

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2012 calendar year, or tax year beginning **JUL 1, 2012** and ending **JUN 30, 2013**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE AMERICAN INDIAN COLLEGE FUND		D Employer identification number 52-1573446
	Doing Business As		E Telephone number 303-426-8900
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 8333 GREENWOOD BLVD		G Gross receipts \$ 17,150,067.
	City, town, or post office, state, and ZIP code DENVER, CO 80221		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
F Name and address of principal officer: CHERYL CRAZY BULL SAME AS C ABOVE		I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
J Website: ▶ COLLEGEFUND.ORG		L Year of formation: 1989 M State of legal domicile: CO	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			

Part I Summary			
1 Briefly describe the organization's mission or most significant activities: THE FUND PROVIDES SCHOLARSHIPS TO THOUSANDS OF AMERICAN INDIAN STUDENTS ANNUALLY.			
2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
Activities & Governance	3 Number of voting members of the governing body (Part VI, line 1a)	3	20
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	20
	5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	52
	6 Total number of volunteers (estimate if necessary)	6	6
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	-99,082.
	7b Net unrelated business taxable income from Form 990-T, line 34	7b	-99,082.
			Prior Year
Revenue	8 Contributions and grants (Part VIII, line 1h)	17,227,467.	15,200,086.
	9 Program service revenue (Part VIII, line 2g)	0.	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-257,304.	1,759,249.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-16,258.	-26,295.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	16,953,905.	16,933,040.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	10,319,729.	10,078,205.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	3,072,473.	3,119,210.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 3,312,367.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,745,211.	3,219,546.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	16,137,413.	16,416,961.
19 Revenue less expenses. Subtract line 18 from line 12	816,492.	516,079.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 69,010,166.	End of Year 71,660,651.
	21 Total liabilities (Part X, line 26)	920,578.	852,788.
	22 Net assets or fund balances. Subtract line 21 from line 20	68,089,588.	70,807,863.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer <i>Cheryl Crazy Bull</i>	Date 10-14-13			
	Type or print name and title CHERYL CRAZY BULL, PRESIDENT & CEO				
Paid Preparer Use Only	Print/Type preparer's name WENDY DEWITT	Preparer's signature	Date	Check <input type="checkbox"/> self-employed	PTIN P01358310
	Firm's name ▶ ANTON COLLINS MITCHELL LLP	Firm's EIN ▶ 01-0724563		Phone no. 303-830-1120	
Firm's address ▶ 303 EAST 17TH AVENUE, SUITE 600 DENVER, CO 80203					

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

232001 12-10-12 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2012)

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III [X]

1 Briefly describe the organization's mission:

SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

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? [] Yes [X] No

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. 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 \$ 11,307,740. including grants of \$ 10,077,605.) (Revenue \$) SCHOLARSHIPS AND GRANTS - PLEASE SEE SCHEDULE O FOR COMPLETE DESCRIPTION

4b (Code:) (Expenses \$ 585,834. including grants of \$ 600.) (Revenue \$) PUBLIC EDUCATION - PLEASE SEE SCHEDULE O FOR COMPLETE DESCRIPTION

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)

(Expenses \$ Including grants of \$) (Revenue \$)

4e Total program service expenses 11,893,574.

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

Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25		X
24b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
25b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
28a	a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
28b	b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
28c	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	X	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
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		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35b	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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	
Note. All Form 990 filers are required to complete Schedule O			

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

Main form area containing questions 1a through 14b with columns for 'Yes' and 'No' and various input fields.

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 to any question in this Part VI

X

Section A. Governing Body and Management

Table with columns for question number, description, and Yes/No responses. Includes questions 1a through 9 regarding governing body members, relationships, and documentation.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with columns for question number, description, and Yes/No responses. Includes questions 10a through 16b regarding local chapters, conflict of interest, whistleblower, and document retention policies.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed AK, AL, AR, AZ, CA, CO, CT, FL, GA, IL, IN, KS
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection.
19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: TAMELA MILLER-CARLSON - 303-426-8900 8333 GREENWOOD BLVD, DENVER, CO 80221

