PUBLIC DISCLOSURE COPY ** 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.

OMB No. 1545-0047

Department of the Treasury

2024 A For the 2023 calendar year, or tax year beginning JUL2023 and ending JUN C Name of organization D Employer identification number Check if applicable: SIOUX FALLS AREA COMMUNITY Address change FOUNDATION, INC. Name change 31-1748533 Doing business as Initial return E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite Final return/ termin-ated 200 N. CHERAPA PLACE (605)336-7055152,806,887. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended return 57103-2205 SIOUX FALLS, SD H(a) Is this a group return Applica-tion pending F Name and address of principal officer: ANDREW T. PATTERSON for subordinates? Yes X No SAME AS C ABOVE _ Yes 「 **H(b)** Are all subordinates included? Tax-exempt status: X 501(c)(3) 501(c) (527 (insert no.) 4947(a)(1) or If "No," attach a list. See instructions WWW.SFACF.ORG J Website: H(c) Group exemption number **K** Form of organization: **X** Corporation Trust Association Other L Year of formation: 1984 M State of legal domicile: SD Part I Summary Briefly describe the organization's mission or most significant activities: THE SIOUX FALLS AREA COMMUNITY Activities & Governance (SFACF) PROVIDES TRUSTED LEADERSHIP THAT INSPIRES PHILANTHROPY. if the organization discontinued its operations or disposed of more than 25% of its net assets. 15 3 Number of voting members of the governing body (Part VI, line 1a) 15 Number of independent voting members of the governing body (Part VI, line 1b) 4 12 5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 200 Total number of volunteers (estimate if necessary) 6 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 0. 7h **Prior Year Current Year** 27,364,480. 91,995,739. Contributions and grants (Part VIII, line 1h) 8 0. Program service revenue (Part VIII, line 2g) 9,539,552. 14,848,306. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -25,560. -27,074.11 36,878,472. 106,816,971. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 29,356,324. 38,394,837. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,159,656. 1,172,790. 15 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. **b** Total fundraising expenses (Part IX, column (D), line 25) 1,062,908. 1,107,857. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) $31,578,\overline{888}$ 40,675,484. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 66,141,487. 5,299,584. Revenue less expenses. Subtract line 18 from line 12 or **Beginning of Current Year End of Year** 283,123,600. 364,501,593. 20 Total assets (Part X, line 16) 41,423,793. 45,231,726. 21 Total liabilities (Part X, line 26) ᄪ 241,699,807. 319,269,867 Net assets or fund balances. Subtract line 21 from line 20 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. Signature of officer Date Sign ANDREW T. PATTERSON, PRESIDENT/CEO Here Type or print name and title Date PTIN Check Print/Type preparer's name Preparer's signature 04/01/25 self-employed P01278549 JULIE BOYER Paid RSM US LLP Firm's EIN 42-0714325 Preparer Firm's name Firm's address 227 WEST FIRST STREET, SUITE Use Only

DULUTH, MN 55802

No

X Yes

Phone no. 2187275025

Pai	art III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	IN PARTNERSHIP WITH DONORS, SIOUX FALLS AREA COMMUNITY FOUNDATION	
	(SFACF) PROVIDES PHILANTHROPIC LEADERSHIP THAT ASSURES THE QUALITY OF	F
	LIFE IN OUR AREA, FOR GOOD, FOR EVER.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	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?	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, an	ıd
	revenue, if any, for each program service reported.	
4a)
	SIOUX FALLS AREA COMMUNITY FOUNDATION IS A PUBLICLY SUPPORTED COMMUNI	
	FOUNDATION THAT ATTRACTS, MANAGES, AND DISTRIBUTES CHARITABLE CAPITAL	ն.
	ITS PRIMARY SERVICE AREA IS THE SIOUX FALLS MSA, A FOUR-COUNTY AREA	
	WITH A POPULATION OF APPROXIMATELY 275,000, AND OTHER COMMUNITIES	
	WITHIN A 25-MILE RADIUS OF THE CITY OF SIOUX FALLS, SOUTH DAKOTA.	
	SFACF'S GRANTMAKING IS AIMED AT IMPROVING THE QUALITY OF LIFE IN THE	
	SERVICE AREA, FOR GOOD, FOR EVER. IN FY 2024, NEARLY 3,500 GRANTS WEI	RE
	MADE. STUDENTS BENEFITED FROM COMPETITIVELY AWARDED SCHOLARSHIPS AND	
	COMPETITIVELY AWARDED GRANTS WERE MADE TO ORGANIZATIONS THAT SOUGHT	ГО
	ADDRESS THE AREA'S MOST PRESSING NEEDS AND OPPORTUNITIES.	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 39,577,453.	

SIOUX FALLS AREA COMMUNITY FOUNDATION, INC.

Form 990 (2023) FOUNDATION,
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)?		37	
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			7.7
	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			
	during the tax year? If "Yes," complete Schedule C, Part II	4	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 Rev. Proc. 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	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? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	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? 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			37
	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			37
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	37	Х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f			37	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			37
_	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?		37	
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	v
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	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	441.	Х	
45	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Λ	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	4-		Х
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		- 71
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	46		Х
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Λ
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47		Х
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Λ
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	10	х	
10	1c and 8a? If "Yes," complete Schedule G, Part II	18	Λ	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		х
20-	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Λ
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	0.4	х	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Δ	

SIOUX FALLS AREA COMMUNITY
Form 990 (2023) FOUNDATION, INC.
Part IV Checklist of Required Schedules (continued) 31-1748533 Page 4

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		•	
00	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	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? <i>If</i> "Yes," <i>complete</i>			
	,	23	x	
24 a	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23	- 21	
2 7 4	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		Х
b		24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			37
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	00-		Х
00	"Yes," complete Schedule L, Part IV	28c 29	Х	Λ
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	Λ	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	30		Х
31	contributions? If "Yes," complete Schedule M	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
OZ.	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- OL		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		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	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
Da	Note: All Form 990 filers are required to complete Schedule O	38	X	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V			Щ
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 14			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	4.	Х	
	(gambling) winnings to prize winners?	1c	000	

SIOUX FALLS AREA COMMUNITY

023) FOUNDATION, INC.

Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
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 (such as a bank account, securities account, or other financial account)?	4a	X	
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			37
_	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	_	v	
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Λ	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	- .	Х	
-1	to file Form 8282? If "Yes " indicate the number of Forms 8282 filed during the year 7d 3	7c	Λ	
	If "Yes," indicate the number of Forms 8282 filed during the year	7e		Х
f	Did the constitution desired the constitution of the constitution	7 6		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		21
g h	If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?	79 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
Ū	sponsoring organization have excess business holdings at any time during the year?	8		Х
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		Х
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		Х
10	Section 501(c)(7) organizations. Enter:			
а	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:			
а	Gross income from members or shareholders			
	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
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.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	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 13b			
	Enter the amount of reserves on hand			v
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	45		¥
	excess parachute payment(s) during the year?	15		X
16	If "Yes," see the instructions and file Form 4720, Schedule N.	16		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Δ
17	If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities.			
•	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes." complete Form 6069.	.,		

Page 6

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 on Schedule O. See instructions.

X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 15 **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 15 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 X of officers, directors, trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 6 Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο Х 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Х 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 Х 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х The organization's CEO, Executive Director, or top management official Х 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed SD Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Upon request X Own website X Another's website __ Other (explain on Schedule O) Describe on 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. State the name, address, and telephone number of the person who possesses the organization's books and records MIKE FINNEGAN, CFO - (605) 336-7055 200 N. CHERAPA PLACE, SIOUX FALLS, SD 57103-2205

FOUNDATION, INC.

31-1748533

Page 7

Form 990 (2023) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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. See the instructions for the order in which to list the persons above.

Check this box if neither the organization ne	or any related	orga	niza	tion	con	npen	sate	ed any current officer, d	rector, or trustee.	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average hours per week	box	not c , unle	heck ss pe	rson is	than o s both r/trus	an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) ANDREW PATTERSON	50.00								_	
PRESIDENT/CEO				Х				182,935.	0.	50,795.
(2) MIKE FINNEGAN	50.00	-						110 510		40 =44
VP, FINANCE/CFO				Х				118,613.	0.	13,511.
(3) MARY KOLSRUD	50.00	-						110 070		
VP, PHILANTHROPY				Х				112,078.	0.	20,972.
(4) TODD ERNST	2.00									
CHAIR OF THE BOARD		Х		Х				0.	0.	0.
(5) SUZANNE VEENIS	2.00									_
VICE CHAIR		Х		X				0.	0.	0.
(6) MATT GASSEN	2.00									
SECRETARY		Х		Х				0.	0.	0.
(7) AARON SEVERSON	2.00									•
TREASURER, CHAIR OF FINANCE	0 00	X		Х				0.	0.	0.
(8) AMANGE AWARE	2.00								•	•
MEMBER	0 00	X						0.	0.	0.
(9) STACY ERDMANN	2.00								•	•
CHAIR OF AUDIT	0 00	X						0.	0.	0.
(10) MANDY GAIKOWSKI	2.00								•	•
CHAIR OF LEGAL/EASTBANK LAND	0 00	X						0.	0.	0.
(11) MARILYN KORSTEN	2.00	.,							•	0
CHAIR OF GRANTS	2 00	Х						0.	0.	0.
(12) ANGELA LAMMERS	2.00	7,							0	0
MEMBER (42)	2 00	Х						0.	0.	0.
(13) ANGELINE LAVIN	2.00	7,							0	0
CHAIR OF INV. MNGMT. (BEG. 01/24)	2 00	Х						0.	0.	0.
(14) LORRAE LINDQUIST	2.00	7,							0	0
MEMBER (45.) GARAN MARTEN	2 00	Х						0.	0.	0.
(15) SARAH MADISON	2.00	7,							0	0
CHAIR OF INV. MNGMT. (THROUGH 01/24)	2 00	Х						0.	0.	0.
(16) STEVE SARBACKER	2.00	٦,						_	_	0
CHAIR OF GIFT ACCEPTANCE	2 00	Х						0.	0.	0.
(17) PAT SWEETMAN	2.00	1								

Form **990** (2023)

MEMBER

Form 990 (2023) F OUNDATIO	JN, INC.	•							21-1	<u>/40</u>	<u> </u>	Р	age c
Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees,	and	jH t	ghes	st C	ompensated Employee	s (continued)				
(A) Name and title	(B) Average hours per week	Average Position (do not check more than one box, unless person is both an						(D) Reportable compensation from	(E) Reportable compensation from related		an	(F) timate nount other	of
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organization (W-2/1099-MIS 1099-NEC)	s	com fr org and	pensa om th anizat d relat anizati	ation e tion ted
(18) DOUG TRIBBLE	2.00	7,						0		0			_
MEMBER (19) BEN WIENER	2.00	X						0.		0.	<u> </u>		0.
MEMBER	2.00	X						0.		0.			0.
1b Subtotal								413,626.		0.	8	5,2	78.
c Total from continuation sheets to Part VI								0.		0.			0.
d Total (add lines 1b and 1c) Total number of individuals (including but no								413,626. eceived more than \$100,	000 of reportable	0.	8.	5,2	78.
compensation from the organization												Yes	No
3 Did the organization list any former officer,	director, trust	ee, k	кеу е	empl	loye	e, or	hig	hest compensated emp	loyee on			100	
line 1a? If "Yes," complete Schedule J for so	uch individual										3		Х
4 For any individual listed on line 1a, is the su												v	
and related organizations greater than \$150Did any person listed on line 1a receive or a											4	X	
rendered to the organization? If "Yes." com											5		Х
Section B. Independent Contractors													
1 Complete this table for your five highest countries the organization. Report compensation for the organization.										ensa	tion fro	om	
(A)	ine calendar y	carc	ariuli	ig w	Turr	JI WI		(B)	cai.		(C	;)	
Name and business	address	NC	ONE	3				Description of s	ervices	C	compe		n
2 Total number of independent contractors (in	acluding but a	ot lin	niter	d to	thos	se lie	ted	above) who received me	ore than				
- rotal number of independent contractors (ii	iolading but II	Ot 111			105	JU 115	, ccu	above, with tecented III	JI U II III I				

0

\$100,000 of compensation from the organization

SIOUX FALLS AREA COMMUNITY FOUNDATION, INC.

Form 990 (2023) FOUNDAT
Part VIII Statement of Revenue

		Check if Schedule O	conta	ains a re	sponse	or note to any lin	e in this Part VIII			
					<u>'</u>	•	(A)	(B)	(C)	(D)
							Total revenue	Related or exempt function revenue	Unrelated	Revenue excluded from tax under
								Tunction revenue	business revenue	sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns		-	la					
ant		Membership dues			lb					
င်္ခ ဇိ		Fundraising events		⊢	lc	146,550.				
Ę,		Related organizations			ld					
ية ق		Government grants (contr			le					
Sin		All other contributions, gifts,			ie					
uti e	1		-		ا ء	91,849,189.				
들		similar amounts not included			lf 💮	6,608,945.				
o d	g		lines 1	a-1f []	lg \$	0,000,945.	01 005 730			
<u>0</u> <u>a</u>	n	Total. Add lines 1a-1f				B 0. 4.	91,995,739.			
						Business Code				
<u>e</u>	2 a	·								
e Z	b									
S T	С									
g a	d									
Program Service Revenue	е									
₫	f	All other program service	rever	nue						
	g	Total. Add lines 2a-2f								
	3	Investment income (include	ling c	dividenc	ls, intere	st, and				
		other similar amounts)					10,293,247.			10293247.
	4	Income from investment of	of tax-	-exemp	bond p	roceeds				
	5	Royalties								
				(i) F	Real	(ii) Personal				
	6 a	Gross rents	6a							
	b	Less: rental expenses	6b							
	С	Rental income or (loss)	6с							
	d	Net rental income or (loss))							
		Gross amount from sales of			urities	(ii) Other				
		assets other than inventory	7a	50,50	4,451.					
	h	Less: cost or other basis	1.5	,	•					
<u>o</u>	_	and sales expenses	7h	45.94	6,309.	3,083.				
ther Revenue	_	Gain or (loss)			8,142.					
ě		Net gain or (loss)				-	4,555,059.			4555059.
<u>*</u>		Gross income from fundraisi					2,233,333			
	0 a	including \$								
0		contributions reported on								
						13,450.				
	L	Part IV, line 18				1				
							-27,074.			-27,074.
		 Net income or (loss) from Gross income from gamin 					27,074.			27,074.
	y a		-							
		Part IV, line 19								
		Less: direct expenses								
		Net income or (loss) from			rities					
	10 a	Gross sales of inventory, I								
		and allowances								
		Less: cost of goods sold								
$\overline{}$	С	Net income or (loss) from	sales	of inve	ntory					
က္						Business Code				
Miscellaneous Revenue	11 a	·								
an en	b									
ee See	С									
Mis	d	All other revenue								
	е	Total. Add lines 11a-11d								
	12	Total revenue. See instruction	ns				106816971.	0.	0.	14821232.

Form 990 (2023) FOUNDATION, II 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 respon									
	not include amounts reported on lines 6b, 3b, 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 domestic organizations									
	and domestic governments. See Part IV, line 21	37,881,537.	37,881,537.							
2	Grants and other assistance to domestic									
	individuals. See Part IV, line 22	513,300.	513,300.							
3	Grants and other assistance to foreign									
	organizations, foreign governments, and foreign									
	individuals. See Part IV, lines 15 and 16									
4	Benefits paid to or for members									
5	Compensation of current officers, directors,	E44 040	450 005	100 500	222 612					
	trustees, and key employees	511,243.	178,935.	122,698.	209,610.					
6	Compensation not included above to disqualified									
	persons (as defined under section 4958(f)(1)) and									
	persons described in section 4958(c)(3)(B)	E02 420	176 107	100 001	206 402					
7	Other salaries and wages	503,420.	176,197.	120,821.	206,402.					
8	Pension plan accruals and contributions (include	40 E22	14 007	10 200	17 /20					
_	section 401(k) and 403(b) employer contributions)	42,533. 46,133.	14,887. 16,147.	10,208.	17,438. 18,914.					
9	Other employee benefits	69,461.	24,311.							
10	Payroll taxes	03,401.	24,311.	16,671.	28,479.					
11	Fees for services (nonemployees):	8,411.	2,187.	2,860.	3,364.					
a	Management	30,097.	7,825.	10,233.	12,039.					
D	Legal	30,057.	7,025.	10,233.	12,033.					
ر د	Accounting									
u	Lobbying Professional fundraising services. See Part IV, line 17									
f	Investment management fees									
g	Other. (If line 11g amount exceeds 10% of line 25,									
9	column (A), amount, list line 11g expenses on Sch 0.)									
12	Advertising and promotion	126,680.	12,668.		114,012.					
13	Office expenses	83,491.	29,467.	19,350.	34,674.					
14	Information technology	58,955.	20,635.	14,149.	24,171.					
15	Royalties	-	-							
16	Occupancy	20,954.	7,334.	5,029.	8,591.					
17	Travel	5,134.	1,797.	1,232.	2,105.					
18	Payments of travel or entertainment expenses									
	for any federal, state, or local public officials									
19	Conferences, conventions, and meetings	19,510.	6,828.	4,683.	7,999.					
20	Interest									
21	Payments to affiliates									
22	Depreciation, depletion, and amortization	55,886.	19,560.	13,413.	22,913.					
23	Insurance	18,246.	6,386.	4,379.	7,481.					
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)									
а	LIFE INSURANCE PREMIUM	375,495.	375,495.							
b	DIRECT FUND EXPENSES	270,408.	270,408.							
c	ORGANIZATIONAL DUES	18,348.	1,834.	8,257.	8,257.					
d	SCHOLARSHIP AND GRANTMA	7,997.	7,997.	•	•					
е	All other expenses	8,245.	1,718.	4,002.	2,525.					
25	Total functional expenses. Add lines 1 through 24e	40,675,484.	39,577,453.	369,057.	728,974.					
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)				5 990 (2222)					

Form 990 (2023)
Part X Balance Sheet

Pai	rt X	Balance Sneet					
		Check if Schedule O contains a response or note	to an	y line in this Part X	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			3 3 ,	1	,
	2	Savings and temporary cash investments			56,366,522.	2	77,705,802.
	3	Pledges and grants receivable, net			1,025,219.	3	45,056,774.
	4				1,025,215	4	45,050,1744
	5	Accounts receivable, net Loans and other receivables from any current or				4	
	3	trustee, key employee, creator or founder, substa					
		controlled entity or family member of any of these				5	
	6	Loans and other receivables from other disqualifi				3	
	"	under section 4958(f)(1)), and persons described	-	·		6	
	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use		8			
Ass	9	5			16,534.	9	236,162.
		Land, buildings, and equipment: cost or other	I		20,0021		200,2021
	104	basis. Complete Part VI of Schedule D	10a	2,089,353.			
	b		10b	1,343,843.	10c	1,498,873.	
	11	Investments - publicly traded securities		590,480.	211,459,017.	11	231,698,208.
	12	Investments - other securities. See Part IV, line 1	4,004,704.	12	14,918.		
	13	Investments - program-related. See Part IV, line 1	2,002,7020	13	22/3200		
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	8,907,761.	15	8,290,856.		
	16	Total assets. Add lines 1 through 15 (must equa			283,123,600.	16	364,501,593.
	17	Accounts payable and accrued expenses			89,851.	17	241,114.
	18	Grants payable	96,400.	18	30,000.		
	19	Deferred revenue	•	19	,		
	20					20	
	21	Escrow or custodial account liability. Complete F				21	
w	22	Loans and other payables to any current or former					
Liabilities		trustee, key employee, creator or founder, substa					
liqe		controlled entity or family member of any of these				22	
Ë	23	Secured mortgages and notes payable to unrelate				23	
	24	Unsecured notes and loans payable to unrelated	third p	parties		24	
	25	Other liabilities (including federal income tax, pay	ables	to related third			
		parties, and other liabilities not included on lines	17-24)	. Complete Part X			
		of Schedule D			41,237,542.	25	44,960,612.
	26	Total liabilities. Add lines 17 through 25			41,423,793.	26	45,231,726.
		Organizations that follow FASB ASC 958, chec	k here	e X			
sec		and complete lines 27, 28, 32, and 33.					
Fund Balances	27	Net assets without donor restrictions			228,933,876.	27	264,336,628.
Ba	28	Net assets with donor restrictions			12,765,931.	28	54,933,239.
u		Organizations that do not follow FASB ASC 95	8, che	eck here			
Ę		and complete lines 29 through 33.					
Net Assets or	29	Capital stock or trust principal, or current funds				29	
set	30	Paid-in or capital surplus, or land, building, or equ	uipmer	nt fund		30	
As	31	Retained earnings, endowment, accumulated inc				31	
Net	32	Total net assets or fund balances			241,699,807.	32	319,269,867.
	33	Total liabilities and net assets/fund balances			283,123,600.	33	364,501,593.

