

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
Information about Form 990 and its instructions is at www.irs.gov/form990

OMB No 1545-0047
2017
Open to Public Inspection

A For the 2017 calendar year, or tax year beginning 07-01-2017, and ending 06-30-2018

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

C Name of organization
SOUTHWEST INITIATIVE FOUNDATION

Doing business as

Number and street (or P O box if mail is not delivered to street address) Room/suite
15 3RD AVE NW

City or town, state or province, country, and ZIP or foreign postal code
HUTCHINSON, MN 55350

D Employer identification number
41-1555592

E Telephone number
(320) 587-4848

G Gross receipts \$ 31,781,052

F Name and address of principal officer
DIANA D ANDERSON
15 3RD AVE NW
HUTCHINSON, MN 55350

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 SWIFFOUNDATION ORG

K Form of organization Corporation Trust Association Other ▶

L Year of formation 1986 **M** State of legal domicile MN

Part I Summary

1 Briefly describe the organization's mission or most significant activities
A REGIONAL COMMUNITY FOUNDATION DEDICATED TO ADVANCING SOUTHWEST MINNESOTA

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)	12
4 Number of independent voting members of the governing body (Part VI, line 1b)	12
5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)	26
6 Total number of volunteers (estimate if necessary)	300
7a Total unrelated business revenue from Part VIII, column (C), line 12	0
7b Net unrelated business taxable income from Form 990-T, line 34	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	4,584,088	5,931,424
9 Program service revenue (Part VIII, line 2g)	500,286	452,393
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	15,177,652	2,369,303
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	62,543	66,193
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	20,324,569	8,819,313
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,300,891	1,682,714
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)	1,779,858	1,816,440
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶420,855		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,770,362	1,714,437
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	4,851,111	5,213,591
19 Revenue less expenses Subtract line 18 from line 12	15,473,458	3,605,722

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	85,680,210	90,345,337
21 Total liabilities (Part X, line 26)	9,496,815	9,191,792
22 Net assets or fund balances Subtract line 21 from line 20	76,183,395	81,153,545

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 2018-12-12
DIANA D ANDERSON PRESIDENT/CEO
Type or print name and title _____

Paid Preparer Use Only

Print/Type preparer's name KRISTIN L SCHMIDT	Preparer's signature KRISTIN L SCHMIDT	Date	Check <input type="checkbox"/> if self-employed	PTIN P01487323
Firm's name ▶ CLIFTONLARSONALLEN LLP			Firm's EIN ▶ 41-0746749	
Firm's address ▶ 818 SECOND STREET SOUTH SUITE 320 WAITE PARK, MN 56387			Phone no (320) 203-5500	

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

SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes 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 \$ 1,284,699 including grants of \$ 3,000) (Revenue \$ 389,492)
See Additional Data

4b (Code) (Expenses \$ 1,240,693 including grants of \$ 509,900) (Revenue \$)
See Additional Data

4c (Code) (Expenses \$ 1,162,639 including grants of \$ 1,169,814) (Revenue \$ 62,901)
See Additional Data

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

4e Total program service expenses ▶ 3,688,031

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	Yes	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (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? <i>If "Yes," complete Schedule C, Part I</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? <i>If "Yes," complete Schedule C, Part II</i>		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? <i>If "Yes," complete Schedule C, Part III</i>		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? <i>If "Yes," complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part II</i>		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		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? <i>If "Yes," complete Schedule D, Part IV</i>	Yes	
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	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		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	Yes	
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		No
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		No
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		No
14a Did the organization maintain an office, employees, or agents outside of the United States?		No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		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? <i>If "Yes," complete Schedule G, Part I</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? <i>If "Yes," complete Schedule G, Part II</i>		No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		No

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b 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? <i>If "Yes," complete Schedule I, Parts I and II</i>	Yes	
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		No
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	Yes	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	Yes	
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		No
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		No
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		No
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		No
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		No
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		No
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		No
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		No
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	Yes	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		No
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	Yes	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		No
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		No
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		No
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		No
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	Yes	

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 columns for question ID, question text, and Yes/No response boxes. Includes sections for backup withholding, employee reporting, foreign accounts, prohibited transactions, charitable contributions, and organizational details.