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

Check if Schedule O contains a response to any question in this Part VII

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former officer/director/trustee			
(1) DR. RICHARD LITTLEBEAR TRUSTEE	1.00	X					0.	0.	0.	
(2) DR. ELMER GUY CHAIR	1.00	X		X			0.	0.	0.	
(3) BARBARA GOHR TRUSTEE	1.00	X					0.	0.	0.	
(4) KIMBERLY BLANCHARD RESOURCE DEVELOPMENT CHAIR	1.00	X					0.	0.	0.	
(5) DR. CAROLE FALCON-CHANDLER TRUSTEE	1.00	X					0.	0.	0.	
(6) VERNA FOWLER TRUSTEE	1.00	X					0.	0.	0.	
(7) CARLA FREDERICKS TRUSTEE	1.00	X					0.	0.	0.	
(8) DR. DAVID M. GIPP TRUSTEE	1.00	X					0.	0.	0.	
(9) DR. CYNTHIA LINDQUIST 1ST VICE CHAIR	1.00	X		X			0.	0.	0.	
(10) DR. MICHAEL OLTROGGE TRUSTEE	1.00	X					0.	0.	0.	
(11) DR. ROBERT MARTIN TRUSTEE	1.00	X					0.	0.	0.	
(12) DAVID W. ROGERS FINANCE & INVESTMENT CHAIR	1.00	X					0.	0.	0.	
(13) DR. LAUREL VERMILLION 2ND VICE CHAIR	1.00	X		X			0.	0.	0.	
(14) LIESL WILKE TRUSTEE	1.00	X					0.	0.	0.	
(15) RICHARD BLACK TRUSTEE	1.00	X					0.	0.	0.	
(16) DR. JAMES DAVIS TRUSTEE	1.00	X					0.	0.	0.	
(17) CAMERON GEIGER TRUSTEE	1.00	X					0.	0.	0.	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) GEORGE THEN TRUSTEE	1.00	X						0.	0.	0.
(19) AL GAYLOR TRUSTEE	1.00	X						0.	0.	0.
(20) FLORENCE GARCIA TRUSTEE	1.00	X						0.	0.	0.
(21) CARRIE BASGALL SECRETARY	40.00			X				49,329.	0.	25,447.
(22) TAMELA A. MILLER-CARLSON TREASURER	50.00			X				125,435.	0.	25,288.
(23) CHERYL CRAZY BULL PRESIDENT/CEO	50.00			X				58,806.	0.	13,954.
(24) CASEY LOZAR V.P. RESOURCE DEVELOPMENT	40.00					X		119,678.	0.	10,464.
(25) RICHARD B WILLIAMS SENIOR ADVISOR	40.00					X		203,462.	0.	30,338.
1b Sub-total								556,710.	0.	105,491.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								556,710.	0.	105,491.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **3**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	X	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII

			(A)	(B)	(C)	(D)		
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514		
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns						
	b	Membership dues						
	c	Fundraising events	356,623.					
	d	Related organizations						
	e	Government grants (contributions)						
	f	All other contributions, gifts, grants, and similar amounts not included above	14,843,463.					
	g	Noncash contributions included in lines 1a-1f: \$	32,279.					
	h	Total. Add lines 1a-1f		15,200,086.				
Program Service Revenue	2 a	Business Code						
	b							
	c							
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f						
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)				1,066,896.		
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties		245.		245.		
	6 a	Gross rents	(i) Real	49,964.				
			(ii) Personal					
			b	Less: rental expenses	40,310.			
			c	Rental income or (loss)	9,654.			
	d	Net rental income or (loss)		9,654.		9,654.		
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	692,353.				
			(ii) Other					
			b	Less: cost or other basis and sales expenses	0.			
			c	Gain or (loss)	692,353.			
	d	Net gain or (loss)		692,353.		692,353.		
	8 a	Gross income from fundraising events (not including \$ 356,623. of contributions reported on line 1c). See Part IV, line 18	a	197,344.				
			b	Less: direct expenses	176,717.			
c			Net income or (loss) from fundraising events		20,627.		20,627.	
9 a	Gross income from gaming activities. See Part IV, line 19	a						
		b	Less: direct expenses					
		c	Net income or (loss) from gaming activities					
10 a	Gross sales of inventory, less returns and allowances	a	38,272.					
		b	Less: cost of goods sold	0.				
		c	Net income or (loss) from sales of inventory		38,272.	38,272.		
Miscellaneous Revenue		Business Code						
11 a	OTHER INCOME	900099	3,989.			3,989.		
b	PARTNERSHIP LOSSES	900099	-99,082.		-99,082.			
c								
d	All other revenue							
e	Total. Add lines 11a-11d		-95,093.					
12	Total revenue. See instructions.		16,933,040.	38,272.	-99,082.	1,793,764.		

