the organization's tax y	/ear		
(A)								(B)		_	(C)
Name and busines	s address							Description of s	ervices	Con	npensation
SEI							- 1	Investment		_	
100 Cider Mill Road, Oak	s, PA 19	45	6					Management		1,:	<u>142,650.</u>
Ologie	_				_						

447 East Main St., Columbus , OH 43215 Campaign Marketing <u>202,804.</u> Media Productions, LLC, 3241 University Video/Audio Drive S, Fargo, ND 58104-6221 Production 158,100. Ruffalo Noel Levitz Professional PO BOX 718, Des Moines, IA 50303-0718. Fundraiser 115,209. Bentz Whaley Flessner 7521 Ohms Lane, Minneapolis, MN 55439 Campaign Consulting 101,394. NOT A TOTAL THE PROPERTY OF TH Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

Statement of Revenue Part VIII Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded from tax under Related or Unrelated Total revenue exempt function business sections 512 - 514 revenue revenue Gifts, Grants llar Amounts 1a 1 a Federated campaigns 1b b Membership dues 286,625, 1c c Fundraising events d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 40,097,949 similar amounts not included above 20,508,900 g Noncash contributions included in lines 1a-1f \$ 40,384,574 h Total. Add lines 1a-1f Business Code 2 a Alumni Records Fees 588,409 611710 588,409 Program Service Revenue 73,487 611710 73,487 Program Event Revenue 900099 57,397 57,397 Miscellaneous Income f All other program service revenue 719, 293. Militari Maria Maria Dimini di Maria Militari di Maria M Total. Add lines 2a-2f Investment income (including dividends, interest, and 12,780,432 304,525 12,475,907. other similar amounts) 4 Income from investment of tax-exempt bond proceeds 261 394. 261,394 Royalties (ii) Personal (i) Real 2,507,920 6 a Gross rents 2,649,804. b Less: rental expenses -141,884. c Rental income or (loss) -141,884 -141.884 d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of 27,040,547. 34,874. assets other than inventory b Less: cost or other basis 49.550 23,366,542. and sales expenses 3,674,005. -14,676. c Gain or (loss) 3 659 329 3,659,329. d Net gain or (loss) 8 a Gross income from fundraising events (not Revenue 286,625. of including \$ contributions reported on line 1c) See 239,276 Part IV, line 18 Other 247,370, b Less direct expenses -8,094 -8,094. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less. direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 34,791 and allowances 0 b Less cost of goods sold 34,791 c Net income or (loss) from sales of inventory 34,791 \* Miscellaneous Revenue Business Code 11 a Alumni Travel 561500 13,761 13,761 524298 7,496 7,496 b Alumni Insurance, Net 2,475. Advertising 900099 2,475 d All other revenue darrende engelikken kanteken skrive Tringe berek kerteken kanteken kantek Tringe berek kerteken kanteken 23,732 Total. Add lines 11a-11d 57,713,567 754,084 328,257. 16,246,652 Total revenue. See instructions

Form 990 (2018) North Dakota State University Foundation 23
Part X Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

Section 50 (C)(3) and 50 (C)(4) organizations must complete all columns. All other organizations must complete column (4)						
<u>.</u>	Check if Schedule O contains a respon	nse or note to any line in  (A)	this Part IX (B)	(C)	(D)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service	Management and	(D) Fundraising	
			expenses	general expenses	expenses	
1	Grants and other assistance to domestic organizations	14,445,602.	14,445,602.	A THE REPORT THE PROPERTY OF T	AND THE PROPERTY OF THE PROPER	
	and domestic governments. See Part IV, line 21	14,445,002.	14,443,002.	NA SECTION OF THE PROPERTY OF	}653864863942456568646663665765666666665255 }99866386834242687768665665777766666666655555	
2	Grants and other assistance to domestic			THE STATE OF THE S	INCOMES TO A STATE OF THE STATE	
	ındıvıduals See Part IV, line 22			**************************************	######################################	
3	Grants and other assistance to foreign			ATILETTELETELETELETELETELETELETELETELETEL	A THE STATE OF THE	
	organizations, foreign governments, and foreign			PARKKETTAKETTA SEPTETUS SEPTETUS PARKETS PARKE	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	
	individuals See Part IV, lines 15 and 16					
4	Benefits paid to or for members					
5	Compensation of current officers, directors,	450 055	74 500	210 015	74 520	
	trustees, and key employees	459,955.	74,520.	310,915.	74,520.	
6	Compensation not included above, to disqualified					
	persons (as defined under section 4958(f)(1)) and					
	persons described in section 4958(c)(3)(B)	<u> </u>	200 161	050 044	1 226 000	
7	Other salaries and wages	2,515,494.	328,461.	850,811.	1,336,222.	
8	Pension plan accruals and contributions (include •	400 000	04 006	65 204	100 600	
	section 401(k) and 403(b) employer contributions)	198,399.	24,336.	65,381.	108,682.	
9	Other employee benefits	539,127.	70,980.	218,188.	249,959.	
10	Payroll taxes	199,542.	28,043.	69,268.	102,231.	
11	Fees for services (non-employees).				, *	
а	Management -			11 000		
b	Legal	44,929.		44,929.		
C	Accounting	43,653.		43,653.		
d	Lobbying				115-000	
е	Professional fundraising services. See Part IV, line 17	115,209.			115,209.	
f	Investment management fees	1,142,650.		1,142,650.		
g	Other. (If line 11g amount exceeds 10% of line 25,					
	column (A) amount, list line 11g expenses on Sch O.)	281,318.	206,095.	· 19,726.	55,497.	
12	Advertising and promotion	56,421.	36,070.	3,762.	16,589.	
13	Office expenses	257,130.	64,011.	101,971.	91,148.	
14	Information technology	149,784.	22,034.	48,455.	79,295.	
15	Royalties					
16	Occupancy	163,173.	10,539.	78,834.	73,800.	
17	Travel	311,462.	21,797.	76,574.	213,091.	
18	Payments of travel or entertainment expenses		*	į		
	for any federal, state, or local public officials				···· · ·	
19	Conferences, conventions, and meetings	128,503.	2,589.	120,268.	5,646.	
20	Interest .	241,966.		241,966.		
21	Payments to affiliates					
22	Depreciation, depletion, and amortization	164,249.	10,925.	76,816.	76,508.	
23	Insurance	66,628.	8,544.	27,336.	30,748.	
24	Other expenses. Itemize expenses not covered	STANDARDARDARDARDARDARDARDARDARDARDARDARDARD				
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)	ANNERS SERVICES SERVI	ATTENDED TO THE TOTAL PROPERTY OF THE TOTAL			
	amount, list line 24e expenses on Schedule 0.)					
а	Event Expense	304,806.	187,879.	90,262.	26,665.	
b	Public Relations/Donor	136,228.	15,942.	24,048.	96,238.	
С	Income Taxes	33,258.		33,258.		
d	Dues & Subscriptions	10,889.		10,889.		
e	All other expenses	32,098.		15,777.	16,321.	
25	Total functional expenses. Add lines 1 through 24e	22,042,473.	15,558,367.	3,715,737.	2,768,369.	
26	Joint costs. Complete this line only if the organization		(			
	reported in column (B) joint costs from a combined					
	educational campaign and fundraising solicitation.					
	Check here if following SOP 98-2 (ASC 958-720)		·		,	
832010	12-31-18	<del> </del>		<del></del>	Form <b>990</b> (2018)	

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) End of year Beginning of year 1 Cash - non-interest-bearing 10,030,453. 8,465,516. 2 Savings and temporary cash investments 2 37,472,585. 34,503,416. 3 3 Pledges and grants receivable, net 524,936. 584,711. 4 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr) Complete Part II of Sch L 900,289. 7 838,276. Notes and loans receivable, net 6,671. 8,211. 8 Inventories for sale or use 148,950. 222,855. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 57,204,645. 10a basis Complete Part VI of Schedule D 34,346,774. 35,653,324. 10b 22,857,871. 10c **b** Less accumulated depreciation 176,999,212. 158,890,989. 11 11 Investments - publicly traded securities 60,850,984. 92,596,636. 12 12 Investments - other securities See Part IV, line 11 Investments - program-related. See Part IV, line 11 13 13 14 14 Intangible assets 1,620,741. 1,502,245. 15 15 Other assets. See Part IV, line 11 322,704,523. 333,463,251. 16 Total assets. Add lines 1 through 15 (must equal line 34) 776,288. 1,196,346. 17 Accounts payable and accrued expenses 17 18 18 Grants payable 83,915. 17,404. 19 19 Deferred revenue 14,256,021. 20 13,235,308. 20 Tax-exempt bond liabilities 388,670. 289,004. 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 11,582,503. 8,076,241. 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of 7,694,161. 6,812,744. Schedule D 34,781,558. 29,627,047 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 32,646,634. 29,723,801. 27 27 Unrestricted net assets 73,904,339. 83,545,210. 28 28 Temporarily restricted net assets 181,371,992. 29 190,567,193. 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds 303,836,204. 287,922,965. 33 33 Total net assets or fund balances 322,704,523. 333,463,251. Total liabilities and net assets/fund balances

Forn	North Dakota State University Foundation	23-7	7120898	Pag	<sub>je</sub> 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			_	X
•					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	57,713	5,5	<u>67.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	22,042	2,4	<u>73.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3	35,671		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	287,922		
5	Net unrealized gains (losses) on investments	5	-20,108	8,8	<u>31.</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	350	),9'	76.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	303,836	, 2	04.
Рa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u> </u>
			,	Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a	AND AND A		
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	nin-akka-ak
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basıs,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,		,,	
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch		334444		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil	ngle Audr			**
	Act and OMB Circular A-133?		3a		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red audit		j	
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2018)

#### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

# **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

Open to Public

OMB No 1545-0047

Name of the organization

► Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number

23-7120898 North Dakota State University Foundation Part 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). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 2 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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 X 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) Я 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 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from 10 activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% 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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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) 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 III, 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) (iv) Is the organization listed (i) Name of supported (ii) EIN (III) Type of organization (v) Amount of monetary (vi) Amount of other our governing document? (described on lines 1.10 support (see instructions) support (see instructions) organization No above (see instructions))

Schedule A (Form 990 or 990-EZ) 2018 North Dakota State University Foundation 23-7120898 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III )