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 [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (12), 1b (12), 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

Table with 3 columns: Question, Yes, No. Rows include: 17 (MN), 18 (Own website, Another's website, Upon request, Other), 19, 20 (MARGIE NELSEN CFO 15 3RD AVE NW HUTCHINSON, MN 55350 (320) 587-4848).

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.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below 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) ROBERT THURSTON CHAIR	4 00	X		X				0	0	0
(2) JANICE NELSON VICE CHAIR	4 00	X		X				0	0	0
(3) JAN LUNDEBREK TREASURER	4 00	X		X				0	0	0
(4) TIM CONNELL SECRETARY	4 00	X		X				0	0	0
(5) PATTI DOLS BOARD MEMBER	4 00	X						0	0	0
(6) TERRY GAALSWYK BOARD MEMBER	4 00	X						0	0	0
(7) CHRISTIE ROCK HANTGE BOARD MEMBER	4 00	X						0	0	0
(8) MARY MAERTENS BOARD MEMBER	4 00	X						0	0	0
(9) THERESA PETERSON BOARD MEMBER	4 00	X						0	0	0
(10) ADBIRIZAK MAHBOUB BOARD MEMBER	4 00	X						0	0	0
(11) RANDY REINKE BOARD MEMBER	4 00	X						0	0	0
(12) MARK TITUS BOARD MEMBER	4 00	X						0	0	0
(13) DIANA D ANDERSON PRESIDENT/CEO	50 00			X				172,570	0	38,631
(14) SCOTT MARQUARDT VICE PRESIDENT	50 00			X				99,338	0	26,969
(15) MARGIE NELSEN CFO	50 00			X				103,771	0	4,804

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				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e	233,297			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	5,698,127			
	g Noncash contributions included in lines 1a-1f \$ _____		2,280,728			
	h Total. Add lines 1a-1f		5,931,424			
Program Service Revenue		Business Code				
	2a LOAN INTEREST	522100	381,742	381,742		
	b OTHER PROGRAM INCOME	900099	62,901	62,901		
	c LOAN ADMIN FEES	900099	7,750	7,750		
	d _____					
	e _____					
	f All other program service revenue					
g Total. Add lines 2a-2f		452,393				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		2,365,396		2,365,396	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross rents	(i) Real	(ii) Personal			
		66,193				
		b Less rental expenses	0			
		c Rental income or (loss)	66,193			
	d Net rental income or (loss)		66,193		66,193	
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
		22,965,562	84			
		b Less cost or other basis and sales expenses	22,961,739	0		
		c Gain or (loss)	3,823	84		
	d Net gain or (loss)		3,907		3,907	
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
	b Less direct expenses	b				
c Net income or (loss) from fundraising events						
9a Gross income from gaming activities See Part IV, line 19	a					
b Less direct expenses	b					
c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances	a					
b Less cost of goods sold	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue	Business Code					
11a _____						
b _____						
c _____						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total revenue. See Instructions		8,819,313	452,393	0	2,435,496	