Pai	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	10	5,81	6,9	71.	
2	Total expenses (must equal Part IX, column (A), line 25)	2	4	0,67	5,4	84.	
3	Revenue less expenses. Subtract line 2 from line 1	3		5,14			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	24	L,69	9,8	07.	
5	Net unrealized gains (losses) on investments	5	1	5,13	9,1	66.	
6	Donated services and use of facilities Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain on Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII						
7	5 Net unrealized gains (losses) on investments 5 15 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 on Schedule O) 9 -3 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 319 Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 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 on 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		-29	8,0	00.		
8		8					
9							
10							
		10	31	9,26	9,8	67.	
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII						
					Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
		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					
	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	Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate						
	consolidated basis, or both:						
	Separate basis X Consolidated basis Both consolidated and separate basis						
С	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?			2c	X		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule C).				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the						
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require		it				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b			

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Name of the organization

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.

SIOUX FALLS AREA COMMUNITY

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

OMB No. 1545-0047

Employer identification number

Open to Public Inspection

FOUNDATION 31-1748533 INC. 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 12, check only one box.) 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).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 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: 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). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 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.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on 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 II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions))

31-1748533 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	ection A. Public Support											
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total					
1	Gifts, grants, contributions, and											
	membership fees received. (Do not											
	include any "unusual grants.")	30154146.	50222045.	65836782.	27364480.	91995739.	265573192					
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	30154146.	50222045.	65836782.	27364480.	91995739.	265573192					
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)						108706727					
	Public support. Subtract line 5 from line 4.						156866465					
Sec	tion B. Total Support											
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total					
7	Amounts from line 4	30154146.	50222045.	65836782.	27364480.	91995739.	265573192					
8	Gross income from interest,											
	dividends, payments received on											
	securities loans, rents, royalties,											
	and income from similar sources	4355899.	4022761.	6176870.	7800481.	10293247.	32649258.					
9	Net income from unrelated business											
	activities, whether or not the											
	business is regularly carried on											
10	Other income. Do not include gain											
	or loss from the sale of capital											
	assets (Explain in Part VI.)											
11	Total support. Add lines 7 through 10						298222450					
	Gross receipts from related activities					12						
13	First 5 years. If the Form 990 is for the	he organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	01(c)(3)						
	organization, check this box and sto						<u></u>					
	tion C. Computation of Publ						F0 C0					
	Public support percentage for 2023 (14	52.60 %					
	Public support percentage from 2022					15	57.21 %					
16a	33 1/3% support test - 2023. If the	· ·		•		•	v					
	stop here. The organization qualifies		-									
D	33 1/3% support test - 2022. If the			41								
47-	and stop here. The organization qua		•		- 10 1010h							
17a	10% -facts-and-circumstances test											
	and if the organization meets the fact meets the facts-and-circumstances to			=	•	viriow the organi	zauon -					
L	10% -facts-and-circumstances test	•	•			17a, and line 15 is	L					
D	more, and if the organization meets t	ū				•	1070 UI					
	organization meets the facts-and-circ				-							
12	Private foundation. If the organization											
10	i iivate iounuation. Ii the organizatio	on did not oneck a	DUA ULI III IE 13, 10	a, 100, 11a, 01 1/k	o, oneon uns bux a	na see manuchon	<u> </u>					

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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 per-						
	formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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						
78	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						
	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support		1		1		
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b,						
	whether or not the business is						
40	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	•					
80	check this box and stop here ction C. Computation of Publi						
	•			L		45	
	Public support percentage for 2023 (I					15	<u>%</u>
	Public support percentage from 2022 ction D. Computation of Investigation					16	%
	•			no 12 polymp (f)		17	
	Investment income percentage for 20					18	<u>%</u>
18	Investment income percentage from a 33 1/3% support tests - 2023. If the			on line 14, and line			7 is not
196							/ 19 IIUL
Į.	more than 33 1/3%, check this box ar						L
į.	33 1/3% support tests - 2022. If the line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						
20	Frivate iounication. Il the organization	in ala not check a	DOX OH III IC 14, 19	a, or 130, CHECK III	iio dux aitu see iits		

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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 on 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 on 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 line 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.)

		Yes	No
	1		
	2		
	За		
	3b		
	JD		
	2-		
	3c		
	_		
	4a		
	4b		
	4c		
	5a		
	- Ju		
	5b		
	5c		
	5 C		
	6		
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	8		
	9a		
	9b		
	9с		
	10a		
	10b		
lul-	A (Forn	n QQAN	2023
.uic	~ (1 01 1	550)	

Par	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	ction B. Type I Supporting Organizations			I
			Yes	No
	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one su			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated amo	ng the		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
Sact	supervised, or controlled the supporting organization.	2		
Seci	Ston C. Type if Supporting Organizations		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
			Yes	No
	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	1		
Sect	the supported organization(s). ction D. All Type III Supporting Organizations			
	such 217 iii 1940 iii Gapporung Grganii auche		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		163	140
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	,		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
	By reason of the relationship described on line 2, above, did the organization's supported organizations have a	_		
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	ction 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 year (see in	ıstructions).		
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 governmental entity.	entity (see instruction	ns).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
	, , ,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in	-		
	these activities but for the organization's involvement.	2b		
	Parent of Supported Organizations. Answer lines 3a and 3b below.			
		0-		
	trustees of each of the supported organizations? <i>If</i> "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Ves " describe in Part VI the role played by the organization in this regard	3b		
	OF ITS SUPPORTED VIUGITEATIONS: IF THE CHESCRIPE IN FAIL VI THE ROLE HISVAR BY THE ARGENT IN THE REASER	1 30	1	i

SIOUX FALLS AREA COMMUNITY

FOUNDATION, INC. Schedule A (Form 990) 2023

31-1748533 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 Section A - Adjusted Net Income (A) Prior Year (optional) Net short-term capital gain 1 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 4 4 Add lines 1 through 3. 5 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) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities 1a **b** Average monthly cash balances 1b **c** Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt-use assets 2 3 3 Subtract line 2 from line 1d. Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, 4 see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Multiply line 5 by 0.035. 6 6 Recoveries of prior-year distributions 7 7 8 Minimum Asset Amount (add line 7 to line 6) Section C - Distributable Amount Current Year 1 Adjusted net income for prior year (from Section A, line 8, column A) 1 Enter 0.85 of line 1. 2 Minimum asset amount for prior year (from Section B, line 8, column A) 3 3 Enter greater of line 2 or line 3. 4 4 Income tax imposed in prior year 5 5 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

6

Schedule A (Form 990) 2023

emergency temporary reduction (see instructions).

instructions)

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations _{(continu}	ued)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	5	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pri	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
	Line 8 amount divided by line 9 amount			10	
	-	(i)	(ii)		(iii)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2023	ns	Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
а	From 2018				
b	From 2019				
С	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
-	and 4c.				
8	Breakdown of line 7:				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				
	Excess from 2023				
	LAUCUS II OIII EUEU				

Schedule A (Form 990) 2023

SIOUX FALLS AREA COMMUNITY 31-174<u>8533 Page 8</u> FOUNDATION, INC. Schedule A (Form 990) 2023 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. Part VI (See instructions.)

332028 12-21-23 Schedule A (Form 990) 2023

SCHEDULE C

Department of the Treasury

Internal Revenue Service

(Form 990)

Political Campaign and Lobbying Activities

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

90 or Form 990-EZ. Open to Public

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.

Inspection

OMB No. 1545-0047

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) organizations: Complete Part III. Name of organization **Employer identification number** SIOUX FALLS AREA COMMUNITY 31-1748533 FOUNDATION, INC. Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political campaign activity expenditures Volunteer hours for political campaign activities Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 \$ 2 Enter the amount of any excise tax incurred by organization managers under section 4955 \$\,_\\$ 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No 4a Was a correction made? Yes Nο b If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Part I-C 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ______\$ 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses, and employer identification number (EIN) of all section 527 political organizations to which the filing organization 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 promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (d) Amount paid from (a) Name (b) Address (c) EIN (e) Amount of political contributions received and filing organization's promptly and directly funds. If none, enter -0-. delivered to a separate political organization. If none, enter -0-.

SIOUX FALLS AREA COMMUNITY FOUNDATION, INC.

Schedule C (Form 990) 2023

31-17<u>48</u>533 Page 2

Part II-A Complete if the org section 501(h)).	anization is exen	npt under sectio	n 501(c)(3) and file	d Form 5768 (el	ection under
	tion belongs to an affi re of excess lobbying of	•	n Part IV each affiliated (group member's nam	e, address, EIN,
B Check if the filing organiza	tion checked box A ar	nd "limited control" pr	ovisions apply.		
	ts on Lobbying Expe ditures" means amou		.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	uence public opinion (grassroots lobbying)			
b Total lobbying expenditures to influ					
c Total lobbying expenditures (add li	~				
d Other exempt purpose expenditure					
e Total exempt purpose expenditure			F		
f Lobbying nontaxable amount. Ente					
If the amount on line 1e, column (a) o		bying nontaxable an			
not over \$500,000,		the amount on line 1e			
over \$500,000 but not over \$1,000					
over \$1,000,000 but not over \$1,5	<i>' ' ' ' ' ' ' ' ' '</i>	\$175,000 plus 10% of the excess over \$1,000,000.			
over \$1,500,000 but not over \$17,		\$225,000 plus 5% of the excess over \$1,500,000.			
over \$17,000,000,		\$1,000,000.			
g Grassroots nontaxable amount (en					
h Subtract line 1g from line 1a. If zer	<i>,</i>				
i Subtract line 1f from line 1c. If zero	o or less, enter -0-				
j If there is an amount other than ze			•		
reporting section 4911 tax for this	_				Yes No
-		eraging Period Unde			
(Some organizations t		01(h) election do not ate instructions for l	have to complete all o ines 2a through 2f.)	f the five columns b	elow.
	Lobbying Exper	nditures During 4-Ye	ear Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990) 2023

Schedule C (Form 990) 2023 FOUNDATION, INC. 31-17485 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 e	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a	1)	(b)
	e lobbying activity.	Yes	No	Amo	unt
1	During the year, did the filing organization attempt to influence foreign, national, state, or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?		X		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X		
	Media advertisements?		X		
	Mailings to members, legislators, or the public?		X		
	Publications, or published or broadcast statements?		X X		
f	Grants to other organizations for lobbying purposes?		X		
9	Direct contact with legislators, their staffs, government officials, or a legislative body?		X		
n :	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?	Х		6	,000.
		Λ		6	,000.
	Total. Add lines 1c through 1i Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?		Х		,000.
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5), or sec	tion	
	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 the				
Pai	t III-B Complete if the organization is exempt under section 501(c)(4), sectio		•		
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"No" OR	(b) Part I	II-A, line	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				
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b	Carryover from last year		2b		
С	Total		-		
3	The state of the s		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the exceeds the amount on line 3, what portion of the exceeds the	ess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and poly	olitical			
	expenditures next year?		4		
5	Taxable amount of lobbying and political expenditures. See instructions		5		
Pai					
	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-	A, lines 1 ar	nd 2 (see	
	uctions); and Part II·B, line 1. Also, complete this part for any additional information. RT II-B, LINE 1, LOBBYING ACTIVITIES:				
COI	NTRACTED WITH A FIRM THAT INFORMS AND ADVOCATES FOR	NON-PR	OFIT		
EN'	TITIES. THIS MAY INCLUDE LOBBYING.				

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.

OMB No. 1545-0047 Inspection

Name of the organization

SIOUX FALLS AREA COMMUNITY FOUNDATION, INC.

Employer identification number 31-1748533

Pai	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		iius UI AC	Complete if the
		(a) Donor advised funds		(b) Funds and other accounts
1	Total number at end of year	5	29	
2	Aggregate value of contributions to (during year)	69,396,96	5.	
3	Aggregate value of grants from (during year)	22,256,83		
4	Aggregate value at end of year	201,731,12	0.	
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor	advised fund	ds
	are the organization's property, subject to the organization's e	xclusive legal control?		X Yes I
6	Did the organization inform all grantees, donors, and donor ad	visors in writing that grant funds ca	ın be used o	nly
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purp	oose conferr	ing
Pai	t II Conservation Easements. Complete if the organic	anization answered "Yes" on Form	990, Part IV,	line 7.
1	Purpose(s) of conservation easements held by the organization	n (check all that apply)		
	Preservation of land for public use (for example, recreati	on or education) 🔲 Preservat	ion of a histo	orically important land area
	Protection of natural habitat	Preservat	ion of a certi	fied historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified	ed conservation contribution in the	form of a co	nservation easement on the last
	day of the tax year.			Held at the End of the Tax Ye
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			2b
С	Number of conservation easements on a certified historic structure	cture included on line 2a		2c
d	Number of conservation easements included on line 2c acquir	ed after July 25, 2006, and not		
	on a historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele	ased, extinguished, or terminated b	y the organi	zation during the tax
	year			
4	Number of states where property subject to conservation ease	ment is located		
5	Does the organization have a written policy regarding the period	odic monitoring, inspection, handlin	g of	
	violations, and enforcement of the conservation easements it h			
6	Staff and volunteer hours devoted to monitoring, inspecting, h	andling of violations, and enforcing	conservatio	on easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handli	ng of violations, and enforcing con-	servation ea	sements during the year
_			4 7 0 (L) (4) (D) ("	
8	Does each conservation easement reported on line 2d above s	•		
_	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservation	•		
	balance sheet, and include, if applicable, the text of the footnot	ite to the organization's financial st	atements tha	at describes the
Pai	organization's accounting for conservation easements. † III Organizations Maintaining Collections of A	Art Historical Treasures o	r Other S	imilar Assets
	Complete if the organization answered "Yes" on Form 9			
	If the organization elected, as permitted under FASB ASC 958		ent and hala	ance sheet works
ıu	of art, historical treasures, or other similar assets held for publ			
	service, provide in Part XIII the text of the footnote to its finance	•		ice of public
h	If the organization elected, as permitted under FASB ASC 958			sheet works of
J	art, historical treasures, or other similar assets held for public of			
	provide the following amounts relating to these items.	on indication, or research in	i iditiidiaile	or public scrivics,
	(i) Revenue included on Form 990, Part VIII, line 1			\$
				· ·
2	If the organization received or held works of art, historical treas	sures or other similar assets for fin		
~	the following amounts required to be reported under FASB AS		anoiai yaii i, j	provide
•	Revenue included on Form 990, Part VIII, line 1	_		\$
	Accepts included in Form 900. Part Y			\$

	t III Organizations Maintaining Co	Ollections of Art	Historical Tre	asures or Oth	er Simil	ar ∆esete	40000	Page Z
							(continu	ea)
3	Using the organization's acquisition, accession	on, and other records	s, check any of the f	ollowing that make	significan	t use of its		
_	collection items (check all that apply).			h				
a	Public exhibition	d		hange program				
b	Scholarly research	е	Other					
C 4	Preservation for future generations	llastians and avalain	how though without the	o organization's ov	ament never	ann in Dart	VIII	
4	Provide a description of the organization's co During the year, did the organization solicit or	•	•	•		ose in Part	AIII.	
5	to be sold to raise funds rather than to be ma						Yes	☐ No
Par	t IV Escrow and Custodial Arrang				n Form 00			NO
. u.	reported an amount on Form 990, Par		e ii tile organization	ranswered res c	111 01111 99	u, raitiv, ii	ne a, or	
12	Is the organization an agent, trustee, custodia		iany for contribution	e or other accete n	ot included	4		
Ia	on Form 990, Part X?						Yes	☐ No
h	If "Yes," explain the arrangement in Part XIII a	and complete the follo	owing table:				_ 163	140
b	ii res, explain the arrangement iii art Air a	and complete the follo	owing table.				Amount	
С	Beginning balance				1c			
	Additions during the year							
	Distributions during the year							
f	Ending balance							
2a	Did the organization include an amount on Fo						Yes	No
	If "Yes," explain the arrangement in Part XIII.						_	
Par								
	·	(a) Current year	(b) Prior year	(c) Two years back		years back	(e) Four y	ears back
1a	Beginning of year balance	159,115,668.	148,463,903.	171,365,391	. 116	715,901.	111,5	81,732.
	Contributions	3,456,785.	2,975,090.	4,281,750	. 28	126,583.	1,6	56,723.
С	Net investment earnings, gains, and losses	17,935,782.	13,843,062.	-22,500,137	. 29	889,938.	5,9	52,604.
d	Grants or scholarships	4,872,714.	5,096,163.	3,533,574	. 2	342,995.	1,5	88,204.
е	Other expenditures for facilities							
	and programs							
f	Administrative expenses	1,127,837.	1,070,224.	1,149,527	. 1	024,036.	8	86,954.
g	End of year balance	174,507,684.	159,115,668.	148,463,903	. 171	365,391.	116,7	15,901.
2	Provide the estimated percentage of the curre	ent year end balance	(line 1g, column (a)) held as:				
а	Board designated or quasi-endowment	94.0000	_%					
b	Permanent endowment 5.0000	%						
С	Term endowment 1.0000	%						
	The percentages on lines 2a, 2b, and 2c should	uld equal 100%.						
3a	Are there endowment funds not in the posses	ssion of the organizat	tion that are held ar	nd administered for	the			
	organization by:						Y	es No
	(i) Unrelated organizations?						3a(i)	X
							3a(ii)	X
b	If "Yes" on line 3a(ii), are the related organizate						3b	
4	Describe in Part XIII the intended uses of the		vment funds.					
Par	t VI Land, Buildings, and Equipme		David IV 18 44 - 0	F 000 Dt	V 15 40			
	Complete if the organization answered					.		
	Description of property	(a) Cost or ot	` '	, ,	Accumula		(d) Book	value
		basis (investm		(otrier)	depreciation	71.1	204	120
_	Land	4 40 6 4			157 4	0.6.1		<u>,129.</u>
b	Buildings		.00.		457,9	, O.T.	918	<u>,207.</u>
C	Leasehold improvements		011		132,	510	-	,692.
d	Equipment	200 0			104,) T 3 •		,845.
	Other			(5))			$\frac{209}{1,498}$	
rotal	. Add lines 1a through 1e. (Column (d) must ed	gual Form 990. Part ∑	K. IIne 10c. column	(B))			, O	,013.