Sec	ction A. Public Support					,	
Cale	ndar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and	-					
	membership fees received. (Do not						
	ınclude any "unusual grants ")	39,910,767.	21,417,369.	27,887,284.	46,535,740.	40,384,574.	176,135,734.
2	Tax revenues levied for the organ-					•	•
	ization's benefit and either paid to						
	or expended on its behalf			·			
3	The value of services or facilities						
	furnished by a governmental unit to						,
	the organization without charge						
4	Total. Add lines 1 through 3	39,910,767.	21,417,369.	27,887,284.	46,535,740.	40,384,574.	176,135,734.
5	The portion of total contributions	THE STATE OF THE PROPERTY OF T	NEW-PERSONAL STREET, S	AT THE PROPERTY OF THE PROPERTY REPAIR OF THE PROPERTY OF THE			
	by each person (other than a						,
	governmental unit or publicly						
	supported organization) included			CONTROL OF THE CONTRO		CXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	-
	on line 1 that exceeds 2% of the	ANESTA PROPERTY AND THE PROPERTY OF THE CANADA PARTY OF THE PROPERTY OF THE PR	CENTES BEFREI BETREITEN FRENKEN EN SEN SEN SEN SEN SEN SEN SEN SEN SE	AKKNIK PERKANNAN AND PERSONAN  AND PERSONAN	NAMENTAL NAM	CREATED AND CONTROL OF THE CONTROL OF THE CREATED AND CONTROL OF THE CREATE	-
	amount shown on line 11,	ALTERNATURE PROPERTY OF THE PR	CANTERNATE AND TOTAL AND THE STREET	An accessing the same of the second statements of the second seco	CANALANA EN PARAMENTA ARABAN AND AND AND AND AND AND AND AND AND A	NAMES OF THE PROPERTY OF THE P	
i	column (f)	AND MANAGEMENT OF THE STREET O					59,322,275.
	Public support. Subtract line 5 from line 4						116,813,459.
Sec	ction B. Total Support				·		
Cale	ndar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	(e) 2018	(f) Total
7	Amounts from line 4	39,910,767.	21,417,369.	27,887,284.	46,535,740.	40,384,574.	176,135,734.
8	Gross income from interest,						
	dividends, payments received on						•
	securities loans, rents, royalties,						
	and income from similar sources	5,050,404.	5,034,769.	6,616,354.	11,694,759.	15,549,746.	43,946,032.
· 9	Net income from unrelated business						r
	activities, whether or not the	45 245	40.044	10 144			265 521
	business is regularly carried on	45,315.	47,714.	18,144.		256,358.	367,531.
10	Other income Do not include gain	٠.	• •			,	-
	or loss from the sale of capital			j	*.		4
	assets (Explain in Part VI)	4HMMMICKKNARKKAKAKITAFAKAFAAFAAF	produkturu partakai produkti p	rentranann hentre af eicheaffen eich	annanananan arkun barbarak karanan	errara pa Tennunkan keranga - langan kapanya '	
11	Total support. Add lines 7 through 10						220,449,297.
12	Gross receipts from related activities,		•	•			<u>,718,647.</u>
13	First five years. If the Form 990 is for	-	first, second, thir	d, fourth, or fifth ta	ix year as a sectio	n 501(c)(3)	
200	organization, check this box and stop ction C. Computation of Publ	here	rcentage	•		•	
				al (6)		44	52.99 %
	Public support percentage for 2018 (I	, ,,,	•	olumn (1))		14   15	== 00
	Public support percentage from 2017			n han 10 and han 1	14 22 1/20/		
10a	33 1/3% support test - 2018. If the containing the support test - 2018 are the support	_			14 15 33 1/370 01 11	iore, check this bo	►X
	<b>stop here.</b> The organization qualifies <b>33 1/3% support test - 2017.</b> If the o		_		lino 15 io 22 1/20/	or more, check th	•
D					III I I I I I I I I I I I I I I I I I	or more, check in	IIS DOX
17-	and stop here. The organization quali 10% -facts-and-circumstances test			-	13 16a or 16b /	and line 14 is 1004	or more
174	and if the organization meets the "fac						
	meets the "facts-and-circumstances"			-	•	. Trion the organ	
h	10% -facts-and-circumstances test	•	·		-	17a and line 15 is	10% or
J	more, and if the organization meets th	•					
	organization meets the "facts-and-circ						<b>▶</b> □
12	Private foundation. If the organization		-		-		
	i i i vate i variadation. Il tile organizatio	ii did not oncor <u>a</u>	557 GIT III IO 10, 100	., .oo,a, o. 17b	, Chook and DOX a	555 11134 45401	

Schedule A (Form 990 or 990-EZ) 2018  Part III   Support Schedule fo	North Dako	ta State Described in	Universit	y Foundat	ion23-712	0898 Page 3
(Complete only if you check					Part II If the organia	zation fails to
qualify under the tests lister						
Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and						
membership fees received (Do no	t					
ınclude any "unusual grants ")				<u> </u>		
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that					1	
are not an unrelated trade or bus-				/		
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to		ļ				
or expended on its behalf						
5 The value of services or facilities		İ		/		
furnished by a governmental unit to	0			1/		
the organization without charge		-		/		
6 Total. Add lines 1 through 5				<b></b>		
7a Amounts included on lines 1, 2, an	.d					
3 received from disqualified persor	ıs		/			
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year  c Add lines 7a and 7b	·		//	-		
8 Public support. (Subtract line 7c from line 6.)		<del>                                     </del>	1 /			·
Section B. Total Support			1	· · · · · · · · · · · · · · · · · · ·	·	<u></u>
Calendar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	/ (c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6			d			
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
<b>b</b> Unrelated business taxable income		/				
(less section 511 taxes) from business	es					
acquired after June 30, 1975		<del>  /                                   </del>		<del> </del>		
<ul> <li>c Add lines 10a and 10b</li> <li>11 Net income from unrelated busines activities not included in line 10b, whether or not the business is regularly carried on</li> </ul>	38					
12 Other income Do not include gain or loss from the sale of capital						-
assets (Explain in Part VI)  13 Total support (Add lines 9, 10c, 11, and 12	2)					
14 First five years. If the Form 990 is		s first, second, thi	rd, fourth, or fifth t	ax year as a section	on 501(c)(3) organiz	ation,
check this box and stop here						<u>▶□</u>
Section C. Computation of Pu	blic Support Pe	ercentage				
15 Public support percentage for 201	8 (line 8,/column (f), c	divided by line 13,	column (f))		15	%
16 Public support percentage from 20					16	%
Section D. Computation of Inv	estment Incom	e Percentage	<del>)</del>	<del></del>		
17 Investment income percentage for	29/18 (line 10c, colur	mn (f), divided by	line 13, column (f))		17	%
18 Investment income percentage fro	,				18	%
19a 33 1/3% support tests - 2018. If	=					7 is not
more than 33 1/3%, check this box						
b 33 1/3% support tests - 2017. If t						and
line 18 is not more than 83 1/3%, o						<b>&gt;</b>
20 Private foundation of the organiza	ition did not check a	box on line 14, 19	a, or 19b, check t		structions redule A (Form 990	or 990-E7\ 2019

# Schedule A (Form 990 or 990-EZ) 2018 North Dakota State University Foundation 23-7120898 Page 4

### 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)

### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 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 Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** 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 **Part VI** when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 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.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c 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 Part VI 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.
- 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 Part VI, 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)
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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 Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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)
- 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)
- 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 Part VI.
- **b** 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 Part VI.
- c 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 Part VI.
- 10a 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
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

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	edule A (Form 990 or 990 EZ) 2018 North Dakota State University Foundation 23-7.	<u> 12089</u>	8 <sub>.P</sub>	age 5
Pa	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	CALLEGUE AND DELLA		CHARLES OF THE PARTY OF THE PAR
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	THE THE THE THE TERMS OF THE TE	WAXE AND AND AND AND AND AND AND AND AND AND	TAXABLE TA
	below, the governing body of a supported organization?	11a		
h	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		
	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	THE SECTION AND A SECTION ASSESSMENT OF THE PERSON AND ASSESSMENT OF THE PERSON AND ASSESSMENT OF THE PERSON ASSESSMENT O	3-15-16-1	*********
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	TX I SELL MARKET KA	ATTERPENE	RECENT
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	TINKE THE AT THE	IX X THE THE	CENTRAL POR
	controlled the organization's activities. If the organization had more than one supported organization,	TENTENE MENTENE	CANAL OF A	CHARLES AND A STANKING AND A STANKIN
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	AMERICAN SAN SAN SAN SAN SAN SAN SAN SAN SAN S		ARRESTAN ARRESTAN ARRESTAN ARRESTAN
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	7400000	-6566011448	THE STATES
_		THE REPORT OF THE PERSON OF TH	PERSONAL	WALLES AND THE
2	Did the organization operate for the benefit of any supported organization other than the supported	CANAGE CANAGE		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	THE THE TEXT OF TEXT OF THE TEXT OF TEXT OF TEXT OF TEXT OF TEXT OF TEXT OF THE TEXT OF TEXT O	TANKARAN TANKARAN TANKARAN TANKARAN	EXXISTE EX
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	TANDAN MARKET	VIIII.	17,20,650
	supervised, or controlled the supporting organization.	2	L	<u> </u>
Sec	tion C. Type II Supporting Organizations			T
		dust diese	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	AND AND PROPERTY OF THE PROPER	AND THE RESERVE	********
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	AND THE STATE OF T	ARREST TO	THE REAL PROPERTY.
	or management of the supporting organization was vested in the same persons that controlled or managed	twint toke, the		Land Street
	the supported organization(s)	1	L	L
Sec	tion 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	TANK AND AND AND AND AND AND AND AND AND AND		XX (X X X X
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	THE CANADA AND THE CA	AND THE SECOND	CLAP LANGE
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	THE STREET, STATE		70000
	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	STATE TO TRANSPORT		MANGANA MANGANA MANGANA MANGANA
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	CANADACTAL		A PARTY
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		L
3	By reason of the relationship described in (2), did the organization's supported organizations have a	CERTAIN AND LANGE	THE STREET	CHANGE CONTRACTOR
	significant voice in the organization's investment policies and in directing the use of the organization's	SANTALAI PARKAICA SASARAN BERKAICA SASARAN BERKAICA SASARAN BARKAICA TATAN BERKAICA	CENTER TO SECURE	CENTRAL CONTRACTOR CON
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	SHEKKLI TERI SEKRET TERI SEKRET TERI SEKRET TERI SEKRET TERI	TERRET ATA	TRUE SE
	supported organizations played in this regard	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions	s).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see in	structions	s)	
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	THE STREET, T	CANADA S	THE PERSON
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	ANAROMIENA PE	***********	
	those supported organizations and explain how these activities directly furthered their exempt purposes,	TREETERS OF	ALXERS AT	
	how the organization was responsive to those supported organizations, and how the organization determined	THE PERSONNEL STREET	A STATE OF THE STA	
	that these activities constituted substantially all of its activities.	2a		
ь	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
_	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the		MAKETE TO	AND WARRED
	reasons for the organization's position that its supported organization(s) would have engaged in these	THE PERSON NAMED IN THE PERSON NAMED IN THE PERSON NAMED IN THE PERSON NAMED IN THE PERSON NAMED IN THE PERSON NAMED IN THE PERSON NAMED IN THE PERSON NAMED IN THE PERSON NAMED IN THE PERSON NAMED IN THE PERSON NAMED IN T	AND DESCRIPTION OF THE PROPERTY OF THE PROPERT	
	activities but for the organization's involvement	2b	AND DESCRIPTION AND DESCRIPTIO	USES CUESTI
2	•		TREE PER	L. Marie
3	Parent of Supported Organizations. Answer (a) and (b) below.	CHEST PERSONS CHEST PERSONS CH	TREAST AND THE SECOND S	MALANASA MAN
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	2-	(144 HARRIST)	362438
	trustees of each of the supported organizations? <i>Provide details in</i> <b>Part VI.</b>	3a	ARCHARAS AND A	PARPERAR
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3b		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	1 00		