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.	1,682,714	1,682,714		
2 Grants and other assistance to domestic individuals. See Part IV, line 22.				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	437,286	190,686	170,388	76,212
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7 Other salaries and wages.	1,080,996	611,438	311,645	157,913
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	54,433	30,561	15,880	7,992
9 Other employee benefits.	143,754	77,300	45,424	21,030
10 Payroll taxes.	99,971	52,987	31,658	15,326
11 Fees for services (non-employees)				
a Management.				
b Legal.	25,464	19,551	383	5,530
c Accounting.	29,540	15,904	9,627	4,009
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.	265,682		265,682	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	143,435	128,652	10,364	4,419
12 Advertising and promotion.	49,170	26,926	16,274	5,970
13 Office expenses.	109,026	66,266	24,328	18,432
14 Information technology.	163,327	88,096	49,662	25,569
15 Royalties.				
16 Occupancy.	54,560	31,190	16,871	6,499
17 Travel.	121,717	100,734	8,141	12,842
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	141,790	115,633	16,821	9,336
20 Interest.	54,180	38,883	11,040	4,257
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	168,406	88,152	58,199	22,055
23 Insurance.	21,053	11,822	6,326	2,905
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 PROVISION FOR LOAN LOSS	197,480	197,480		
b FUNDRAISING COSTS	59,764	46,533		13,231
c PUBLIC RELATIONS	28,480	17,241	8,232	3,007
d				
e All other expenses	81,363	49,282	27,760	4,321
25 Total functional expenses. Add lines 1 through 24e.	5,213,591	3,688,031	1,104,705	420,855
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	3,800	1	3,800
	2 Savings and temporary cash investments	1,568,313	2	1,020,794
	3 Pledges and grants receivable, net	244,711	3	231,760
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net	6,274,558	7	6,501,388
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	50,935	9	61,949
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	3,832,579		
	b Less accumulated depreciation	1,135,129		
	11 Investments—publicly traded securities	66,507,265	11	69,727,987
	12 Investments—other securities See Part IV, line 11	8,214,854	12	9,946,371
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	139,963	15	153,838
16 Total assets. Add lines 1 through 15 (must equal line 34)	85,680,210	16	90,345,337	
Liabilities	17 Accounts payable and accrued expenses	258,606	17	214,146
	18 Grants payable	212,150	18	127,930
	19 Deferred revenue	197,996	19	65,545
	20 Tax-exempt bond liabilities	1,508,010	20	1,296,471
	21 Escrow or custodial account liability Complete Part IV of Schedule D	1,581,344	21	1,505,140
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	1,746,353	23	1,470,515
	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	3,992,356	25	4,512,045
	26 Total liabilities. Add lines 17 through 25	9,496,815	26	9,191,792
Net Assets or Fund Balances	27 Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets	25,538,405	27	26,855,861
	28 Temporarily restricted net assets	16,350,425	28	17,017,485
	29 Permanently restricted net assets	34,294,565	29	37,280,199
	30 Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34. Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	76,183,395	33	81,153,545
	34 Total liabilities and net assets/fund balances	85,680,210	34	90,345,337

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	8,819,313
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,213,591
3	Revenue less expenses Subtract line 2 from line 1	3	3,605,722
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	76,183,395
5	Net unrealized gains (losses) on investments	5	1,160,440
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	203,988
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	81,153,545

Part XII Financial Statements and Reporting

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

		Yes	No
<p>1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O</p>			
<p>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</p> <p><input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis</p>	2a		No
<p>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</p> <p><input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis</p>	2b	Yes	
<p>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</p>	2c	Yes	
<p>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?</p>	3a	Yes	
<p>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</p>	3b	Yes	

Additional Data

Software ID:

Software Version:

EIN: 41-1555592

Name: SOUTHWEST INITIATIVE FOUNDATION

Form 990 (2017)

Form 990, Part III, Line 4a:

ECONOMIC DEVELOPMENT (SEE SCHEDULE O)

Form 990, Part III, Line 4b:

COMMUNITY FOUNDATIONS AND DESIGNATED FUNDS (SEE SCHEDULE O)

Form 990, Part III, Line 4c:

LEADERSHIP AND COMMUNITY DEVELOPMENT PROGRAMS (SEE SCHEDULE O)

SCHEDULE A
(Form 990 or 990EZ)

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.

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

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
SOUTHWEST INITIATIVE FOUNDATION

Employer identification number

41-1555592

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), 170(b)(1)(A)(vi), and 170(b)(1)(A)(ix)

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

	Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")	4,176,639	2,991,161	4,551,115	4,584,088	5,931,424	22,234,427
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	4,176,639	2,991,161	4,551,115	4,584,088	5,931,424	22,234,427
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)						8,199,026
6	Public support. Subtract line 5 from line 4						14,035,401

Section B. Total Support

	Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4	4,176,639	2,991,161	4,551,115	4,584,088	5,931,424	22,234,427
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,109,517	951,239	927,798	1,332,883	2,431,589	6,753,026
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						28,987,453
12	Gross receipts from related activities, etc. (see instructions)					12	2,288,279

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 2017 (line 6, column (f) divided by line 11, column (f))	14	48.420 %
15	Public support percentage for 2016 Schedule A, Part II, line 14	15	53.570 %

