

Form **990**
Department of the Treasury
Internal Revenue Service

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
2019
Open to Public Inspection

A For the **2019** calendar year, or tax year beginning **07-01-2019**, and ending **06-30-2020**

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization
SIOUX FALLS AREA COMMUNITY FOUNDATION INC

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
200 N CHERAPA PLACE

City or town, state or province, country, and ZIP or foreign postal code
SIOUX FALLS, SD 571032205

D Employer identification number
31-1748533

E Telephone number
(605) 336-7055

G Gross receipts \$ 166,009,948

F Name and address of principal officer:
ANDREW T PATTERSON
200 N CHERAPA PLACE
SIOUX FALLS, SD 571032205

H(a) Is this a group return for subordinates? Yes No

H(b) Are all subordinates included? Yes No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: ▶ WWW.SFACF.ORG

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1984

M State of legal domicile: SD

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
SFACF IS A PUBLICLY-SUPPORTED COMMUNITY FOUNDATION. ITS PRIMARY ACTIVITY IS GRANTMAKING.

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)	3	15
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	15
5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	15
6 Total number of volunteers (estimate if necessary)	6	250
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 39	7b	-3

	Prior Year		Current Year	
	2019	2018	2019	2018
8 Contributions and grants (Part VIII, line 1h)	40,728,771	30,154,146		
9 Program service revenue (Part VIII, line 2g)	0	0		
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	6,807,862	19,541,215		
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-21,632	0		
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	47,515,001	49,695,361		
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	18,672,965	18,424,590		
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0		
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	888,196	927,206		
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0		
b Total fundraising expenses (Part IX, column (D), line 25) ▶581,377				
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	646,530	617,345		
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	20,207,691	19,969,141		
19 Revenue less expenses. Subtract line 18 from line 12	27,307,310	29,726,220		
	Beginning of Current Year		End of Year	
	2019	2018	2019	2018
	20 Total assets (Part X, line 16)	179,302,241	199,124,298	
21 Total liabilities (Part X, line 26)	34,663,754	36,673,697		
22 Net assets or fund balances. Subtract line 21 from line 20	144,638,487	162,450,601		

Part II Signature Block

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

Sign Here Signature of officer: ***** Date: 2021-05-14
ANDREW T PATTERSON PRESIDENT/CEO
Type or print name and title

Paid Preparer Use Only
Print/Type preparer's name: Preparer's signature: Date: 2021-05-14
Check if self-employed PTIN: P01623183
Firm's name ▶ RSM US LLP Firm's EIN ▶ 42-0714325
Firm's address ▶ 110 SOUTH PHILLIPS AVE SUITE 300 SIOUX FALLS, SD 571046721 Phone no. (605) 336-9955

Part III Statement of Program Service Accomplishments

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

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 LIFE IN OUR AREA, FOR GOOD, FOR EVER. THE COMMUNITY FOUNDATION CULTIVATES PHILANTHROPY BY INSPIRING NEW GENERATIONS OF DONORS TO NURTURE SIOUX FALLS' POSITION AS A NATIONALLY RECOGNIZED CHARITABLE FRONTRUNNER. TO THAT END, SFACF MANAGES AND GROWS ENDOWMENTS AND DIRECTS CHARITABLE GRANTS TO SOCIAL, CULTURAL, EDUCATIONAL, RELIGIOUS, COMMUNITY DEVELOPMENT, AND ENVIRONMENTAL ACTIVITIES THAT ADDRESS THE AREA'S EMERGING NEEDS AND OPPORTUNITIES. THIS EMPHASIS ON GROWING LONG-TERM CHARITABLE ENDOWMENTS ASSURES THAT THE STABILITY AND QUALITY OF LIFE WE ENJOY TODAY WILL BE SUSTAINED FOR GENERATIONS TO COME, IN GOOD TIMES OR BAD. SFACF SERVES MINNEHAHA, LINCOLN, MCCOOK, AND TURNER COUNTIES AND COMMUNITIES WITHIN A 25-MILE RADIUS OF THE CITY OF SIOUX FALLS, SOUTH DAKOTA.

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

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 19,113,422 including grants of \$ 18,424,590) (Revenue \$)
See Additional Data

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

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

4d Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 19,113,422

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		No
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		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		No
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	Yes	
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		No
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		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	Yes	
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.		
11a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	Yes	
11b	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		No
11c	Did the organization report an amount for investments—program related—in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		No
11d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		No
11e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	Yes	
11f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		No
12b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?		No
14b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		No
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 foreign organization? If "Yes," complete Schedule F, Parts II and IV		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		No
20b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	Yes	

Part IV Checklist of Required Schedules (continued)

Table with 3 main columns: Question/Description, Yes, No. Rows include questions 22 through 38 regarding grants, compensation, tax-exempt bonds, excess benefit transactions, and related parties.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V []

Table with 3 main columns: Question/Description, Yes, No. Rows include 1a (Form 1096), 1b (Forms W-2G), and 1c (gambling winnings).

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

Main form area containing questions 2a through 16b with corresponding input fields and checkboxes.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (15), 1b (15), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed SD
18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: MIKE FINNEGAN CFO 200 N CHERAPA PLACE SIOUX FALLS, SD 571032205 (605) 336-7055

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 instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or 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 instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) SCOTT CHRISTENSEN CHAIR OF THE BOARD	2.00	X		X			0	0	0	
(2) SUSIE PATRICK VICE CHAIR OF THE BOARD	2.00	X		X			0	0	0	
(3) TODD ERNST SECRETARY, CHAIR OF SPECIAL GIFTS	2.00	X		X			0	0	0	
(4) JEFF STRAND TREASURER, CHAIR OF FINANCE	2.00	X		X			0	0	0	
(5) AMANGE AWARE MEMBER	2.00	X					0	0	0	
(6) HOLLY BRUNICK CHAIR OF AUDIT	2.00	X					0	0	0	
(7) STACY ERDMANN MEMBER	2.00	X					0	0	0	
(8) JAY HUIZENGA CHAIR OF GRANTS	2.00	X					0	0	0	
(9) LINDA LARSON VICE CHAIR OF GRANTS	2.00	X					0	0	0	
(10) SARAH MADISON CHAIR OF INVESTMENTS	2.00	X					0	0	0	
(11) MARY JO MURRAY MEMBER	2.00	X					0	0	0	
(12) STEVE SARBACKER MEMBER	2.00	X					0	0	0	
(13) AARON SEVERSON MEMBER	2.00	X					0	0	0	
(14) MATT TOBIN CHAIR OF LEGAL	2.00	X					0	0	0	
(15) SUZANNE VEENIS CHAIR OF DEVELOPMENT	2.00	X					0	0	0	
(16) ANDREW PATTERSON PRESIDENT/CEO	50.00			X			141,635	0	42,428	
(17) MIKE FINNEGAN VP, FINANCE/CFO	50.00			X			100,741	0	10,074	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) MARY KOLSRUD VP, PHILANTHROPY	50.00			X				87,639	0	8,764
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							330,015	0		61,266

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

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

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

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants, and Other Similar Amounts	1a Federated campaigns	1a 79,900			
	b Membership dues	1b			
	c Fundraising events	1c			
	d Related organizations	1d			
	e Government grants (contributions)	1e			
	f All other contributions, gifts, grants, and similar amounts not included above	1f 30,074,246			
	g Noncash contributions included in lines 1a - 1f:\$	1g 3,393,318			
	h Total. Add lines 1a-1f		30,154,146		

Program Service Revenue			(A)	(B)	(C)	(D)
		Business Code				
2a						
b						
c						
d						
e						
f All other program service revenue						
g Total. Add lines 2a-2f.						

Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		4,355,899			4,355,899	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents		(i) Real				
			(ii) Personal				
		b Less: rental expenses	6b				
		c Rental income or (loss)	6c				
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory		(i) Securities	131,499,903			
			(ii) Other				
		b Less: cost or other basis and sales expenses	7b	116,314,587			
		c Gain or (loss)	7c	15,185,316			
	d Net gain or (loss)			15,185,316		15,185,316	
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18		8a				
			b Less: direct expenses	8b			
	c Net income or (loss) from fundraising events						
	9a Gross income from gaming activities. See Part IV, line 19		9a				
			b Less: direct expenses	9b			
	c Net income or (loss) from gaming activities						
	10a Gross sales of inventory, less returns and allowances		10a				
b Less: cost of goods sold			10b				
c Net income or (loss) from sales of inventory							
11a Miscellaneous Revenue		Business Code					
b							
c							
d All other revenue							
e Total. Add lines 11a-11d							
12 Total revenue. See instructions			49,695,361	0	0	19,541,215	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	17,968,174	17,968,174		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	456,416	456,416		
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, trustees, and key employees	411,427	152,228	90,513	168,686
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	392,880	145,366	86,434	161,080
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	22,844	8,452	5,026	9,366
9 Other employee benefits	44,189	16,350	9,722	18,117
10 Payroll taxes	55,866	20,670	12,291	22,905
11 Fees for services (non-employees):				
a Management				
b Legal	7,298		1,897	5,401
c Accounting	26,448	8,816	8,816	8,816
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion	84,997	8,499		76,498
13 Office expenses	52,278	19,466	11,005	21,807
14 Information technology	87,434	32,351	19,235	35,848
15 Royalties				
16 Occupancy	11,028	4,080	2,427	4,521
17 Travel	1,297	480	285	532
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	25,380	9,390	5,584	10,406
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	58,382	21,601	12,844	23,937
23 Insurance	12,175	4,505	2,678	4,992
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a LIFE INSURANCE PREMIUM	171,751	171,751		
b SPECIAL PROJECTS EXPENS	56,317	56,317		
c ORGANIZATIONAL DUES	13,653	2,160	4,143	7,350
d SCHOLARSHIP AND GRANTMA	5,520	5,520		
e All other expenses	3,387	830	1,442	1,115
25 Total functional expenses. Add lines 1 through 24e	19,969,141	19,113,422	274,342	581,377
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1 Cash—non-interest-bearing		1		
	2 Savings and temporary cash investments	37,341,153	2	50,916,147	
	3 Pledges and grants receivable, net	1,954,670	3	2,212,000	
	4 Accounts receivable, net		4		
	5 Loans and other 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		5		
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6		
	7 Notes and loans receivable, net		7		
	8 Inventories for sale or use		8		
	9 Prepaid expenses and deferred charges	36,374	9	15,287	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	1,900,574			
	b Less: accumulated depreciation	400,328	1,529,479	10c	1,500,246
	11 Investments—publicly traded securities	130,417,406	11	136,541,580	
	12 Investments—other securities. See Part IV, line 11	144,136	12	99,391	
	13 Investments—program-related. See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11	7,879,023	15	7,839,647	
16 Total assets. Add lines 1 through 15 (must equal line 34)	179,302,241	16	199,124,298		
Liabilities	17 Accounts payable and accrued expenses	76,071	17	78,989	
	18 Grants payable	399,850	18	564,030	
	19 Deferred revenue		19		
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 Loans and other payables to 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		22		
	23 Secured mortgages and notes payable to unrelated third parties		23		
	24 Unsecured notes and loans payable to unrelated third parties		24		
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	34,187,833	25	36,030,678	
	26 Total liabilities. Add lines 17 through 25	34,663,754	26	36,673,697	
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.				
	27 Net assets without donor restrictions	133,677,582	27	150,910,387	
	28 Net assets with donor restrictions	10,960,905	28	11,540,214	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.				
	29 Capital stock or trust principal, or current funds		29		
	30 Paid-in or capital surplus, or land, building or equipment fund		30		
	31 Retained earnings, endowment, accumulated income, or other funds		31		
32 Total net assets or fund balances	144,638,487	32	162,450,601		
33 Total liabilities and net assets/fund balances	179,302,241	33	199,124,298		

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	49,695,361
2	Total expenses (must equal Part IX, column (A), line 25)	2	19,969,141
3	Revenue less expenses. Subtract line 2 from line 1	3	29,726,220
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	144,638,487
5	Net unrealized gains (losses) on investments	5	-11,238,500
6	Donated services and use of facilities	6	
7	Investment expenses	7	-125,989
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-549,617
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	162,450,601

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 Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a		No
3b		

Additional Data

Software ID:

Software Version:

EIN: 31-1748533

Name: SIOUX FALLS AREA COMMUNITY
FOUNDATION INC

Form 990 (2019)

Form 990, Part III, Line 4a:

SIOUX FALLS AREA COMMUNITY FOUNDATION IS A PUBLICLY SUPPORTED COMMUNITY FOUNDATION THAT ATTRACTS, MANAGES, AND DISTRIBUTES CHARITABLE CAPITAL. ITS PRIMARY SERVICE AREA IS THE SIOUX FALLS MSA, A FOUR-COUNTY AREA WITH A POPULATION OF APPROXIMATELY 250,000, AND OTHER COMMUNITIES WITHIN A 25-MILE RADIUS OF THE CITY OF SIOUX FALLS, SOUTH DAKOTA.SFACF'S PRIMARY ACTIVITY IS GRANTMAKING AIMED AT IMPROVING THE QUALITY OF LIFE IN THE SERVICE AREA, FOR GOOD, FOR EVER. IN FY 2020, OF MORE THAN 2,600 GRANTS MADE, NEARLY 150 STUDENTS BENEFITED FROM COMPETITIVELY AWARDED SCHOLARSHIPS AND COMPETITIVELY AWARDED GRANTS WERE MADE TO ORGANIZATIONS THAT SOUGHT TO ADDRESS THE AREA'S MOST PRESSING NEEDS AND OPPORTUNITIES. IN ALL, MORE THAN 500 CHARITABLE ORGANIZATIONS RECEIVED SUPPORT IN PROGRAM AREAS THAT INCLUDE ARTS AND HUMANITIES, COMMUNITY DEVELOPMENT, EDUCATION, ENVIRONMENT, HEALTH, HUMAN SERVICES, AND RELIGION. SFACF HAS MET AND ADHERES TO NATIONAL STANDARDS FOR COMMUNITY FOUNDATIONS IN THE U.S. AS ESTABLISHED BY THE COUNCIL ON FOUNDATIONS, WWW.COF.ORG, ARLINGTON, VIRGINIA.

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
SIOUX FALLS AREA COMMUNITY FOUNDATION INC

Employer identification number
31-1748533

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.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10 An organization that normally receives: (1) more than 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **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.**
 - 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.**
 - 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.**
 - d **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.**
 - e 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.
 - f Enter the number of supported organizations _____
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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 failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .	15,145,709	17,542,012	23,985,945	40,728,771	30,154,146	127,556,583
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge..						
4	Total. Add lines 1 through 3	15,145,709	17,542,012	23,985,945	40,728,771	30,154,146	127,556,583
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). . .						47,360,185
6	Public support. Subtract line 5 from line 4.						80,196,398

Section B. Total Support

	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4.	15,145,709	17,542,012	23,985,945	40,728,771	30,154,146	127,556,583
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,974,820	2,942,695	3,596,688	5,344,273	4,355,899	19,214,375
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						146,770,958

12 Gross receipts from related activities, etc. (see instructions) **12**

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) **14** 54.640 %

15 Public support percentage for 2018 Schedule A, Part II, line 14 **15** 58.500 %

16a **33 1/3% support test—2019.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b **33 1/3% support test—2018.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a **10%-facts-and-circumstances test—2019.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b **10%-facts-and-circumstances test—2018.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . .						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
c	Add lines 7a and 7b.						
8	Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6.						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . .						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c	Add lines 10a and 10b.						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15	Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2018 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2018 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
	3a		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
	4b		
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)? <i>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.</i>		
	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
	5c		
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? <i>If "Yes," provide detail in Part VI.</i>		
	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
	9c		
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)? <i>If "Yes," answer line 10b below.</i>		
	10a		
b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).</i>		
	10b		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or 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? <i>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 supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2	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? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in (2), 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section 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 instructions):		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)		
2	Activities Test. Answer (a) and (b) below.		
a	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? <i>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.</i>	Yes	No
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>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.</i>		
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** 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.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014.			
b From 2015.			
c From 2016.			
d From 2017.			
e From 2018.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7:			
\$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015.			
b Excess from 2016.			
c Excess from 2017.			
d Excess from 2018.			
e Excess from 2019.			

Additional Data

Software ID:

Software Version:

EIN: 31-1748533

Name: SIOUX FALLS AREA COMMUNITY
FOUNDATION INC

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

Facts And Circumstances Test

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No. 1545-0047
2019
Open to Public Inspection

▶ 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.

Name of the organization
SIOUX FALLS AREA COMMUNITY FOUNDATION INC

Employer identification number
31-1748533

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	450	
2 Aggregate value of contributions to (during year)	23,344,882	
3 Aggregate value of grants from (during year)	10,930,934	
4 Aggregate value at end of year	88,345,687	

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No
- 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

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

- 1 Purpose(s) of conservation easements held by the organization (check all that apply).
- Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area
- Protection of natural habitat Preservation of a certified historic structure
- Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____
- 4 Number of states where property subject to conservation easement is located ▶ _____
- 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No
- 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____
- 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____
- 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No
- 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____
- (ii) Assets included in Form 990, Part X ▶ \$ _____
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
- a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____
- b Assets included in Form 990, Part X ▶ \$ _____

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

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

Part IV Escrow and Custodial Arrangements.

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

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**

- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- c** Beginning balance
 - d** Additions during the year
 - e** Distributions during the year
 - f** Ending balance

	Amount
1c	
1d	
1e	
1f	

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

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	111,581,732	92,566,007	87,352,451	76,749,755	76,175,203
b Contributions	1,656,723	18,414,237	2,349,232	4,894,556	2,651,591
c Net investment earnings, gains, and losses	5,952,604	6,061,606	6,673,179	8,924,857	1,020,119
d Grants or scholarships	1,588,204	4,631,508	2,962,409	2,469,368	2,411,362
e Other expenditures for facilities and programs					
f Administrative expenses	886,954	828,610	846,446	747,349	685,796
g End of year balance	116,715,901	111,581,732	92,566,007	87,352,451	76,749,755

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

- a** Board designated or quasi-endowment ▶ 92.000 %
 - b** Permanent endowment ▶ 6.000 %
 - c** Temporarily restricted endowment ▶ 2.000 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.