Schedule A (Form 990 or 990-EZ) 2018 North Dakota State University Foundation 23-7120898 Page 6 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (B) Current Year (A) Prior Year Section A - Adjusted Net Income (optional) 1 Net short-term capital gain 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 4 Add lines 1 through 3 5 Depreciation and depletion Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or 6 maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8

Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	IRXRAXARXXI PRXXXIPXR IRRAXAXXI IRRAXAIXXI IRXXXIIXXXX		
	instructions for short tax year or assets held for part of year).	CANADAKAN CANADAKAN CANADAKAN CANADAKAN CANADAKAN		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
ď	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		- PARKY LEATER NEW CONTROL THE RECENT AND THE RECEN
	factors (explain in detail in Part VI):	CXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		ALIENTANIA PROGRAMMANIA PROGRAMANIA PROGRAMMANIA PROGRAMMANIA PROGRAMMANIA PROGRAMMANIA PROGRAMA
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		
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		
Sect	ion 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			

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

emergency temporary reduction (see instructions)

instructions)

Schedule A (Form 990 or 990-EZ) 2018 North Dakota State University Foundation 23-7120898 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI) See instructions. 6 Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions Distributable amount for 2018 from Section C, line 6 Line 8 amount divided by line 9 amount 10 (iii) (ii) Underdistributions Distributable Section E - Distribution Allocations (see instructions) **Excess Distributions** Amount for 2018 Pre-2018 Distributable amount for 2018 from Section C, line 6 Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in Part VI) See instructions. 3 Excess distributions carryover, if any, to 2018 a From 2013 **b** From 2014 c From 2015 d From 2016 e 1 rom 2017 ងការស្រីសាលាលាលារបាលប្រហែលប្រហែល f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2018 distributable amount i Carryover from 2013 not applied (see instructions) Remainder Subtract lines 3g, 3h, and 3i from 3f Distributions for 2018 from Section D, a Applied to underdistributions of prior years **b** Applied to 2018 distributable amount c Remainder. Subtract lines 4a and 4b from 4. Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1 For result greater than zero, explain in Part VI See instructions Excess distributions carryover to 2019. Add lines 3) SALA SELECTION OF THE PROPERTY 8 Breakdown of line 7 a Excess from 2014 b Excess from 2015 c Excess from 2016 d Excess from 2017 TARRESTANTA DE LA CONTRACTOR DE LA CONTR 

e Excess from 2018

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)
	,

### SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Political Campaign and Lobbying Activities**

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.



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

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

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

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

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

	Section 501(c)(4), (5), or (6) organiza	ations. Complete Part III							
Nar	ne of organization				ployer identification number				
	North I	dation	23-7120898						
Pá	art:I-A Complete if the or	ganization is exempt unde	er section 501(c)	or is a section 527	organization.				
2	Provide a description of the organi Political campaign activity expendi Volunteer hours for political campa	tures	ıl campaıgn actıvities i		\$				
D	art(I=B   Complete if the or	nanization is exempt unde	er section 501(c)	(3)					
	Enter the amount of any excise tax				\$				
	Enter the amount of any excise tax				\$				
	If the organization incurred a section			· ·	Yes No				
	a Was a correction made?	511 7555 tax, aid it iii 7 5111 17 25 1	or and your.		Yes No				
	o if "Yes," describe in Part IV								
	artile Complete if the or	ganization is exempt unde	er section 501(c),	except section 50	(c)(3).				
1	Enter the amount directly expende	d by the filing organization for sec	tion 527 exempt funct	ion activities	\$				
2	Enter the amount of the filing organ	nization's funds contributed to oth	er organizations for se	ection 527					
	exempt function activities			•	\$				
3	Total exempt function expenditure	s Add lines 1 and 2. Enter here an	d on Form 1120-POL,						
	line 17b			•	\$				
	Did the filing organization file Form				Yes No				
5	Enter the names, addresses and e								
	made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political								
	contributions received that were pr	omptly and directly delivered to a	separate political orga	anization, such as a sepa					
	contributions received that were proportical action committee (PAC). If	omptly and directly delivered to a additional space is needed, provi	separate political orga de information in Part	anization, such as a sepa IV	rate segregated fund or a				
	contributions received that were pr	omptly and directly delivered to a	separate political orga	anization, such as a sepa	(e) Amount of political contributions received and				
	contributions received that were proportical action committee (PAC). If	omptly and directly delivered to a additional space is needed, provi	separate political orga de information in Part	anization, such as a sepa IV (d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization				
	contributions received that were proportical action committee (PAC). If	omptly and directly delivered to a additional space is needed, provi	separate political orga de information in Part	anization, such as a sepa IV (d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization				
	contributions received that were proportical action committee (PAC). If	omptly and directly delivered to a additional space is needed, provi	separate political orga de information in Part	anization, such as a sepa IV (d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization				
	contributions received that were proportical action committee (PAC). If	omptly and directly delivered to a additional space is needed, provi	separate political orga de information in Part	anization, such as a sepa IV (d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization				
	contributions received that were proportical action committee (PAC). If	omptly and directly delivered to a additional space is needed, provi	separate political orga de information in Part	anization, such as a sepa IV (d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization				

Schedule C (Form 990 or 990-EZ) 2018 ]	North D	akot	a State Uni	versity Fou	ndatio 23-7	120898 Page 2
PartsIFA Complete if the org section 501(h)).	anization i	s exe	mpt under section	n 501(c)(3) and fi	led Form 5768 (e	lection under
A Check ► if the filing organization	tion belongs to	an aff	liated group (and list ii	Part IV each affiliated	group member's nan	ne, address, EIN,
expenses, and shar						
B Check Lifthe filing organization	tion checked t	ox A a	nd "limited control" pro	ovisions apply		T 40.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.
	ts on Lobbyin litures" mean	-	nditures unts paid or incurred.	)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ience public o	pinion (	grass roots lobbying)			
<b>b</b> Total lobbying expenditures to influ	-					
c Total lobbying expenditures (add lii	-					
d Other exempt purpose expenditure						
e Total exempt purpose expenditure		and 1	<b>d</b> )			
f Lobbying nontaxable amount Ente	er the amount	from th	e following table in bot	h columns		
If the amount on line 1e, column (a) o	r (b) is:	he lob	bying nontaxable am	ount is:	ARKAKAN PERENTAN PERE	
Not over \$500,000		20% of	the amount on line 1e			CAMERIA DE LA CONTRACTOR DEL CONTRACTOR DE LA CONTRACTOR DE LA CONTRACTOR DE LA CONTRACTOR DE LA CONTRACTOR DE LA CONTRACTOR DE LA CONTRACTOR DE LA CONTRACTOR DE LA CONTRACTOR DE LA CONTRACTOR DE LA CONTRACTOR DE LA CONTRACTOR DE LA CONTRACTOR DE LA CONTRACTOR DE LA CONTRACTOR DE LA CONTRACTOR DE LA CONTRACTOR DE LA CONTRACTOR DE LA CONTRACTOR
Over \$500,000 but not over \$1,000	0,000	100,00	00 plus 15% of the exc	ess over \$500,000.	TERRITARIAN TERRIT	HENERATE SENSE SEN
Over \$1,000,000 but not over \$1,5	00,000	175,00	00 plus 10% of the exc	ess over \$1,000,000.	TARREST CONTROL OF THE CONTROL OF TH	
Over \$1,500,000 but not over \$17,	000,000	225,00	00 plus 5% of the exce	ss over \$1,500,000.	A PART OF THE PART	ENTRY DEFINITION OF THE STATE O
Over \$17,000,000		1,000,	000		CARLES AND AND AND AND AND AND AND AND AND AND	
<u></u>						
g Grassroots nontaxable amount (en	ter 25% of line	1f)				ļ <u> </u>
h Subtract line 1g from line 1a If zero	o or less, enter	-0-		1		
i Subtract line 1f from line 1c If zero	•					<u> </u>
j If there is an amount other than zer		e 1h or	line 1, did the organiz	ation file Form 4720	Г	
reporting section 4911 tax for this				0 11 5040		Yes No
(Some organizations th	nat made a se	ction 5	eraging Period Under 01(h) election do not ate instructions for li	have to complete all	of the five columns b	elow.
	Lobbying	Expe	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2015	i	、 <b>(b)</b> 2016	<b>(c)</b> 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount					-	
b Lobbying ceiling amount	NAME OF THE PARTY	CARREST CONTRACTOR				
(150% of line 2a, column(e))	######################################	**************************************	THE STREET OF TH	AND THE PROPERTY OF THE PROPER	TRANSPORT ON THE OWNER AND THE SHARE THE STATE OF THE SHARE THE STATE OF THE SHARE THE STATE OF THE SHARE	
c Total lobbying expenditures						
d Greecreete nontavable amount						1
d Grassroots nontaxable amount e Grassroots ceiling amount		XXXX GANGRAN				
(150% of line 2d, column (e))		236600000000000000000000000000000000000				,
f Grassroots lobbying expenditures					Schedule C (Forn	1 990 or 990-EZ) 2018