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	4,020,430.	4,020,430.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	6,057,775.	6,057,775.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	556,710.	216,727.	127,876.	212,107.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,855,112.	722,130.	426,240.	706,742.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	707,388.	277,102.	161,394.	268,892.
11 Fees for services (non-employees):				
a Management				
b Legal	34,195.	10,000.	17,582.	6,613.
c Accounting	26,711.		26,711.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	234,059.	162,491.	40,127.	31,441.
12 Advertising and promotion	1,901,591.	79,856.		1,821,735.
13 Office expenses	158,315.	34,231.	88,041.	36,043.
14 Information technology	115,925.	61,817.	16,722.	37,386.
15 Royalties				
16 Occupancy	82,595.	25,519.	32,860.	24,216.
17 Travel	312,130.	146,853.	49,594.	115,683.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	92,155.		92,155.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	67,594.	26,380.	15,573.	25,641.
23 Insurance	40,817.	917.	38,659.	1,241.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24a. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PUBLICATIONS/DUES	52,819.	31,958.	14,560.	6,301.
b STAFF DEVELOPMENT	50,697.	17,738.	19,734.	13,225.
c BAD DEBT	3,280.			3,280.
d				
e All other expenses	46,663.	1,650.	43,192.	1,821.
25 Total functional expenses. Add lines 1 through 24e	16,416,961.	11,893,574.	1,211,020.	3,312,367.
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 958-729)

Part X Balance Sheet

Check if Schedule O contains a response to any question in this Part X

		(A) Beginning of year		(B) End of year	
Assets	1	Cash - non-interest-bearing	2,350,583.	1	3,251,162.
	2	Savings and temporary cash investments	1,197,444.	2	3,392,597.
	3	Pledges and grants receivable, net	6,067,049.	3	3,863,208.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see Instr). Complete Part II of Sch L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	103,643.	9	101,201.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,266,119.		
	b	Less: accumulated depreciation	10b 595,185.	10c	670,934.
	11	Investments - publicly traded securities	50,830,374.	11	54,304,128.
	12	Investments - other securities. See Part IV, line 11	5,801,915.	12	4,733,493.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	1,956,643.	15	1,343,928.
16	Total assets. Add lines 1 through 15 (must equal line 34)	69,010,166.	16	71,660,651.	
Liabilities	17	Accounts payable and accrued expenses	365,442.	17	264,796.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	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 Schedule D	555,136.	25	587,992.
	26	Total liabilities. Add lines 17 through 25	920,578.	26	852,788.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	28,600,357.	27	27,319,293.
	28	Temporarily restricted net assets	15,131,560.	28	17,657,737.
	29	Permanently restricted net assets	24,357,671.	29	25,830,833.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	68,089,588.	33	70,807,863.
	34	Total liabilities and net assets/fund balances	69,010,166.	34	71,660,651.

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	16,933,040.
2	Total expenses (must equal Part IX, column (A), line 25)	2	16,416,961.
3	Revenue less expenses. Subtract line 2 from line 1	3	516,079.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	68,089,588.
5	Net unrealized gains (losses) on investments	5	2,197,113.
6	Donated services and use of facilities	6	
7	Investment expenses	7	-162,707.
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	167,790.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	70,807,863.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Form 990 (2012)

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2012

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Name of the organization

THE AMERICAN INDIAN COLLEGE FUND

Employer identification number

52-1573446

Part I 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 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 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.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 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.)
- 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 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 that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I
 - b Type II
 - c Type III - Functionally integrated
 - d Type III - Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11g(i)		
(ii) A family member of a person described in (i) above? 11g(ii)		
(iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii)		
- h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
Total									

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

Schedule A (Form 990 or 990-EZ) 2012

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	16677051.	13230694.	19742859.	17227467.	15200086.	82078157.
2 Tax revenues levied for the organization'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	16677051.	13230694.	19742859.	17227467.	15200086.	82078157.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						82078157.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	16677051.	13230694.	19742859.	17227467.	15200086.	82078157.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...	2011786.	1485835.	1092730.	973,749.	1066896.	6630996.
9 Net income from unrelated business activities, whether or not the business is regularly carried on ...						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	250,904.	9,968.	4,533.	1,440.	3,989.	270,834.
11 Total support. Add lines 7 through 10						88979987.
12 Gross receipts from related activities, etc. (see instructions)					12	213,689.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	92.24	%
15 Public support percentage from 2011 Schedule A, Part II, line 14	15	90.09	%
16a 33 1/3% support test - 2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			<input type="checkbox"/>

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047

2012

Open to Public Inspection

Name of the organization THE AMERICAN INDIAN COLLEGE FUND Employer identification number 52-1573446

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Includes rows for total number at end of year, aggregate contributions, aggregate grants, aggregate value, and questions about donor informed status.