		DICOM IMPED	MILLIA COMMON	. 4 4	
Schedule D	(Form 990) 2023	FOUNDATION,	INC.		31-
Part VII	Investments -	Other Securities			
	Complete if the org	ganization answered "Yes" o	on Form 990, Part IV, line	e 11b. See Form 990, Part X, line 12.	
(a) Descrip	tion of security or cate	GOTY (including name of security)	(b) Book value	(c) Method of valuation: Cost	or end-o

·	, ,	· · · · · · · · · · · · · · · · · · ·
(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)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		

Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))

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)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

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	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	

Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))

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)	CHARITABLE GIFT ANNUITY PAYABLE	150,493.
(3)	ASSETS HELD FOR OTHERS	44,810,119.
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, line 25, col. (B))	44,960,612.

2. 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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... X

Schedule D (Form 990) 2023 FOUNDATION, INC. 31Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

· u	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		Hereinae per He		
1	Table and the second of the se			1	115,746,426.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			•	113,710,1200
a	Net unrealized gains (losses) on investments	2a	15,139,166.		
b	Donated services and use of facilities			-	
c	Recoveries of prior year grants			-	
d	Other (Describe in Part XIII.)		-5,952,235.	-	
e	Add lines 2a through 2d			2e	9,186,931.
3	Subtract line 2e from line 1				106,559,495.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	298,000.		
b	Other (Describe in Part XIII.)		-40,524.		
С	Add lines 4a and 4b			4c	257,476.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990. Part I. line 12.)				106,816,971.
Pai	t XII Reconciliation of Expenses per Audited Financial Stateme	ents W	ith Expenses per F	Retur	n
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	38,176,366.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments				
С	Other losses				
d	Other (Describe in Part XIII.)	2d	-2,539,642.		
е	Add lines 2a through 2d			2e	-2,539,642.
3	Subtract line 2e from line 1			3	40,716,008.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	-40,524.		
С	Add lines 4a and 4b			4c	-40,524.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	40,675,484.
Pai	t XIII Supplemental Information				
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part			; Part :	X, line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addi	tional inf	ormation.		
PAF	RT X, LINE 2:				
m+++	CONTRACT OF COUNTY DAYLORA HAG NO THOUSE WAY	m		~ ~	
THE	STATE OF SOUTH DAKOTA HAS NO INCOME TAX.	THE	FOUNDATION I	SA	
m 7 2	Z EVENDE ODGANIZACION LINDED GEOGRON E01/G\/	2 \ 0	r miir thmrh	7 T	יייייייייייייייייייייייייייייייייייייי
TA2	X-EXEMPT ORGANIZATION UNDER SECTION 501(C)(3) 0	F THE INTERN	АЬ.	REVENUE
COL	DE; HOWEVER, THE FOUNDATION IS REQUIRED TO	DAV	TMCOME MAY O	NT T	m.c
COL	DE; HOWEVER, THE FOUNDATION IS REQUIRED TO	PAI	INCOME IAA O	1/ T	15
TTATE	RELATED BUSINESS INCOME PRIMARILY RESULTING	י בים	M DACC_TUDOII	СП	ENITTTE C
OME	CELATED BUSINESS INCOME PRIMARILI RESULTING	FRO	M PASS-INKOU	Gn .	FNITITES
тът	WHICH IT HAS AN OWNERSHIP INTEREST. THE FO	X CIXII	MION DAID NO	ТМ	COME HAY
T1/	WHICH II HAS AN OWNERSHIP INTEREST. THE PC	MUMDA	IION PAID NO	TIN	COME IAX
FOF	THE YEARS ENDED JUNE 30, 2024 AND 2023.				
THE	FOUNDATION FILES FORMS 990 AND 990-T RETU	IRNS	IN THE U.S.	FED	ERAL
JUF	RISDICTION. THE FOUNDATION IS NO LONGER SUE	JECT	TO U.S. FED	ERA	L INCOME
ΤΑΣ	X EXAMINATIONS BY TAX AUTHORITIES BEYOND TH	IREE	YEARS. THE F	OUN:	DATION HAS

NO FEDERAL OR STATE TAX EXAMINATIONS CURRENTLY IN PROCESS.

MANAGEMENT EVALUATED THE FOUNDATION'S TAX POSITIONS AND CONCLUDED THAT THE

Schedule D (Form 990) 2023 FOUNDATION, INC.	31-1748533 Page
Part XIII Supplemental Information (continued)	
FOUNDATION HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT R	EQUIRE RECOGNITION
IN THE FINANCIAL STATEMENTS.	
PART XI, LINE 2D - OTHER ADJUSTMENTS:	
CHANGE IN CASH SURRENDER VALUE OF LIFE INSURANCE	287,601.
AGENCY FUNDS REVENUE	-6,266,243.
CHANGE IN VALUE OF PLEDGES	26,407.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	-5,952,235.
TOTAL TO SCHEDOLE D, PART AI, LINE 2D	-5,952,255.
PART XI, LINE 4B - OTHER ADJUSTMENTS:	
CITY BLOSSOM FUNDRAISING EVENT	-40,524.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
AGENCY FUNDS EXPENSE	-2,539,642.
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
	40 504
CITY BLOSSOM FUNDRAISING EVENT	-40,524.

SCHEDULE F (Form 990)

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.

2023
Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection
Employer identification number

Name of the organization
SIOUX FALLS AREA COMMUNITY
FOUNDATION, INC.

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on

	Form 990, Part IV	/ line 1/h		·	-	
1	· · · · · · · · · · · · · · · · · · ·	•	maintain roos	ds to substantiate the amount of its gran	ate and other assistance	
1	=	-		-		lv Du
	the grantees' eligibility to	or the grants or a	ssistance, and t	the selection criteria used to award the q	grants or assistance?	Yes No
_						
2		ribe in Part V the	organization's p	procedures for monitoring the use of its	grants and other assistance outs	side the
	United States.					
3				n be duplicated if additional space is no		
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
URC	OPE	0	0	INVESTMENTS		1,693,988.
	, <u>, , , , , , , , , , , , , , , , , , ,</u>		•	INVESTIGATE		1,033,300.
3 a	Subtotal	0	0			1,693,988.
b	Total from continuation					
	sheets to Part I	0	0			0.
С	Totals (add lines 3a					
_	and Oh)	0	0			1 693 988

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

Schedule F (Form 990) 2023

31-1748533

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2 Enter total number of	recipient organization	l ns listed above that are r	ecognized as charities by the f	oreign country,	recognized as a tax			

2	2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax	
	exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	

3 Enter total number of other organizations or entities

31-1748533

Schedule F (Form 990) 2023 Part III 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. (h) Method of valuation (book, FMV, appraisal, other) (c) Number of (d) Amount of (e) Manner of (f) Amount of (g) Description of (a) Type of grant or assistance (b) Region cash disbursement recipients cash grant noncash noncash assistance assistance

SIOUX FALLS AREA COMMUNITY

Schedule F (Form 990) 2023 FOUNDATION, INC.

Part IV Foreign Forms

31-1748533 P

Page 4

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see the Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2023

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							umn (c)	
LINE 3								
UX FALLS	AREA	COMMUNITY	FOUNDATION	HOLDS	SHARES	IN A	COMPANY	ON
DON STOC	K EXCI	HANGE.						
	nvestments vs. estimated numb	nvestments vs. expenditure estimated number of recipion LINE 3	nvestments vs. expenditures per region); Part I estimated number of recipients), as applicable. LINE 3	nvestments vs. expenditures per region); Part II, line 1 (accounting mestimated number of recipients), as applicable. Also complete this particle. LINE 3 UX FALLS AREA COMMUNITY FOUNDATION	nvestments vs. expenditures per region); Part II, line 1 (accounting method); Part estimated number of recipients), as applicable. Also complete this part to provide LINE 3 UX FALLS AREA COMMUNITY FOUNDATION HOLDS	nvestments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting estimated number of recipients), as applicable. Also complete this part to provide any additional LINE 3 UX FALLS AREA COMMUNITY FOUNDATION HOLDS SHARES	nvestments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method) estimated number of recipients), as applicable. Also complete this part to provide any additional information. LINE 3 UX FALLS AREA COMMUNITY FOUNDATION HOLDS SHARES IN A	nvestments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, colors are stimated number of recipients), as applicable. Also complete this part to provide any additional information. See instruct LINE 3 UX FALLS AREA COMMUNITY FOUNDATION HOLDS SHARES IN A COMPANY

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

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.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization SIOUX FALLS AREA COMMUNITY Employer identification number FOUNDATION, 31-1748533 INC. 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. Mail solicitations е Solicitation of non-government grants Internet and email solicitations b Solicitation of government grants Phone solicitations Special fundraising events С g In-person solicitations 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 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No 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.

SIOUX FALLS AREA COMMUNITY

Schedule G (Form 990) 2023

FOUNDATION, INC.

31-1748533 Page 2

Pa	rt I	Fundraising Events. Complete if the of fundraising event contributions and great productions.				
		-	(a) Event #1 CITY BLOSSOM	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
Φ			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts	160,000.			160,000.
	2	Less: Contributions	146,550.			146,550.
	3	Gross income (line 1 minus line 2)	13,450.			13,450.
	4	Cash prizes				
	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
	7	Food and beverages	11,946.			11,946.
	8	Entertainment				
	9	Other direct expenses	28,578.			28,578.
	10	7				40,524.
Pa		Net income summary. Subtract line 10 from light Gaming. Complete if the organization		000 Port IV line 10 or		-27,074.
		\$15,000 on Form 990-EZ, line 6a.	answered res on rollin	990, Fait IV, line 19, or	reported more than	
4		,	(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
anne			(a) billigo	bingo/progressive bingo	(c) Other garming	col. (a) through col. (c))
Revenue						
_	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes % No	Yes % No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
9	Fn	ter the state(s) in which the organization condu	ucts gaming activities:			
		the organization licensed to conduct gaming a	_	states?		Yes No
b	If "	No," explain:				
10a	We	ere any of the organization's gaming licenses re	evoked, suspended, or te	rminated during the tax	year?	Yes No
b	If "	Yes," explain:				

SIOUX FALLS AREA COMMUNITY FOUNDATION. INC.

Sch	edule G (Form 990) 2023 FOUNDATION, INC. 31-1	<u>/40</u>	<u> </u>	Pag	<u>е з</u>
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:		1		
а	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	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes		No
b	o If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount				
	of gaming revenue retained by the third party \$				
С	If "Yes," enter name and address of the third party:				
	Name				
	Address				
16	Gaming manager information:				
	Name				
	Name				
	Gaming manager compensation \$				
	Description of services provided				
	Director/officer Employee Independent contractor				
17	Mandatory distributions:				
	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 \$				
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Par	t III, lir	nes 9, 9	9b, 10k	э,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.				

332083 09-13-23 Schedule G (Form 990) 2023

SIOUX FALLS AREA COMMUNITY FOUNDATION. INC.

Schedule G	i (Form 990) Supplemental Infor r	FOUNDATION,	INC.		31-1748533	Page 4
Part IV	Supplemental Infor	nation _(continued)				

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.
SIOUX FALLS AREA COMMUNITY

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

FOUNDATIO	N, INC.						31-1748533
Part I General Information on Grants a	nd Assistance						
1 Does the organization maintain records t	o substantiate th	e amount of the grants	or assistance, the	grantees' eligibility	for the grants or assis	stance, and the selection	
criteria used to award the grants or assis							X Yes No
2 Describe in Part IV the organization's pro							
Part II Grants and Other Assistance to I recipient that received more than \$	•			, ,	anization answered "Y	es" on Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
YALE UNIVERSITY PO BOX 208232 FINANCIAL AID OFFICE NEW HAVEN, CT 06520-8232	06-0646973	501(C)(3)	10,000.	0.			ALUMNI FUND
VOLUNTEERS OF AMERICA, DAKOTAS PO BOX 89306 SIOUX FALLS, SD 57109-9306	13-1692595	501(C)(3)	304,984.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
ALZHEIMER'S ASSOCIATION - SD CHAPTER - SD CHAPTER - 5915 S. REMINGTON PLACE #110 - SIOUX FALLS, SD 57108	13-3039601	501(C)(3)	23,525.	0.			WALK TO END ALZHEIMER'S, GENERAL SUPPORT
TEACH FOR AMERICA PO BOX 398633 SAN FRANCISCO, CA 94139-8633	13-3541913	501(C)(3)	50,000.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
INTERNATIONAL RESCUE COMMITTEE PO BOX 6068 ALBERT LEA, MN 56007-9847	13-5660870	501(C)(3)	40,000.	0.			REFUGEE AID
LAMBDA CHI ALPHA EDUCATIONAL FOUNDATION - 10 W. CARMEL DRIVE #220 - CARMEL, IN 46032	13-6266432	501(C)(3)	35,000.	0.			CAPITAL CAMPAIGN
2 Enter total number of section 501(c)(3) at	nd government or	ganizations listed in th	e line 1 table				270.
3 Enter total number of other organizations	s listed in the line	1 table					11.

(b) EIN	(c) IRC section if applicable	(d) Amount of	(e) Amount of	(f) Method of	(a) Description of	(h) Dumana of success
	паррисавіе	cash grant	noncash assistance	valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
14-1338587	501(C)(3)	10,000.	0.			GENERAL SUPPORT
						DAYCARE KITCHEN
						EQUIPMENT, GENERAL
14-1876554	501(C)(3)	12,500.	0.			SUPPORT
14-1880905	501(C)(3)	302,000.	0.			GENERAL SUPPORT
16-0743916	501(C)(3)	7,301.	0.			SCHOLARSHIP SUPPORT
20-0293050	501(C)(3)	12,250.	0.			GENERAL SUPPORT
20-0652270	501(C)(3)	15,000.	0.			GENERAL SUPPORT
20-2336497	501(C)(3)	10,000.	0.			GENERAL SUPPORT
		, ,				
20-3184240	501(C)(3)	13,738.	0.			MINISTRY SUPPORT
20-3473359	501 (C) (3)	16 700				GENERAL SUPPORT
	14-1876554 14-1880905 16-0743916 20-0293050 20-0652270 20-2336497	16-0743916 501(C)(3) 20-0293050 501(C)(3) 20-0652270 501(C)(3) 20-2336497 501(C)(3)	14-1876554 501(C)(3) 12,500. 14-1880905 501(C)(3) 302,000. 16-0743916 501(C)(3) 7,301. 20-0293050 501(C)(3) 12,250. 20-0652270 501(C)(3) 15,000. 20-2336497 501(C)(3) 10,000.	14-1876554 501(C)(3) 12,500. 0. 14-1880905 501(C)(3) 302,000. 0. 16-0743916 501(C)(3) 7,301. 0. 20-0293050 501(C)(3) 12,250. 0. 20-0652270 501(C)(3) 15,000. 0. 20-2336497 501(C)(3) 10,000. 0.	14-1876554 501(C)(3) 12,500. 0. 14-1880905 501(C)(3) 302,000. 0. 16-0743916 501(C)(3) 7,301. 0. 20-0293050 501(C)(3) 12,250. 0. 20-0652270 501(C)(3) 15,000. 0. 20-2336497 501(C)(3) 10,000. 0.	14-1876554 501(C)(3) 12,500. 0. 14-1880905 501(C)(3) 302,000. 0. 16-0743916 501(C)(3) 7,301. 0. 20-0293050 501(C)(3) 12,250. 0. 20-0652270 501(C)(3) 15,000. 0. 20-2336497 501(C)(3) 10,000. 0. 20-3184240 501(C)(3) 13,738. 0.