# Schedule C (Form 990 or 990-EZ) 2018 North Dakota State University Foundatio 23-7120898 Page 3 Part II-B. Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(;	a)	(l	o)
of the lobbying activity.	Yes	No	Amo	ount
During the year, did the filing organization attempt to influence foreign, national, state, or			THE STATE OF THE S	
local legislation, including any attempt to influence public opinion on a legislative matter	C. PR. GIRCLARDSCALL  C. PRINCIPLI DE STR.  PRINCIPLE DE STR.  PRINCIP	AND CONTRACTOR	NI CANADARA MANA	PRESENT TRANSPORTED TO THE PROPERTY OF THE PRO
or referendum, through the use of	TRANSPORTER	PATRICK SERVICES	TAREST NAME OF THE PARTY OF THE	CANACHARAN TITAL AND CANACA CA
a Volunteers?	X		PORTRE NAME OF THE PROPERTY OF	THE STATE OF THE S
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	T. BENERALINAKUUK AF PE-KASTRALA JAHU SA BENERALINAKUN JAHU	
c Media advertisements?		X		
d Mailings to members, legislators, or the public?		X		
e Publications, or published or broadcast statements?		X		
f Grants to other organizations for lobbying purposes?		X		
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X		
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X		
i Other activities?		Х		
j Total Add lines 1c through 1i	20 10 10 10 10 10 10 10 10 10 10 10 10 10			0.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	ALEGARAN PERSENTAL MESTAL MEST	ALL AND A STANDARD OF THE STAN
b If "Yes," enter the amount of any tax incurred under section 4912	CHEST STATES OF THE STATES OF	AND THE PARTY OF T		
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912		Handle Britains		
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			THE SAME AND ASSET TO THE PARTY OF THE PARTY	
Part III-A Complete if the organization is exempt under section 501(c)(4), sec	tion 501(c)	(5), or se	ection	
501(c)(6).				
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from Partelli-B Complete if the organization is exempt under section 501(c)(4), sec	the prior yea	r? <b>3</b>		
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes."		R (b) Par		ne 3, is
1 Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	iticai	A MANAGEMENT OF A STANKING THE ASSET OF A STANKING THE ASSET OF A STANKING THE ASSET OF A STANKING TO A STANKING THE ASSET OF		
expenses for which the section 527(f) tax was paid).		THE REAL SER		
a Current year		2a_		
b Carryover from last year		2b		
c Total		2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the e		######################################		
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	d political	ATTICKTURE AR ALAXAF ALA ALAXAF ALA ANAMAZARA		
expenditure next year?		4		
5 Taxable amount of lobbying and political expenditures (see instructions)		5		
Rart V Supplemental Information			10/	
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro	up list); Part II	I-A, lines 1 a	and 2 (see	
nstructions); and Part II-B, line 1 Also, complete this part for any additional information  Part II-B, Line 1, Lobbying Activities:				
A group of NDSU alumni volunteers, named the Bison C	aucus,	have	contac	t
with legislators to educate them on the needs of the	univer	sity	and	
higher education in general.				

# **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Name of the organization

North Dakota State University Foundation

**Employer identification number** 23-7120898

Schedule D (Form 990) 2018

Pa	rt I Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's	_	Yes No
6	Did the organization inform all grantees, donors, and donor a		e used only
	for charitable purposes and not for the benefit of the donor o		
	impermissible private benefit?		Yes No
Pa	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply)	
	Preservation of land for public use (e.g., recreation or e	ducation) Preservation of a his	torically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	of a conservation easement on the last
	day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
ь	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stri	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 7/25/06, and not on a historic struc	ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by th	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas	sement is located >	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it		└── Yes
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cor	servation easements during the year
	<b></b>		
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserv	ation easements during the year
	<b>▶</b> \$		
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170	r—
	and section 170(h)(4)(B)(ii)?		└── Yes
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes	the organization's accounting for
<b>D</b> -	conservation easements.	Art Historical Tressures or C	Ather Cimilar Assets
Pal	t III Organizations Maintaining Collections of		Amer Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public exh		ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describe		A
þ	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pu	ublic service, provide the following amounts
	relating to these items		<b>.</b>
	(i) Revenue included on Form 990, Part VIII, line 1		\$ 89,447.
_	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treations of		ai gaiii, provide
_	the following amounts required to be reported under SFAS 1:	to (ASC 936) relating to these items	<b>.</b> ¢
a	Revenue included on Form 990, Part VIII, line 1		<b>7</b>

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

	edule D (Form 990) 2018 North Dettills Organizations Maintaining C	akota Stat						L20898 e <b>ts</b> (continu			
3	Using the organization's acquisition, accessi										
	(check all that apply)	•	•	-	_						
а	X Public exhibition	d	Loan or exc	hange progra	ams						
b	X Scholarly research	e		0.0							
c											
4	The state of the s										
5	During the year, did the organization solicit o										
_	to be sold to raise funds rather than to be ma						[]	Yes	☐ No		
Pa	tilly Escrow and Custodial Arran				'Yes" on F	orm 99					
	reported an amount on Form 990, Part X, line 21.										
1a	Is the organization an agent, trustee, custodi	an or other intermed	liary for contribution	s or other as	sets not ir	ncluded					
	on Form 990, Part X?		•					Yes	X No		
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table								
		•	J					Amount			
c	Beginning balance					1c					
	Additions during the year					1d					
e	Distributions during the year					1e					
f	Ending balance					1f					
	Did the organization include an amount on Fo	orm 990. Part X. line	21. for escrow or cu	ustodial acco	unt liabilit	v? 	<u> </u>	Yes	No		
	If "Yes," explain the arrangement in Part XIII					•			X		
	tiVa Endowment Funds. Complete it					)					
1.35		(a) Current year	(b) Prior year	(c) Two year			years back	(e) Four y	ears back		
1a	Beginning of year balance	206,293,111.	167,201,113.	142,674			10,237		989,430.		
b	Contributions	15,788,641.	22,709,487.	23,942		21,8	368,428.		991,952.		
c	Net investment earnings, gains, and losses	-4,115,595.	25,161,615.	10,454			756,349.	<del>}</del>	291,966.		
d	Grants or scholarships	4,324,523.	3,472,584.		7,074.		54,508.	+	362,106.		
e	Other expenditures for facilities	, , , , , ,	, , , , , , , , , , , , , , , , , , , ,					· · · · · ·			
·	and programs	2,747,102.	2,910,976.	4,539	954.	10.3	381,449.	.  .	367,726.		
f	Administrative expenses	2,721,832.	2,395,544.		3,031.		12,215.		33,279.		
g	End of year balance	208,172,700.	206,293,111.	167,201			574,144.	+	010,237.		
2	Provide the estimated percentage of the curr						•	<u> </u>	· -		
- а	Board designated or quasi-endowment	1.83	%	,,,							
ь	Permanent endowment > 84.40	%									
c		<del>3.7</del> 7 %									
·	The percentages on lines 2a, 2b, and 2c sho										
32	Are there endowment funds not in the posse		ation that are held a	nd administer	red for the	e organi	zation				
-	by	50.011 01 11.0 0. ga				· <b>J</b> - · · ·		[S	es No		
	(i) unrelated organizations							3a(i)	X		
	(ii) related organizations							3a(ii)	X		
h	If "Yes" on line 3a(ii), are the related organiza	tions listed as requir	ed on Schedule R?					3b			
4	Describe in Part XIII the intended uses of the								<del> </del>		
	tavia Land, Buildings, and Equipm										
,	Complete if the organization answered		). Part IV. line 11a S	See Form 990	, Part X, In	ne 10					
	Description of property	(a) Cost or o				cumulate	ed	(d) Book	value		
	besomption of property	basis (investr	' '			eciation		(4) 500			
12	Land	1,542,		<u>`                                    </u>				2,883	,882.		
	Buildings	5,290,		3,278.	17,60	65.0		0,028			
C	Leasehold improvements			6,515.		$\frac{15,2}{15}$			,249.		
d	Equipment			9,869.		15,4			,393.		
	Other	-		0,602.		62,1			,489.		
	. Add lines 1a through 1e (Column (d) must ed	gual Form 990, Part				•		4,346			

Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1	1b. See Form 990, Part X, line 12			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value			
(1) Financial derivatives					
(2) Closely-held equity interests					
(3) Other					
(A) Mineral Interest	8,587.	Cost			
(B) Partnership Funds	35,636,217.	End-of-Year Market Value			
(C) Real Estate Fund	10,044,915.	End-of-Year Market Value			
(D) Global hedge funds	29,468,917.	End-of-Year Market Value			
(E) Equity Method Investments	17,438,000.	End-of-Year Market Value			
(F)					
(G)					
(H)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	92,596,636.				

Part VIII Investments - Program Related.

Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c See Form 990, Part X, line 13.	
. (a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value	_
(1)			<u></u>
(2)			
(3)			<u> </u>
(4)			`
(5)			
(6)	-		<u></u> ,`
(7)			
(8)		, , , , , , , , , , , , , , , , , , , ,	
(9)			•
Total (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	n	(b) E	Book value	
(1)				
(2)				
(3)		-		
(4)				
(5)				•
(6)			_	
(7)				.•
(8)			_	•
(9)		(	. P	نـ
Total (Column (h) must equal Form 900, Part Y, col. (R) line 15.)				

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f See Form 990, Part X, line 25

1.	(a) Description of liability	(b) Book value	
(1)	Federal income taxes		
(2)	Gift Annuities Payable	2,821,743.	
(3)	Trusts Payable	3,750,983.	
(4)	Due To Fossum	37,412.	
(5)	Special Assessments Payable	202,606.	
(6)			
(7)			POTITION NEW TONING AND AND AND AND AND AND AND AND AND AND
(8)			
(9)			
Total.	(Column (b) must equal Form 990, Part X, col (B) line 25.)	<b>▶</b> 6,812,744.	