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Form for Part II Conservation Easements. Includes questions about purpose of easements, total number, acreage, and monitoring. Includes a table for 'Held at the End of the Tax Year' with rows 2a, 2b, 2c, 2d.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions about reporting works of art and assets for financial gain.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

- 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	34,751,047.	33,636,474.	26,565,285.	22,910,316.	27,713,348.
b Contributions	2,247,162.	2,486,899.	2,939,666.	708,611.	526,304.
c Net investment earnings, gains, and losses	3,727,941.	843,752.	4,720,398.	3,165,341.	-5,140,749.
d Grants or scholarships	1,288,703.	484,772.	516,957.	218,983.	188,587.
e Other expenditures for facilities and programs					
f Administrative expenses	170,193.	43,802.	71,918.		
g End of year balance	39,267,254.	34,751,047.	33,636,474.	26,565,285.	22,910,316.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment 29.17 %
- b Permanent endowment 61.68 %
- c Temporarily restricted endowment 9.15 %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations		X
(ii) related organizations		X
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		100,000.		100,000.
b Buildings		885,701.	374,033.	511,668.
c Leasehold improvements				
d Equipment		280,418.	221,152.	59,266.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				670,934.

Part VII Investments - Other Securities. 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	4,733,493.	END-OF-YEAR MARKET VALUE
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	4,733,493.	

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CHARITABLE GIFT ANNUITIES	14,683.
(3) HELD IN TRUST FOR OTHERS	573,309.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	587,992.

2. FIN 48 (ASC 740) Footnote. 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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return			
1	Total revenue, gains, and other support per audited financial statements		1 22,643,084.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a 2,197,113.	
b	Donated services and use of facilities	2b 3,507,848.	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d 167,790.	
e	Add lines 2a through 2d		2e 5,872,751.
3	Subtract line 2e from line 1		3 16,770,333.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a 162,707.	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		4c 162,707.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5 16,933,040.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return			
1	Total expenses and losses per audited financial statements		1 19,924,809.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a 3,507,848.	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e 3,507,848.
3	Subtract line 2e from line 1		3 16,416,961.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		4c 0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5 16,416,961.

Part XIII Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4: THE ENDOWMENT IS COMPOSED OF APPROXIMATELY 100 INDIVIDUAL ENDOWMENT FUNDS ESTABLISHED BY DONORS PRIMARILY TO PROVIDE SCHOLARSHIPS AND SUPPORT TO TRIBAL COLLEGE STUDENTS AND TRIBAL COLLEGES, RESPECTIVELY.

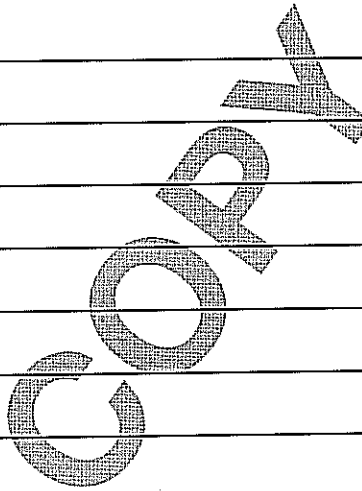
PART X, LINE 2: THE FUND BELIEVES THAT IT HAS CONDUCTED ITS OPERATIONS IN ACCORDANCE WITH, AND HAS PROPERLY MAINTAINED, ITS TAX-EXEMPT STATUS, AND THAT IT HAS TAKEN NO MATERIAL UNCERTAIN TAX POSITIONS THAT QUALIFY FOR

Part XIII Supplemental Information (continued)

RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS. THE FUND IS NO LONGER SUBJECT TO U.S. FEDERAL, STATE AND LOCAL, OR NON-U.S. INCOME TAX EXAMINATIONS BY TAX AUTHORITIES FOR YEARS BEFORE FISCAL YEAR 2010, BASED ON THE STATUTE OF LIMITATIONS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

CHANGE IN VALUE OF CHARITABLE TRUSTS 167,790.



SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding
Fundraising or Gaming Activities

OMB No. 1545-0047

2012

Department of the Treasury
Internal Revenue Service

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

Open To Public
Inspection

Name of the organization **THE AMERICAN INDIAN COLLEGE FUND** Employer identification number **52-1573446**

Part I Fundraising Activities. Complete if the organization answered "Yes" to 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 Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) 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
		Yes	No			
Total						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" to 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.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		2012-2013	2013-2014	NONE	
		GALA	GALA		(add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	372,817.	181,150.	553,967.
	2	Less: Contributions	240,005.	116,618.	356,623.
	3	Gross income (line 1 minus line 2)	132,812.	64,532.	197,344.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs	3,167.	12,500.	15,667.
	7	Food and beverages	33,086.	0.	33,086.
	8	Entertainment	24,237.	21,232.	45,469.
	9	Other direct expenses	76,398.	6,097.	82,495.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			(176,717)
	11	Net income summary. Combine line 3, column (d), and line 10			20,627.