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

- (i)** unrelated organizations
- (ii)** related organizations

	Yes	No
3a(i)		No
3a(ii)		No
3b		

- b** If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		206,000		206,000
b Buildings		1,432,014	242,851	1,189,163
c Leasehold improvements				
d Equipment		164,431	123,938	40,493
e Other		98,129	33,539	64,590
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				1,500,246

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

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. (Column (b) must equal Form 990, Part X, col.(B) line 13.)		

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CHARITABLE GIFT ANNUITIES PAYABLE	238,757
(3) ASSETS HELD FOR OTHERS	35,791,921
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	36,030,678

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	36,461,177
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-11,238,500
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	-1,869,695
e	Add lines 2a through 2d	2e	-13,108,195
3	Subtract line 2e from line 1	3	49,569,372
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	125,989
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	125,989
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	49,695,361

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	18,649,063
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	-1,320,078
e	Add lines 2a through 2d	2e	-1,320,078
3	Subtract line 2e from line 1	3	19,969,141
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	19,969,141

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 31-1748533

Name: SIOUX FALLS AREA COMMUNITY
FOUNDATION INC

Supplemental Information

Return Reference	Explanation
PART X, LINE 2:	THE FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ISSUED NEW GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES. THE FOUNDATION ADOPTED THIS NEW GUIDANCE FOR THE YEAR ENDED JUNE 30, 2010. MANAGEMENT EVALUATED THE FOUNDATION'S TAX POSITIONS AND CONCLUDED THAT THE FOUNDATION HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS.

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS:	CHANGE IN CASH SURRENDER VALUE OF LIFE INSURANCE 1,322,609. AGENCY FUNDS -3,192,304.

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS:	AGENCY FUNDS EXPENSE -1,320,078.

Note: To capture the full content of this document as Filed, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

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

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization SIOUX FALLS AREA COMMUNITY FOUNDATION INC

Employer identification number

31-1748533

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000.

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation, (g) Description of noncash assistance, (h) Purpose of grant or assistance. Rows 1-12.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 207
3 Enter total number of other organizations listed in the line 1 table 3

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) SCHOLARSHIP ASSISTANCE	146	429,250		N/A	N/A
(2) HARDSHIP ASSISTANCE	25	27,166		N/A	N/A
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2:	<p>SFACF REVIEWS THE TAX STATUS OF POTENTIAL GRANTEEES USING GUIDESTAR CHARITY CHECK, WHICH INTEGRATES DATA FROM IRS PUBLICATION. MONITORING PROCEDURES VARY BASED ON THE GRANTEE'S TAX STATUS, THE PURPOSE OF THE GRANT, AND THE SOURCE OF THE RECOMMENDATION FOR THE GRANT. GRANTS TO ORGANIZATIONS WITHOUT 501(C)(3) OR EQUIVALENT TAX STATUS ARE MADE USING STANDARD EXPENDITURE RESPONSIBILITY PROCEDURES. TO ASSURE THAT A PROPOSED ACTIVITY IS EXCLUSIVELY CHARITABLE AND THAT THE ORGANIZATION HAS 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 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.</p>

Additional Data

Software ID:
Software Version:
EIN: 31-1748533
Name: SIOUX FALLS AREA COMMUNITY
FOUNDATION INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ABBAY OF THE HILLS PO BOX 38 MARVIN, SD 57251	46-4176934	501(C)(3)	5,500				GENERAL SUPPORT
ACTIVE GENERATIONS 2300 W 46TH STREET SIOUX FALLS, SD 571056528	46-0305500	501(C)(3)	78,292				MEALS ON WHEELS, CAPITAL PROJECTS, GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALCESTER HUDSON SCHOOL DISTRICT 501 IOWA STREET PO BOX 198 ALCESTER, SD 57001	46-6003186	GOVT	5,500				PURCHASE WEIGHT ROOM EQUIPMENT
ALEXANDRIA TECHNICAL & COMMUNITY COLLEGE FOUNDATION 1601 JEFFERSON STREET ALEXANDRIA, MN 56308	41-1272662	501(C)(3)	25,000				BELIEVERS & ACHIEVERS SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALPHA CENTER 3405 S KIWANIS AVENUE SIOUX FALLS, SD 57105	36-3347022	501(C)(3)	15,000				GENERAL SUPPORT
ALZHEIMER'S ASSOCIATION 4304 S TECHNOLOGY DRIVE SIOUX FALLS, SD 57106	13-3039601	501(C)(3)	8,976				GENERAL SUPPORT, WALK, RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AUGUSTANA UNIVERSITY 2001 S SUMMIT AVENUE SIOUX FALLS, SD 57197	46-0224588	501(C)(3)	466,382				SCHOLARSHIP SUPPORT, GENERAL SUPPORT, VARIOUS PROGRAMS, CENTER FOR WESTERN STUDIES
AVERA MCKENNAN FOUNDATION 1325 S CLIFF AVENUE PO BOX 5045 SIOUX FALLS, SD 571175045	46-0224743	501(C)(3)	305,997				CANCER PATIENT SUPPORT, , DOUGHERTY HOSPICE HOUSE, GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BATTLESHIP SOUTH DAKOTA MEMORIAL FOUNDATION 7604 W EMILY STREET SIOUX FALLS, SD 571064709	46-6015380	501(C)(3)	12,059				SUPPORT TO THE BATTLESHIP SOUTH DAKOTA MEMORIAL
BETHANY CHRISTIAN SERVICES OF SOUTH DAKOTA 400 S SYCAMORE AVENUE 103-1 SIOUX FALLS, SD 571101255	20-5485352	501(C)(3)	7,500				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BETHEL MINISTRIES INTERNATIONAL PO BOX 573 RESERVE, NM 87830	26-0619803	501(C)(3)	10,000				MISSION SUPPORT - WHEELCHAIRS AND FOOD
BHUTANESE NEPALESE YOUTH OF SIOUX FALLS 3505 E MADISON STREET SIOUX FALLS, SD 57103	83-3371354	501(C)(3)	6,000				COVID - 19 ASSISTANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIG HORN GOLF CLUB CHARITIES 255 PALOWET DRIVE PALM DESERT, CA 92260	20-5377872	501(C)(3)	60,000				BIG HORN CARES PROGRAM SUPPORT
BISHOP DUDLEY HOSPITALITY HOUSE 101 N INDIANA AVENUE SIOUX FALLS, SD 57103	91-1836528	501(C)(3)	54,983				GENERAL SUPPORT, COVID-19 ASSISTANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BISHOP O'GORMAN CATHOLIC SCHOOLS 3100 W 41ST STREET SIOUX FALLS, SD 571054222	46-0413591	501(C)(3)	8,698				TUITION ASSISTANCE, GENERAL SUPPORT
BISHOP O'GORMAN CATHOLIC SCHOOLS FOUNDATION INC 3100 W 41ST STREET SIOUX FALLS, SD 571054222	51-0145184	501(C)(3)	18,742				GENERAL SUPPORT, TEACHERS' ENDOWMENT, HIGH SCHOOL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BLACK HILLS AREA COMMUNITY FOUNDATION 803 ST JOSEPH STREET PO BOX 231 RAPID CITY, SD 57709	36-3608635	501(C)(3)	7,000				GENERAL SUPPORT
BLACK HILLS PLAYHOUSE PO BOX 2513 RAPID CITY, SD 57709	46-0215866	501(C)(3)	10,000				ACHIEVING HEALTH, WELL BEING, AND INDEPENDENCE THROUGH PERFORMING ARTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BLACK HILLS STATE UNIVERSITY FOUNDATION UNIT 9506 1200 UNIVERSITY STREET SPEARFISH, SD 577999506	23-7428348	501(C)(3)	227,000				SCHOLARSHIP SUPPORT
BOY SCOUTS OF AMERICA SIOUX COUNCIL 800 N WEST AVENUE SIOUX FALLS, SD 57104	46-0224599	501(C)(3)	32,578				CLIMB WITH US - COMMUNITY APPEALS CAMPAIGN, FRIENDS OF SCOUTING, GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYS & GIRLS CLUB OF THE COACHELLA VALLEY 42 600 COOK STREET 120 PALM DESERT, CA 92211	95-6122699	501(C)(3)	10,000				GENERAL SUPPORT
BOYS & GIRLS CLUBS OF THE SIOUX EMPIRE 100 S SPRING AVENUE 280 SIOUX FALLS, SD 57104	46-0399482	501(C)(3)	65,100				GIRLS LEADING OUR WORLD, COUNSELING SERVICES, GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BRANDON COMMUNITY FOOD PANTRY 406 MAIN AVENUE BRANDON, SD 57005	30-0432338	501(C)(3)	5,250				GENERAL SUPPORT
BRANDON LUTHERAN CHURCH 600 E HOLLY BOULEVARD PO BOX 320 BRANDON, SD 57005	46-6034467	501(C)(3)	5,575				CHURCH HYMNALS, GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BRANDON VALLEY BASEBALL ASSOCIATION PO BOX 605 BRANDON, SD 57005	46-0401362	501(C)(3)	7,500				IMPROVEMENTS TO VALLEY SPRINGS FACILITY
BREATHE BRAVELY 305 W 29TH STREET SIOUX FALLS, SD 57105	47-5334258	501(C)(3)	9,000				GENERAL SUPPORT, SCHOLARSHIPS, EDUCATION SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BUTTERFLY HOUSE AND AQUARIUM 4320 S OXBOW AVENUE SIOUX FALLS, SD 571064110	52-2370420	501(C)(3)	76,500				GENERAL SUPPORT, FIELD TRIP PROGRAM, CAPITAL CAMPAIGN
CALL TO FREEDOM 1915 E EIGHTH STREET 100 SIOUX FALLS, SD 57103	47-5469817	501(C)(3)	66,000				OUTREACH, MARISSA'S PROJECT, GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CALVARY CATHEDRAL 500 S MAIN AVENUE SIOUX FALLS, SD 571046814	46-0225354	501(C)(3)	14,407				GENERAL SUPPORT
CALVARY CHAPEL 1605 W 51ST STREET SIOUX FALLS, SD 57105	46-0463362	501(C)(3)	8,000				GENERAL MINISTRY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CANTON - INWOOD AREA HEALTH FOUNDATION 440 N HIAWATHA DRIVE CANTON, SD 57013	46-0210400	501(C)(3)	66,000				GENERAL SUPPORT
CARITAS CLINICS INC 636 TAUROMEE AVENUE KANSAS CITY, KS 66101	48-1009910	501(C)(3)	10,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CATHOLIC COMMUNITY FOUNDATION FOR EASTERN SD 523 N DULUTH AVENUE SIOUX FALLS, SD 571042714	46-6068924	501(C)(3)	26,605				ADORATION SISTERS MONASTERY, COVID-19 ASSISTANCE
CATHOLIC DIOCESE OF SIOUX FALLS 523 N DULUTH AVENUE SIOUX FALLS, SD 571042714	46-6000424	501(C)(3)	61,008				GENERAL SUPPORT, CFSA