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

Sche	dule D (Form 990) 2018 North Dakota State U					7120898 Page 4
	Complete if the organization answered "Yes" on Form 990, Pal			•		
1	Total revenue, gains, and other support per audited financial stateme				1	
	Amounts included on line 1 but not on Form 990, Part VIII, line 12					
	Net unrealized gains (losses) on investments		2a			
b	Donated services and use of facilities		2b			
	Recoveries of prior year grants		2c			
	Other (Describe in Part XIII )		2d			
	Add lines 2a through 2d				2e	
3	Subtract line 2e from line 1				3	
	Amounts included on Form 990, Part VIII, line 12, but not on line 1			ľ		
	Investment expenses not included on Form 990, Part VIII, line 7b		4a			
	Other (Describe in Part XIII.)		4b			
	Add lines 4a and 4b		1		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, I	line 12.)		l	5	
Par	REXIII Reconciliation of Expenses per Audited Finance	ial Staten	ents With E	xpenses per	Retu	rn.
[-A	Complete if the organization answered "Yes" on Form 990, Pal					
1	Total expenses and losses per audited financial statements	······································			1	
	Amounts included on line 1 but not on Form 990, Part IX, line 25:			ľ		
	Donated services and use of facilities		2a			
	Prior year adjustments		2b			
	Other losses		2c			
	Other (Describe in Part XIII )		2d			
	Add lines 2a through 2d				2e	
	Subtract line 2e from line 1			·	3	
	Amounts included on Form 990, Part IX, line 25, but not on line 1					
	Investment expenses not included on Form 990, Part VIII, line 7b		4a			
	Other (Describe in Part XIII )		4b			
	Add lines 4a and 4b			-	4c	
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I,	. line 18 )		ľ	5	
Par	XXIII Supplemental Information.	<del>'</del>		•		· -
Provid	le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to pro				l; Part	X, line 2; Part XI,
	and 40, and 1 at Air, lines 2d and 40 Asso complete this part to pre		zitoriai imorniai.			<u>,</u>
Par	t III, line 4:					
The	Foundation has a bronze statue and	wall_	hanging,	depicti	ng t	the bison
mas	cot and symbol of NDSU. Items are o	on publ	ic displ	ay to pro	omot	te the
Uni	versity. Collection of art is displ	ayed c	n campus	to prom	ote	the visual
art	s and used in study for related maj	jors.		,		
Par	t IV, line 2b:					
	h and cash equivalents held for oth	ners co	nsist of	funds he	eld	and
-		10110 00				
1110	ested for various organizations.					
Tn	estments held for others represent	the po	rtion of	charital	h1_	remainder
						<del></del>
	trusts for which the Foundation hol	us the	assets,			tne  ule D (Form 990) 2018
•		34				

Schedule D (Form 990) 2018 North Dakota State University Foundation 23-7120898 Page 5    Part XIII   Supplemental Information (continued)
beneficiary.
Part V, line 4:
The endowment funds held by North Dakota State University Foundation have
been established to follow donors' wishes to provide an ongoing reliable
source of funding to North Dakota State University for student
scholarships, faculty support, departmental support and organization
operations.
Part X, Line 2:
The Foundation is a publicly supported organization under Internal Revenue
Code Section 501(c)(3), and is classified as an organization which is not
a private foundation. Accordingly, the Foundation is not subject to
federal income taxes. In addition, the Foundation is subject to income tax
on net income that is derived from business activities that are unrelated
to its exempt purposes.
The Foundation believes that it has appropriate support for any tax
positions taken affecting its annual filing requirements, and as such,
does not have any uncertain tax positions that are material to the
financial statements. The Foundation would recognize future accrued
interest and penalties related to unrecognized tax benefits and
liabilities in income tax expense if such interest and penalties are
incurred. The Foundation files an Exempt Organization Business Income Tax
Return (Form 990-T) with the IRS to report its unrelated business taxable
income.

# SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

# **Statement of Activities Outside the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

➤ Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

Employer identification number

ION.	rth Dakota St	ate Univ	ersity F	oundation	23-712089	8					
				tside the United States. Comple	ete if the organization answered "Y	es" on					
	Form 990, Part 1\	/, line 14b									
1	For grantmakers. Does	the organization	n maintain recor	ds to substantiate the amount of its gra	ants and other assistance,						
	the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Lulyes Lulyes No										
2	For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the										
	United States.										
3	Activities per Region (T	T .		an be duplicated if additional space is i		<u> </u>					
	(a) Region	(b) Number of	(c) Number of employees,	(d) Activities conducted in the region	(e) If activity listed in (d)	(f) Total expenditures					
		offices in the region	l agents, and	(by type) (such as, fundraising, program services, investments, grants to	is a program service, describe specific type	for and					
		", ", "   cg.c.,	independent contractors	recipients located in the region)	of service(s) in the region	investments in the region					
			in the region			tile region					
ent!	ral America and	1									
	Caribbean -	0	0	Investments		29,469,000.					
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			0	   Tiberran, lankkyti, rijest i Hannisteriininin reinibaldi ilikation wii 197 <sup>op</sup>	Hiller of the contract of the	29 469 000					
	Subtotal	<del>-</del>	U			29,469,000.					
b	Total from continuation	_	0		NY SENSET PROPERTY OF THE STATE	0.					
_	sheets to Part I					<del></del>					
С	Totals (add lines 3a	<u>_</u>	0		AND STRUCKED CORRESCED COLORS, COLORS CONTINUENTS AND AND AND AND AND AND AND AND AND AND	29,469,000.					
	and 3b)		L	tions for Form 900	TOTAL CONTRACTOR OF THE PROPERTY OF THE PROPER	Form 990) 2018					

23-7120898

North Dakota State University Foundation

Schedule F (Form 990) 2018

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed

d of ik, FMV, ither)							
(i) Method of valuation (book, FMV, appraisal, other)							-
(h) Description of noncash assistance			,				
(g) Amount of noncash assistance							
(f) Manner of cash disbursement							,
(e) Amount of cash grant			,				
(d) Purpose of grant							·
(c) Region		-					
(b) IRS code section and EIN (if applicable)	7			AND ANALYMENT ANALYMENT AND ANALYMENT AND ANALYMENT AND ANALYMENT AND ANALYMENT AND ANALYMENT AND ANALYMENT AND ANALYMENT AND ANALYMENT AND ANALYMENT AND ANALYMENT AND ANALYMENT AND ANALYMENT AND ANALYMENT ANALYMENT AND ANALYMENT AND ANALYMENT AND ANALYMENT AND ANALYMENT ANALYMEN	CENTERATE AND ACTIVE	PARTICIPATE STATE OF THE PARTY	7. 12. 14. 14. 14. 14. 14. 14. 14. 14. 14. 14
1 (a) Name of organization							

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Enter total number of other organizations or entities

Schedule F (Form 990) 2018

ty Foundation 23-7120898

Page 3

North Dakota State University Foundation

Partilli Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed

Schedule F (Form 990) 2018

(h) Method of valuation (book, FMV, appraisal, other) (g) Description of noncash assistance (f) Amount of noncash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance

Schedule F (Form 990) 2018

	ule F (Form 990) 2018	North	Dakota	State	University	Foundation	23-7120898	Page 4
Part	V Foreign Forn	ns						
1	•	equired to file	Form 926, Re		n corporation during th S. Transferor of Proper	e tax year? If "Yes," the ty to a Foreign	X Yes	□ No
2	may be required to se Trusts and Receipt of	parately file Fo Certain Foreig	orm 3520, Anr gn Gifts, and/c	nual Return or Form 3520	the tax year? If "Yes," To Report Transactions 0-A, Annual Information I 3520-A; don't file with	: With Foreign n Return of Foreign	Yes	X No
3	-	e required to	file Form 547	1, Informatio	corporation during the ton Return of U.S. Perso		X Yes	□ No
4	qualified electing fund	during the ta a Shareholde	x year? If "Yes	s," the organ	sive foreign investmen nization may be required estment Company or Q	d to file Form 8621,	X Yes	□ No
5		e required to	file Form 886	5, Return of	partnership during the t		☐ Yes	X No
6		may be requ	ıred to separa	tely file Forn	boycotting countries d n 5713, International Bo		☐ Yes	X No

Schedule F (Form 990) 2018 North Dakota State University Foundation 23-7120898 Page 5
Part V. Supplemental Information
Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method, amounts of
investments vs expenditures per region); Part II, line 1 (accounting method), Part III (accounting method), and Part III, column (c)
(estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions
Schedule F, Part IV:
mb . The state of the distance and indicate investments during the
The Foundation reviews its direct and indirect investments during the
tax period for determining required fereign filings. The Foundation's
tax period for determining required foreign filings. The Foundation's
ownership interests in foreign corporations do not require a Form 5471
Ownership interests in foreign corporations do not require a form 31/1
to be filed.
The Foundation invests in partnerships that hold direct or indirect
interests in passive foreign investment companies. The investment
partnerships have properly filed Form 8621, or the underlying
investments did not generate any unrelated business income. Under these
Solve the month of the company of the Sile of Additional from 0001
facts, the Foundation is not required to file an additional Form 8621.

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

# **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

2018

OMB No 1545-0047

Open to Public

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

So to www.irs.gov/Form990 for instructions and the latest information.

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**Employer identification number** Name of the organization 23-7120898 North Dakota State University Foundation Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17 Form 990-EZ filers are not required to complete this part 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a X Mail solicitations e Solicitation of non-government grants X Internet and email solicitations Solicitation of government grants X Phone solicitations g X Special fundraising events d X In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or X Yes

key employees listed in Form 990,	Part VII) or entity in connection with	h profess	ional 1	fundraising services?	Yes	No No
b If "Yes," list the 10 highest paid in compensated at least \$5,000 by the		irsuant to	agree	ements under which	the fundraiser is to t	oe .
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	Activity (iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
Ruffalo Noel Levitz - PO BOX	Telemarketing & Direct	Yes	No		-	
718, Des Moines, IA	Mail		Х	216,772.	115,209.	101,563.
Total			<b></b>	216,772.	115,209.	101,563.
3 List all states in which the organizat	tion is registered or licensed to solic	cit contrib	utions	s or has been notified	d it is exempt from re	egistration

AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO
MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

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

See Part IV for continuations

Schedule G (Form 990 or 990-EZ) 2018

Schedule G (Form 990 or 990-EZ) 2018 North Dakota State University Foundation23-7120898 Page 2 Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b List events with gross receipts greater than \$5,000 (b) Event #2 (c) Other events (a) Event #1 (d) Total events (add col (a) through BBB Auction BBB Dinner col (c)) (total number) (event type) (event type) 49,966. 525,901. 374,058 101,877. 1 Gross receipts 36,820 286,625. 249,805 2 Less. Contributions 13,146. 239,276. 124,253. 101,877. Gross income (line 1 minus line 2) 4 Cash prizes 124,253. 124,253 Noncash prizes Direct Expenses 4,145. 4,145. 6 Rent/facility costs 5,900. 65,839. 59,939. 7 Food and beverages 4,675 4,675. 8 Entertainment 48,458. 31,841. 14,311. 2,306. 9 Other direct expenses 247,370. 10 Direct expense summary Add lines 4 through 9 in column (d) -8,094.11 Net income summary Subtract line 10 from line 3, column (d) Part III. Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a (b) Pull tabs/instant (d) Total gaming (add Revenue (c) Other gaming (a) Bingo bingo/progressive bingo col. (a) through col (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes Rent/facility costs 5 Other direct expenses Yes Yes Yes No 6 Volunteer labor Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities. Yes a is the organization licensed to conduct gaming activities in each of these states? b If "No," explain Yes 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? b If "Yes," explain.