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1	Gross revenue		
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d)				()
8	Net gaming income summary. Combine line 1, column d, and line 7				

9 Enter the state(s) in which the organization operates gaming activities: _____
 a Is the organization licensed to operate gaming activities in each of these states? Yes No
 b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
 b If "Yes," explain: _____

- 11 Does the organization operate 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 operated in:

13a		%
13b		%

 - a The organization's facility
 - b An outside facility
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? 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:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

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 IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No. 1545-0047

2012

Open to Public
Inspection

Name of the organization

THE AMERICAN INDIAN COLLEGE FUND

Employer identification number
52-1573446

Part I General Information on Grants and Assistance

- 1 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 criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Yes No

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN INDIAN HIGHER EDUCATION CONSORTIUM - 121 ORONOCO STREET - ALEXANDRIA, VA 22314	84-0640326	501(C)(3)	130,000.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT
BAY MILLS COMMUNITY COLLEGE 12214 W. LAKESHORE DR. BRIMLEY, MI 49715	38-2604866	501(C)(3)	72,180.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT
BLACKFEET COMMUNITY COLLEGE PO BOX 819 BROWNING, MT 59417	81-0378943	501(C)(3)	86,438.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT
CANKESKA CIKANA COMM COLLEGE PO BOX 269 FT. TOTTEN, ND 58335	45-0350756	501(C)(3)	59,008.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT
CHIEF DULL KNIFE COLLEGE PO BOX 98 LAME DEER, MT 59043	81-0351900	501(C)(3)	59,974.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT
COLLEGE OF THE MENOMINEE NATION PO BOX 1179 KESHENA, WI 54135	39-1773613	501(C)(3)	384,284.	3,756.	FMV	COMPUTER EQUIPMENT	PROVIDE OPERATIONAL & PROGRAM SUPPORT

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **33.**
- 3 Enter total number of other organizations listed in the line 1 table **1.**

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

Schedule I (Form 990) (2012)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II).

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DINE COLLEGE PO BOX 97 TSAILE, AZ 86556	86-0215931	501(C)(3)	268,058.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT
AANI'IIH NAKODA COLLEGE (FORMERLY FORT BELKNAP COLLEGE) - PO BOX 159 - HARLEM, MT 59526	81-0420980	501(C)(3)	57,336.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT
FORT PECK COMMUNITY COLLEGE PO BOX 398 POPLAR, MT 59255	81-0374399	501(C)(3)	74,053.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT
FT BERTHOLD COMMUNITY COLLEGE PO BOX 490 NEW TOWN, ND 58763	45-0322990	501(C)(3)	55,960.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT
HASKELL INDIAN NATIONS UNIVERSITY 155 INDIAN AVE. LAWRENCE, KS 66046	03-0489646	FEDERAL INSTITUT	47,111.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT
ILISAGVIK COLLEGE PO BOX 749 BARROW, AK 99723	92-0158414	501(C)(3)	374,646.	6,432.FMV		COMPUTER EQUIPMENT	PROVIDE OPERATIONAL & PROGRAM SUPPORT
INSTITUTE OF AMERICAN INDIAN ARTS 83 AVAN NU PO RD. SANTA FE, NM 87508	85-0377670	501(C)(3)	60,904.	1,346.FMV		BOOKS	PROVIDE OPERATIONAL & PROGRAM SUPPORT
KEMENAW BAY OJIBWA COMMUNITY COLLEGE - PO BOX 519 - BARAGA, MI 49908	38-1743340	501(C)(3)	27,919.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT
LAC COURTE OREILLES OJIBWAY COMMUNITY COLLEGE - RR2 BOX 2357 - HAYWARD, WI 54843	39-1453493	501(C)(3)	61,760.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LEECH LAKE TRIBAL COLLEGE PO BOX 180 CASS LAKE, MN 56633	75-3061667	501(C)(3)	48,229.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT
LITTLE BIG HORN COLLEGE PO BOX 370 CROW AGENCY, MT 59022	81-0331905	501(C)(3)	76,899.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT
LITTLE PRIEST TRIBAL COLLEGE PO BOX 270 WINNEBAGO, NE 68071	91-1849962	501(C)(3)	36,425.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT
NAVAJO TECHNICAL COLLEGE PO BOX 849 CROWN POINT, NM 87313	85-0303705	501(C)(3)	120,348.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT
NEBRASKA INDIAN COMM COLLEGE PO BOX 428 MACY, NE 68039	47-0623553	501(C)(3)	46,064.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT
NORTHWEST INDIAN COLLEGE 2522 KWANA RD. BELLINGHAM, WA 98226	91-0905644	501(C)(3)	430,015.	5,950.FMV		COMPUTER EQUIPMENT	PROVIDE OPERATIONAL & PROGRAM SUPPORT
OGLALA LAKOTA COLLEGE PO BOX 490 KYLE, SD 57752	23-7135915	501(C)(3)	184,765.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT
SAGINAW CHIPPEWA TRIBAL COLLEGE 2274 ENTERPRISE DR. MT. PLEASANT, MI 48858	38-6178758	501(C)(3)	36,039.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT
SALISH KOOTENAI COLLEGE PO BOX 70 PABLO, MT 59855	81-0378823	501(C)(3)	190,985.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT