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CENTERVILLE DEVELOPMENT CORPORATION 741 MAIN STREET CENTERVILLE, SD 57014	46-0315601	501(C)(3)	10,000				CENTERVILLE DOWNTOWN REVITALIZATION & IMPROVEMENTS PROJECT
CENTRAL CHURCH 3102 W RALPH ROGERS ROAD SIOUX FALLS, SD 57106	46-0231577	501(C)(3)	251,800				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CHABAB LUBAVITCH OF SOUTH DAKOTA 2900 W OLD YANKTON ROAD SIOUX FALLS, SD 57108	81-4118734	501(C)(3)	45,500				GENERAL SUPPORT
CHILDREN OF THE NATIONS PO BOX 3970 SILVERDALE, WA 98383	91-1702551	501(C)(3)	10,000				MISSION TRIP SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CHILDREN'S HOME FOUNDATION PO BOX 1749 SIOUX FALLS, SD 571011749	46-0366277	501(C)(3)	198,207				GENERAL SUPPORT, BOOKS, LESSONS, CHILD'S VOICE PROGRAM, SCHOLARSHIP SUPPORT
CHRIST THE KING CHURCH 1501 W 26TH STREET SIOUX FALLS, SD 57105	46-0247335	501(C)(3)	20,000				GOOD SHEPHERD FUND, GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CITY OF ANGELS INTERNATIONAL CHRISTIAN CHURCH PO BOX 88549 LOS ANGELES, CA 90009	20-5800298	501(C)(3)	18,000				SOUTH REGION MISSIONS
CITY OF HUDSON 310 FOURTH STREET HUDSON, SD 57034	46-6000210	GOVT	11,500				TRAINING MANIKINS, HUDSON AMBULANCE SERVICE, HURST COMBO TOOL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CITY OF LENNOX 107 S MAIN PO BOX 228 LENNOX, SD 570390228	46-6000261	GOVT	7,525				LENNOX PARK & RECREATION POOL PROJECT
CITY OF PIERRE 2301 PATRON PARKWAY PIERRE, SD 57501	46-6000356	501(C)(3)	10,000				POOL FUND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CITY OF SIOUX FALLS 231 S DAKOTA AVENUE SIOUX FALLS, SD 57104	46-6000425	GOVT	581,018				READING BRIDGE PROGRAM, DOG PARK
CITY OF TEA PO BOX 128 TEA, SD 57064	46-0349659	GOVT	5,800				CPR TRAINING CLASS, VETERAN'S MEMORIAL, RADIO PROJECT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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COLGATE ROCHESTER CROZER DIVINITY SCHOOL 1100 S GOODMAN STREET ROCHESTER, NY 146202589	16-0743916	501(C)(3)	6,488				SCHOLARSHIP SUPPORT
COLLEGE OF SAINT BENEDICT 37 COLLEGE AVENUE S SAINT JOSEPH, MN 56374	41-0969244	501(C)(3)	204,500				SCHOLARSHIP SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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COLLISIONFIRST PRIORITY OF SIOUX FALLS INC 3815 S WESTERN AVENUE SIOUX FALLS, SD 57105	26-3765706	501(C)(3)	42,300				GENERAL SUPPORT
COMMUNITY INDOOR TENNIS CENTER 4210 N BOBHALLA DRIVE SIOUX FALLS, SD 57107	45-2784394	501(C)(3)	38,775				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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COMMUNITY REFORMED CHURCH 6800 E 41ST STREET SIOUX FALLS, SD 57110	46-0365454	501(C)(3)	21,700				GENERAL SUPPORT, STREET PROJECT
COMPASSION CHILD CARE 225 E 11TH STREET SUITE 102 SIOUX FALLS, SD 57104	45-4077445	501(C)(3)	662,716				PIVOT PROGRAM, GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CRAZY HORSE MEMORIAL FOUNDATION 12151 AVENUE OF THE CHIEFS CRAZY HORSE, SD 577309506	46-0220678	501(C)(3)	107,112				GENERAL SUPPORT
CRU CITY 7013 S EDINBURG PLACE SIOUX FALLS, SD 57108	95-6006173	501(C)(3)	31,850				GENERAL SUPPORT, MINISTRY SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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DAKOTA ROYAL CHARITY DRAFT HORSE SHOW 48016 RIVERSIDE PLACE SIOUX FALLS, SD 57108	47-3741864	501(C)(3)	10,000				GENERAL SUPPORT
DAKOTABILITIES 1116 S FOURTH AVENUE SIOUX FALLS, SD 57105	46-0306216	501(C)(3)	23,450				BETTER NURSING CARE THROUGH BETTER TECHNOLOGY, GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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DAWSON MCALLISTER LIVE PO BOX 1835 SPRING HILL, TN 37174	95-2846179	501(C)(3)	5,300				GENERAL SUPPORT
DE LA SALLE HIGH SCHOOL ONE DELASALLE DRIVE MINNEAPOLIS, MN 55401	41-0705834	501(C)(3)	12,100				SCHOLARSHIP SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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DORDT UNIVERSITY ADVANCEMENT OFFICE 498 4TH AVENUE NE SIOUX CENTER, IA 51250	42-0772559	501(C)(3)	156,800				SCHOLARSHIP SUPPORT, CAPITAL PROJECT SUPPORT
DOW RUMMEL COMMUNITY ENHANCEMENT FOUNDATION 1321 W DOW RUMMEL STREET SIOUX FALLS, SD 57104	27-0860032	501(C)(3)	18,145				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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DOW RUMMEL VILLAGE 1321 W DOW RUMMEL STREET SIOUX FALLS, SD 57104	46-0271277	501(C)(3)	101,573				GENERAL SUPPORT, CAPITAL CAMPAIGN
DUCKS UNLIMITED - SOUTH DAKOTA CHAPTER 420 PURDUE STREET VERMILLION, SD 57069	91-1784670	501(C)(3)	10,000				SOUTH DAKOTA SAVE OUR PRAIRIE PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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EARLY FORD V-8 FOUNDATION & MUSEUM PO BOX 284 2181 GENERAL DOOLITTLE DRIVE AUBURN, IN 46706	94-3152163	501(C)(3)	300,000				OPERATING AND CONSTRUCTION COSTS
EAST SIDE LUTHERAN CHURCH 1300 E 10TH STREET SIOUX FALLS, SD 57103	46-0234112	501(C)(3)	12,189				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ELK POINT JEFFERSON EDUCATIONAL FOUNDATION 402 S DOUGLAS PO BOX 578 ELK POINT, SD 570250578	45-2531813	501(C)(3)	9,674				SCHOLARSHIP SUPPORT
EMBE 300 W 11TH STREET SIOUX FALLS, SD 571046306	46-0234998	501(C)(3)	113,631				CULTURE CONSULTANTS, GENERAL SUPPORT, BUS, COVID-10 ASSISTANCE, LEADERS OF TOMORROW