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Schedule G (Form 990 or 990-EZ) 2018

Schedule G (Form 990 or 990-EZ) 2018 North Dakota State University Foundation 23-	-7120898	Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes	No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
to administer charitable gaming?	Yes	☐ No
13 Indicate the percentage of gaming activity conducted in:	_	
a The organization's facility	13a	%
b An outside facility	13b	%
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records		
Name ▶		
Address >		,
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amount		
of gaming revenue retained by the third party ►\$		
c If "Yes," enter name and address of the third party		
on res, enternante and address of the time party		
Name ▶		
Address		
16 Gaming manager information		
Name		
Gaming manager compensation > \$		
Description of services provided	-	
Director/officer Employee Independent contractor		
47. Mandakan, diakah, kansa		
17 Mandatory distributions:		
a is the organization required under state law to make charitable distributions from the gaming proceeds to	Yes	□ No
retain the state gaming license?		140
<b>b</b> Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
organization's own exempt activities during the tax year > \$   Part   V   Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and (v)	Part III. lines O	0b 10b
Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and formation 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions	-art III, lines 9,	90, 100,
Schedule G, Part I, Line 2b, List of Ten Highest Paid Fundraise	rs:	_
(i) Name of Fundraiser: Ruffalo Noel Levitz		
(i) Address of Fundraiser: PO BOX 718, Des Moines, IA 50303-07	18	
		·

Schedule G	(Form 990 or 990-E	<u>z) N</u>	orth	Dakota	State	University	Foundation23-	7120898	Page 4
Part IV	Supplementa	Informa	ation (co	ntinued)		<del></del>	<del></del>		
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## SCHEDULE (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

▶ Attach to Form 990.

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OMB No 1545-0047

Employer identification number

Schedule I (Form 990) (2018) **%** lepartmental support for 23-7120898 Cash grants provided for (h) Purpose of grant or assistance student scholarships aculty support, X Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) 。 (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States North Dakota State University Foundation recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. See Part IV for Column (h) descriptions 14,445,602 (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section (if applicable) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table NDSON 45-6002439 General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization North Dakota State University or government 1340 Administration Ave Name of the organization Fargo, ND 58102 Part I

23-7120898

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	uired in Part I, line	e 2, Part III, column	(b), and any other ac	ddtional information.	
Part I, Line 2:					
Grants are paid to or at the direction of North Dakota State University for	tion of 1	North Dako	ta State U	niversity for	
scholarships, departmental expenses,	s, grants,	s, and buildings	ldings and	equipment.	
We provide grants in accordance with	th applicable	cable donor	r restrictions.	ions. The	
uses of these grant funds are moni	tored th	monitored throughout the year		through the	
Request for Payment process and sc	scholarship	process.	In addition,	on, we rely	
on the University to monitor appro	appropriate use	se of funds	and	to perform	
internal testing through our Donor	Compliance		Services Department.	ent.	

Schedule I (Form 990) (2018)

Schedule   (Form 990) North Dakota State University Foundation 23-7120898 Page 2 Part V Supplemental Information
Part II, line 1, Column (h):
Name of Organization or Government: North Dakota State University
(h) Purpose of Grant or Assistance: Cash grants provided for student
scholarships, faculty support, departmental support for equipment,
research, supplies, travel, etc.
<del></del>
<del></del>

#### **SCHEDULE J** (Form 990)

Department of the Treasury

Internal Revenue Service

**Compensation Information** 

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

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

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OMB No 1545-0047

► Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

**Employer identification number** 23-7120898

North Dakota State University Foundation

	Questions Regarding Compensation		<b>Y</b>	
ta	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items	NAME OF THE PARTY	Yes	No A
	First-class or charter travel Housing allowance or residence for personal use	AND A MAKE		
	Travel for companions Payments for business use of personal residence	TO SERVE IN A SERVE IN	*********	PROFESSION OF THE PROPERTY OF
	Tax indemnification and gross-up payments Health or social club dues or initiation fees	TRINKE SALE	CANADA AND AND AND AND AND AND AND AND AN	1-14 AV
	Discretionary spending account Personal services (such as maid, chauffeur, chef)		THE SHARE	CHARACTER AND AND AND AND AND AND AND AND AND AND
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or	ALPHANES AND ALPHA	TANDARA TANDARA TANDARA	TYATERS P
_	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,	TRACE RES	14 LE . ELST 14 ES . ELST 14 ES . ELST 14 ES . ELST 14 ES . ELST 14 ES . ELST 14 ES . ELST 14 ES . ELST 14 ES . ELST 14 ES . ELST 14 ES . ELST 14 ES . ELST 14 ES . ELST 14 ES . ELST 14 ES . ELST 14 ES . ELST 14 ES . ELST 14 ES . ELST 15 ES . ELST 16 ES	SERVICE SERVICE
_	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to		ARTHUR AREAS	THE STATE OF THE S
	establish compensation of the CEO/Executive Director, but explain in Part III	ALPERTARY ALPERTARY ALPERTARY	THE REPORT	
	X Compensation committee	XXXFF 03/54 XXXMXXII-4 XXXMXXII-4 XXXXMXXII-4 XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	THE MANUAL THE PARTY OF THE PAR	AND THE PROPERTY OF THE PROPER
	Independent compensation consultant  X Compensation survey or study	200 CANADA		
	X Form 990 of other organizations X Approval by the board or compensation committee	22 E 2 E 2 E 2 E 2 E 2 E 2 E 2 E 2 E 2	THE SECTION OF THE SE	CARTICIAN AT A STATE OF THE STA
	Team   Office organizations	WEEKEEKEEKEEKEEKEEKEEKEEKEEKEEKEEKEEKEEK	TIPE TEXT	MARKET AND
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing	EXRXBLERME SATAR AND SIEMETH N SIEMETH N SIEME		
7	organization or a related organization.	X TAXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		
•	Receive a severance payment or change-of-control payment?	4a		X
a	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
C	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		TP WEATH	ADABAC NAME
	The story of lines 4a-c, list the persons and provide the applicable amounts for each item in that in	HELT THE SELECTION OF T	NAT THE PARTY	XX BATTAL
	Only position 504(s)(2), 504(s)(4), and 504(s)(20) organizations must complete lines 5.0	TABLE PARTS		NAME OF STREET
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.  For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	THE STATE OF THE S	TREATURE A	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
5		AXTERMENT XXXXXXIXXXX ML'IXX ITEME XXX AXT ITEM XXX AXT ITEM	TENERS OF	
_	contingent on the revenues of	5a	_ESE_SE244	X
	The organization?	5b		X
D	Any related organization?	TENENTEE E	********	72646386
_	If "Yes" on line 5a or 5b, describe in Part III	XXEXXAPECH EXECUTER EXECUTER EXECUTER ELECTROPIES LICENSE	THE STREET	TO TOWNS
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	AFINERE INC EXECUTER	EXXXVEXX	APLEASES
	contingent on the net earnings of.	SEXESTER S	14000FFEE5	X
	The organization?	6a		X
b	Any related organization?	6b	EXECUTARES.	
	If "Yes" on line 6a or 6b, describe in Part III	ANTAXATAX ANTAXATAX ANTAXATAX ANTAXATAX	AND AND AND AND AND AND AND AND AND AND	SPECIAL NAME OF THE PROPERTY O
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	REAL STREET		V
	not described on lines 5 and 67 If "Yes," describe in Part III	7	CRESS TRES	X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	TEACH AT	APPRICATE TO A STREET	
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	.0000,010.	X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	NEW WORLD		SELENALES SELENA
	Regulations section 53 4958-6(c)?	9		l

Schedule J (Form 990) 2018 North Dakota State University Foundation 23-7120898

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Note: The sum of columns (B)(I)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of W-2		and/or 1099-MISC compensation	(C) Retirement and	plgi	(E) Total of columns	(F) Compensation
(A) Name and Ttile		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	otner deterred compensation	benefits	(a)·(i)(a)	in column (B) reported as deferred on prior Form 990
John R. Glover	(E)	247,302.	0	7,857.	23,936.	23,645.	302,74	
President & CEO	⊞		0			0		
Allyson Peterson	ε	137,80	0.	30	13,	13,08	164,52	
	▣		0		0			
Monique Anderson	Ξ	119,38	0.	90	11,	21,80	153,87	
VP of Development	(ii)	0.1	0	• 0	• 0	0		
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Department of the Treasury Internal Revenue Service SCHEDULEK (Form 990)

Name of the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, Supplemental Information on Tax-Exempt Bonds

Open to Public OMB No 1545-0047 2018

explanations, and any additional information in Part VI.