	ION, INC.						1-1748533 Page
Part II Continuation of Grants and Oth	ner Assistance to Do	omestic Organizations	s and Domestic Go	vernments (Sch	edule I (Form 990), Pa ⊺	ırt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LUNCH IS SERVED 1600 E. 12TH STREET							
SIOUX FALLS, SD 57103	20-3832197	501(C)(3)	5,200.	0.			GENERAL SUPPORT
BIG HORN GOLF CLUB CHARITIES 255 PALOWET DRIVE							
PALM DESERT, CA 92260	20-5377872	501(C)(3)	50,000.	0.			GENERAL SUPPORT
SCULPTUREWALK 300 S. PHILLIPS AVENUE #L104 SIOUX FALLS, SD 57104	20-8535871	501(C)(3)	56,050.	0.			SCULPTURE SPONSORSHIP, GENERAL SUPPORT
5100K FALLS, 5D 37104	20 0333071	301(0)(3)	30,030.				GENERAL BOTTORT
WEGNER ARBORETUM SOCIETY 1900 S. PERRY PLACE SIOUX FALLS, SD 57110	20-8784637	501(C)(3)	178,228.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
SIOON FALLS, SD 37110	20-0704037	301(C)(3)	170,220.	0.			BUFFORT
ECOSUN PRAIRIE FARM 906 CANDLEWOOD LANE BROOKINGS, SD 57006	20-8883057	501(C)(3)	25,000.	0.			GOOD EARTH PRAIRIE PROJECT
THE SALVATION ARMY 900 N. CLIFF AVENUE							
SIOUX FALLS, SD 57103	22-2406433	501(C)(3)	73,252.	0.			GENERAL SUPPORT
CELEBRATION CHURCH 500 PASQUE FLOWER TRAIL							
BRANDON, SD 57005	22-3763068	501(C)(3)	15,000.	0.			MINISTRY SUPPORT
PEACE LUTHERAN CHURCH 5509 W. 41ST STREET							DITTIDING GUDDODE PROGRAM
SIOUX FALLS, SD 57106	23-7003936	501(C)(3)	33,638.	0.			BUILDING SUPPORT, PROGRAM SUPPORT, GENERAL SUPPORT
LIFESCAPE 2501 W. 26TH STREET							
SIOUX FALLS, SD 57105	23-7072116	501(C)(3)	34,064.	0.			GENERAL SUPPORT

Schedule I (Form 990) FOUNDATION Part II Continuation of Grants and Other A	_	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa		1-1748533 Page
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL MUSIC MUSEUM							
414 E. CLARK STREET							
VERMILLION, SD 57069-2390	23-7266823	501(C)(3)	23,000.	0.			GENERAL SUPPORT
DAKOTA STATE UNIVERSITY FOUNDATION 820 N. WASHINGTON AVENUE HESTON HAL	22 7200005	E01/(0)/(2)	E E2E 000				ATHLETICS FACILITIES, CYBERSECURITY AND ENTREPRENEURIAL CENTER,
MADISON, SD 57042 FRIENDS OF SOUTH DAKOTA PUBLIC	23-7299995	501(C)(3)	5,535,000.	0.			GENERAL SUPPORT
BROADCASTING - 601 N. PHILLIPS AVENUE #100 - SIOUX FALLS, SD							
57104	23-7310698	501(C)(3)	234,039.	0.			GENERAL SUPPORT
HELPLINE CENTER 3817 S. ELMWOOD AVENUE							NETWORK OF CARE, LYFT RIDES, SALSA PROGRAM, PROGRAM SUPPORT, GENERAL
SIOUX FALLS, SD 57105	23-7424387	501(C)(3)	102,300.	0.			SUPPORT
BLACK HILLS STATE UNIVERSITY FOUNDATION - 1200 UNIVERSITY STREET #9506 - SPEARFISH, SD 57799-9506	23-7428348	509(A)(3)	1,027,500.	0.			WOMEN'S ATHLETICS SUPPORT, EVENT SUPPORT, WOMEN'S BUSINESS CENTER
KINGDOM CAPITAL FUND 5735 E. 41ST STREET SIOUX FALLS, SD 57110	26-0194811	501(C)(3)	15,000.	0.			GENERAL SUPPORT
SIOUX FALLS PUBLIC SCHOOLS EDUCATION FOUNDATION - PO BOX 560 - SIOUX FALLS, SD 57101-0560	26-3537657	501(C)(3)	11,591.	0.			PROGRAM SUPPORT, GENERAI SUPPORT
SIOUX FALLS LUTHERAN SCHOOL 6715 S. BOE LANE SIOUX FALLS, SD 57108	26-3623721	501(C)(3)	45,100.	0.			CAPITAL CAMPAIGNS, GENERAL SUPPORT
FAMILY VISITATION CENTER 2020 S. NORTON AVENUE SIOUX FALLS, SD 57105	26-3654937	501(C)(3)	5,200.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	overnments (Sche	edule I (Form 990), Pa	rt II.) ⊤	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLLISION							
3815 S. WESTERN AVENUE							SCHOOL MINISTRY SUPPORT,
SIOUX FALLS, SD 57105	26-3765706	501(C)(3)	64,162.	0.			GENERAL SUPPORT
EMPOWER SIOUX FALLS							
1915 E. EIGHTH STREET #103							SIOUX FALLS NEIGHBORHOOD
SIOUX FALLS, SD 57103	26-4760861	501(C)(3)	28,000.	0.			SOCCER
DOW RUMMEL COMMUNITY ENHANCEMENT FOUNDATION - 1321 W. DOW RUMMEL							
STREET - SIOUX FALLS, SD 57104	27-0860032	501(C)(3)	29,494.	0.			GENERAL SUPPORT
RESTORATION GENERATION, INC PO BOX 91405 SIOUX FALLS, SD 57109	27-1864860	501(C)(3)	6,000.	0.			GENERAL SUPPORT
PARENT ADVOCATES FOR SPANISH IMMERSION, INC PO BOX 75 -							
SIOUX FALLS, SD 57101	27-2237233	501(C)(3)	21,000.	0.			GENERAL SUPPORT
FACE IT TOGETHER 5020 S. TENNIS LANE #4 SIOUX FALLS, SD 57108	27-2501220	501(C)(3)	68,500.	0.			GENERAL SUPPORT
WESTSIDE LUTHERAN CHURCH 3901 OKLAHOMA AVENUE							
SIOUX FALLS, SD 57107	27-3509770	501(C)(3)	10,000.	0.			GENERAL SUPPORT
SKYVIEW ACADEMY FOUNDATION 6161 BUSINESS CENTER DRIVE HIGHLANDS RANCH, CO 80130	27-3612126	501(C)(3)	20,000.	0.			GENERAL SUPPORT
TEDDY BEAR DEN 500 S. MAIN AVENUE SIOUX FALLS, SD 57104	31-1802800	501(C)(3)	13,300.	0.			GENERAL SUPPORT

(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant 10,000.	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
			0.			SCHOLARSHIP SUPPORT
			0.			SCHOLARSHIP SUPPORT
			0.			SCHOLARSHIP SUPPORT
6-2182171	501(C)(3)	10,000.				
6-2182171	501(C)(3)	10,000.				
6-2182171	501(C)(3)	10,000.				
		= : , : : : •	0.			GENERAL SUPPORT
6-2270051	501(C)(3)	10,250.	0.			GENERAL SUPPORT
		,				
						FOOD PANTRY, BACKPACK
6-3293534	501(C)(3)	163,920.	0.			PROGRAM, GENERAL SUPPORT
						PROGRAM SUPPORT, GENERAL
6-3297853	501(C)(3)	236 859	0.			SUPPORT
6-3347022	501(C)(3)	9,700.	0.			GENERAL SUPPORT
6_3517418	501(C)(3)	20 000	0			MINISTRY SUPPORT
0 3317410	501(0)(3)	20,000.	0.			MINIBIRI BOFFORT
6-3608635	501(C)(3)	7,500.	0.			GENERAL SUPPORT
6_360961 <i>¤</i>	501(C)(3)	68 504	0			GENERAL SUPPORT
6 6	-3293534 -3297853 -3347022 -3517418	-3293534 501(C)(3) -3297853 501(C)(3) -3347022 501(C)(3) -3517418 501(C)(3)	-3293534 501(C)(3) 163,920. -3297853 501(C)(3) 236,859. -3347022 501(C)(3) 9,700. -3517418 501(C)(3) 20,000. -3608635 501(C)(3) 7,500.	-3293534 501(C)(3) 163,920. 0. -3297853 501(C)(3) 236,859. 0. -3347022 501(C)(3) 9,700. 0. -3517418 501(C)(3) 20,000. 0.	-3293534 501(C)(3) 163,920. 0. -3297853 501(C)(3) 236,859. 0. -3347022 501(C)(3) 9,700. 0. -3517418 501(C)(3) 20,000. 0. -3608635 501(C)(3) 7,500. 0.	-3293534 501(C)(3) 163,920. 0. -3297853 501(C)(3) 236,859. 0. -3347022 501(C)(3) 9,700. 0. -3517418 501(C)(3) 20,000. 0. -3608635 501(C)(3) 7,500. 0.

2320 N. CAREER AVENUE SIGUAL PALLS, SD 57107 1301 36 4112897 501(C)(3) 87,204. 0. SENERAL SUPPORT SENERAL SUPPORT SENERAL SUPPORT SENERAL SUPPORT SENERAL SUPPORT SIGUAL PALLS, SD 57108 37-1640708 501(C)(3) 115,000. 0. SENERAL SUPPORT PARTNERS WORLDWIDE 6139 TARGE DELIVE SE GRAND RAPIDS, MI 49546 38-3293173 501(C)(3) 7,500. 0. SENERAL SUPPORT SEMMAUS ROAD CHURCH PO BOX 528 HARRISBURG, SD 57032 38-3908469 501(C)(3) 11,200. 0. SENERAL SUPPORT SENERAL SUPPORT SENERAL SUPPORT UNIVERSITY OF ST. THOMAS 2115 SUMMATT AVENUE ST. FAUL, MN 55012 001 41-0693970 501(C)(3) 26,000. 0. SENERAL SUPPORT SCHOLARSHIP SUPPORT, SCHOLARSHIP SUPPORT, SCHOLARSHIP SUPPORT, SCHOLARSHIP SUPPORT, ONE DELASALLE BRIVE MINUSERSITY OF NORTHWESTERN MOSTHWESTERN MEDIA DELASALLE BRIVE MINUSERSITY OF NORTHWESTERN MOSTHWESTERN MEDIA TO BOX 130317 - SAINT FAUL, MN RADIO FROGRAM SUPPORT SCHOLARSHIP SUPPORT COLLEGE OF SAINT BENEDICT	Schedule I (Form 990) FOUNDATIO	•						31-17 4 8533 Pa
organization or government fi applicable cash grant noncash assistance cash systance cash systance	Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	ırt II.)	1
2320 N. CAREER AVENUE SIGUAL PALLS, SD 57107 1301 36 4112897 501(C)(3) 87,204. 0. SENERAL SUPPORT SENERAL SUPPORT SENERAL SUPPORT SENERAL SUPPORT SENERAL SUPPORT SIGUAL PALLS, SD 57108 37-1640708 501(C)(3) 115,000. 0. SENERAL SUPPORT PARTNERS WORLDWIDE 6139 TARGE DELIVE SE GRAND RAPIDS, MI 49546 38-3293173 501(C)(3) 7,500. 0. SENERAL SUPPORT SEMMAUS ROAD CHURCH PO BOX 528 HARRISBURG, SD 57032 38-3908469 501(C)(3) 11,200. 0. SENERAL SUPPORT SENERAL SUPPORT SENERAL SUPPORT UNIVERSITY OF ST. THOMAS 2115 SUMMATT AVENUE ST. FAUL, MN 55012 001 41-0693970 501(C)(3) 26,000. 0. SENERAL SUPPORT SCHOLARSHIP SUPPORT, SCHOLARSHIP SUPPORT, SCHOLARSHIP SUPPORT, SCHOLARSHIP SUPPORT, ONE DELASALLE BRIVE MINUSERSITY OF NORTHWESTERN MOSTHWESTERN MEDIA DELASALLE BRIVE MINUSERSITY OF NORTHWESTERN MOSTHWESTERN MEDIA TO BOX 130317 - SAINT FAUL, MN RADIO FROGRAM SUPPORT SCHOLARSHIP SUPPORT COLLEGE OF SAINT BENEDICT		(b) EIN			noncash	valuation (book, FMV,		
SIOUX FALLS, SD 57108 37-1640708 501(C)(3) 115,000. 0. GENERAL SUPPORT PARTNERS WORLDWIDE 6139 TAHOE DRIVE SE GRAND RAPIDS, MI 49546 38-3293173 501(C)(3) 7,500. 0. GENERAL SUPPORT EMMAUS ROAD CHURCH FO BOX 528 HARRISBURG, SD 57032 38-3908469 501(C)(3) 11,200. 0. GENERAL SUPPORT HAZELDEN BETTY FORD FOUNDATION FO BOX 11 CENTER CITY, MN 55012-0011 41-0682405 501(C)(3) 20,000. 0. GENERAL SUPPORT UNIVERSITY OF ST. THOMAS 2115 SUMMIT AVENUE ST. PAUL, MN 55105 41-0693970 501(C)(3) 26,000. 0. GENERAL SUPPORT DE LA SALLE HIGH SCHOOL ONE DELASALLE DRIVE MINNERPOLIS, NN 55401 41-0705834 501(C)(3) 25,000. 0. SCHOLARSHIP SUPPORT UNIVERSITY OF NORTHWESTERN/NORTHWESTERN MEDIA FO BOX 130517 - SAINT FAUL, NN 55113-0005 41-0711610 501(C)(3) 27,730. 0. GENERAL SUPPORT	SOUTHEAST TECH FOUNDATION 2320 N. CAREER AVENUE SIOUX FALLS, SD 57107-1301	36-4112897	501(C)(3)	87,204.	0.			
GRAND RAPIDS, MI 49546 38-3293173 501(C)(3) 7,500. 0. GENERAL SUPPORT EMMAUS ROAD CHURCH PO BOX 528 HARRISBURG, SD 57032 38-3908469 501(C)(3) 11,200. 0. GENERAL SUPPORT HAZELDEN BETTY FORD FOUNDATION PO BOX 11 CENTER CITY, MN 55012-0011 41-0682405 501(C)(3) 20,000. 0. GENERAL SUPPORT UNIVERSITY OF ST. THOMAS 2115 SUMMIT AVENUE ST. PAUL, NN 55105 41-0693970 501(C)(3) 26,000. 0. GENERAL SUPPORT DE LA SALLE HIGH SCHOOL ONE DELASALLE DRIVE MINNEAPOLIS, MN 55401 41-0705834 501(C)(3) 25,000. 0. SCHOLARSHIP SUPPORT UNIVERSITY OF NORTHWESTERN/NORTHWESTERN MEDIA - PO BOX 130517 - SAINT PAUL, NN 55113-0005 41-0711610 501(C)(3) 27,730. 0. GENERAL SUPPORT COLLEGE OF SAINT BENEDICT	2800 E. 57TH STREET	37-1640708	501(C)(3)	115,000.	0.			· ·
PO BOX 528 HARRISBURG, SD 57032 38-3908469 501(C)(3) 11,200. 0. GENERAL SUPPORT HAZELDEN BETTY FORD FOUNDATION PO BOX 11 CENTER CITY, MN 55012-0011 41-0682405 501(C)(3) 20,000. 0. GENERAL SUPPORT UNIVERSITY OF ST. THOMAS 2115 SUMMIT AVENUE ST. PAUL, MN 55105 41-0693970 501(C)(3) 26,000. 0. GENERAL SUPPORT, GENERAL SUPPORT DE LA SALLE HIGH SCHOOL ONE DELASALLE DRIVE MINNEAPOLIS, MN 55401 UNIVERSITY OF NORTHWESTERN/NORTHWESTERN MEDIA - PO BOX 130517 - SAINT PAUL, MN 55113-0005 41-0711610 501(C)(3) 27,730. 0. GENERAL SUPPORT COLLEGE OF SAINT BENEDICT	6139 TAHOE DRIVE SE	38-3293173	501(C)(3)	7,500.	0.			GENERAL SUPPORT
PO BOX 11 CENTER CITY, MN 55012-0011 UNIVERSITY OF ST. THOMAS 2115 SUMMIT AVENUE ST. PAUL, MN 55105 41-0693970 501(C)(3) 20,000. 0. SCHOLARSHIP SUPPORT, SCHOLARSHIP SUPPORT, GENERAL SUPPORT DE LA SALLE HIGH SCHOOL ONE DELASALLE DRIVE MINNEAPOLIS, MN 55401 UNIVERSITY OF NORTHWESTERN/NORTHWESTERN MEDIA - PO BOX 130517 - SAINT PAUL, MN 55113-0005 COLLEGE OF SAINT BENEDICT		38-3908469	501(C)(3)	11,200.	0.			GENERAL SUPPORT
ST. PAUL, MN 55105 41-0693970 501(C)(3) 26,000. 0. GENERAL SUPPORT DE LA SALLE HIGH SCHOOL ONE DELASALLE DRIVE MINNEAPOLIS, MN 55401 41-0705834 501(C)(3) 25,000. 0. SCHOLARSHIP SUPPORT UNIVERSITY OF NORTHWESTERN/NORTHWESTERN MEDIA - PO BOX 130517 - SAINT PAUL, MN 55113-0005 41-0711610 501(C)(3) 27,730. 0. GENERAL SUPPORT	HAZELDEN BETTY FORD FOUNDATION PO BOX 11 CENTER CITY, MN 55012-0011	41-0682405	501(C)(3)	20,000.	0.			GENERAL SUPPORT
ONE DELASALLE DRIVE MINNEAPOLIS, MN 55401 41-0705834 501(C)(3) 25,000. 0. SCHOLARSHIP SUPPORT UNIVERSITY OF NORTHWESTERN/NORTHWESTERN MEDIA - PO BOX 130517 - SAINT PAUL, MN 55113-0005 41-0711610 501(C)(3) 27,730. 0. GENERAL SUPPORT	2115 SUMMIT AVENUE	41-0693970	501(C)(3)	26,000.	0.			· ·
NORTHWESTERN/NORTHWESTERN MEDIA - PO BOX 130517 - SAINT PAUL, MN 55113-0005 41-0711610 501(C)(3) 27,730. 0. GENERAL SUPPORT COLLEGE OF SAINT BENEDICT	ONE DELASALLE DRIVE	41-0705834	501(C)(3)	25,000.	0.			SCHOLARSHIP SUPPORT
COLLEGE OF SAINT BENEDICT	NORTHWESTERN/NORTHWESTERN MEDIA - PO BOX 130517 - SAINT PAUL, MN	41-0711610	501(C)(3)	27,730.	0.			RADIO PROGRAM SUPPORT, GENERAL SUPPORT
SAINT JOSEPH, MN 56374 41-0969244 501(C)(3) 17,000. 0. GENERAL SUPPORT	37 COLLEGE AVENUE S.	41 0050244						CENEDAL CHEDODE

Schedule I (Form 990) FOUNDATIO							1-1748533 Page
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALEXANDRIA TECHNICAL & COMMUNITY COLLEGE FOUNDATION - 318 17TH AVENUE E ALEXANDRIA, MN 56308	41-1272662	501(C)(3)	500,000.	0.			HOUSING CAMPAIGN
GOOD SHEPHERD EVANGELICAL LUTHERAN CHURCH - WISCONSIN SYNOD 4800 SOUTHEASTERN DRIVE - SIOUX FALLS,							
SD 57103	41-1568278	501(C)(3)	10,000.	0.			GENERAL SUPPORT
BYRON PUBLIC SCHOOLS 801 FRONTAGE ROAD NW BYRON, MN 55920	41-6002825	170(C)(1)	28,374.	0.			BAND EQUIPMENT
MINNESOTA STATE UNIVERSITY MANKATO	11 0002023	170(0)(1)	20,371.	•			DIMO EQUITION
FOUNDATION - 126 ALUMNI &							
FOUNDATION CENTER - MANKATO, MN							
56001	41-6033423	501(C)(3)	10,000.	0.			GENERAL SUPPORT
DORDT UNIVERSITY 498 FOURTH AVENUE NE SIOUX CENTER, IA 51250	42-0772559	501(C)(3)	165,000.	0.			CAPITAL CAMPAIGNS, ATHLETICS PROGRAMS, GENERAL SUPPORT
HISTORIC ARNOLDS PARK PO BOX 609 ARNOLDS PARK, IA 51331	42-1231504	501(C)(3)	24,000.	0.			PARK RESTORATION, PROGRAM SUPPORT
QUEEN OF PEACE PO BOX 1707							
SIOUX CITY, IA 51102	42-1292909	501(C)(3)	250,000.	0.			CAPITAL CAMPAIGN
OKOBOJI FOUNDATION 243 WEST BROADWAY PO BOX 593	40.4000=-		10.555				
OKOBOJI, IA 51355	42-1322070	501(C)(3)	19,500.	0.			GENERAL SUPPORT
HOPE HAVEN SUPPORT FOUNDATION 1800 19TH STREET							
ROCK VALLEY, IA 51247	42-1346221	501(C)(3)	10,000.	0.			BUILDING PROJECT

45-4077445 501(C)(3)

Part II Continuation of Grants and Other							
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FIRST ENGLISH LUTHERAN CHURCH 9 THIRD STREET NW							CHRISTMAS GIFTS SUPPORT
ORTONVILLE, MN 56278	43-0658188	501(C)(3)	5,600.	0.			GENERAL SUPPORT
STEPHENS COLLEGE 1200 E. BROADWAY							
COLUMBIA, MO 65215	43-0670936	501(C)(3)	6,230.	0.			SCHOLARSHIP SUPPORT
FELLOWSHIP OF CHRISTIAN ATHLETES							
KANSAS CITY, MO 64129	43-1469296	501(C)(3)	29,560.	0.			GENERAL SUPPORT
KING OF GLORY CHURCH 1001 E. 17TH STREET							
SIOUX FALLS, SD 57104	45-2247326	501(C)(3)	6,000.	0.			GENERAL SUPPORT
ELK POINT-JEFFERSON EDUCATIONAL FOUNDATION - 402 S. DOUGLAS PO BOX							
578 - ELK POINT, SD 57025-0578	45-2531813	501(C)(3)	25,551.	0.			SCHOLARSHIP SUPPORT
HUETHER FAMILY MATCH POINTE 4210 N. BOBHALLA DRIVE							
SIOUX FALLS, SD 57107	45-2784394	501(C)(3)	18,000.	0.			GENERAL SUPPORT
THE FOSTER NETWORK 620 S. CLIFF AVENUE #200							
SIOUX FALLS, SD 57104	45-3438467	501(C)(3)	10,000.	0.			GENERAL SUPPORT
ABOVE & BEYOND CANCER 1915 GRAND AVENUE							
DES MOINES, IA 50309	45-3951308	501(C)(3)	10,000.	0.			GENERAL SUPPORT
COMPACCION CUILD CARE							
COMPASSION CHILD CARE 1921 E. EIGHTH STREET							

816,170.