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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EMBRACE CHURCH 2800 E 57TH STREET SIOUX FALLS, SD 57108	37-1640708	501(C)(3)	9,000				GENERAL SUPPORT
EPISCOPAL DIOCESE OF SOUTH DAKOTA 408 N JEFFERSON AVENUE PIERRE, SD 575012626	46-0452261	501(C)(3)	99,779				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FACE IT TOGETHER INC 5020 S TENNIS LANE 4 SIOUX FALLS, SD 57108	27-2501220	501(C)(3)	304,000				GENERAL SUPPORT
FAITH TEMPLE FOOD GIVEAWAY 2121 W 33RD STREET SIOUX FALLS, SD 57105	83-1248616	501(C)(3)	10,000				FOOD PURCHASES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FAMILY CONNECTION PO BOX 100 SIOUX FALLS, SD 57101	46-0435140	501(C)(3)	8,300				GENERAL SUPPORT
FAMILY VISITATION CENTER 311 E 14TH STREET SIOUX FALLS, SD 57104	26-3654937	501(C)(3)	8,200				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FEEDING SOUTH DAKOTA 4701 N WESTPORT AVENUE SIOUX FALLS, SD 57107	36-3293534	501(C)(3)	273,037				BACK PACK PROGRAM, GENERAL SUPPORT, COVID-19 ASSISTANCE
FELLOWSHIP OF CATHOLIC UNIVERSITY STUDENTS (FOCUS) PO BOX 18710 GOLDEN, CO 80402	84-1522811	501(C)(3)	6,500				MINISTRY SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FIRST CONGREGATIONAL CHURCH OF SIOUX FALLS 300 S MINNESOTA AVENUE SIOUX FALLS, SD 571046352	46-0225435	501(C)(3)	22,759				GENERAL SUPPORT
FIRST EVANGELICAL FREE CHURCH 2601 W 69TH STREET SIOUX FALLS, SD 57108	46-0281277	501(C)(3)	53,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FIRST LUTHERAN CHURCH 327 S DAKOTA AVENUE SIOUX FALLS, SD 57104	46-0232600	501(C)(3)	113,283				MEDIA MINISTRY, CAPITAL CAMPAIGN, GENERAL SUPPORT
FIRST PRESBYTERIAN CHURCH 2300 S WEST AVENUE SIOUX FALLS, SD 57105	46-0229140	501(C)(3)	14,566				PROPERTY MAINTENANCE AND REPAIR, GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FIRST UNITED METHODIST CHURCH 401 S SPRING AVENUE SIOUX FALLS, SD 57104	46-0230392	501(C)(3)	38,424				GENERAL SUPPORT
FIRST UNITED METHODIST CHURCH FOUNDATION OF SIOUX FALLS 401 S SPRING AVENUE SIOUX FALLS, SD 57104	46-0355004	501(C)(3)	40,673				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FRIENDS OF SOUTH DAKOTA PUBLIC BROADCASTING PO BOX 5000 SIOUX FALLS, SD 571175000	23-7310698	501(C)(3)	188,885				PROGRAMMING, GENERAL SUPPORT, CAPITAL CAMPAIGN
FRIENDS OF THE BIG SIOUX RIVER PO BOX 2341 SIOUX FALLS, SD 57101	47-3343873	501(C)(3)	6,100				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FRIENDS OF THE LEVITT SHELL SIOUX FALLS 524 N MAIN AVENUE 106 SIOUX FALLS, SD 57104	61-1699910	501(C)(3)	131,425				GENERAL SUPPORT
FURNITURE MISSION OF SOUTH DAKOTA 209 N NESMITH AVENUE SIOUX FALLS, SD 57103	81-0584500	501(C)(3)	35,550				GENERAL SUPPORT, SUPPLIES AND EQUIPMENT, COVID-19 ASSISTANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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GIRL SCOUTS - DAKOTA HORIZONS 1101 S MARION ROAD SIOUX FALLS, SD 571063466	46-0250744	501(C)(3)	14,228				GIRL SCOUTS OUTREACH PROGRAM, GENERAL SUPPORT
GLORIA DEI LUTHERAN CHURCH 5500 E 57TH STREET SIOUX FALLS, SD 57108	46-0382186	501(C)(3)	199,470				LOAVES AND FISHES, GOOD SAMARITAN FUND, GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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GLORY HOUSE OF SIOUX FALLS 4000 S WEST AVENUE PO BOX 88145 SIOUX FALLS, SD 571098145	46-0308425	501(C)(3)	41,000				APARTMENT CAPITAL CAMPAIGN, GENERAL SUPPORT, COVID-19 ASSISTANCE
GREAT BEAR RECREATION PARK INC 2401 W 49TH STREET SIOUX FALLS, SD 57106	46-0417880	501(C)(4)	25,895				ADAPTIVE SKI PROGRAM, TUBING HILL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREAT PLAINS ZOO & DELBRIDGE MUSEUM 805 S KIWANIS AVENUE SIOUX FALLS, SD 571043798	46-6015015	501(C)(3)	175,383				GENERAL SUPPORT, LIONS
HABITAT FOR HUMANITY OF GREATER SIOUX FALLS INC 721 E AMIDON STREET SIOUX FALLS, SD 571041015	46-0407140	501(C)(3)	6,149				GENERAL SUPPORT

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HARMONY SOUTH DAKOTA 2522 W 41ST STREET 125 SIOUX FALLS, SD 57105	46-3296505	501(C)(3)	27,600				YOUTH MUSIC PROGRAM, PROJECT JUMPSTART, GENERAL SUPPORT
HELPLINE CENTER 1000 N WEST AVENUE 310 SIOUX FALLS, SD 571041314	23-7424387	501(C)(3)	34,700				COMMUNITY TRENDS REPORT, GENERAL SUPPORT, COVID-19 ASSISTANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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HOPE HARBOR PO BOX 26 MARSHALL, MN 56258	20-0652270	501(C)(3)	5,250				GENERAL SUPPORT
HOPE HAVEN INTERNATIONAL MINISTRIES 521 NORTH KIWANIS AVENUE SIOUX FALLS, SD 57104	42-0890017	501(C)(3)	11,500				GENERAL SUPPORT, MACHINE PURCHASE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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HOPE LUTHERAN CHURCH 1700 S CLIFF AVENUE SIOUX FALLS, SD 57105	46-0253194	501(C)(3)	16,405				GENERAL SUPPORT
INTER-LAKES COMMUNITY ACTION PARTNERSHIP INC 111 N VAN EPS AVENUE PO BOX 268 MADISON, SD 570420268	46-0282131	501(C)(3)	163,624				BRIGHT FUTURES PROGRAM, FLOOD AND TORNADO ASSISTANCE, HEARTLAND HOUSE, GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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KING OF GLORY CHURCH 1001 E 17TH STREET SIOUX FALLS, SD 57104	45-2247326	501(C)(3)	58,238				SUPPLY PURCHASES FOR DELIVERING NECESSITIES DURING COVID PANDEMIC
KINGDOM CAPITAL FUND 5735 E 41ST STREET SIOUX FALLS, SD 57110	26-0194811	501(C)(3)	10,000				GENERAL SUPPORT

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LIFESCAPE 2501 W 26TH STREET SIOUX FALLS, SD 57105	23-7072116	501(C)(3)	46,104				GENERAL SUPPORT, PPE, COMMUNITY ACTIVITIES
LIFESCAPE FOUNDATION 2011 W 26TH STREET 201 SIOUX FALLS, SD 571052498	46-0353254	501(C)(3)	10,632				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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LOYOLA LAW SCHOOL 919 ALBANY STREET LOS ANGELES, CA 90015	95-1643334	501(C)(3)	10,000				PROJECT FOR THE INNOCENT
LUTHERAN SOCIAL SERVICES OF SOUTH DAKOTA 705 E 41ST STREET 200 SIOUX FALLS, SD 571056048	46-0224731	501(C)(3)	165,486				HERE4YOUTH FUND, GENERAL SUPPORT, COVID-19 ASSISTANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MAKE-A-WISH FOUNDATION OF SOUTH DAKOTA 1400 W 17TH STREET SIOUX FALLS, SD 57104	46-0375953	501(C)(3)	20,957				GENERAL SUPPORT
MAYO CLINIC PO BOX 450 ALBERT LEA, MN 560079849	41-6011702	501(C)(3)	25,000				GENERAL SUPPORT

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MCCROSSAN BOYS RANCH 47135 260TH STREET SIOUX FALLS, SD 571076428	46-0311913	501(C)(3)	18,051				GENERAL SUPPORT
MEMORIAL LUTHERAN CHURCH 5000 S WESTERN AVENUE SIOUX FALLS, SD 571082605	46-6003751	501(C)(3)	10,100				GENERAL SUPPORT, AV NEEDS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MIDWEST DISTRICT MISSIONARY CHURCH 1518 O STREET PLEASANT DALE, NE 68423	47-6026578	501(C)(3)	6,000				GENERAL SUPPORT
MIGHTY CORSON ART PLAYERS PO BOX 444 BRANDON, SD 570050444	46-0373641	501(C)(3)	5,384				ELECTRICAL UPDATES AND STAFFING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MINNEHAHA COUNTY TREASURER 415 N DAKOTA AVENUE ADMIN BUILDING 1ST FLOOR SIOUX FALLS, SD 571042465	46-6000426	GOVT	27,000				INDIGENT RELIEF, COVID-19 ASSISTANCE
MOUNT ZION CONGREGATION 523 W 14TH STREET PO BOX 756 SIOUX FALLS, SD 571010756	46-0362692	501(C)(3)	13,253				GENERAL SUPPORT