16a 33 1/3% support test—2017. 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—2016. 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—2017. 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—2016. 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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(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 2017 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2016 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2016 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2017. 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—2016. 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? 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.		
	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
	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)? If "Yes," describe in Part VI when and how the organization made the determination.		
	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.		
	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
	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)? 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.		
	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in 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).		
	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? If "Yes," provide detail in Part VI .		
	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
	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? If "Yes," provide detail in Part VI .		
	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? If "Yes," provide detail in Part VI .		
	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)? If "Yes," answer line 10b below.		
	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		
	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.	Yes	No
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>		
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

- 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 2017 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-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013.			
c From 2014.			
d From 2015.			
e From 2016.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2017 from Section D, line 7			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2017, 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 2017 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 2018. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2013.			
b Excess from 2014.			
c Excess from 2015.			
d Excess from 2016.			
e Excess from 2017.			

Additional Data

Software ID:

Software Version:

EIN: 41-1555592

Name: SOUTHWEST INITIATIVE FOUNDATION

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
▶ 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.
Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047
2017
Open to Public Inspection

Name of the organization
SOUTHWEST INITIATIVE FOUNDATION

Employer identification number
41-1555592

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	22	215
2 Aggregate value of contributions to (during year)	1,439,338	2,753,074
3 Aggregate value of grants from (during year)	192,456	1,435,498
4 Aggregate value at end of year	4,278,483	86,066,852

- 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 8/17/06, 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
- | | Amount |
|--|--------|
| c Beginning balance | |
| d Additions during the year | |
| e Distributions during the year | |
| f Ending balance | |
- 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	51,425,215	46,493,493	46,535,872	45,965,928	40,394,208
b Contributions	2,952,055	625,171	1,874,516	1,092,643	871,173
c Net investment earnings, gains, and losses	3,160,317	5,770,342	435,959	1,274,953	6,579,176
d Grants or scholarships					
e Other expenditures for facilities and programs	2,286,072	1,463,791	2,352,854	1,797,652	1,878,629
f Administrative expenses					
g End of year balance	55,251,515	51,425,215	46,493,493	46,535,872	45,965,928

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶ 31 320 %
 - b** Permanent endowment ▶ 5 820 %
 - c** Temporarily restricted endowment ▶ 62 860 %
- 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
- | | Yes | No |
|--|---------------|----|
| (i) unrelated organizations | 3a(i) | No |
| (ii) related organizations | 3a(ii) | No |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

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		1,015,000		1,015,000
b Buildings		1,655,624	495,519	1,160,105
c Leasehold improvements		202,816	141,454	61,362
d Equipment		959,139	498,156	460,983
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				2,697,450

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) DONATED REAL ESTATE HELD AS INVESTMENTS	1,360,500	C
(B) FARMLAND WITH LIFE ESTATE	6,648,585	C
(C) CHARITABLE REMAINDER UNITRUST	207,795	C
(D) INVESTMENTS HELD IN TRUST	1,729,491	C
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12.)	9,946,371	

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	
ANNUITY PAYABLE	37,460
CAPITAL LEASE PAYABLE	39,433
LIFE ESTATE LIABILITY	3,694,237
OBLIGATIONS OF SPLIT-INTEREST AGREEMENTS	207,795
INVESTMENT TRUST LIABILITY	533,120
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)	4,512,045

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	9,845,279
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	1,160,440
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	45,339
e	Add lines 2a through 2d	2e	1,205,779
3	Subtract line 2e from line 1	3	8,639,500
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	265,682
b	Other (Describe in Part XIII)	4b	-85,869
c	Add lines 4a and 4b	4c	179,813
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	8,819,313

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	4,875,129
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	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	4,875,129
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	265,682
b	Other (Describe in Part XIII)	4b	72,780
c	Add lines 4a and 4b	4c	338,462
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	5,213,591

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: 41-1555592

Name: SOUTHWEST INITIATIVE FOUNDATION

Supplemental Information

Return Reference	Explanation
PART IV, LINE 2B	ASSETS HELD ON DONOR'S BEHALF CONSISTS OF 22 FUNDS IN WHICH THE BENEFICIARIES WERE DESIGNATED BY THE DONOR AT THE TIME THE FUNDS WERE ESTABLISHED THEREFORE, THE FOUNDATION HAS NO CONTROL OVER THE DISTRIBUTION OF THESE FUNDS