0.

GENERAL SUPPORT

SIOUX FALLS, SD 57103

Schedule I (Form 990) FOUNDATIO	_	maatia Overanizatiana	and Domestic Co	warmanta (Sah	adula I (Farm 000) Da		31-1748533 Page
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LOST&FOUND PO BOX 1897 SIOUX FALLS, SD 57101	45-4306370	501(C)(3)	30,200.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
SIOUX FALLS DESIGN CENTER PO BOX 301 SIOUX FALLS, SD 57101	45-5383909	501(C)(3)	13,000.	0.			PROGRAM SUPPORT
PARKER CEMETERY ASSOCIATION PO BOX 727 PARKER, SD 57053	46-0175208	501(C)(13)	5,373.	0.			MAINTENANCE OF PUBLIC AREAS OF THE CEMETERY
CANTON-INWOOD AREA HEALTH FOUNDATION - 440 N. HIAWATHA DRIVE - CANTON, SD 57013	46-0210400	501(C)(3)	45,000.	0.			GENERAL SUPPORT
CRAZY HORSE MEMORIAL FOUNDATION 12151 AVENUE OF THE CHIEFS CRAZY HORSE, SD 57730-9506	46-0220678	501(C)(3)	13,715.	0.			GENERAL SUPPORT
AUGUSTANA UNIVERSITY 2001 S. SUMMIT AVENUE SIOUX FALLS, SD 57197	46-0224588	501(C)(3)	837,696.	0.			CAMPUS UPGRADES, LIBRARY SUPPORT, SCHOLARSHIP SUPPORT, CENTER FOR WESTERN STUDIES, GENERAL
DAKOTA WESLEYAN UNIVERSITY 1200 W. UNIVERSITY AVENUE MITCHELL, SD 57301-4398	46-0224589	501(C)(3)	10,000.	0.			SCHOLARSHIP SUPPORT
BOY SCOUTS OF AMERICA - SIOUX COUNCIL - SIOUX COUNCIL - 800 N. WEST AVENUE - SIOUX FALLS, SD 57104	46-0224599	501(C)(3)	27,500.	0.			GENERAL SUPPORT
UNIVERSITY OF SIOUX FALLS 1101 W. 22ND STREET SIOUX FALLS, SD 57105-1699	46-0224600	501(C)(3)	84,303.	0.			ATHLETIC DEPARTMENT, SCHOLARSHIP SUPPORT, CAPITAL CAMPAIGNS, GENERAL SUPPORT

Schedule I (Form 990) FOUNDATIO Part II Continuation of Grants and Other		mostic Organizations	and Domestic Co	warnmente (Sch	adula I (Form 900) Pa		1-1748533 Page
Part II Continuation of Grants and Other		omestic Organizations	s and Domestic Go	vernments (Sch	edule i (Form 990), Fa		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LUTHERAN SOCIAL SERVICES OF SOUTH							
DAKOTA - 705 E. 41ST STREET #200 -							PROGRAM SUPPORT, GENERAL
SIOUX FALLS, SD 57105-6048	46-0224731	501(C)(3)	114,401.	0.			SUPPORT
,			, ,				
AVERA FOUNDATION							HOSPICE HOUSE, CAPITAL
PO BOX 5045							CAMPAIGNS, GENERAL
SIOUX FALLS, SD 57117-5045	46-0224743	501(C)(3)	380,673.	0.			SUPPORT
SIOUX FALLS FAMILY YMCA							
220 S. MINNESOTA AVENUE							FLOOD RELIEF, GENERAL
SIOUX FALLS, SD 57104-6314	46-0225021	501(C)(3)	150,817.	0.			SUPPORT, PROGRAM SUPPORT
CALVARY CATHEDRAL							
500 S. MAIN AVENUE							HVAC REPLACEMENT, GENERA
SIOUX FALLS, SD 57104-6814	46-0225354	501(C)(3)	36,693.	0.			SUPPORT
FIRST CONGREGATIONAL CHURCH OF							
SIOUX FALLS - 300 S. MINNESOTA							
AVENUE - SIOUX FALLS, SD							
57104-6352	46-0225435	501(C)(3)	10,385.	0.			GENERAL SUPPORT
ST. MARGARET'S CHURCH							
417 S. ELM STREET PO BOX 137	46 0006150	501 (6) (2)	F 100				
KIMBALL, SD 57355	46-0226158	501(C)(3)	5,100.	0.			GENERAL SUPPORT
FIRST PRESBYTERIAN CHURCH							
2300 S. WEST AVENUE							BUILDING MAINTENANCE,
	46-0229140	501(C)(3)	29,139.	0.			GENERAL SUPPORT
SIOUX FALLS, SD 57105	46-0229140	501(C)(3)	29,139.	0.			GENERAL SUPPORT
ABBOTT HOUSE							
909 COURT MERRILL STREET							
MITCHELL, SD 57301	46-0229822	501(C)(3)	10,000.	0.			CAPITAL CAMPAIGN
•			, , , , ,				
OUR SAVIOR'S LUTHERAN CHURCH							
909 W. 33RD STREET							DEBT REDUCTION, PROGRAM
SIOUX FALLS, SD 57105	46-0229996	501(C)(3)	101,767.	0.			SUPPORT, GENERAL SUPPORT

Schedule I (Form 990

Part II Continuation of Grants and Other							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FIRST UNITED METHODIST CHURCH							CHRISTMAS SUPPORT,
401 S. SPRING AVENUE							CAPITAL CAMPAIGN, GENERAL
SIOUX FALLS, SD 57104	46-0230392	501(C)(3)	253,871.	0.			SUPPORT
CENTRAL CHURCH							
3102 W. RALPH ROGERS ROAD							
SIOUX FALLS, SD 57106	46-0231577	501(C)(3)	201,000.	0.			GENERAL SUPPORT
SOUTHEASTERN BEHAVIORAL HEALTHCARE 2000 S. SUMMIT AVENUE							
SIOUX FALLS, SD 57105	46-0232306	501(C)(3)	30,304.	0.			GENERAL SUPPORT
FIRST LUTHERAN CHURCH							
327 S. DAKOTA AVENUE							CAPITAL CAMPAIGNS,
SIOUX FALLS, SD 57104	46-0232600	501(C)(3)	146,976.	0.			GENERAL SUPPORT
SIOUX EMPIRE UNITED WAY							
1000 N. WEST AVENUE #120							
SIOUX FALLS, SD 57104	46-0233701	501(C)(3)	423,751.	0.			GENERAL SUPPORT
EAST SIDE LUTHERAN CHURCH							
1300 E. TENTH STREET							
SIOUX FALLS, SD 57103	46-0234112	501(C)(3)	14,089.	0.			GENERAL SUPPORT
							SWIMMING LESSONS,
EMBE							PLAYGROUND PROJECT, LEGO
300 W. 11TH STREET							LEAGUE, TRIBUTE TO WOMEN
SIOUX FALLS, SD 57104-6306	46-0234998	501(C)(3)	127,521.	0.			GENERAL SUPPORT
ST. JOSEPH'S INDIAN SCHOOL							
PO BOX 326							
CHAMBERLAIN, SD 57326	46-0235912	501(C)(3)	14,645.	0.			GENERAL SUPPORT
SIOUX FALLS AREA HUMANE SOCIETY							
3720 E. BENSON ROAD							
SIOUX FALLS, SD 57104	46-0239786	501(C)(3)	72,181.	0.			GENERAL SUPPORT

Schedule I (Form 990) FOUNDATIO							1-1748533 Page
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	s and Domestic Go	vernments (Scho	edule I (Form 990), Pa	ırt II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GIRL SCOUTS - DAKOTA HORIZONS 1101 S. MARION ROAD SIOUX FALLS, SD 57106-3466	46-0250744	501(C)(3)	15,553.	0.			GENERAL SUPPORT
HOPE LUTHERAN CHURCH 1700 S. CLIFF AVENUE SIOUX FALLS, SD 57105	46-0253194		11,300.	0.			GENERAL SUPPORT
CAMINANDO JUNTOS 311 E. 14TH STREET SIOUX FALLS, SD 57104	46-0253283	501(C)(3)	13,500.	0.			COUNSELING TO CREATE 501C3
DOW RUMMEL VILLAGE 1321 W. DOW RUMMEL STREET SIOUX FALLS, SD 57104	46-0271277	501(C)(3)	47,919.	0.			GENERAL SUPPORT
SOUTH DAKOTA STATE UNIVERSITY FOUNDATION - 815 MEDARY AVENUE - BROOKINGS, SD 57006	46-0273801	509(A)(3)	397,952.	0.			SCHOLARSHIP SUPPORT, PROGRAM SUPPORT, GENERAL SUPPORT
SACRED HEART CHURCH 509 CAPITOL STREET YANKTON, SD 57078	46-0274781	501(C)(3)	200,000.	0.			CHURCH REMODEL
UNION GOSPEL MISSION 701 E. EIGHTH STREET SIOUX FALLS, SD 57103-1632	46-0281018	501(C)(3)	27,780.	0.			GENERAL SUPPORT
FIRST EVANGELICAL FREE CHURCH 2601 W. 69TH STREET SIOUX FALLS, SD 57108	46-0281277	501(C)(3)	140,500.	0.			CHILDCARE SCHOOL, WESTSIDE CHRISTIAN SCHOOL, GENERAL SUPPORT
INTER-LAKES COMMUNITY ACTION PARTNERSHIP - PO BOX 268 - MADISON, SD 57042-0268	46-0282131	501(C)(3)	44,909.	0.			HOUSING SUPPORT, HEARTLAND HOUSE

Schedule I (Form 990) FOUNDATIO	N, INC.					3	1-1748533 Page 1
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WEST CENTRAL SCHOOL DISTRICT 49 705 E. SECOND STREET PO BOX 730 HARTFORD, SD 57033-0730	46-0284421	170(C)(1)	10,695.	0.			PROGRAM SUPPORT, SCHOLARSHIP SUPPORT, GENERAL SUPPORT
ACTIVE GENERATIONS 2300 W. 46TH STREET SIOUX FALLS, SD 57105-6528	46-0305500	501(C)(3)	91,222.	0.			MEALS ON WHEELS, COMMUNITY APPEALS, FACILITY UPGRADES, GENERAL SUPPORT
DAKOTABILITIES 1116 S. FOURTH AVENUE SIOUX FALLS, SD 57105	46-0306216	501(C)(3)	14,000.	0.			ACTIVITY DAY, GENERAL SUPPORT
JUNIOR ACHIEVEMENT OF SOUTH DAKOTA 300 S. PHILLIPS AVENUE #L102 SIOUX FALLS, SD 57104	46-0306352	501(C)(3)	11,900.	0.			PROGRAM SUPPORT
MCCROSSAN BOYS RANCH 47135 260TH STREET SIOUX FALLS, SD 57107-6428	46-0311913	501(C)(3)	112,699.	0.			CAPITAL CAMPAIGN, GENERAL SUPPORT
LUTHERANS OUTDOORS IN SOUTH DAKOTA 2001 S. SUMMIT AVENUE SIOUX FALLS, SD 57197-0001	46-0320561	501(C)(3)	7,268.	0.			GENERAL SUPPORT
SOUTH DAKOTA HALL OF FAME 1480 S. MAIN STREET CHAMBERLAIN, SD 57325	46-0324210	501(C)(3)	112,600.	0.			GENERAL SUPPORT
FIRST CHRISTIAN REFORMED CHURCH 2901 E. 26TH STREET SIOUX FALLS, SD 57103	46-0324244	501(C)(3)	8,000.	0.			GENERAL SUPPORT
SIOUX FALLS CHRISTIAN SCHOOLS 6120 S. CHARGER CIRCLE SIOUX FALLS, SD 57108	46-0340024	501(C)(3)	85,000.	0.			CAPITAL CAMPAIGNS, PROGRAM SUPPORT, GENERAL SUPPORT

Schedule I (Form 990) FOUNDATIO							31-1748533 Page 1
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	s and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASBURY UNITED METHODIST CHURCH 2425 S. WESTERN AVENUE							
SIOUX FALLS, SD 57105-3412	46-0340325	501(C)(3)	9,711.	0.			GENERAL SUPPORT
SIOUX FALLS LUTHERAN SCHOOL ASSOCIATION INC - 6715 S. BOE LANE							TUITION ASSISTANCE FUND,
- SIOUX FALLS, SD 57108	46-0343381	501(C)(3)	14,321.	0.			GENERAL SUPPORT
JUNIOR LEAGUE OF SIOUX FALLS 1000 N. WEST AVENUE #225							
SIOUX FALLS, SD 57104-1309	46-0349098	501(C)(3)	15,000.	0.			GENERAL SUPPORT
THE COMPASS CENTER 1704 S. CLEVELAND AVENUE #3							
SIOUX FALLS, SD 57103	46-0350199	501(C)(3)	17,500.	0.			GENERAL SUPPORT
LIFESCAPE FOUNDATION 2011 W. 26TH STREET #201 SIOUX FALLS, SD 57105-2498	46-0353254	501(C)(3)	393,169.	0.			CAPITAL CAMPAIGNS, GENERAL SUPPORT
SIOUX FALLS ARTS COUNCIL PO BOX 2053 SIOUX FALLS, SD 57101	46-0354287	501(C)(3)	40,750.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
FIRST UNITED METHODIST CHURCH FOUNDATION OF SIOUX FALLS - 401 S. SPRING AVENUE - SIOUX FALLS, SD	45 00004						
57104	46-0355004	501(C)(3)	47,969.	0.			GENERAL SUPPORT
FAITH BAPTIST FELLOWSHIP 601 W. 57TH STREET							
SIOUX FALLS, SD 57108	46-0356749	501(C)(3)	24,000.	0.			GENERAL SUPPORT
SPECIAL OLYMPICS SOUTH DAKOTA 800 E. I-90 LANE	46 005055	501/57/03	20.71				
SIOUX FALLS, SD 57104	46-0359776	DOT(G)(3)	30,714.	0.			GENERAL SUPPORT

Schedule I (Form 990) FOUNDATIO							31-1748533 Page
Part II Continuation of Grants and Other	Assistance to Do	omestic Organizations	s and Domestic Go	vernments (Scho	edule I (Form 990), Pa ⊺	ırt II.) ⊤	-
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MOUNT ZION CONGREGATION PO BOX 756							
SIOUX FALLS, SD 57101-0756	46-0362692	501(C)(3)	13,015.	0.			GENERAL SUPPORT
COMMUNITY REFORMED CHURCH 6800 E. 41ST STREET	46,0365454	F01 (G) (2)	0.000				
SIOUX FALLS, SD 57110 CHILDREN'S HOME	46-0365454	501(C)(3)	9,000.	0.			GENERAL SUPPORT
FOUNDATION/CHILDREN'S HOME SOCIETY OF SD - PO BOX 1749 - SIOUX FALLS,							CAPITAL CAMPAIGNS, PROGRAM SUPPORT, GENERAL
SD 57101-1749	46-0366277	501(C)(3)	454,015.	0.			SUPPORT
SOUTH DAKOTA DENTAL FOUNDATION 804 N. EUCLID AVENUE #103 PO BOX 11							
PIERRE, SD 57501	46-0367045	501(C)(3)	146,577.	0.			GENERAL SUPPORT
SOUTH DAKOTA HISTORICAL SOCIETY FOUNDATION - 900 GOVERNORS DRIVE - PIERRE, SD 57501	46-0370475	501(C)(3)	12,100.	0.			GENERAL SUPPORT
SOUTH DAKOTA FOR THE EDUCATION OF YOUNG CHILDREN - PO BOX 44 BOX -	46 0371100	F01 (G) (2)	15.000				ANTID GADE WAS TODGE
ELDER, SD 57719	46-0371120	501(C)(3)	15,000.	0.			CHILD CARE TASK FORCE
RONALD MCDONALD HOUSE CHARITIES OF SOUTH DAKOTA - 825 S. LAKE AVENUE							
- SIOUX FALLS, SD 57104	46-0371152	501(C)(3)	48,695.	0.			GENERAL SUPPORT
NEU HUTTERHALER MENNONITE CHURCH 27165 - 432ND AVENUE							PROGRAM SUPPORT, GENERAL
BRIDGEWATER, SD 57319	46-0375265	501(C)(3)	10,000.	0.			SUPPORT
MAKE-A-WISH SOUTH DAKOTA & MONTANA 1400 W. 17TH STREET							
SIOUX FALLS, SD 57104	46-0375953	501(C)(3)	36,922.	0.			GENERAL SUPPORT