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MULTI-CULTURAL CENTER OF SIOUX FALLS 515 N MAIN AVENUE SIOUX FALLS, SD 571045901	46-0445034	501(C)(3)	22,262				BASKETBALL FOR INDIGENOUS YOUTH PROGRAM, COVID-19 ASSISTANCE
NAMI SOUTH DAKOTA 1601 E 69TH STREET PO BOX 88808 SIOUX FALLS, SD 571098808	43-1201653	501(C)(3)	14,490				VOLUNTEER BASE AND IMPLEMENT A COORDINATED COMMUNICATION SYSTEM, GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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NEBRASKA WESLEYAN UNIVERSITY 5000 ST PAUL AVENUE LINCOLN, NE 685042760	47-0376524	501(C)(3)	25,952				SCHOLARSHIP SUPPORT
NETWORK FOR GOOD 1140 CONNECTICUT AVENUE NW 700 WASHINGTON, DC 20036	68-0480736	501(C)(3)	10,000				PROJECT JUMPSTART

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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OAK HILLS BAPTIST CHURCH 6201 S LYNCREST AVENUE SIOUX FALLS, SD 571082500	46-0406168	501(C)(3)	31,000				GENERAL SUPPORT
OUR SAVIOR'S LUTHERAN CHURCH 909 W 33RD STREET SIOUX FALLS, SD 57105	46-0229996	501(C)(3)	11,100				TV MINISTRY, GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PACIFIC LUTHERAN UNIVERSITY OFFICE OF DEVELOPMENT 12180 PARK STREET TACOMA, WA 98447	91-0565571	501(C)(3)	6,283				SCHOLARSHIP SUPPORT
PEACE LUTHERAN CHURCH 5509 W 41ST STREET SIOUX FALLS, SD 57106	23-7003936	501(C)(3)	10,332				HEARTLAND EPHPHATHA

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PRAIRIE HILLS COVENANT CHURCH 2500 S POWDERHOUSE ROAD SIOUX FALLS, SD 57110	51-0140098	501(C)(3)	90,000				GENERAL SUPPORT, ONE VOICE COMMUNITY CHOIR
PRECEPT MINISTRIES INTERNATIONAL PO BOX 182218 CHATTANOOGA, TN 374227218	62-0841438	501(C)(3)	5,400				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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REACH LITERACY 2101 E 41ST STREET 23 SIOUX FALLS, SD 57105	46-0396579	501(C)(3)	67,880				ADULT LITERACY, WORKPLACE ACADEMIES, PROJECT JUMPSTART, GENERAL SUPPORT
ROMSDAL LUTHERAN CHURCH - 29484 476TH AVENUE BERESFORD, SD 57004	46-0438066	501(C)(3)	26,395				GENERAL SUPPORT

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RONALD MCDONALD HOUSE CHARITIES OF SOUTH DAKOTA INC 825 S LAKE AVENUE SIOUX FALLS, SD 57104	46-0371152	501(C)(3)	39,030				THE R&R RENOVATION PROJECT, MCKILTS, GENERAL SUPPORT
SAMARITANS PURSE PO BOX 3000 BOONE, NC 28607	58-1437002	501(C)(3)	10,500				GENERAL SUPPORT, TORNADO RECOVERY

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SANFORD HEALTH FOUNDATION 2335 E 60TH STREET N PO BOX 5039 SIOUX FALLS, SD 571175039	36-3297853	501(C)(3)	1,394,079				AVA'S HOUSE, STEPPING INTO GOOD HEALTH, MENTAL HEALTH PROGRAM, EMPLOYEE CRISIS FUND, GENERAL SUPPORT
SANFORD SCHOOL OF MEDICINE OF THE UNIVERSITY OF SOUTH DAKOTA LEE MEDICAL BUILDING ROOM 101 414 E CLARK STREET VERMILLION, SD 57069	46-0448678	501(C)(3)	6,800				SCHOLARSHIP SUPPORT

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SCOTTISH RITE FOUNDATION OF SOUTH DAKOTA PO BOX 567 MITCHELL, SD 57301	46-6015073	501(C)(3)	14,347				GENERAL SUPPORT
SCULPTUREWALK INC 300 S PHILLIPS AVENUE L104 SIOUX FALLS, SD 57104	20-8535871	501(C)(3)	159,100				SCULPTUREWALK 2020, ARC OF DREAMS, GENERAL SUPPORT

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SEEDS OF CHANGE FOUNDATION 4615 N LEWIS AVENUE SIOUX FALLS, SD 57104	47-1654423	501(C)(3)	5,500				GENERAL SUPPORT
SHETEK LUTHERAN MINISTRIES 14 KEELEY ISLAND DRIVE SLAYTON, MN 561721923	41-0726175	501(C)(3)	10,000				BUILDING ON CAPITAL CAMPAIGN

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SHRINERS HOSPITAL FOR CHILDREN 2900 N ROCKY POINT DRIVE TAMPA, FL 33607	36-2193608	501(C)(3)	5,500				GENERAL SUPPORT
SIOUX EMPIRE BASEBALL ASSOCIATION SUITE 3 1601 W 44TH PLACE SIOUX FALLS, SD 571056377	41-1903475	501(C)(3)	6,250				EQUIPMENT

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SIOUX EMPIRE CHARACTER COUNTS COALITION INC 3220 W 57TH STREET SUITE 109 SIOUX FALLS, SD 57108	45-2722954	501(C)(3)	13,500				CHAMPIONS TAKING THE LEAD - LEADERSHIP EXPLORATION AND DEVELOPMENT, GENERAL SUPPORT
SIOUX EMPIRE COMMUNITY THEATRE 315 N PHILLIPS AVENUE SIOUX FALLS, SD 571046005	80-0074622	501(C)(3)	13,768				GENERAL SUPPORT

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SIOUX EMPIRE UNITED WAY 1000 N WEST AVENUE 120 SIOUX FALLS, SD 57104	46-0233701	501(C)(3)	369,135				ALEXIS DE TOCQUEVILLE SOCIETY, GENERAL SUPPORT
SIOUX EMPIRE WHEELS TO WORK 5400 W 57TH STREET 7 SIOUX FALLS, SD 57106	06-1722652	501(C)(3)	6,000				GENERAL SUPPORT, CAR REPAIRS

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SIOUX FALLS AREA CASA 100 S SPRING AVENUE SIOUX FALLS, SD 57104	46-0430647	501(C)(3)	28,538				GENERAL SUPPORT
SIOUX FALLS AREA CHAMBER OF COMMERCE FOUNDATION 200 N PHILLIPS AVENUE 200 SIOUX FALLS, SD 57104	36-3470628	501(C)(3)	14,200				FORWARD SIOUX FALLS, GENERAL SUPPORT

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SIOUX FALLS AREA HUMANE SOCIETY 3720 E BENSON ROAD SIOUX FALLS, SD 57104	46-0239786	501(C)(3)	67,896				SPAY AND NEUTER EQUIPMENT AND PROGRAMS, GENERAL SUPPORT
SIOUX FALLS ARTS COUNCIL 326 E EIGHTH STREET 106A SIOUX FALLS, SD 57103	46-0354287	501(C)(3)	32,900				HIGH PLAINS WOODWINDS, SUPPORT FOR "OUR GROWTH PROJECT.", MARTIN LUTHER KING JR. STATUE, GENERAL SUPPORT

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SIOUX FALLS CARES PO BOX 91831 SIOUX FALLS, SD 57109	46-0450382	501(C)(3)	20,827				GENERAL SUPPORT
SIOUX FALLS CHRISTIAN SCHOOLS 6120 S CHARGER CIRCLE SIOUX FALLS, SD 57108	46-0340024	501(C)(3)	53,500				TUITION ASSISTANCE, CAPITAL CAMPAIGN

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SIOUX FALLS DEVELOPMENT FOUNDATION 200 N PHILLIPS AVENUE 101 SIOUX FALLS, SD 57104	46-0243934	501(C)(6)	68,400				CAREER CONNECTIONS PROGRAM
SIOUX FALLS FAMILY YMCA 220 S MINNESOTA AVENUE SIOUX FALLS, SD 571046314	46-0225021	501(C)(3)	363,926				CAMPERSHIPS, BASKETBALL PROGRAM, YOUTH CENTER, GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SIOUX FALLS HOPE COALITION 920 E JUSTIN DRIVE SIOUX FALLS, SD 57108	82-2097994	501(C)(3)	11,106				GENERAL SUPPORT
SIOUX FALLS HOUSING AND REDEVELOPMENT COMMISSION 630 S MINNESOTA AVENUE SIOUX FALLS, SD 571044825	46-0333222	GOVT	7,250				FINANCIAL ASSISTANCE FOR EDUCATIONAL SUPPORT, SFHRC ONLINE APPLICATION INTERFACE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SIOUX FALLS LUTHERAN SCHOOL ASSOCIATION INC 308 W 37TH STREET SIOUX FALLS, SD 571055706	46-0343381	501(C)(3)	8,894				EDUCATIONAL PROGRAMS, TUITION ASSISTANCE, GENERAL SUPPORT
SIOUX FALLS MIDWEST WRESTLING ASSOCIATION PO BOX 627 6807 W TAMMY PLACE SIOUX FALLS, SD 571020627	46-0431912	501(C)(3)	14,000				GENERAL SUPPORT