Supplemental Information

Return Reference	Explanation
PART V, LINE 4	THE SWIF GENERAL ENDOWMENT FUND IS ACCESSED THROUGH BOARD APPROVAL, GUIDED BY A SPENDING POLICY THAT ALLOWS RESOURCES TO BE USED TO SUPPLEMENT PROGRAM ACTIVITIES AND OPERATION BUDGET EXPENSES OTHER DESIGNATED ENDOWED FUNDS ARE DIRECTED TO GRANTS AND EXPENSES RELATED TO THE DONOR'S ORIGINAL INTENT

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	<p>THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND SIMILAR STATE INCOME TAX LAWS THE FOUNDATION IS A NONPRIVATE FOUNDATION AND CONTRIBUTIONS TO THE ORGANIZATION QUALIFY AS A CHARITABLE TAX DEDUCTION BY THE CONTRIBUTOR AWSM LLC AND SWIF REAL ESTATE HOLDINGS, LLC ARE 100% OWNED LLC'S AND AS SUCH ARE CONSIDERED DISREGARDED ENTITIES FOR TAX PURPOSES IT IS THE POLICY OF THE FOUNDATION, IN ACCORDANCE WITH GAAP, TO ASSESS ANY UNCERTAIN TAX PROVISIONS AND, IF NECESSARY, RECORD A TAX ASSET OR LIABILITY, AND THE RELATED INCOME TAX EXPENSE, FOR ANY UNCERTAIN TAX PROVISIONS THE FOUNDATION DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS OR UNRELATED BUSINESS INCOME THE FOUNDATION FOLLOWS THE ACCOUNTING STANDARDS FOR CONTINGENCIES IN EVALUATING UNCERTAIN TAX POSITIONS THIS GUIDANCE PRESCRIBES RECOGNITION THRESHOLD PRINCIPLES FOR THE FINANCIAL STATEMENT RECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN ON A TAX RETURN THAT ARE NOT CERTAIN TO BE REALIZED THE FOUNDATION'S TAX RETURNS ARE SUBJECT TO REVIEW AND EXAMINATION BY FEDERAL AND STATE AUTHORITIES</p>

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	CHANGE IN SPLIT INTEREST AGREEMENT 45,339

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	AGENCY FUND REVENUES -85,869

Supplemental Information

Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS	AGENCY FUND EXPENSES 72,780

**Schedule I
(Form 990)**

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

OMB No 1545-0047

2017

**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.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

SOUTHWEST INITIATIVE FOUNDATION

Employer identification number

41-1555592

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

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. Part II can be duplicated if additional space is needed.

(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 noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ _____ 48

3 Enter total number of other organizations listed in the line 1 table ▶ _____ 31

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)					
(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	THE GRANTS MANAGEMENT FUNCTION OF THE DATABASE IS THE REPOSITORY FOR ALL RECORDS RELATED TO GRANTS MADE AND/OR ASSISTANCE PROVIDED SWIF CONDUCTS RESEARCH TO VERIFY THE ELIGIBILITY OF ALL GRANTEEES, USING RESOURCES SUCH AS GUIDESTAR AND THE IRS PUBLICATION 78 EACH ADVISED FUND COMMITTEE MUST SUBMIT A ROSTER OF THEIR ADVISORS FOR BOARD REVIEW AND APPROVAL ANNUALLY, AND CRITERIA FOR THEIR GRANT IS REVIEWED TO ENSURE COMPLIANCE WITH ALL STATE AND FEDERAL REGULATIONS AND MEETS THE REQUIRED CHARITABLE PURPOSE OF THE FUND AGREEMENTS IN PLACE

Additional Data**Software ID:****Software Version:****EIN:** 41-1555592**Name:** SOUTHWEST INITIATIVE FOUNDATION**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
ALLINA HEALTH HOSPICE FOUNDATION 3915 GOLDEN VALLEY ROAD MINNEAPOLIS, MN 55422	27-4116873	501C3	5,000				HUTCHINSON HOSPICE PROGRAM
ATLAS FOR LIFE 101 2ND AVE NE PIPESTONE, MN 56164	20-1813304	501C3	5,000				TREE HOUSE PROGRAM FOR AT-RISK YOUTH