Schedule I (Form 990) THE AMERICAN INDIAN COLLEGE FUND

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II).							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SINTE GLESKA UNIVERSITY PO BOX 105 MISSION, SD 57555	46-0312209	501(C)(3)	18,821.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT
SISSETON WAHPETON COLLEGE PO BOX 689 SISSETON, SD 57262	46-0357254	501(C)(3)	52,973.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT
SITTING BULL COLLEGE 1341 92ND STREET FT. YATES, ND 58538	23-7373765	501(C)(3)	72,672.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT
SOUTHWESTERN INDIAN POLYTECHNIC INSTITUTE - 9169 COORS ROAD NW. - ALBUQUERQUE, NM 87184	85-0235298	501(C)(3)	429,116.	4,452.FMV		COMPUTER EQUIPMENT	PROVIDE OPERATIONAL & PROGRAM SUPPORT
STONE CHILD COMMUNITY COLLEGE RR1 BOX 1082 BOX ELDER, MT 59521	81-0420650	501(C)(3)	72,868.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT
TOHONO O'ODHAM COMMUNITY COLLEGE PO BOX 3129 SELLS, AZ 85634	86-0931108	501(C)(3)	44,529.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT
TURTLE MOUNTAIN COMMUNITY COLLEGE PO BOX 340 BELCOURT, ND 58316	45-0323401	501(C)(3)	103,009.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT
UNITED TRIBES TECHNICAL COLLEGE 3315 UNIVERSITY BISMARCK, ND 58504	45-0314233	501(C)(3)	113,467.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT
WHITE EARTH TRIBAL & COMMUNITY COLLEGE - PO BOX 478 - MAHMONEN, MN 56557	41-1978247	501(C)(3)	35,843.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOND DU LAC TRIBAL AND COMMUNITY COLLEGE - 2101 14TH STREET - CLOQUET, MN 55720	41-1816396	501(C)(3)	65,791.	0.			PROVIDE OPERATIONAL & PROGRAM SUPPORT

Part II Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(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 non-cash assistance
SCHOLARSHIPS	3831	5,373,942.	0.		
STUDENT PROGRAMS	163	14,202.	87,303.	BOOK VALUE	TRAVEL, CONVENINGS, AND REGISTRATION FOR STUDENT PROGRAMS
RESEARCH FELLOWSHIPS	8	108,125.	28,814.	BOOK VALUE	TRAVEL, ADVISORY PANEL & PUBLICATION EXPENSES
RESEARCH/FELLOWS RETREATS	15	0.	35,752.	BOOK VALUE	TRAVEL RETREAT EXPENSES
COMMUNITY SUPPORT	384	0.	17,096.	BOOK VALUE	COMMUNITY MEAL & EVENT, AND VARIOUS SUPPORT

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

SCHEDULE I, PART I, LINE 2: TO ENSURE THAT FUNDS ARE PROPERLY DISBURSED TO ELIGIBLE STUDENTS THE FUND REQUIRES TRANSCRIPTS, CLASS SCHEDULES, AND PROOF OF TRIBAL ENROLLMENT OR DESCENDANCY. THE ORGANIZATION MAINTAINS DATA ON ALL SCHOLARSHIP RECIPIENTS IN A DATABASE AND PROVIDES COMPREHENSIVE REPORTS TO DONORS. TRIBAL COLLEGE AND OTHER GRANT ASSISTANCE ARE ALSO MONITORED BY THE ORGANIZATION THROUGH DATA COLLECTION AND COMPREHENSIVE REPORTING TO DONORS. EVERY GRANT BUDGET IS TRACKED IN DETAIL WITHIN THE ORGANIZATION'S ACCOUNTING SYSTEM. DATA IS OBTAINED FROM GRANT RECIPIENTS, INCLUDING TRIBAL COLLEGES, THROUGH SITE VISITS AND REPORTING REQUIREMENTS.

THE AMERICAN INDIAN COLLEGE FUND

Part III Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III.)