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SIOUX FALLS MINISTRY CENTER 1915 E 8TH STREET SUITE 103 SIOUX FALLS, SD 57103	26-4760861	501(C)(3)	44,877				GENERAL SUPPORT, EMPOWER CAMPUS PROJECT, COVID-19 ASSISTANCE
SIOUX FALLS PUBLIC SCHOOLS EDUCATION FOUNDATION PO BOX 560 SIOUX FALLS, SD 571010560	26-3537657	501(C)(3)	6,780				GENERAL SUPPORT, INNOVATIONS IN EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SIOUX FALLS SCHOOL DISTRICT 201 E 38TH STREET PO BOX 5051 SIOUX FALLS, SD 571175051	46-6002586	GOVT	147,240				MCKINNEY-VENTOS HOMELESS EDUCATION PROJECT, EQUIPMENT, FIELD TRIPS. MISC. PROGRAMS
SIOUX FALLS STATE THEATRE COMPANY PO BOX 481 SIOUX FALLS, SD 57101	20-3473359	501(C)(3)	13,700				GENERAL SUPPORT, CONSTRUCTION COMPLETION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SIOUX FALLS THRIVE 2104 S SUMMIT AVENUE 237 SIOUX FALLS, SD 57105	81-4491870	501(C)(4)	146,347				GENERAL SUPPORT, KIDLINK PROGRAM
SIOUXLAND HERITAGE MUSEUMS 200 W SIXTH STREET SIOUX FALLS, SD 571046001	36-3609618	501(C)(3)	76,752				GENERAL SUPPORT

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SISTERS OF THE PRESENTATION OF THE BLESSED VIRGIN MARY 1500 N SECOND STREET ABERDEEN, SD 574011238	46-0253283	501(C)(3)	5,700				CAMINANDO JUNTOS, GENERAL SUPPORT
SKYVIEW ACADEMY FOUNDATION 6161 BUSINESS CENTER DRIVE HIGHLANDS RANCH, CO 80130	27-3612126	501(C)(3)	10,000				SVA FIELD DAY FUNDRAISER

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTH DAKOTA BALLET COMPANY 6301 SOUTH MINNESOTA AVENUE SUITE 200 SIOUX FALLS, SD 57108	84-1805666	501(C)(3)	28,950				GENERAL SUPPORT
SOUTH DAKOTA COMMUNITY FOUNDATION 1714 N LINCOLN AVENUE PIERRE, SD 57501	46-0398115	501(C)(3)	30,735				SOUTH DAKOTA NONPROFIT CAPACITY BUILDING PROGRAM, EMERGENCY RELIEF FUND FOR IMMIGRANTS, CRAZY HORSE MEMORIAL FUND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTH DAKOTA GOLF ASSOCIATION JUNIOR GOLF FOUNDATION FIRST TEE PO BOX 88938 SIOUX FALLS, SD 57109	46-0449824	501(C)(3)	11,409				GENERAL SUPPORT, YOUTH GOLF PROGRAMS
SOUTH DAKOTA HALL OF FAME 1480 S MAIN AVENUE CHAMBERLAIN, SD 57325	46-0324210	501(C)(3)	75,000				GENERAL SUPPORT, ENDOWMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SOUTH DAKOTA MILITARY HERITAGE ALLIANCE 1600 W RUSSELL STREET SIOUX FALLS, SD 57104	83-2381925	501(C)(3)	125,000				GENERAL SUPPORT
SOUTH DAKOTA NETWORK AGAINST FAMILY VIOLENCE AND SEXUAL ASSAULT PO BOX 90453 SIOUX FALLS, SD 571090453	36-3792912	501(C)(3)	11,000				EMERGENCY SERVICES FUNDING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTH DAKOTA NEWS WATCH 3001 W SPRUCELEIGH COURT SIOUX FALLS, SD 571050170	81-4674814	501(C)(3)	83,500				GENERAL SUPPORT
SOUTH DAKOTA PARKS AND WILDLIFE FOUNDATION 523 E CAPITOL AVENUE FOSS BUILDING PIERRE, SD 575013182	46-0387968	501(C)(3)	5,225				GOOD EARTH STATE PARK, PALISADES STATE PARK

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SOUTH DAKOTA RIGHT TO LIFE COMMITTEE EDUCATIONAL FUND 1107 MT RUSHMORE ROAD SUITE 1-B RAPID CITY, SD 57701	46-0367005	501(C)(3)	10,000				CONVENTION SPONSOR
SOUTH DAKOTA SALUTES 158 SIGNAL HILL ROAD YANKTON, SD 57078	82-2307913	501(C)(3)	30,000				OPERATIONAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SOUTH DAKOTA SCHOOL FOR THE DEAF 4101 W 38TH STREET SUITE 101 SIOUX FALLS, SD 57106	46-6000364	GOVT	31,506				GENERAL SUPPORT, SCHOLARSHIP SUPPORT
SOUTH DAKOTA STATE HISTORICAL SOCIETY FOUNDATION 900 GOVERNORS DRIVE PIERRE, SD 57501	46-0370475	501(C)(3)	12,000				HER VOTE.HER CHOICE. CAMPAIGN, GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTH DAKOTA STATE UNIVERSITY FOUNDATION 815 MEDARY AVENUE PO BOX 525 BROOKINGS, SD 570070499	46-0273801	501(C)(3)	1,215,402				SCHOLARSHIP SUPPORT, GENERAL SUPPORT
SOUTH DAKOTA SYMPHONY ORCHESTRA 301 S MAIN AVENUE SIOUX FALLS, SD 57104	46-6017026	501(C)(3)	233,149				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTH DAKOTA YOUTH FOUNDATION 1310 MAIN AVENUE S SUITE 109 BROOKINGS, SD 57006	47-4832848	501(C)(3)	36,000				CHARACTER COUNTS PROGRAM, GENERAL SUPPORT
SOUTHEAST TECH FOUNDATION 2320 N CAREER AVENUE SIOUX FALLS, SD 571071301	36-4112897	501(C)(3)	84,929				SCHOLARSHIP SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SOUTHEASTERN BEHAVIORAL HEALTHCARE 2000 S SUMMIT AVENUE SIOUX FALLS, SD 57105	46-0232306	501(C)(3)	28,818				INCENTIVES FOR PROBLEM SOLVING COURTS, GENERAL SUPPORT
SPECIAL OLYMPICS SOUTH DAKOTA 800 E I-90 LANE SIOUX FALLS, SD 57104	46-0359776	501(C)(3)	56,675				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SPIRIT OF PEACE - UNITED CHURCH OF CHRIST 6509 S CLIFF AVENUE SIOUX FALLS, SD 57108	13-1957221	501(C)(3)	270,753				GENERAL SUPPORT, HAND IN HAND, COVID-19 RELIEF
ST FRANCIS HOUSE 210 N SHERMAN AVENUE SIOUX FALLS, SD 57103	46-0423202	501(C)(3)	314,098				GENERAL SUPPORT, HOMELESSNESS TO HOPE CAMPAIGN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST JOSEPH'S INDIAN SCHOOL 1301 N MAIN STREET PO BOX 89 CHAMBERLAIN, SD 57325	46-0235912	501(C)(3)	13,221				GENERAL SUPPORT
ST MARK'S LUTHERAN CHURCH 2001 S ELMWOOD AVENUE SIOUX FALLS, SD 57105	46-6026433	501(C)(3)	30,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST VINCENT DEPAUL SOCIETY 431 N CLIFF AVENUE SIOUX FALLS, SD 57103	46-0383607	501(C)(3)	9,742				HOLY INNOCENTS DIAPER MINISTRY
STANFORD UNIVERSITY PO BOX 20466 STANFORD, CA 904300204	20-2699147	501(C)(3)	21,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STEIGER INTERNATIONAL PO BOX 236 WHEATON, IL 60187	36-3517418	501(C)(3)	18,000				GENERAL SUPPORT
STEPHENS COLLEGE 1200 E BROADWAY COLUMBIA, MO 65215	20-1117521	501(C)(3)	6,262				STEPHENS CARES INITIATIVE, SCHOLARSHIP SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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STOCKYARDS PLAZA INC DBA STOCKYARDS AG EXPERIENCE PO BOX 2042 SIOUX FALLS, SD 57101	46-5391991	501(C)(3)	68,500				GENERAL SUPPORT, PLAZA EXPENSE
STRITECKY FAMILY FOUNDATION 601 WEST JOLYN DRIVE SIOUX FALLS, SD 57108	82-3186761	501(C)(3)	30,100				DATABASE SOFTWARE, BOOKS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEACH FOR AMERICA - SOUTH DAKOTA PO BOX 398633 SAN FRANCISCO, CA 941398633	13-3541913	501(C)(3)	72,000				GENERAL SUPPORT
TEDDY BEAR DEN 500 S MAIN AVENUE SIOUX FALLS, SD 57104	31-1802800	501(C)(3)	18,323				GENERAL SUPPORT, COVID-19 SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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THE BANQUET 900 E EIGHTH STREET SIOUX FALLS, SD 57103	46-0387495	501(C)(3)	121,663				REPAIRS AND MAINTENANCE SUPPORT, GENERAL SUPPORT, COVID-19 ASSISTANCE
THE COMMUNITY OUTREACH 1915 E EIGHTH STREET 105 SIOUX FALLS, SD 57103	46-0416744	501(C)(3)	2,143,260				GENERAL SUPPORT, FLOOD ASSISTANCE, COVID-19 HOUSING ASSISTANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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THE COMPASS CENTER 1704 S CLEVELAND AVENUE 3 SIOUX FALLS, SD 57103	46-0350199	501(C)(3)	18,525				GENERAL SUPPORT, THERAPY SUPPORT, COVID-19 ASSISTANCE
THE LOST & FOUND ASSOCIATION PO BOX 1897 SIOUX FALLS, SD 57101	45-4306370	501(C)(3)	7,500				STUDENT MENTAL HEALTH SUPPORT AND EVALUATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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THE NAOMI PROJECT 222 NORTH SPRING AVENUE SIOUX FALLS, SD 57104	35-2611927	501(C)(3)	15,000				INITIATIVE TO END LABOR TRAFFICKING, FOOD ACCESS PROGRAMS
THE RANSOM CHURCH 2600 S MINNESOTA AVENUE SIOUX FALLS, SD 57105	26-3291812	501(C)(3)	6,700				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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THE SALVATION ARMY 800 N CLIFF AVENUE PO BOX 1002 SIOUX FALLS, SD 571011002	36-2167910	501(C)(3)	28,899				GENERAL SUPPORT
TREE HOUSE YOUTH 5757 WAYZATA BLVD MINNEAPOLIS, MN 55416	36-3287099	501(C)(3)	90,500				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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TRINITY LUTHERAN CHURCH 46448- 263RD STREET HARTFORD, SD 57033	46-0379802	501(C)(3)	9,600				GENERAL SUPPORT
UNION GOSPEL MISSION 701 E 8TH STREET SIOUX FALLS, SD 571031632	46-0281018	501(C)(3)	23,796				GENERAL SUPPORT, EQUIPMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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UNITED METHODIST CHURCH - SPIRIT LAKE 1812 GARY AVENUE SPIRIT LAKE, IA 51360	42-0698210	501(C)(3)	8,500				THEN FEED JUST ONE, GENERAL SUPPORT
UNIVERSITY OF COLORADO FOUNDATION 1800 N GRANT ST DENVER, CO 80203	84-6049811	501(C)(3)	10,000				SALES MENTORING PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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UNIVERSITY OF NORTHWESTERN NORTHWESTERN MEDIA PO BOX 130517 SAINT PAUL, MN 55113	41-0711610	501(C)(3)	16,400				SIOUX FALLS KNWC
UNIVERSITY OF SIOUX FALLS 1101 W 22ND STREET SIOUX FALLS, SD 571051699	46-0224600	501(C)(3)	61,490				SCHOLARSHIP SUPPORT, GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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UNIVERSITY OF SOUTH DAKOTA 414 E CLARK STREET VERMILLION, SD 57069	46-6003541	501(C)(3)	31,000				SCHOOL OF LAW
UNIVERSITY OF SOUTH DAKOTA FOUNDATION 1110 N DAKOTA STREET VERMILLION, SD 570691218	46-6018891	501(C)(3)	259,770				GENERAL SUPPORT, CAPITAL PROJECTS, SCHOLARSHIPS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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VOLUNTEERS OF AMERICA - NORTHERN ROCKIES 1876 S SHERIDAN AVE SHERIDAN, WY 82801	83-0280532	501(C)(3)	10,000				VOA CAMP SD
VOLUNTEERS OF AMERICA DAKOTAS 1309 W 51ST STREET PO BOX 89306 SIOUX FALLS, SD 571099306	13-1692595	501(C)(3)	92,111				GENERAL SUPPORT, HOME PLACE CAMPAIGN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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WASHINGTON PAVILION OF ARTS AND SCIENCE 301 S MAIN AVENUE PO BOX 984 SIOUX FALLS, SD 571010984	46-0435791	501(C)(3)	366,310				GENERAL SUPPORT, DAPA, YOUTH VISITS, , OPEN DOOR INITIATIVE
WEGNER ARBORETUM SOCIETY 1900 S PERRY PLACE SIOUX FALLS, SD 57110	20-8784637	501(C)(3)	133,696				GENERAL SUPPORT, LAND PURCHASE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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WESSINGTON SPRINGS AREA DEVELOPMENT PO BOX 443 WESSINGTON SPRINGS, SD 57382	46-6000539	501(C)(3)	10,000				CITY OF WESSINGTON SPRINGS PUBLIC POOL PROJECT
WEST CENTRAL SCHOOL DISTRICT 49-7 705 E SECOND STREET PO BOX 730 HARTFORD, SD 570330730	46-0284421	GOVT	6,213				TEACHER GRANT AWARDS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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WEST NIDAROS LUTHERAN CHURCH 25403 - 471ST AVENUE CROOKS, SD 570200730	46-6011973	501(C)(3)	95,254				GENERAL SUPPORT
YOUTHROOTS 1127 SHERMAN STREET 100 DENVER, CO 80203	27-1325457	501(C)(3)	15,000				YOUTH ADVISORY COUNCIL