Schedule I (Form 990) FOUNDATIO							1-1748533 Page
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	urt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRANDON VOLUNTEER FIRE DEPARTMENT 401 N. SIOUX BOULEVARD							PERSONAL PROTECTIVE
BRANDON, SD 57005	46-0376472	501(C)(3)	10,000.	0.			EQUIPMENT
HORSEPOWER 26659 BLUE SAGE LANE #100 SIOUX FALLS, SD 57106	46-0378036	501(C)(3)	15,000.	0.			PROGRAM SUPPORT
	40-0378030	301(C)(3)	13,000.	0.			FROGRAM SUFFORT
ABBOTT HOUSE FOUNDATION 909 COURT MERRILL DRIVE PO BOX 700 MITCHELL, SD 57301	46-0379896	501(C)(3)	17,000.	0.			FOSTER CARE, GENERAL SUPPORT
GLORIA DEI LUTHERAN CHURCH 5500 E. 57TH STREET SIOUX FALLS, SD 57108	46-0382186	501(C)(3)	69,645.	0.			HORSE THERAPY, MORTGAGE REDUCTION, GENERAL SUPPORT
THE BANQUET 900 E. EIGHTH STREET SIOUX FALLS, SD 57103	46-0387495	501(C)(3)	137,173.	0.			GENERAL SUPPORT
REACH LITERACY 2101 E. 41ST STREET #23 SIOUX FALLS, SD 57105	46-0396579	501(C)(3)	11,700.	0.			GENERAL SUPPORT
SOUTH DAKOTA COMMUNITY FOUNDATION 2310 PATRON PARKWAY PO BOX 296 PIERRE, SD 57501	46-0398115	501(C)(3)	311,250.	0.			PROGRAM SUPPORT
HOLY CROSS LUTHERAN CHURCH 1300 S. SERTOMA AVENUE SIOUX FALLS, SD 57106	46-0398455	501(C)(3)	14,800.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUBS OF THE SIOUX EMPIRE - 100 S. SPRING AVENUE #280 - SIOUX FALLS, SD 57104	46-0399482		73,571.	0.			SCHOLARSHIP SUPPORT, CHILDCARE SUPPORT, GENERAL SUPPORT

Part II Continuation of Grants and Other	i colotanos to De		and Domostic Go	Total (oon	22.27 (1 31111 333), 1 4	,	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ABIDING SAVIOR FREE LUTHERAN							
CHURCH - 4100 S. BAHNSON AVENUE -							
SIOUX FALLS, SD 57103-5851	46-0406443	501(C)(3)	28,800.	0.			GENERAL SUPPORT
HABITAT FOR HUMANITY OF GREATER							
SIOUX FALLS - 721 E. AMIDON STREET							
- SIOUX FALLS, SD 57104-1015	46-0407140	501(C)(3)	36,444.	0.			GENERAL SUPPORT
LORD OF LIFE LUTHERAN CHURCH							
2600 S. SYCAMORE AVENUE							
SIOUX FALLS, SD 57110-5968	46-0410470	501(C)(3)	49,800.	0.			GENERAL SUPPORT
BISHOP O'GORMAN CATHOLIC SCHOOLS							BUILDING UPGRADES,
3100 W. 41ST STREET	46 0413501	501 (0) (2)	50 501				TEACHER SALARY FUND,
SIOUX FALLS, SD 57105-4222	46-0413591	501(C)(3)	52,501.	0.			GENERAL SUPPORT
ST. DYSMAS OF SOUTH DAKOTA							
1300 E. TENTH STREET							
SIOUX FALLS, SD 57103	46-0416529	501(C)(3)	11,496.	0.			GENERAL SUPPORT
THE COMMUNITY OUTREACH							
1915 E. EIGHTH STREET #105							
SIOUX FALLS, SD 57103	46-0416744	501(C)(3)	10,000.	0.			GENERAL SUPPORT
GREAT BEAR MANAGEMENT INC.							
2401 W. 49TH STREET							ADAPTIVE SKI TRAINING
SIOUX FALLS, SD 57105-6500	46-0417880	501(C)(4)	93,781.	0.			EQUIPMENT PURCHASE
ST. FRANCIS HOUSE							
210 N. SHERMAN AVENUE							
SIOUX FALLS, SD 57103	46-0423202	501(C)(3)	73,840.	0.			GENERAL SUPPORT
SIOUX FALLS AREA CASA							
100 S. SPRING AVENUE							
SIOUX FALLS, SD 57104	46-0430647	501(C)(3)	49,699.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FAMILY CONNECTION							PERSONAL HYGIENE,
PO BOX 100							CHILDREN'S CONNECTION,
SIOUX FALLS, SD 57101	46-0435140	501(C)(3)	17,590.	0.			GENERAL SUPPORT
WASHINGTON PAVILION OF ARTS AND							
SCIENCE - 301 S. MAIN AVENUE PO							
BOX 984 - SIOUX FALLS, SD							CAPITAL CAMPAIGN, PROGRA
57101-0984	46-0435791	501(C)(3)	573,175.	0.			SUPPORT, GENERAL SUPPORT
LANDS LUTHERAN CHURCH							
47998 292ND STREET							
HUDSON, SD 57034	46-0438066	501(C)(3)	30,656.	0.			GENERAL SUPPORT
NEW HAVEN MINISTRIES							
1915 E. EIGHTH STREET #102							
SIOUX FALLS, SD 57103	46-0439619	501(C)(3)	14,658.	0.			GENERAL SUPPORT
	10 0103013		11,000.				2011011
SIOUX EMPIRE HOUSING PARTNERSHIP							
200 N. PHILLIPS AVENUE #200							
SIOUX FALLS, SD 57104-6058	46-0442266	501(C)(3)	36,500.	0.			GENERAL SUPPORT
SANFORD SCHOOL OF MEDICINE OF THE			,				
UNIVERSITY OF SOUTH DAKOTA - LEE							
MEDICAL BUILDING, ROOM 101 414 E.							SCHOLARSHIP SUPPORT,
CLARK STREET - VERMILLION, SD	46-0448678	501(C)(3)	29,724.	0.			GENERAL SUPPORT
SOUTH DAKOTA GOLF ASSOCIATION							
JUNIOR GOLF FOUNDATION - PO BOX							
88938 - SIOUX FALLS, SD 57109	46-0449824	501(C)(3)	21,449.	0.			FIRST TEE PROGRAM
SIOUX FALLS CARES							
PO BOX 91831							
SIOUX FALLS, SD 57109	46-0450382	501(C)(3)	10,530.	0.			GENERAL SUPPORT
	40 0430302	551(5)(5)	10,330.	0.			DINIMI DOLLONI
SOUTH DAKOTA SERVICES FOR THE DEAF							
FOUNDATION - 4101 W. 38TH STREET							SCHOLARSHIP SUPPORT,
#101 - SIOUX FALLS, SD 57106	46-0455984	501(C)(3)	22,000.	0.			GENERAL SUPPORT

Schedule I (Form 990) FOUNDATIO							1-1748533 Page
Part II Continuation of Grants and Other	Assistance to Do	omestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.) ⊤	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SPIRIT OF JOY LUTHERAN CHURCH 2208 W. LAQUINTA STREET SIOUX FALLS, SD 57108	46-0457455	501(C)(3)	17,000.	0.			CAPITAL CAMPAIGN, GENERA SUPPORT
LINCOLN HIGH SCHOOL BAND PARENTS ASSOCIATION - PO BOX 2965 - SIOUX FALLS, SD 57101	46-0457773	501(C)(3)	24,000.	0.			PARADE MARCH SUPPORT, GENERAL SUPPORT
LIFELIGHT COMMUNICATIONS 420 S. DULUTH AVENUE SIOUX FALLS, SD 57104	46-0460742	501(C)(3)	46,000.	0.			GENERAL SUPPORT
CENTER OF HOPE 1905 E. EIGHTH STREET SIOUX FALLS, SD 57103-1809	46-0463138	501(C)(3)	5,700.	0.			GENERAL SUPPORT
ST. PETER'S CEMETERY ASSOCIATION 23994 452ND AVENUE MADISON, SD 57042	46-1750461	501(C)(13)	12,057.	0.			MAINTENANCE OF PUBLIC AREAS OF THE CEMETERY
HARMONY SOUTH DAKOTA 4005 W. 90TH STREET SIOUX FALLS, SD 57108	46-3296505	501(C)(3)	9,110.	0.			GENERAL SUPPORT
SIOUX FALLS CANINE RESCUE 105 W. CHICORY DRIVE BRANDON, SD 57005	46-3760170	501(C)(3)	7,000.	0.			GENERAL SUPPORT
CHRISTIAN YOUTH ACTIVITY LEAGUE 47644 273RD STREET HARRISBURG, SD 57032-0002	46-4964311	501(C)(3)	15,000.	0.			FLAG FOOTBALL PROGRAM
STOCKYARDS AG EXPERIENCE PO BOX 2042 SIOUX FALLS, SD 57101	46-5391991	501(C)(3)	156,000.	0.			GENERAL SUPPORT

Schedule I (Form 990) FOUNDATIO Part II Continuation of Grants and Other		mestic Organization	s and Domestic Go	vernments (Sch	edule I (Form 990) Pa		1-1748533 Page
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BLACK HILLS STATE UNIVERSITY 1200 UNIVERSITY STREET #9502 SPEARFISH, SD 57799-9502	46-6000364	170(C)(1)	38,900.	0.			CAPITAL CAMPAIGN
CATHOLIC DIOCESE OF SIOUX FALLS 523 N. DULUTH AVENUE SIOUX FALLS, SD 57104-2714	46-6000424	501(C)(3)	612,009.	0.			CAPITAL CAMPAIGNS, PARIS SUPPORT, GENERAL SUPPORT
CITY OF SIOUX FALLS 231 N. DAKOTA AVENUE PO BOX 7402 SIOUX FALLS, SD 57117	46-6000425	170(C)(1)	8,422,649.	0.			JACOBSON PLAZA PROJECT, PARKS & PLAYGROUNDS, SOCCER PITCH, SWIMMING LESSONS
PARKSTON SCHOOL DISTRICT 33-3 102A S. CHAPMAN DRIVE PARKSTON, SD 57366	46-6001961	501(C)(3)	12,158.	0.			SCHOLARSHIP SUPPORT
GARRETSON SCHOOL DISTRICT 49-4 PO BOX C GARRETSON, SD 57030	46-6002580	170(C)(1)	5,262.	0.			AED PURCHASE, PROGRAM SUPPORT
SIOUX FALLS SCHOOL DISTRICT #49-5 201 E. 38TH STREET SIOUX FALLS, SD 57105-5898	46-6002586	501(C)(3)	2,440,159.	0.			BOOK CLUB, FIELD TRIPS, PLAYGROUND EQUIPMENT
ST. MARY'S PARISH - DELL RAPIDS 608 E. EIGHT STREET DELL RAPIDS, SD 57022	46-6003662	501(C)(3)	250,000.	0.			GENERAL SUPPORT
MEMORIAL LUTHERAN CHURCH 5000 S. WESTERN AVENUE SIOUX FALLS, SD 57108-2605	46-6003751	501(C)(3)	8,300.	0.			GENERAL SUPPORT
WEST NIDAROS LUTHERAN CHURCH 25403 471ST AVENUE CROOKS, SD 57020	46-6011973	501(C)(3)	115,779.	0.			GENERAL SUPPORT

Schedule I (Form 990) FOUNDATIO							31-1748533 Page
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
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THE HISTORY CLUB 758 S. PHILLIPS AVENUE SIOUX FALLS, SD 57104	46-6012327	501(C)(3)	11,049.	0.			GENERAL SUPPORT
SOUTH DAKOTA ORNITHOLOGISTS' UNION 8504 E. 38TH STREET SIOUX FALLS, SD 57110	46-6013509	501(C)(3)	5,700.	0.			SCHOLARSHIP SUPPORT, GENERAL SUPPORT
GREAT PLAINS ZOO & DELBRIDGE MUSEUM - 805 S. KIWANIS AVENUE - SIOUX FALLS, SD 57104-3798	46-6015015	501(C)(3)	253,918.	0.			BUTTERFLY HOUSE & AQUARIUM, GENERAL SUPPOR
SCOTTISH RITE FOUNDATION OF SOUTH DAKOTA - PO BOX 567 - MITCHELL, SD 57301	46-6015073	501(C)(3)	15,807.	0.			GENERAL SUPPORT
SOUTH DAKOTA SYMPHONY ORCHESTRA 301 S. MAIN AVENUE SIOUX FALLS, SD 57104	46-6017026	501(C)(3)	227,148.	0.			CONCERT SPONSORSHIPS, GENERAL SUPPORT
UNIVERSITY OF SOUTH DAKOTA FOUNDATION - 1110 N. DAKOTA STREET - VERMILLION, SD 57069-1218	46-6018891	501(C)(3)	172,332.	0.			ATHLETIC DEPARTMENT, SCHOLARSHIP SUPPORT, CAPITAL CAMPAIGNS, GENERAL SUPPORT
ST. MARK'S LUTHERAN CHURCH 2001 S. ELMWOOD AVENUE SIOUX FALLS, SD 57105	46-6026433	501(C)(3)	50,000.	0.			GENERAL SUPPORT
CHRIST THE KING CATHOLIC CHURCH PO BOX 399 PRESHO, SD 57568	46-6028078	501(C)(3)	10,000.	0.			GENERAL SUPPORT
BRANDON LUTHERAN CHURCH 600 E. HOLLY BOULEVARD PO BOX 320 BRANDON, SD 57005	46-6034467	501(C)(3)	5,975.	0.			GENERAL SUPPORT

Schedule I (Form 990) FOUNDATIO	N, INC.					3	31-1748533 Page
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MOUNT ZION CEMETERY SOCIETY 55 RAMBLING BROOK ROAD CHAPPAQUA, NY 10514	46-6058891	501(C)(13)	9,000.	0.			MAINTENANCE OF PUBLIC AREAS OF THE CEMETERY
CATHOLIC COMMUNITY FOUNDATION FOR EASTERN SD - 523 N. DULUTH AVENUE - SIOUX FALLS, SD 57104-2714	46-6068924	501(C)(3)	254,546.	0.			CAPITAL CAMPAIGNS, GENERAL SUPPORT
NEBRASKA WESLEYAN UNIVERSITY 5000 ST. PAUL AVENUE LINCOLN, NE 68504-2760	47-0376524	501(C)(3)	29,205.	0.			SCHOLARSHIP SUPPORT
CREIGHTON UNIVERSITY 2500 CALIFORNIA PLAZA OMAHA, NE 68178	47-0376583	501(C)(3)	5,100.	0.			PARENT AND FAMILY LEADERSHIP, GENERAL SUPPORT
FALLS AREA SINGLE TRACK PO BOX 90144 SIOUX FALLS, SD 57109	47-1254119	501(C)(3)	10,250.	0.			TRAIL EXPANSION
FRIENDS OF THE BIG SIOUX RIVER 400 N. MAIN AVENUE #205 SIOUX FALLS, SD 57104	47-3343873	501(C)(3)	21,250.	0.			MAPPING & PHOTO PROJECT, GENERAL SUPPORT
SOUTH DAKOTA YOUTH FOUNDATION 1310 MAIN AVENUE S. #109 BROOKINGS, SD 57006	47-4832848	501(C)(3)	30,000.	0.			PROGRAM SUPPORT
VETERANS COMMUNITY PROJECT 367 N. WILLOW AVENUE SIOUX FALLS, SD 57104	47-4960735	501(C)(3)	971,150.	0.			CAPITAL CAMPAIGN, GENERAL SUPPORT
CALL TO FREEDOM 1915 E. EIGHTH STREET #100 SIOUX FALLS, SD 57103	47-5469817	501(C)(3)	58,302.	0.			CONSTRUCTION SUPPORT, GENERAL SUPPORT

Schedule I (Form 990) FOUNDATIO							1-1748533 Page
Part II Continuation of Grants and Other	Assistance to Do	omestic Organizations	s and Domestic Go	vernments (Scho	edule I (Form 990), Pa l	rt II.) │	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEARTLAND VELO							
666 GRAND AVENUE #2000							
DES MOINES, IA 50309	47-5479625	501(C)(3)	10,000.	0.			GENERAL SUPPORT
GROUND WORKS MIDWEST							
102 N. KROHN PLACE #116							
SIOUX FALLS, SD 57103	47-5498537	501(C)(3)	41,000.	0.			GENERAL SUPPORT
,			,				
MIDWEST DISTRICT MISSIONARY CHURCH							
14958 WILD INDIGO STREET							
BENNINGTON, NE 68007	47-6026578	501(C)(3)	15,000.	0.			GENERAL SUPPORT
PRAIRIE HILLS COVENANT CHURCH							
6000 E. 33RD STREET	F1 0140000	F01/G)/2)	F1 210				GENERAL GURRORE
SIOUX FALLS, SD 57110	51-0140098	501(C)(3)	51,319.	0.			GENERAL SUPPORT
BISHOP O'GORMAN CATHOLIC SCHOOLS							CHOIR DEPARTMENT SUPPORT
FOUNDATION - 3100 W. 41ST STREET -							TEACHER SALARY FUND,
SIOUX FALLS, SD 57105-4222	51-0145184	501(C)(3)	84,445.	0.			GENERAL SUPPORT
NATIONAL PARK FOUNDATION							
1500 K STREET NW #700							
WASHINGTON, DC 20005	52-1086761	501(C)(3)	11,000.	0.			GENERAL SUPPORT
PHYSICIANS COMMITTEE FOR							
RESPONSIBLE MEDICINE - 5100							
WISCONSIN AVE., NW, SUITE 400 -							
WASHINGTON, DC 20016-4131	52-1394893	501(C)(3)	10,000.	0.			GENERAL SUPPORT
AMERICAN RED CROSS							
2925 E. 57TH STREET							DISASTER RELIEF, GENERAL
SIOUX FALLS, SD 57108	53-0196605	501(C)(3)	69,747.	0.			SUPPORT
TIP OF PRINCIPLES OF THE PRINCIPLE OF TH							
FIRST PRESBYTERIAN CHURCH - BONITA							
SPRINGS - 9715 BONITA BEACH ROAD -	E0 1600501	E01/Q)/2)	10.000	_			CENTED AT CHIDDOD
BONITA SPRINGS, FL 34135	59-1622501	DOT(C)(2)	10,000.	0.			GENERAL SUPPORT