(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 non-cash assistance
FACULTY OF THE YEAR AWARDS	30.	15,000.	1,250.	BOOK VALUE	ADMINISTRATIVE FEES FOR PROJECT
FACULTY FELLOWSHIPS	25.	246,000.	40,181.	BOOK VALUE	CONSULTANT FEES, TRAVEL EXPENSES
LEADERSHIP	39.	15,500.	74,510.	BOOK VALUE	TRAVEL, RETREATS FOR STUDENTS

**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" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2012

Open to Public Inspection

Name of the organization

THE AMERICAN INDIAN COLLEGE FUND

Employer identification number

52-1573446

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- First-class or charter travel
- Travel for companions
- Tax indemnification and gross-up payments
- Discretionary spending account
- Housing allowance or residence for personal use
- Payments for business use of personal residence
- Health or social club dues or initiation fees
- Personal services (e.g., maid, chauffeur, chef)

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

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 establish compensation of the CEO/Executive Director, but explain in Part III.

- Compensation committee
- Independent compensation consultant
- Form 990 of other organizations
- Written employment contract
- Compensation survey or study
- Approval by the board or compensation committee

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a Receive a severance payment or change-of-control payment?
 - b Participate in, or receive payment from, a supplemental nonqualified retirement plan?
 - c Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a The organization?
 - b Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a The organization?
 - b Any related organization?
- If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	X	
2	X	
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2012

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

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.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) TAMELA A. MILLER-CARLSON TREASURER	115,435. 0.	10,000. 0.	0. 0.	9,304. 0.	15,984. 0.	150,723. 0.	0. 0.
(2) RICHARD B WILLIAMS SENIOR ADVISOR	175,962. 0.	10,000. 0.	17,500. 0.	14,086. 0.	16,252. 0.	233,800. 0.	0. 0.
(i)							
(ii)							
(iii)							
(i)							
(ii)							
(iii)							
(i)							
(ii)							
(iii)							
(i)							
(ii)							
(iii)							
(i)							
(ii)							
(iii)							
(i)							
(ii)							
(iii)							
(i)							
(ii)							
(iii)							
(i)							
(ii)							
(iii)							
(i)							
(ii)							
(iii)							

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 1A: THE ORGANIZATION PAYS DUES TOTALLING \$24 PER MONTH.

COPIED

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2012

Open to Public Inspection

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.

Name of the organization **THE AMERICAN INDIAN COLLEGE FUND** Employer identification number **52-1573446**

Part	Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art	X	28	9,130.	FAIR MARKET VALUE
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications	X		1,186.	FAIR MARKET VALUE
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded				
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ (<u>COMPUTERS</u>)	X	52	21,534.	FAIR MARKET VALUE
26	Other ▶ (<u>TRAVEL</u>)	X	1	379.	FAIR MARKET VALUE
27	Other ▶ (<u>GIFT CERT</u>)	X	1	50.	FAIR MARKET VALUE
28	Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) (2012)

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2012

Open to Public
Inspection

Name of the organization

THE AMERICAN INDIAN COLLEGE FUND

Employer identification number
52-1573446

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE AMERICAN INDIAN COLLEGE FUND TRANSFORMS INDIAN HIGHER EDUCATION BY
FUNDING AND CREATING AWARENESS OF THE UNIQUE, COMMUNITY-BASED
ACCREDITED TRIBAL COLLEGES AND UNIVERSITIES, OFFERING STUDENTS ACCESS
TO KNOWLEDGE, SKILLS, AND CULTURAL VALUES WHICH ENHANCE THEIR
COMMUNITIES AND THE COUNTRY AS A WHOLE.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

THE AMERICAN INDIAN COLLEGE FUND PROVIDED SCHOLARSHIPS TO OVER 3,800
AMERICAN INDIAN STUDENTS DURING THE FISCAL YEAR, INCLUDING OVER 1,500
FIRST GENERATION COLLEGE STUDENTS. THE MAJORITY OF THE STUDENTS
SERVED, LIVE ON RESERVATIONS AND INTEND TO STAY WITHIN THEIR
COMMUNITIES AND USE THEIR EDUCATION TO HELP ENHANCE THE EDUCATION,
HEALTHCARE, ECONOMIC, AND SOCIAL SERVICES WITHIN THESE COMMUNITIES.
SOME SCHOLARSHIPS INCLUDE LEADERSHIP TRAINING AND INTERNSHIP
OPPORTUNITIES. GRANTS ARE ALSO PROVIDED TO THE TRIBAL COLLEGES AND
UNIVERSITIES TO ENHANCE EDUCATIONAL PROGRAMMING AND SERVICES. GRANTS
INCLUDE FACULTY FELLOWSHIPS FOR TERMINAL DEGREE COMPLETION AND
RESEARCH, PROGRAM DEVELOPMENT, LEADERSHIP TRAINING, CULTURAL
PRESERVATION ACTIVITIES, EQUIPMENT FOR MATH AND SCIENCE, AND OTHER
NEEDS OF THE COLLEGES.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