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

Schedule K (Form 990) 2018 (i) Pooled financing Employer identification number 23-7120898 × × × ŝ (g) Defeased (h) On behalf ŝ × × of issuer ۵ Yes Yes × Ŷ × × × 12,145,894 11,983,655 3,495,894 162,239 Yes × ŝ 2012뗩 incurred for reno 12,145,894. issued 11/29/2007 To refund bonds (f) Description of purpose Payment of loan ß Construction Yes × × × 1,690,000. 5,650,000. 31,489. 5,618,511 inance × × ŝ 2010 Yes × Continuations 500,000 ,650,000 (e) Issue price 2,874,692. 3,481,500. 3,500,000 18,500 × × ŝ 2007 <u>വ</u> North Dakota State University Foundation 12/20/05 12/11/10 (d) Date issued 05/23/12 Yes × See Part VI for Column (f) 45-6002069307522BC5 (c) CUSIP# None None Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, For Paperwork Reduction Act Notice, see the Instructions for Form 990. Does the organization maintain adequate books and records to support the Were the bonds issued as part of a refunding issue of taxable bonds (or, if 23-7120898 45-6002205 (b) Issuer EIN issued prior to 2018, an advance refunding issue)? if issued prior to 2018, a current refunding issue)? Has the final altocation of proceeds been made? Working capital expenditures from proceeds B University Foundation Capital expenditures from proceeds Credit enhancement from proceeds North Dakota State Capitalized interest from proceeds Amount of bonds legally defeased Gross proceeds in reserve funds 2 Proceeds in refunding escrows Year of substantial completion Issuance costs from proceeds final allocation of proceeds? (a) Issuer name Fargo, Other unspent proceeds Amount of bonds retired Total proceeds of issue Other spent proceeds Cass County, Part I Bond Issues Part'III Proceeds οĘ ccity Ŋ 9 က 0 9 7 œ 4 10 13 2 4 5 4

				[   		ٳ		
1 Was the organization a partner in a partnership or a member of an LLC.	Α No.		\ \ \ \ \	2	Š	2	م درک	4
	3	×	2	×	55	×	221	2
2 Are there any lease arrangements that may result in private business use of		:						
bond-financed property?		×		×		×		
3a Are there any management or service contracts that may result in private		;		1				
business use of bond-financed property?		×		×		×		
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside		•						
counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of								
bond-financed property?		×		×		×		
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside								
counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by								
entities other than a section 501(c)(3) organization or a state or local government		.00 %		% 00·		° 00°		%
5 Enter the percentage of financed property used in a private business use as a result of								
unrelated trade or business activity carned on by your organization, another								
section 501(c)(3) organization, or a state or local government		.00 %		* 00.		° 00.		%
6 Total of lines 4 and 5		% 00°		% 00.		l		%
7 Does the bond issue meet the private security or payment test?		X		X		×		
8a Has there been a sale or disposition of any of the bond-financed property to a non-								
governmental person other than a 501(c)(3) organization since the bonds were issued?		×		X		X		
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed								
of		%		%		%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections								
1 141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified								
bonds of the issue are remediated in accordance with the requirements under	;		:		ł			
	×		×		×			
Part IV. Arbitrage								
		A		9		S)		
1 Has the issuer filed Form 8038-1, Arbitrage Hebate, Yield Heduction and	Yes	S.	Yes	S.	Yes	S.	Yes	Š
Penalty in Lieu of Arbitrage Rebate?		×		X		X		
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X		X		×		
b Exception to rebate?		X	X		×			
c No rebate due?	X			X		×		
If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
performed								:
3 Is the bond issue a variable rate issue?		×		>		>		

Page 3

23-7120898

North Dakota State University Foundation

Schedule K (Form 990) 2018

#### SCHEDULE M (Form 990)

Noncash Contributions

2018

Open to Public

Department of the Treasury Internal Revenue Service Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection Employer identification number

Name of the organization

North Dakota State University Foundation

23-7120898

Pa	rt la Types of Property				
		(a)	(b)	(c)	(d)
		Check if	Number of contributions or	Noncash contribution amounts reported on	Method of determining noncash contribution amounts
		applicable		Form 990, Part VIII, line 1g	
1	Art - Works of art	X	1	1,505.	
2	Art - Historical treasures	X	3	30,000.	FMV
3	Art - Fractional interests				
4	Books and publications	Х	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	120.	FMV
5	Clothing and household goods	X	ag manganan	525.	FMV
6	Cars and other vehicles			· · · · · · · · · · · · · · · · · · ·	
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	Х	41	2,761,265.	Average High/Low
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or				
••	trust interests	X	5	17,438,000.	Appraised Value
12	Securities - Miscellaneous			··	
13	Qualified conservation contribution -				
	Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial	Х	1	144,800.	FMV
17	Real estate - Other				
18	Collectibles				- <del></del>
19	Food inventory	X	3	2,718.	Cost
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other (Various House)	Х	138	96.466.	Cost/FMV
26	Other (Grain)	X	3	25,197.	
27	Other (Volunteer Tra)	X	3	8,304.	
28	Other ( )				
29	Number of Forms 8283 received by the organi	zation during	the tax year for c	ontributions	
LJ	for which the organization completed Form 82		-	• • • • • • • • • • • • • • • • • • •	2
	for which the organization completed form of	00, i ait iv, i	Solice Holdlowica	<u>20 j</u>	Yes No
ഷം	During the year, did the organization receive b	v contributio	n any property rer	oorted in Part I lines 1 throu	
Sua	must hold for at least three years from the date				T t " 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,
	exempt purposes for the entire holding period		arcontribution, and	Willow Ish trequired to be a	30a X
h	If "Yes," describe the arrangement in Part II	:			
31	Does the organization have a gift acceptance	nolicy that re	adures the review	of any nonstandard contribu	tions?
	•	_	· ·	•	· <del>  -   -  </del>
320	Does the organization hire or use third parties contributions?	oi relateu Of	gariizations to son	on, process, or sell noricasi	32a X
L		•			
	If "Yes," describe in Part II	olumn (a) fa	r a tupo of propert	v for which column (a) is obs	
33	If the organization didn't report an amount in o	olumn (c) to	a type of propert	y for writer column (a) is the	TONGU,
	describe in Part II			<del> </del>	그 그리지 살았다면 한 사람이 되었다.

Schedule M	(Form 990) 2018	North Dak	ota State	e Univer	sity Fou	ndation	23-/120898	Page 2
Part II	Supplemental is reporting in Part this part for any actions.	<b>Information.</b> P I, column (b), the n Iditional information	rovide the inform number of contrib n.	nation required to outions, the num	by Part I, lines 3 ober of items red	0b, 32b, and 33, ceived, or a comb	and whether the organ unation of both Also co	ization omplete
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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.

Attach to Form 990 or 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number 23-7120898

North Dakota State University Foundation   23-7120096
Form 990, Part I, Doing Business As:
NDSU Foundation; NDSU Foundation and
Alumni Association
Form 990, Part VI, Section A, line 1:
The President of North Dakota State University and the President and CEO of
the North Dakota State University Foundation shall serve as ex-officio,
non-voting members.
Form 990, Part VI, Section A, line 4:
The following significant changes took place effective January 1, 2018:
A group known as the "Trustees" shall have authority to elect eleven
individuals from among its members to serve on the Executive Governing
Board.
The Organization changed its name to North Dakota State University
Foundation.
Form 990, Part VI, Section A, line 7a:
A group known as the "Trustees" shall have authority to elect eleven
individuals from among its members to serve on the Executive Governing
Board.
Form 990, Part VI, Section A, line 8b:
There are no committees with authority to act on behalf of the governing
body.

North Dakota State University Foundation

Employer identification number 23-7120898

Form 990, Part VI, Section B, line 11b:

The Form 990 was reviewed by the Finance and Audit Committee and the Executive Governing Board before filing.

Form 990, Part VI, Section B, Line 12c:

Foundation officers, Executive Governing Board (EGB) members, and staff are required to report any potential conflicts of interest to the Chair of the EGB and the Foundation's President and CEO for review and possible remedial action. Such action may include holding the information on file, informing the EGB of the appearance of a conflict of interest, or requiring the EGB member to either cease and desist the activity or to resign from the Foundation EGB.

#### Form 990, Part VI, Section B, Line 15:

The process for determining compensation for the President and CEO is the responsibility of the Foundation's Compensation Committee, comprised of the officers of the Board. The Committee annually reviews mutually determined goals and objectives of the incumbent. Salary adjustments are based on a review of similar positions using competitive market compensation paid by other regional and national foundations with similar endowment and staff size. In making salary recommendations, the committee takes advantage of information compiled annually by various regional and national salary surveys within the industry. In turn, the President and CEO evaluates four direct reports, one of which is the CFO, using mutually agreed to goals and objectives for each person. The CUPA report is used for salary comparisons for similar positions at peer institutions. The President and CEO's recommendation on salary is forwarded to the Committee for review. As part

SCHEDULE R Form 990)

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

► Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

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

State University Foundation

North Dakota

Name of the organization

Parti

Department of the Treasury Internal Revenue Service

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OMB No 1545-0047

Open to Public Inspection

Employer identification number 23-7120898

(g) Section 512(b)(13) controlled Ŷ entity? Direct controlling Yes × Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year tate University Direct controlling North Dakota entity Foundation End-of-year assets <u>e</u> status (if section Public charity 501(c)(3)) Line 12a, Total income Exempt Code € 501(c)(3) Legal domicile (state or Legal domicile (state or foreign country) foreign country) North Dakota Supporting Organization Primary activity Primary activity Name, address, and EIN (if applicable) - 45-6013302 Name, address, and EIN of related organization of disregarded entity Fossum Foundation, Inc 1241 University Dr. N Fargo, ND 58102 PartII

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

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Schedule R (Form 990) 2018

832161 10-02-18 LHA

23-7120898

Page 2

Schedule R (Form 990) 2018 North Dakota State University Foundation

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year PartIII

General or Percentage managing ownership 3 Yes Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Disproportionate Yes allocations? Ξ Share of end-of-year assets Ô Share of total income  $\boldsymbol{arphi}$ Predominant income (related, unrelated, excluded from tax under sections 512-514) e (d)
I Direct controlling entity (c)
Legal
domicile
(state or
foreign Primary activity 9 Name, address, and EIN of related organization

Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year Part IV

(a)	(q)	(0)	(p)	(e)	E	(6)	(f)	(E)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp, S corp, or furst)	Share of total income	Share of end-of-year	Percentage ownership	Section 512(b)(13) controlled entity?
		country)		(200)		2000		Yes No
Charitable Remainder Unitrusts (27)	Charitable Trust	2	N/A	TRUST	A/N	N/A	A/N	×
			•				_	-
Charitable Remainder Annuity Trust (1)	Charitable Trust	QN QN	N/A	FRUST	N/A	N/A	N/A	×
							-	
		Ş	,		,	;		
Perpetual Trusts (2)	Charitable Trust	Nω	N/A	TRUST	N/A	N/A	N/A	×
	1					-		
Perpetual Trust (1)	Charitable Trust	ON	N/A	TRUST	N/A	N/A	N/A	×