Schedule I (Form 990) FOUNDATIO	ON, INC.					3	1-1748533 Page 1
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	s and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MAKE-A-WISH - SOUTHERN FLORIDA 4491 S. STATE ROAD 7 SUITE 201	50.0500300	501/57/27	6.000				
FT. LAUDERDALE, FL 33314-4035	59-2620322	501(C)(3)	6,000.	0.			GENERAL SUPPORT
THE SHELTER FOR ABUSED WOMEN & CHILDREN - PO BOX 10102 - NAPLES, FL 34101	59-2752895	501(C)(3)	10.000	0.			PROGRAM SUPPORT
FL 34101	59-2752695	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
LEVITT AT THE FALLS 400 N. MAIN AVENUE #202 SIOUX FALLS, SD 57104	61-1699910	501(C)(3)	89,900.	0.			CONCERT SPONSORSHIPS, GENERAL SUPPORT
PRISON FELLOWSHIP PO BOX 1550	62 0000204	E01/G)/2)	5 600	0.			GENERAL CURROR
MERRIFIELD, VA 22116-1550	62-0988294	501(C)(3)	5,600.	0.			GENERAL SUPPORT
LIFELINE CHILDREN'S SERVICES 1915 E. EIGHTH STREET #101 SIOUX FALLS, SD 57103	63-0896878	501(C)(3)	29,000.	0.			GENERAL SUPPORT
SIOUX EMPIRE PIT RESCUE PO BOX 2321							
SIOUX FALLS, SD 57101	71-1051859	501(C)(3)	12,500.	0.			GENERAL SUPPORT
THE DIOCESE OF SOUTH DAKOTA 408 N. JEFFERSON AVENUE PIERRE, SD 57501-2626	72-1529199	501(C)(3)	128,198.	0.			BUILDING MAINTENANCE, SUPPORT FOR INDIVIDUAL CHURCHES
TEA AREA SCHOOL DISTRICT 41-5 PO BOX 488							
TEA, SD 57064	74-3076050	501(C)(3)	6,900.	0.			PROGRAM SUPPORT
THE PREMIERE PLAYHOUSE 315 N. PHILLIPS AVENUE							PENGUIN PROJECT, GENERAL
SIOUX FALLS, SD 57104-6005	80-0074622	501(C)(3)	43,155.	0.			SUPPORT

Schedule I (Form 990) FOUNDATIO							31-1748533 Page
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	s and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALL CAME DECOME							
ALL CATS RESCUE PO BOX 464							VETERINARIAN CARE,
SIOUX FALLS, SD 57101	80-0218548	501(C)(3)	5,100.	0.			GENERAL SUPPORT
FURNITURE MISSION OF SOUTH DAKOTA 209 N. NESMITH AVENUE							WAREHOUSE STAFFING SUPPORT, CAPITAL
SIOUX FALLS, SD 57103	81-0584500	501(C)(3)	174,980.	0.			CAMPAIGN, GENERAL SUPPORT
STARTUP SIOUX FALLS 100 E. SIXTH STREET							
SIOUX FALLS, SD 57104	81-0585921	501(C)(4)	65,333.	0.			BUILDING RENOVATION
THINK 3D SOLUTIONS 401 E. EIGHTH STREET #207 SIOUX FALLS, SD 57103	81-1888215		99,756.	0.			LEADERS OF TOMORROW PROGRAM
HORIZON HEALTH FOUNDATION 125 S. MAIN STREET HOWARD, SD 57349	81-2678046	501(C)(3)	5,700.	0.			DENTAL SENSORS
B-SQUAD DOG RESCUE PO BOX 583							
BRANDON, SD 57005	81-3977832	501(C)(3)	10,000.	0.			GENERAL SUPPORT
CHABAD LUBAVITCH OF SOUTH DAKOTA 2900 W. OLD YANKTON ROAD SIOUX FALLS, SD 57108	81-4118734	501(C)(3)	100,500.	0.			SPEAKER CONFERENCE, GENERAL SUPPORT
SIOUX FALLS THRIVE 2104 S. SUMMIT AVENUE #237 SIOUX FALLS, SD 57105	81-4491870	501(C)(4)	258,577.	0.			MOBILE FOOD MARKET, PROGRAM SUPPORT
SOUTH DAKOTA NEWS WATCH PO BOX 90205							
SIOUX FALLS, SD 57109	81-4674814	501(C)(3)	91,750.	0.			GENERAL SUPPORT

Schedule I (Form 990) FOUNDATION							31-1748533 Page 1
Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LEADERSHIP SOUTH DAKOTA							
РО ВОХ 91533							
SIOUX FALLS, SD 57109	82-0880122	501(C)(3)	10,250.	0.			GENERAL SUPPORT
ST. PETER ON THE PRAIRIE							
PO BOX 314							BUILDING UPGRADES,
MADISON, SD 57042	82-1985362	501(C)(3)	26,917.	0.			GENERAL SUPPORT
SIOUX FALLS HOPE COALITION							
2601 S. MINNESOTA AVENUE #105 - PMB							
SIOUX FALLS, SD 57105	82-2097994	501(C)(3)	75,733.	0.			GENERAL SUPPORT
Broom Timber, BB 37133	02 203,331	301(0)(3)	73,733.				DINDING BOTTON
SOUTH DAKOTA SALUTES							
158 SIGNAL HILL ROAD							
YANKTON, SD 57078	82-2307913	501(C)(3)	53,000.	0.			GENERAL SUPPORT
SIOUX FALLS SKATEPARK ASSOCIATION							
PO BOX 858				_			
SIOUX FALLS, SD 57101	82-3310395	501(C)(3)	337,000.	0.			GENERAL SUPPORT
HUNGRY HEARTS							
4701 E. 54TH STREET							
SIOUX FALLS, SD 57101	83-1062551	501(C)(3)	6,100.	0.			GENERAL SUPPORT
,			,				
TRE MINISTRIES							
900 W. 11TH STREET							
SIOUX FALLS, SD 57104	83-1551427	501(C)(3)	13,250.	0.			GENERAL SUPPORT
WAGNER COMMUNITY SWIMMING POOL							
29912 399TH AVENUE	02 1005004	E01/Q\/3\	200 000	•			GONGERIGETON PROTECT
WAGNER, SD 57380	83-1905901	DUI(C)(3)	200,000.	0.			CONSTRUCTION PROJECT
HOPE FOR THE HOPELESS ORGANIZATION							
H2O - 516 S. LOWELL AVENUE - SIOUX							BUILDING PROJECT, GENERAL
FALLS, SD 57103	83-2055081	501(C)(3)	19,500.	0.			SUPPORT
· · · · · · · · · · · · · · · · · · ·	1	1					Calcadula I /Farra 000

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.) ⊤	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTH DAKOTA MILITARY HERITAGE							
ALLIANCE - 1600 W. RUSSELL STREET							PROGRAM SUPPORT, GENERAL
- SIOUX FALLS, SD 57104	83-2381925	501(C)(3)	152,000.	0.			SUPPORT
CLUBCENTRAL VOLLEYBALL							
813 S. HONEY LOCUST AVENUE							TRAVEL, TOURNAMENT FEES,
SIOUX FALLS, SD 57110	83-2745193	501(C)(3)	6,000.	0.			AND UNIFORMS
EMILY'S HOPE, INC.							NARCAN DISTRIBUTION, DRUG
221 S. PHILLIPS AVENUE #203							PREVENTION EDUCATION,
SIOUX FALLS, SD 57104	83-3324332	501(C)(3)	30,625.	0.			GENERAL SUPPORT
SIOUX FALLS SOCCER ACADEMY							
1401 N. WOODRIDGE AVENUE							
SIOUX FALLS, SD 57107	83-3623615	501(C)(3)	15,000.	0.			PROGRAM SUPPORT
YOUNG LIFE							
1412 S. MINNESOTA AVENUE							
SIOUX FALLS, SD 57105	84-0385934	501(C)(3)	6,950.	0.			GENERAL SUPPORT
DENVER CHRISTIAN SCHOOL							
3898 S. TELLER STREET							
LAKEWOOD, CO 80235	84-0426076	501(C)(3)	50,000.	0.			PERFORMING ARTS CENTER
LUKE SOCIETY							
3409 GATEWAY BOULEVARD #1000							
SIOUX FALLS, SD 57106	84-0563440	501(C)(3)	7,500.	0.			GENERAL SUPPORT
FELLOWSHIP OF CATHOLIC UNIVERSITY							
STUDENTS (FOCUS) - PO BOX 17408 -							
DENVER, CO 80217	84-1522811	501(C)(3)	117,500.	0.			MINISTRY SUPPORT
LOVE INC OF GREATER CANTON							
111 E. SIXTH STREET							
CANTON, SD 57013	84-1696089	501(C)(3)	6,439.	0.			DISASTER RELIEF

Part II Continuation of Grants and Othe		mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa		1-1748533 P
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTH DAKOTA BALLET COMPANY							
204 E. WILLOW STREET							
BERESFORD, SD 57004	84-1805666	501(C)(3)	11,500.	0.			GENERAL SUPPORT
VINGS OF VALOR							
5618 278TH STREET							ENDOWMENT SUPPORT,
PARKER, SD 57053	84-3711088	501(C)(3)	210,000.	0.			GENERAL SUPPORT
THE NAVIGATORS							
PO BOX 50500	0.4. 600=006	501 (5) (0)	4= 600				
COLORADO SPRINGS, CO 80949	84-6007896	501(C)(3)	17,680.	0.			MINISTRY SUPPORT
OURNEY OF HOPE INC							
O BOX 826							
IOUX FALLS, SD 57101	85-3189862	501(C)(3)	8,250.	0.			PROGRAM SUPPORT
,			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
RARE BY DESIGN							
1701 S. SHIELDS AVENUE							
SIOUX FALLS, SD 57103	86-2990471	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
HRIST OUR HOPE ANGLICAN CHURCH							
310 S. MAIN AVENUE							
IOUX FALLS, SD 57105	87-2228828	501(C)(3)	16,700.	0.			GENERAL SUPPORT
IAMILY DAYGADE							
AMILY DAYCARE							
3704 S. GREENWOOD AVENUE	87-2692781	501/C)/2)	E 600	0.			CENEDAI CHIDDODM
IOUX FALLS, SD 57106	87-2692781	501(C)(3)	5,600.	0.			GENERAL SUPPORT
EADING BRIDGE INC.							
07 N. COLUMBIA DRIVE							
FIOUX FALLS, SD 57103	87-3849602	501(C)(3)	30,000.	0.			PROGRAM SUPPORT
,			,				
ONGLEY FOUNDATION							
505 S. MARSON MANOR CIRCLE							
IOUX FALLS, SD 57103	87-4707321	501(C)(3)	10,000.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other		mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990). Pa		51-1740555
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KINGDOM WORX FOUNDATION							
PO BOX 89431							
SIOUX FALLS, SD 57109	87-4735196	501(C)(3)	6,400.	0.			GENERAL SUPPORT
LUTHER HOUSE OF STUDY							
2100 S. SUMMIT AVENUE							
SIOUX FALLS, SD 57105	88-1810650	501(C)(3)	55,657.	0.			GENERAL SUPPORT
SOUTH DAKOTA HISPANIC CHAMBER OF							
COMMERCE - 120 S. INDIANA AVENUE -							
SIOUX FALLS, SD 57103	88-1982887	501(C)(3)	10,000.	0.			CAPACITY BUILDING
BRIDGING THE OPPORTUNITY GAP							
401 E. EIGHTH STREET #207	00 0510001	501 (6) (2)	06.000				LEADERS OF TOMORROW
SIOUX FALLS, SD 57103	88-2510081	501(C)(3)	26,000.	0.			PROGRAM
DIRECT LINE							
225 W. NINTH STREET							
SIOUX FALLS, SD 57104	90-0387693	501(C)(3)	22,182.	0.			GENERAL SUPPORT
PACIFIC LUTHERAN UNIVERSITY							
12180 PARK STREET							
TACOMA, WA 98447	91-0565571	501(C)(3)	7,076.	0.			SCHOLARSHIP SUPPORT
CHILDREN OF THE NATIONS							
PO BOX 3970							
SILVERDALE, WA 98383	91-1702551	501(C)(3)	11,000.	0.			GENERAL SUPPORT
,			,				
DUCKS UNLIMITED - SOUTH DAKOTA							
CHAPTER - 420 PURDUE STREET -							
VERMILLION, SD 57069	91-1784670	501(C)(3)	15,000.	0.			GENERAL SUPPORT
BISHOP DUDLEY HOSPITALITY HOUSE							
101 N. INDIANA AVENUE							CENTER FOR FAMILIES,
SIOUX FALLS, SD 57103	91-1836528	501(C)(3)	176,583.	0.			GENERAL SUPPORT

(a) Name and address of	(b) EINI	(a) IPC continu	(d) Amount of	(a) Amount of	(f) Mothed of	(a) Description of	(b) Durnoss of avert
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE CULTURE LINK CORP							
707 W. 11TH STREET #3							
SIOUX FALLS, SD 57104	92-1562334	501(C)(3)	25,000.	0.			GENERAL SUPPORT
LIGHT FOR THE NEXT GENERATION							
1200 E. THIRD STREET #210							
SIOUX FALLS, SD 57104	92-3732140	501(C)(3)	20,500.	0.			PROGRAM SUPPORT
WALK THRU THE BIBLE MINISTRIES							
5550 TRIANGLE PARKWAY #250							
PEACHTREE CORNERS, GA 30092	93-0669857	501(C)(3)	10,000.	0.			GENERAL SUPPORT
CROOKS VETERANS PARK							
117 WINTERBERRY CIRCLE							FLAGPOLES, GENERAL
CROOKS, SD 57020	93-1433603	501(C)(3)	11,000.	0.			SUPPORT
CROOKS, SD 37020	JJ 1433003	301(0)(3)	11,000.	0.			DOFFORT
MIDWEST STREET MEDICINE							
605 S. NICHOLAS CIRCLE							PROGRAM STARTUP, GENER
BRANDON, SD 57005	93-2081981	501(C)(3)	32,000.	0.			SUPPORT
SOUTH DAKOTA BLACK CHAMBER OF							
COMMERCE - 5013 S. LOUISE AVENUE							
#1276 - SIOUX FALLS, SD 57108	93-3682013	501(C)(6)	10,000.	0.			PROGRAM SUPPORT
·							
LUTHERAN CONGREGATION SUPPORT							
NETWORK - 2100 S. SUMMIT AVENUE -							
SIOUX FALLS, SD 57105	93-4271774	501(C)(3)	20,000.	0.			GENERAL SUPPORT
STANFORD UNIVERSITY							HOOVER FOUNDATION, MEN
PO BOX 20466							GOLF PROGRAM, GENERAL
STANFORD, CA 94309-0466	94-1156365	501(C)(3)	31,000.	0.			SUPPORT
	24 1120202	551(5)(5)	31,000.	0.			50110111
WYCLIFFE BIBLE TRANSLATORS							
PO BOX 628200							
ORLANDO, FL 32862	95-1831097	501(C)(3)	19,500.	0.			MINISTRY SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORLD VISION							
PO BOX 9716 FEDERAL WAY, WA 98063	95-1922279	501(C)(3)	7,448.	0.			MINISTRY SUPPORT
COUTHWEST CHURCH	95-2816362	E01/Q\/2\	200 000	0.			GENERAL SUPPORT
INDIAN WELLS, CA 92210 INGS SCHOOLS OF THE DESERT	93-2010302	501(C)(3)	200,000.	0.			GENERAL SUFFURI
PALM SPRINGS, CA 92264	95-3809983	501(C)(3)	50,000.	0.			GENERAL SUPPORT
CRU PO BOX 628222							
DRLANDO, FL 32862-8222	95-6006173	501(C)(3)	92,770.	0.			MINISTRY SUPPORT
KNOWN 34 S. WILLOW CREEK STREET							
CHANDLER, AZ 85225	99-2096455	508(C)(1)(A)	20,000.	0.			PROGRAM SUPPORT

PROPOSED ACTIVITY IS EXCLUSIVELY CHARITABLE AND THAT THE ORGANIZATION HAS

Schedule I (Form 990) 2023 FOUNDATION, IN	C.				31-1748533	Page
Part III Grants and Other Assistance to Domestic Individual Part III can be duplicated if additional space is needed		e organization answe	ered "Yes" on Form 9	990, Part IV, line 22.		
(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
SCHOLARSHIP ASSISTANCE	175	493,300.	0.	N/A	N/A	
UNDOUGH AGGIGMANGE		20.000		N/2	7/2	
HARDSHIP ASSISTANCE	2	20,000.	0.	N/A	N/A	
Part IV Supplemental Information. Provide the information re	equired in Part I, lin	ıe 2; Part III, column	(b); and any other a	dditional information.		
PART I, LINE 2:						
SFACF REVIEWS THE TAX STATUS OF PO	OTENTIAL G	RANTEES US	SING GUIDES	TAR CHARITY		
CHECK, WHICH INTEGRATES DATA FROM	IRS PUBLI	CATION. MC	ONITORING P	ROCEDURES		
VARY BASED ON THE GRANTEE'S TAX S	TATUS, THE	E PURPOSE C	OF THE GRAN	T, AND THE		
SOURCE OF THE RECOMMENDATION FOR	THE GRANT.					
GRANTS TO ORGANIZATIONS WITHOUT 5	01(C)(3) C	OR EQUIVALE	ENT TAX STA	TUS ARE MADE		
USING STANDARD EXPENDITURE RESPON	SIBILITY F	ROCEDURES	. TO ASSURE	THAT A		

THE CAPACITY TO PERFORM SUCCESSFULLY, AN ORGANIZATION WITHOUT CHARITABLE

TAX STATUS IS SUBJECT TO PRE-GRANT INQUIRY. THE INQUIRY AND ITS OUTCOME ARE

DOCUMENTED IN A COMPLIANCE FILE. IF IN SFACF'S OPINION, ORGANIZATIONAL

CAPACITY IS WEAK, A GRANT WILL BE PAID ONLY AS REIMBURSEMENT FOR DOCUMENTED

CHARITABLE EXPENSES. OTHERWISE, THE ORGANIZATION IS REQUIRED TO SIGN A

GRANT AGREEMENT AND TO REPORT ON THE OUTCOMES OF THE SUPPORTED CHARITABLE

ACTIVITIES.

FOR GRANTS MADE TO 501(C)(3) ORGANIZATIONS AND CHARITABLE EQUIVALENTS, SUCH AS RELIGIOUS ORGANIZATIONS AND GOVERNMENTAL ENTITIES:

-ALL GRANT RECOMMENDATIONS FROM DONOR-ADVISORS ARE REVIEWED PRIOR TO

APPROVAL TO ASSURE THAT NEITHER THE DONOR-ADVISOR NOR PERSONS RELATED TO

THE ADVISOR WILL BENEFIT FROM THE GRANT. AT THE REQUEST OF THE

DONOR-ADVISOR, SFACF WILL REQUIRE, ACCEPT, AND REVIEW POST-GRANT

EVALUATIONS.

-ORGANIZATIONS RECEIVING COMPETITIVELY AWARDED GRANTS FROM SFACF'S GRANTS

COMMITTEE FOR A SPECIFIC PURPOSE ARE REQUIRED TO SIGN GRANT AGREEMENTS AND

TO REPORT ON THE OUTCOMES OF THE ACTIVITIES SUPPORTED. EVALUATIONS ARE

REVIEWED BY THE GRANTS COMMITTEE AS THEY ARE RETURNED TO SFACF. ADDITIONAL

GRANTS ARE NOT MADE TO AN ORGANIZATION THAT FAILS TO REPORT OR THAT FILES

AN UNSATISFACTORY REPORT UNTIL THE ORGANIZATION IS IN COMPLIANCE WITH

EVALUATION STANDARDS.