Schedule J
(Form 990)

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.**

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
SIOUX FALLS AREA COMMUNITY
FOUNDATION INC

Employer identification number
31-1748533

Part I Questions Regarding Compensation

		Yes	No		
<p>1a 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.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax idemnification and gross-up payments <input type="checkbox"/> Discretionary spending account </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) </td> </tr> </table>	<input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax idemnification and gross-up payments <input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)			
<input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax idemnification and gross-up payments <input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)				
<p>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</p>	1b				
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?</p>	2				
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee </td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee			
<input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee				
<p>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:</p> <p>a Receive a severance payment or change-of-control payment?</p> <p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>	4a		No		
	4b		No		
	4c		No		
<p>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p> <p>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:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 5a or 5b, describe in Part III.</p>	5a		No		
	5b		No		
<p>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:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 6a or 6b, describe in Part III.</p>	6a		No		
	6b		No		
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III</p>	7		No		
<p>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</p>	8		No		
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9				

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 are not listed on Form 990, Part VII.

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 ANDREW PATTERSON PRESIDENT/CEO	(i)	141,635	0	0	15,450	26,978	184,063	0
	(ii)	0	0	0	0	0	0	0

Part III **Supplemental Information**

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

Return Reference	Explanation
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**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2019

▶ **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 the latest information.**

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
SIOUX FALLS AREA COMMUNITY
FOUNDATION INC

Employer identification number
31-1748533

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	110	3,225,016	AVERAGE MARKET VALUE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (<u>LIFE INSURANCE</u>)	X	1	168,302	CASH SURRENDER VALUE
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 3

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

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization 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.

Return Reference	Explanation
PART I, LINE 32B:	SFACF USES VARIOUS BANK TRUST DEPARTMENTS AND BROKERAGE FIRMS TO ACCEPT AND SELL CONTRIBUTIONS OF SECURITIES AND MUTUAL FUNDS.

SCHEDULE O
(Form 990 or 990-EZ)**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2019**Open to Public Inspection**

Department of the Treasury

Internal Revenue Service

Name of the organization
SIOUX FALLS AREA COMMUNITY
FOUNDATION INC

Employer identification number

31-1748533

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	SENIOR STAFF COMPILES INFORMATION FOR SFACF'S TAX RETURN AND REVIEWS THE INDEPENDENT ACCOUNTING FIRM'S DRAFT DOCUMENT. WHEN COMPLETE, SENIOR 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.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	<p>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." 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.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	SFACF USES THE COUNCIL ON FOUNDATION'S ANNUAL "GRANTMAKER'S SALARY AND 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 ALL OTHER STAFF.

990 Schedule O, Supplemental Information

Return Reference	Explanation
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.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9:	CHANGE IN CASH SURRENDER VALUE OF LIFE INSURANCE 1,322,609. CHANGE IN NET ASSETS HELD FOR OTHERS, NET OF DISTRIBUTIONS -1,872,226.

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2019

Open to Public Inspection

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

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.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) EASTBANK LAND COMPANY II LLC 200 N CHERAPA PLACE SIOUX FALLS, SD 57103 47-4549848	TO OWN, MANAGE, SELL, LEASE AND OTHERWISE HOLD TITLE TO AND OPERATE REAL EST	SD	0	565,000	SIOUX FALLS AREA COMMUNITY FOUNDATION
(2) EASTBANK LAND IV LLC 200 N CHERAPA PLACE SIOUX FALLS, SD 57103 81-1423793	TO OWN, MANAGE, SELL, LEASE AND OTHERWISE HOLD TITLE TO AND OPERATE REAL EST	SD	0	200,000	SIOUX FALLS AREA COMMUNITY FOUNDATION
(3) EASTBANK LAND V LLC 200 N CHERAPA PLACE SIOUX FALLS, SD 57103 85-2962967	TO OWN, MANAGE, SELL, LEASE AND OTHERWISE HOLD TITLE TO AND OPERATE REAL EST	SD	0	0	SIOUX FALLS AREA 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 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

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

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

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 country)	(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	(i) Section 512(b)(13) controlled entity?	
								Yes	No

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

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

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	
b Gift, grant, or capital contribution to related organization(s)	1b	
c Gift, grant, or capital contribution from related organization(s)	1c	
d Loans or loan guarantees to or for related organization(s)	1d	
e 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	
h Purchase of assets from related organization(s)	1h	
i Exchange of assets with related organization(s)	1i	
j Lease of facilities, equipment, or other assets to related organization(s)	1j	
k Lease of facilities, equipment, or other assets from related organization(s)	1k	
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	
o Sharing of paid employees with related organization(s)	1o	
p 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	
s 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 must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

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 country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R. (see instructions).

Return Reference	Explanation