See Part VII for Continuations

Schedule R (Form 990) 2018

832162 10-02-18

Partiv Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

				-
Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s with one or more re	lated organizations listed	in Parts II-IV?	
<ul> <li>a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity</li> </ul>	^			1a X
<ul> <li>Gift, grant, or capital contribution to related organization(s)</li> </ul>				ф Ж
c Gift, grant, or capital contribution from related organization(s)				1c X
d Loans or loan quarantees to or for related organization(s)				L
				†
e Loans of loan guarantees by related organization(s)				Je V
f Dividends from related organization(s)				¥
a Sale of assets to related organization(s)				to X
				#
i Exchange of assets with related organization(s)				<b>4</b>
j Lease of facilities, equipment, or other assets to related organization(s)				-j.
k Lease of facilities, equipment, or other assets from related organization(s)				¥ X
l Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			<b>X</b>
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			1m X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	tion(s)			t X
o Sharing of paid employees with related organization(s)				Ĺ
and described the state of the				
				•
<ul> <li>Reimbursement paid by related organization(s) for expenses</li> </ul>				1q X
<ul> <li>Other transfer of cash or property to related organization(s)</li> </ul>				1r X
s Other transfer of cash or property from related organization(s)				1s X
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	who must complete the	is line, including covered	relationships and transaction thresholds	
(a) Name of related organization	(b) Transaction	(c) Amount involved	(d) Method of determining amount involved	volved
	type (a-s)			
(1)				
	-		222222	
(2)				
(9)				
(4)				
(9)				
(9)				
832163 10-02-18	٦ q		Schedule	Schedule R (Form 990) 2018

Page 4

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

בוופר אמטיונים ופומנסת טעמווצמויסן ספר וואינטייסים ופעמים וואינטייסים ופעמים וואינטייסים וואינטיסים ם וואינטיסיסים וואינטיסיסים וואינטיסיסים וואינטיסיסים וואינטיסיסיסיטיסיסיסיסיסיסיטיסיסיסיסיסיטיס				}						
(a)	<u>(a)</u>	<u>©</u>	<b>©</b>	(e)	€	( <u>6</u> )	Ē	€	9	₹ 3
Name, address, and EIN of entity	Primary activity	흜	Predominant income (related, unrelated, excluded from tax under	501(c)(3) orgs?	Share of total	Share of end-of-year	Orspropor- tonate allocations?	Ospropor Code V-UBI General or Percentage tonate amount in box 20 managing allocations? of Schedule K-1 partner? ownership	General o managing partner?	Percentage ownership
		country)	sections 512-514) Ye	Yes No	ıncome	assets	Yes No	(Form 1065)	Yes No	
					_					
									_	
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Schedule R (Form 990) 2018

Schedule R (Form 990) 2018 North Dakota State University Foundation 23-7120898 Page 5
Part VII Supplemental Information.
Provide additional information for responses to questions on Schedule R. See instructions
Part IV, Identification of Related Organizations Taxable as Corp or Trust:
Name of Related Organization:
Charitable Remainder Unitrusts (27)
Direct Controlling Entity: North Dakota State University Foundation
Name of Related Organization:
Charitable Remainder Annuity Trust (1)
Direct Controlling Entity: North Dakota State University Foundation
Name of Related Organization:
Perpetual Trusts (2)
Direct Controlling Entity: North Dakota State University Foundation
Name of Related Organization:
Perpetual Trust (1)
Direct Controlling Entity: North Dakota State University Foundation

# State of North Dakota SECRETARY OF STATE



## RESTATED ARTICLES OF INCORPORATION OF NORTH DAKOTA STATE UNIVERSITY FOUNDATION AND ALUMNI ASSOCIATION

The undersigned, as Secretary of State of the State of North Dakota, hereby certifies that Restated Articles of Incorporation of

### NORTH DAKOTA STATE UNIVERSITY FOUNDATION AND ALUMNI ASSOCIATION

duly signed and executed pursuant to the provisions governing a North Dakota Nonprofit Corporation, have been received in this office and are found to conform to law.

ACCORDINGLY the undersigned, as such Secretary of State, and by virtue of the authority vested in him by law, hereby issues this Restated Certificate of Incorporation to

NORTH DAKOTA STATE UNIVERSITY FOUNDATION AND ALUMNI ASSOCIATION and changing the name to NORTH DAKOTA STATE UNIVERSITY FOUNDATION.

Effective Date: January 1, 2018

Alvin A. Jaeger Secretary of State

ahunil Jarger

1594649

#### RECEIVED

DEC 1 2 2017

SEC. OF STATE

ARTICLES OF AMENDMENT AMENDING AND RESTATING THE ARTICLES OF INCORPORATION OF

NORTH DAKOTA STATE UNIVERSITY FOUNDATION AND ALUMNI ASSOCIATION

to be known as

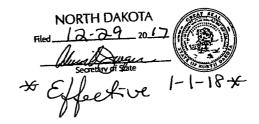
#### NORTH DAKOTA STATE UNIVERSITY FOUNDATION

The following amended and restated Articles of Incorporation of North Dakota State University Foundation and Alumni Association, a North Dakota nonprofit corporation, duly adopted pursuant to the authority and provisions of the North Dakota Nonprofit Corporation Act, North Dakota Century Code ("NDCC") Chapter 10-33, supersede and take the place of the existing Articles of Incorporation and any amendments thereto.

These Articles of Amendment have been adopted pursuant to North Dakota Century Code Section 10-33-15, and shall be effective on January 1, 2018.

> NORTH DAKOTA STATE UNIVERSITY FOUNDATION AND ALUMNI ASSOCIATION to be known as NORTH DAKOTA STATE UNIVERSITY FOUNDATION

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DEC. 1 2 2017

AMENDED AND RESTATED ARTICLES OF INCORPORATION

OF

SEC. OF STATE NORTH DAKOTA STATE UNIVERSITY FOUNDATION

#### ARTICLE I

#### Name

The name of the corporation is North Dakota State University Foundation (the "Corporation").

#### ARTICLE II

#### Purposes and Activities

The Corporation is organized and shall be operated exclusively for religious, charitable, scientific, literary and educational purposes within the meaning of Sections 170(c)(2), 501(c)(3) and 2055(a) of the Internal Revenue Code of 1986, as amended ("the Code"). Within the limitations established by the preceding sentence, the Corporation is organized and shall be operated primarily to create opportunities to advance education, research and service at North Dakota State University (the "University"), by working in close collaboration with faculty, staff, students and alumni of the University, as well as community members and businesses, to efficiently and effectively raise funds, manage assets, and administer other privately funded resources to stimulate continued development at the University, and do any and all other acts and things and exercise any and all other rights and powers which may be reasonably necessary, incidental, desirable or expedient in the accomplishment of such purposes.

#### ARTICLE III

#### Powers

The Corporation shall have those powers which are required by, and are consistent with, the purposes enumerated in Article II above, subject to limitations provided in applicable federal or state law or in its articles or bylaws. Within those limitations, the Corporation may act on its own behalf or as the agent, trustee or representative of others; buy, lease, acquire, own, hold, improve, use, and deal in and with, real or personal property, or an interest in property wherever located; sell, convey, mortgage, create a security interest in, lease, exchange, transfer, or dispose of all or a part of its real or personal property, or an interest in property, wherever located; and exercise any other powers conferred on the Corporation by NDCC Chapter 10-33 and by any future laws amendatory thereof and supplementary thereto.

#### **ARTICLE IV**

#### Restrictions

Notwithstanding any other provisions of these Articles of Incorporation ("Articles"), the restrictions in this Article IV shall govern the activities of the Corporation.

The Corporation shall not engage in any activity which may not be carried on (a) by an organization which is exempt from federal income taxation under Section 501(a) of the Code by virtue of being described in Section 501(c)(3) of the Code or (b) by an organization contributions to which are deductible under Sections 170(c)(2), 2055(a) and 2522(a) of the Code.

The Corporation shall not directly or indirectly afford pecuniary gain, dividends or other pecuniary remuneration, incidentally or otherwise, to its directors or officers, and no part of the net earnings of the Corporation shall inure directly or indirectly to the benefit of any private individual, except that the Corporation shall be authorized and empowered to pay reasonable compensation for services rendered and goods received, to provide indemnification and pay premiums for insurance protection without reimbursement to the full extent permitted or required by applicable law, and to make payments and distributions in furtherance of the purposes set forth in Article II of these Articles.

Fax Services

The Corporation shall not attempt to influence legislation as a substantial part of its activities and shall neither directly nor indirectly participate in or intervene in any political campaign on behalf of, or in opposition to, any candidate for public office, whether by the publishing or distributing of statements or otherwise.

#### ARTICLE V

#### Registered Office

The Corporation's registered agent shall be John R. Glover. The Corporation's registered and principal executive office in the state shall be located at the Harry D. McGovern Alumni Center, 1241 North University Drive, Fargo, North Dakota 58102.

#### ARTICLE VI

#### **Executive Governing Board**

The business and affairs of the Corporation shall be managed by or under the direction of an Executive Governing Board (the "Board"), which will serve as the Board of Directors of the Corporation within the meaning of the North Dakota Nonprofit Corporation Act, at NDCC § 10-33-27. To the extent consistent with these Articles and permissible under NDCC Chapter 10-33, the Bylaws of the Corporation shall specify the manner for determining the number, term of office, method of selection, removal, powers and duties of the directors of the Corporation, the time and place of their meetings, voting rights and such other regulations relating to the Board as may be desired. An action required or permitted to be taken at a Board meeting may be taken by written action signed by the number of directors that would be required or permitted to take such action at a meeting of the Executive Governing Board at which all directors were present.

#### ARTICLE VII

#### Membership

The Corporation shall have no members.

#### ARTICLE VIII

#### No Personal Liability

The officers and directors of the Corporation shall not be personally liable for the payment of any debts or obligations of the Corporation, nor shall any property of any officer or director be subject to the payment of the debts or obligations of the Corporation.

#### ARTICLE IX

#### No Capital Stock

The Corporation shall have no capital stock.

#### ARTICLE X

#### Amendments

These Articles may be amended as set forth in the Bylaws of the Corporation.

#### ARTICLE XI

#### Dissolution

The Corporation may be dissolved in accordance with the laws of the State of North Dakota. Upon dissolution of the Corporation, the Board or the officers acting under the direction of the Board, shall distribute the assets of the corporation in the following order of priority: (1) assets received and held for a special use or purpose in accordance with the uses and purposes for which the assets have been received and held; (2) costs and expenses of the dissolution proceedings, including attorney fees and disbursements; and (3) debts, obligations, and liabilities of the Corporation. Any property remaining after these payments shall be transferred, in such proportions as the Executive Governing Board of the Corporation shall determine, to one or more organizations which are exempt from federal income taxation under Section 501(a) exclusively for exempt purposes within the meaning of Code Section 501(c)(3) of the Code, or to the State of North Dakota or any political subdivision or agency of the State for exclusively public purposes. No provision of

these Articles shall be construed to affect the disposition of property held by the Corporation upon trust or other condition, and upon dissolution of the Corporation, such property shall be transferred in accordance with the trust or condition imposed with respect to it.