ORGANIZATIONS BENEFITING FROM ANNUAL DISTRIBUTIONS MADE FROM DESIGNATED

AND AGENCY FUNDS RECEIVE NOTIFICATION OF PURPOSE RESTRICTIONS PLACED ON THE

GRANT AND EITHER 1) CERTIFY THAT BY CASHING THE CHECK THE PROCEEDS WILL BE

31-174853<u>3 Page 2</u> FOUNDATION, INC. Schedule I (Form 990) Part IV Supplemental Information USED FOR THE INTENDED PURPOSE OR 2) ARE REQUIRED TO SUBMIT A REPORT TO SFACF VERIFYING THE USE OF THE GRANT. ADDITIONAL GRANTS ARE NOT MADE TO AN ORGANIZATION THAT FAILS TO REPORT OR THAT FILES AN UNSATISFACTORY REPORT UNTIL THE ORGANIZATION HAS TAKEN STEPS TO AND DEMONSTRATED IT HAS AND WILL COMPLY WITH GRANT RESTRICTIONS. -SCHOLARSHIPS AWARDED BY SFACF ARE APPROVED AND PAID TO EDUCATIONAL INSTITUTIONS ONLY AFTER VERIFYING STUDENT ENROLLMENT, AND IN THE CASE OF SCHOLARSHIP RENEWAL, A STUDENT'S CONTINUING FINANCIAL NEED AND ACADEMIC ELIGIBILITY FOR ASSISTANCE. PART II, LINE 1, COLUMN (H): NAME OF ORGANIZATION OR GOVERNMENT: AUGUSTANA UNIVERSITY (H) PURPOSE OF GRANT OR ASSISTANCE: CAMPUS UPGRADES, LIBRARY SUPPORT, SCHOLARSHIP SUPPORT, CENTER FOR WESTERN STUDIES, GENERAL SUPPORT

SCHEDULE J (Form 990)

Department of the Treasury

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.

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

Open to Public

OMB No. 1545-0047

Inspection

Internal Revenue Service Name of the organization

Part I Questions Regarding Compensation

SIOUX FALLS AREA COMMUNITY FOUNDATION, INC.

Employer identification number 31-1748533

			Yes	No
1 a	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.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as 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	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,	_		
	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 organization used to establish the compensation of the organization's			
Ŭ	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.			
	X Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
	Tom 300 of other organizations			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	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), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			7.7
	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			37
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on 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	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		l

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

Schedule J (Form 990) 2023

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 on 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 aren't 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-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) ANDREW PATTERSON	(i)	155,935.	27,000.	0.	17,425.	33,370.	233,730.	0.
PRESIDENT/CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

SIOUX FALLS AREA COMMUNITY

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

SIOUX FALLS AREA COMMUNITY FOUNDATION, INC.

 $Employer\ identification\ number\\ 31-1748533$

Pai	ti iy	pes of Property			T					
			(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contri amounts repor Form 990, Part VI	ted on		(d) d of determir ontribution a		S
1	Art - Work	s of art			,	, ,				
2		rical treasures								
3		onal interests								
4		publications								
5		nd household goods								
6		other vehicles								
7		planes								
8		l property								
9		- Publicly traded	Х	121	6.585	.020.	AVERAGE	MARKET	VA	LUE
10		- Closely held stock	X	1			APPRAISA			
11		- Partnership, LLC, or		_		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
••		ests								
12		- Miscellaneous								
13		conservation contribution -								
	Historic st									
14		conservation contribution - Other								
15		e - Residential								
16		e - Commercial								
17		e - Other								
18		s								
19		ntory								-
20		medical supplies								-
21										
22		artifacts								
23		specimens								
24		ical artifacts								
25		()								
26	Other	(
27	Other	()								
28	Other									
29	Number of	Forms 8283 received by the organiz	zation during	g the tax year for co	ontributions					
	for which t	he organization completed Form 828	33, Part V, D	Oonee Acknowledg	ement	29			3	
									Yes	No
30a	During the	year, did the organization receive by	/ contributio	n any property rep	orted in Part I, line	s 1 throug	h 28, that it			
	must hold	for at least 3 years from the date of t	the initial co	ntribution, and whi	ch isn't required to	be used	for			
	exempt pu	rposes for the entire holding period?)					30a		X
b		escribe the arrangement in Part II.								
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?								X	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash									
	contribution	ns?						32a	X	
b		escribe in Part II.								
33	If the orga	nization didn't report an amount in c	olumn (c) fo	r a type of property	for which column	(a) is ched	cked,			
	describe ir	n Part II.								

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

Schedule M (Form 990) 2023

SIOUX FALLS AREA COMMUNITY

31-1748533 Schedule M (Form 990) 2023 FOUNDATION, INC. Page 2 Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization Part II is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. SCHEDULE M, LINE 32B: SFACF USES VARIOUS BANK TRUST DEPARTMENTS AND BROKERAGE FIRMS TO ACCEPT AND SELL CONTRIBUTIONS OF SECURITIES AND MUTUAL FUNDS. SCHEDULE M, PART I, COLUMN (B): REPORTING THE NUMBER OF CONTRIBUTIONS

SCHEDULE O (Form 990)

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 Form 990-EZ.

Attach to Form 990 or Form 990-EZ.

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

2023
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

SIOUX FALLS AREA COMMUNITY FOUNDATION, INC.

Employer identification number 31-1748533

FOUNDATIONS IN THE U.S. AS ESTABLISHED BY THE COUNCIL ON FOUNDATIONS,

WWW.COF.ORG, ARLINGTON, VIRGINIA.

Name of the organization SIOUX FALLS AREA COMMUNITY FOUNDATION, INC.

Employer identification number 31-1748533

FORM 990, PART VI, SECTION A, LINE 4:

THE SIOUX FALLS AREA COMMUNITY FOUNDATION UPDATED BYLAWS WITH ASSISTANCE OF
LEGAL COUNSEL. CHANGES WERE REVIEWED AND APPROVED BY THE FOUNDATION LEGAL

COMMITTEE AND BOARD OF DIRECTORS. THESE UPDATES (LISTED BELOW) AIMED TO
MODERNIZE GOVERNANCE PRACTICES AND IMPROVE OPERATIONAL EFFICIENCY FOR THE
COMMUNITY FOUNDATION.

THE KEY CHANGES ARE AS FOLLOWS:

- ENHANCED AND MODERNIZED COMMUNICATION METHODS, INCLUDING ELECTRONIC DELIVERY OF MEETING NOTICES AND THE ABILITY FOR VIRTUAL CONFERENCING.
- INSTITUTED NEW TERM OF OFFICE LIMITS, INCLUDING A TWO-YEAR TERM LIMIT FOR

 THE CHAIR OF THE BOARD AND ALLOWING THE CHAIR AN ADDITIONAL YEAR TO SERVE

 IN THE CAPACITY CHAIR, WHOSE TERM WOULD HAVE OTHERWISE EXPIRED.
- UPDATED DISTRIBUTION REQUIREMENTS FOR ITS REPORT OF FINANCIAL CONDITION,
 ACTIVITIES AND DISTRIBUTIONS. INSTEAD OF RELYING SOLELY ON A TRADITIONAL
 NEWSPAPER PUBLICATION FOR DELIVERY, THE FOUNDATION NOW ALLOWS FOR MODERN
 METHODS OF PUBLIC DISSEMINATION, AS DETERMINED BY THE BOARD.
- INTRODUCED THE ROLE OF CHIEF FINANCIAL OFFICER AS AN OFFICER OF THE FOUNDATION.
- REVISED THE APPROVAL PROCESS FOR PAYMENTS, ALLOWING FOR ELECTRONIC SIGNATURES.
- INCREASED THE THRESHOLD FOR REQUIRING TWO OFFICER SIGNATURES ON CHECKS,
 DRAFTS OR OTHER WITHDRAWALS FROM \$1,000 TO \$5,000.

FORM 990, PART VI, SECTION B, LINE 11B:

STAFF COMPILES INFORMATION FOR SFACF'S TAX RETURN AND REVIEWS THE INDEPENDENT ACCOUNTING FIRM'S DRAFT DOCUMENT.

Name of the organization SIOUX FALLS AREA COMMUNITY FOUNDATION, INC.

Employer identification number 31-1748533

WHEN COMPLETE, STAFF PRESENT THE DRAFT (WITH THE EXCEPTION OF SCHEDULE B,

SCHEDULE OF CONTRIBUTORS, WHICH IN DEFERENCE TO DONORS' DESIRE FOR PRIVACY

IS REVIEWED BY THE CHAIR OF THE BOARD OF DIRECTORS) TO A JOINT MEETING OF

THE AUDIT AND FINANCE COMMITTEES, THE MEMBERSHIP OF WHICH IS COMPRISED OF

BOARD MEMBERS AND ATTORNEYS AND/OR CPAS DRAWN FROM THE COMMUNITY.

ONCE APPROVED AT THE COMMITTEE LEVEL, ALL MEMBERS OF THE GOVERNING BOARD

RECEIVE ELECTRONIC COPIES OF THE TAX RETURN, WITH SCHEDULE B REDACTED. THE

BOARD REVIEWS, DISCUSSES, AND APPROVES THE RETURN. THE PREPARER

SUBSEQUENTLY FILES THE TAX RETURN.

THIS REVIEW PROCESS IS CONDUCTED ANNUALLY.

FORM 990, PART VI, SECTION B, LINE 12C:

AT THE BEGINNING OF EACH FISCAL YEAR, ALL MEMBERS OF SFACF'S STAFF, ITS

BOARD OF DIRECTORS, STANDING COMMITTEES, AND BOARD MEMBERS OF EASTBANK LAND

CO. FILE CONFLICT OF INTEREST FORMS WITH THE PRESIDENT/CEO. THE FORMS

DISCLOSE EACH INDIVIDUAL'S AFFILIATIONS WITH OTHER NONPROFIT ORGANIZATIONS

AND SFACF VENDORS. THESE FORMS ARE COMPILED IN THE GOVERNING BOARD'S POLICY

MANUAL, WHICH IS AVAILABLE ONLINE, AND ARE AVAILABLE FOR PUBLIC REVIEW UPON

REQUEST.

AT THE BEGINNING OF EACH MEETING, THE PERSON PRESIDING CALLS FOR DISCLOSURE
OF CONFLICTS RELATED TO AGENDA ITEMS. BOARD AND COMMITTEE MEMBERS ARE
REQUIRED TO GIVE NOTICE OF ANY POTENTIAL CONFLICT OF INTEREST AND "SHALL
NOT VOTE ON SUCH MATTER, AND SHALL NOT ATTEMPT TO EXERT PERSONAL INFLUENCE

IN CONNECTION THEREWITH."

Name of the organization SIOUX FALLS AREA COMMUNITY FOUNDATION, INC.

Employer identification number 31-1748533

IN THE EVENT THE EXISTENCE OF A CONFLICT OF INTEREST IS UNCLEAR, AFTER

DISCLOSING THE INTEREST AND ALL MATERIAL FACTS, THE PERSON WILL LEAVE THE

MEETING WHILE THE REMAINING BOARD OR COMMITTEE MEMBERS DETERMINE WHETHER A

CONFLICT OF INTEREST EXISTS.

IF THE BOARD OR A COMMITTEE PERCEIVES THAT A PERSON HAS FAILED TO DISCLOSE

ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, IT WILL INFORM THE PERSON OF THE

BASIS FOR SUCH BELIEF AND GIVE THAT PERSON AN OPPORTUNITY TO EXPLAIN THE

ALLEGED FAILURE TO DISCLOSE.

IF, AFTER HEARING THAT PERSON'S RESPONSE AND AFTER MAKING FURTHER

INVESTIGATION AS WARRANTED BY THE CIRCUMSTANCES, THE BOARD OR COMMITTEE

DETERMINES THE PERSON HAS FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT

OF INTEREST, IT WILL TAKE APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION,

WHICH MAY INCLUDE TERMINATION OF EMPLOYMENT OR DISMISSAL FROM THE BOARD OR

COMMITTEE.

FURTHERMORE, THE IMMEDIATE FAMILY OF BOARD AND STAFF ARE NOT ELIGIBLE TO

APPLY FOR ANY AWARD PROGRAM ADMINISTERED BY SFACF. AN IMMEDIATE FAMILY

MEMBER IS DEFINED AS PARENT OR STEP-PARENT, SPOUSE, CHILD OR STEP-CHILD,

GRANDPARENT, GRANDCHILD OR STEP-GRANDCHILD, SIBLING OR STEP-SIBLING, AUNT

OR UNCLE, NIECE OR NEPHEW, IN-LAW (MOTHER, FATHER, SISTER, BROTHER,

DAUGHTER OR SON), AND OTHER RELATIVE OR SIGNIFICANT OTHERS WHO HAVE LIVED

AS PART OF THE BOARD OR STAFF MEMBER'S IMMEDIATE FAMILY.

FORM 990, PART VI, SECTION B, LINE 15:

SFACF USES THE COUNCIL ON FOUNDATION'S ANNUAL "GRANTMAKER'S SALARY AND

Name of the organization SIOUX FALLS AREA COMMUNITY **Employer identification number** 31-1748533 FOUNDATION, INC. BENEFITS REPORT" TO ESTABLISH SALARY RANGES FOR ALL STAFF POSITIONS, INCLUDING THE TOP MANAGEMENT OFFICIALS. RANGES ARE BASED ON THE NATIONAL SURVEY'S COMMUNITY FOUNDATION TABLES. SFACF'S FINANCE COMMITTEE REVIEWS ALL PERSONNEL POLICIES ANNUALLY. THEY REVIEW SALARY RANGES EACH JANUARY. THE COMMITTEE'S RECOMMENDATIONS ARE FORWARDED TO THE BOARD OF DIRECTORS FOR FURTHER CONSIDERATION AND RATIFICATION. FOLLOWING ANNUAL PERFORMANCE APPRAISALS, THE EXECUTIVE COMMITTEE SETS THE CEO'S ANNUAL SALARY, AND THE CEO ESTABLISHES THE SALARY OF ALL OTHER STAFF. FORM 990, PART VI, SECTION C, LINE 19: COPIES OF SFACF'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST AT NO CHARGE TO THE INQUIRER. UNAUDITED FINANCIAL STATEMENTS ARE INCLUDED IN ITS ANNUAL REPORT. AUDITED FINANCIAL STATEMENTS AND SFACF'S FEDERAL TAX RETURNS ARE AVAILABLE UPON REQUEST AT NO CHARGE TO THE INQUIRER AND ONLINE AT WWW.SFACF.ORG AND WWW.GUIDESTAR.ORG, A NATIONAL CLEARINGHOUSE FOR INFORMATION ON NONPROFITS. FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: CHANGE IN CASH SURRENDER VALUE OF LIFE INSURANCE 287,601. CHANGE IN NET ASSETS HELD FOR OTHERS, NET OF DISTRIBUTIONS -3,726,601. CHANGE IN VALUE OF PLEDGES 26,407. TOTAL TO FORM 990, PART XI, LINE 9 -3,412,593.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Attach to Form 990.

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

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Name of the organization

SIOUX FALLS AREA COMMUNITY FOUNDATION, INC.

Employer identification number 31-1748533

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (f) (a) (b) (c) (d) (e) Direct controlling Name, address, and EIN (if applicable) Primary activity Legal domicile (state or Total income End-of-year assets of disregarded entity entity foreign country) EASTBANK LAND COMPANY II, LLC - 47-4549848 TO OWN, MANAGE, SELL, LEASE 200 N CHERAPA PLACE & OTHERWISE HOLD TITLE TO & SIOUX FALLS AREA OPERATE REAL ESTATE SIOUX FALLS, SD 57103 SOUTH DAKOTA 0. 565 000. COMMUNITY FOUNDATION EASTBANK LAND IV, LLC - 81-1423793 TO OWN, MANAGE, SELL, LEASE & OTHERWISE HOLD TITLE TO & 200 N CHERAPA PLACE SIOUX FALLS AREA SIOUX FALLS, SD 57103 OPERATE REAL ESTATE SOUTH DAKOTA 0. 150,000. COMMUNITY FOUNDATION EASTBANK LAND V. LLC - 85-2962967 TO OWN, MANAGE, SELL, LEASE & OTHERWISE HOLD TITLE TO & 200 N CHERAPA PLACE SIOUX FALLS AREA SOUTH DAKOTA SIOUX FALLS, SD 57103 OPERATE REAL ESTATE 0 0. COMMUNITY FOUNDATION

Part II 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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	contr	g) 512(b)(13) rolled tity?
				501(c)(3))		Yes	No
-							

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

31-1748533

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(l	h)	(i)	(j)	(k)	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	1	ortionate tions?	Code V-UBI amount in box 20 of Schedule	Genera manag partne	Percentage ownership	
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	lo	

Part IV 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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership		tion b)(13) rolled tity?
		country)		,				Yes	No

1a

Yes No

FOUNDATION, INC. Schedule R (Form 990) 2023

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

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

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?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b	Gift, grant, or capital contribution to related organization(s)				1b	
С					1 - 1	
d	d Loans or loan guarantees to or for related organization(s)				1d	
е	Loans or loan guarantees by related organization(s)				1e	
f	Dividends from related organization(s)				1f	
g	Sale of assets to related organization(s)				1g	
	Purchase of assets from related organization(s)					
i	Exchange of assets with related organization(s)				1i	
j	Lease of facilities, equipment, or other assets to related organization(s)				. 1j	
k	c Lease of facilities, equipment, or other assets from related organization(s)				. 1k	
ı	Performance of services or membership or fundraising solicitations for related organization	on(s)			. 11	
	n Performance of services or membership or fundraising solicitations by related organization					
	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)					
0	Sharing of paid employees with related organization(s)				10	
р	Reimbursement paid to related organization(s) for expenses				. 1p	
q	Reimbursement paid by related organization(s) for expenses				. 1q	
r	Other transfer of cash or property to related organization(s)				1r	
	Other transfer of cash or property from related organization(s)				. 1s	
2	If the answer to any of the above is "Yes," see the instructions for information on who mu	ust complete thi	is line, including covered rela	tionships and transaction thresholds.		
	-	(b) Fransaction type (a-s)	(c) Amount involved	(d) Method of determining amount	involved	
1)						
۵,						
2)						
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3)						
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4)						
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5)						
6)						
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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.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign	related, unrelated, excluded from tax under sections 512-514)	(e) (f) Are all ners sec. Share of 1(c)(3) rgs.? total	(g) Share of end-of-year	(h) Disproportionate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General of managing partner?	(k) Percentage ownership
		country)	sections 512-514) Yes	s No income	assets	Yes No	(Form 1065)	Yes No	
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	-								
	_								
	_								
	_								

SIOUX FALLS AREA COMMUNITY FOUNDATION. INC.

Schedule R	(Form 990) 2023 Supplemental Infor	FOUNDATION,	INC.	31-1748533 Page 5
rait VII	-			
	Provide additional informa	ation for responses to qu	estions on Schedule R. See instructions.	