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 FINANCIAL AID OFFICE SIOUX FALLS, SD 57197	46-0224588	EDUCATION	5,925				HALVORSON EDUCATION, CANBY HS, TEIGEN SCHOLARSHIP
BIRD ISLAND CULTURAL CENTRE PO BOX 434 BIRD ISLAND, MN 55310	81-4413103	501C3	6,500				ECI VISION TO ACTION, GALLERY ART HANGING SYSTEM/AIR CONDITIONER REPLACEMENT

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
CHIPPEWA VALLEY YOUTH CLUB 802 N 2ND ST MONTEVIDEO, MN 56265	46-2666914	501C3	12,575				ORGANIZATION SUPPORT, YOUTH COORDINATOR
CHRISTIAN COMMUNITY OUTREACH CENTER 815 E LINCOLN AVE OLIVIA, MN 56277	41-1951484	RELIGIOUS	9,000				AFTER SCHOOL YOUTH PROGRAM, PROMOTING READING AND BEING A GOOD CITIZEN

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
CITY OF APPLETON 323 W SCHLIEMAN AVE APPLETON, MN 56208	41-6004938	GOVERNMENT	11,920				ADA ACCESSIBLE PICNIC TABLES, CAMPGROUND, AMBULANCE, LIBRARY, SWIMMING POOL PROJECTS
CITY OF BALATON PO BOX 388 BALATON, MN 56115	41-6004955	GOVERNMENT	37,650				LIGHTS AT PICNIC SHELTER, BASKETBALL COURT, CUSHIONS, LIBRARY, WALKING BRIDGE

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
CITY OF CLARKFIELD PO BOX 278 CLARKFIELD, MN 56223	41-6005042	GOVERNMENT	71,434				CARDINAL DAYS, CARDINAL KIDS CHILD CARE CENTER, LIBRARY COMMUNITY EVENTS, MALL
CITY OF HERON LAKE PO BOX 315 HERON LAKE, MN 56137	41-6005230	GOVERNMENT	5,000				HERON LAKE LIBRARY, DEFIBRILLATOR, FIRE DEPARTMENT

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
CITY OF MADISON 404 6TH AVE MADISON, MN 56256	41-6005335	GOVERNMENT	29,102				BASEBALL FIELD, KIWANIS PLAYGROUND, COMMUNITY THEATRE, AND CHILD CARE MARKET STUDY
CITY OF MARSHALL 344 W MAIN ST MARSHALL, MN 56258	41-6005351	GOVERNMENT	6,250				ENHANCING THE SPORT OF CURLING, LEGION FIELD TENNIS COURTS RENOVATION

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
CITY OF MOUNTAIN LAKE PO BOX C MOUNTAIN LAKE, MN 56159	41-6005401	GOVERNMENT	33,943				AMBULANCE RADIOS, BIKE RODEO, CHRISTMAS LIGHTING, CHRISTMAS AT THE VILLAGE, CITY BEAUTIFICATION, PLAYGROUND, LAWCON PARK, BAND SHELL, TREE PROJECT
CITY OF PIPESTONE 119 2ND AVE SW PIPESTONE, MN 56164	41-6005460	GOVERNMENT	7,370				DOWNTOWN HOLIDAY LIGHTS, AQUATIC SCHOLARSHIPS

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
CITY OF TYLER PO BOX C TYLER, MN 56178	41-6005587	GOVERNMENT	15,920				LINCOLN COUNTY FAIR, TYLER GOLF COURSE
CITY OF WALNUT GROVE PO BOX 335 WALNUT GROVE, MN 56180	41-6005611	GOVERNMENT	9,721				CHILD RESTRAINT FOR AMBULANCE, TURNOUT FIRE GEAR, WELCOME SIGNS

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
COMMUNITY INTEGRATION CENTER 201 5TH ST SW WILLMAR, MN 56201	82-2096014	501C3	5,000				YOUTH AND SPORTS
COUNCIL ON FOUNDATIONS 2121 CRYSTAL DR STE 700 ARLINGTON, VA 22202	13-6068327	501C3	14,350				2018 MEMBERSHIP