THE AMERICAN INDIAN COLLEGE FUND UTILIZES A PUBLIC SERVICE

Name of the organization

THE AMERICAN INDIAN COLLEGE FUND

Employer identification number

52-1573446

ANNOUNCEMENT CAMPAIGN TO INFORM THE PUBLIC ABOUT THE UNIQUE, COMMUNITY-BASED, AND ACCREDITED TRIBAL COLLEGES AND UNIVERSITIES (TCUS) AND HOW THEY ARE SUCCESSFULLY CHANGING THE LIVES OF AMERICAN INDIANS. EARNED MEDIA VIA ARTICLES AND INTERVIEWS, ALONG WITH SOCIAL MEDIA, WERE ALSO UTILIZED TO ENHANCE AWARENESS. TCUS ARE OFTEN THE BEST OPTIONS FOR AMERICAN INDIANS TO ATTEND AND SUCCEED IN HIGHER EDUCATION. THE AMERICAN INDIAN COLLEGE FUND GARNERED OVER \$3.5 MILLION IN DONATED ADVERTISING DURING THE FISCAL YEAR TO ENHANCE PUBLIC AWARENESS. AMERICAN INDIANS ARE A CRITICAL TARGET AUDIENCE FOR AWARENESS ACTIVITIES TO ENCOURAGE THEM TO FURTHER THEIR EDUCATION AND CONSIDER TCUS AS VIABLE OPTIONS. AMERICAN INDIAN SCHOLARSHIP APPLICANTS INCREASED OVER 50% THIS PAST YEAR. TCUS ARE ALSO GARNERING INTEREST FROM PRIVATE AND PUBLIC ENTITIES AS INSTITUTIONS PRODUCING IMPORTANT RESEARCH.

FORM 990, PART VI, SECTION B, LINE 11: THE BOARD OF TRUSTEES REVIEWS AND APPROVES THE FORM 990 PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C: ALL TRUSTEES MUST REVIEW AND COMPLETE THE QUESTIONNAIRE WITHIN THE CONFLICT OF INTEREST POLICY ANNUALLY, AND IN DOING SO, MUST IMMEDIATELY DISCLOSE ANY KNOWN OR POSSIBLE CONFLICTS. THE COMPLETED CONFLICT POLICIES ARE THEN GIVEN TO THE ORGANIZATION'S SECRETARY AND FILED. IN ADDITION, IF AN ACTUAL OR POSSIBLE CONFLICT ARISES THROUGHOUT THE YEAR, THE TRUSTEE MUST IMMEDIATELY DISCLOSE THE CONFLICT TO THE BOARD OF TRUSTEES, WHICH IS GENERALLY DONE SO IN MEETING MINUTES (AS THAT IS WHERE CONFLICTS OF INTEREST HAVE GENERALLY ARISEN). FOR EXAMPLE, ON THE EXECUTIVE COMMITTEE, A COMMITTEE MEMBER'S TCU WAS THE RECIPIENT OF ADDITIONAL FUNDING, TO WHICH PRIOR TO THIS AGENDA ITEM DISCUSSION, SHE

Name of the organization

THE AMERICAN INDIAN COLLEGE FUND

Employer identification number

52-1573446

RECUSED HERSELF FROM BOTH THE DISCUSSION AND THE VOTE, AND BOTH OF THESE ACTIONS ARE RECORDED IN THE MEETING MINUTES. IF A TRUSTEE DOES NOT DISCLOSE A CONFLICT, THE GOVERNANCE COMMITTEE IS REQUIRED TO REVIEW THE ISSUE AND MAKE A RECOMMENDATION, INCLUDING APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION IF/AS NEEDED.

FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION FOR TOP MANAGEMENT IS DETERMINED AND APPROVED BY THE BOARD OF TRUSTEES BY USING COMPARABILITY DATA TO SUBSTANTIATE THE DECISION. TOP MANAGEMENT DETERMINES THE COMPENSATION FOR OTHER KEY EMPLOYEES USING COMPARABILITY DATA TO SUBSTANTIATE THE DECISION. THE LAST REVIEW BY THE COMPENSATION COMMITTEE WAS COMPLETED IN OCTOBER, 2012 USING A COMPARABLE EXECUTIVE SALARY SURVEY, AND APPROVED BY THE FULL BOARD IN OCTOBER, 2012.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:
AK, AL, AR, AZ, CA, CO, CT, FL, GA, IL, IN, KS, KY, MA, MD, ME, MI, MN, MT, ND, NH, NJ, NM, NY, OH
OK, OR, RI, SC, TN, UT, VA, WA, WI, WV

FORM 990, PART VI, SECTION C, LINE 19: THE GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST. THE FINANCIAL STATEMENTS ARE POSTED ON THE WEBSITE AS PART OF THE ANNUAL REPORT.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN VALUE OF CHARITABLE TRUSTS 167,790.