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
DANEBOB LUTHERAN CHURCH 140 DANEBOB CT TYLER, MN 56178	41-0734738	RELIGIOUS	50,000				FOLK SCHOOL ACCESSIBLE HOUSING BUILDING FUND
FAMILY PROMISE OF KANDIYOHI COUNTY 312 6TH STREET SW WILLMAR, MN 56201	30-0758513	501C3	5,000				PROJECT OUTREACH PART TIME STAFF EXPANSION

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

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FIRST LUTHERAN CHURCH 401 7TH AVE SW PIPESTONE, MN 56164	41-0826789	RELIGIOUS	20,000				MINISTRY SUPPORT
FRIENDS OF THE ORCHESTRA LTD 803 CHERYL AVE MARSHALL, MN 56258	41-1799541	501C3	5,502				FISCAL YEAR 2018 DISBURSEMENT

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

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HUTCHINSON AREA COMMUNITY FOUNDATION 2 MAIN ST S HUTCHINSON, MN 55350	41-1938474	501C3	32,310				SALUTING COMMUNITY HEROS, OPERATING FUNDS
HUTCHINSON CENTER FOR THE ARTS PO BOX 667 HUTCHINSON, MN 55350	26-2263988	501C3	5,000				ART KIDS DROP IN DAY, CREATIVE FAMILIES

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
IMMIGRANT LAW CENTER 450 N SYNDICATE ST STE 200 SAINT PAUL, MN 55104	41-0909036	501C3	21,000				SOUTHWEST MINNESOTA IMMIGRATION PROJECT
ISD #129 - MONTEVIDEO 2001 WILLIAM AVE MONTEVIDEO, MN 56265	41-6000507	EDUCATION	5,636				MONTEVIDEO HIGH SCHOOL SCHOLARSHIP PROGRAM, SENSORY ROOM

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

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ISD #173 - MOUNTAIN LAKE PO BOX 400 MOUNTAIN LAKE, MN 56159	41-6000682	EDUCATION	13,737				ALTERNATIVE CLASSROOM, AUDITORIUM SEATS, CHROMEBOOKS, ECFE, SCIENCE INVENTION, TECHNOLOGY INTEGRATION
ISD #2159 - BUFFALO LAKE-HECTOR-STEWART PO BOX 307 HECTOR, MN 55342	41-1751593	EDUCATION	45,183				TEACHER GRANTS, CHILD CARE CENTER

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

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ISD #2180 - MACCRAY PO BOX 690 CLARA CITY, MN 56222	41-1783004	EDUCATION	17,112				TEACHER GRANT REQUESTS
ISD #2184 - LUVERNE PUBLIC SCHOOLS 709 N KNISS AVE LUVERNE, MN 56156	41-6008465	EDUCATION	6,947				LUVERNE CHILD GUIDE

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

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ISD #2190 - YELLOW MEDICINE EAST 450 9TH AVE GRANITE FALLS, MN 56241	41-6004911	EDUCATION	5,168				AFTER SCHOOL SNACKS FOR ACTIVE YOUTH, FALL MUSICAL, THEATER RESIDENCY, HEART2HEART, ILLUMINATED PHOTOGRAPHY, POSITIVE BEHAVIOR RECOGNITION, MUSIC STANDS
ISD #2689 - PIPESTONE 1401 7TH ST SW PIPESTONE, MN 56164	41-1801895	EDUCATION	5,000				DIGITAL DISCOVERY MAKERSPACE AT THE MEINDERS COMMUNITY LIBRARY

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

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ISD #2853 - LAC QUI PARLE VALLEY 2860 291ST AVE MADISON, MN 56256	41-1837788	EDUCATION	31,000				FLEXIBLE SEATING AT APPLETON ELEMENTARY, BAND TRIP, BAND EQUIPMENT, EARLY CHILDHOOD INITIATIVE, DAYBREAK POST PROM, PLAYGROUND, SUMMER RECREATION, OPEN GYM
ISD #2895 - JACKSON COUNTY CENTRAL PO BOX 119 JACKSON, MN 56143	41-1872029	EDUCATION	13,269				JACKSON COUNTY CENTRAL SCHOLARSHIPS, TEACHER GRANT REQUESTS

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

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ISD #2898 - WESTBROOK WALNUT GROVE PO BOX 129 WESTBROOK, MN 56183	41-6000705	EDUCATION	9,000				ALTERNATIVE SEATING, BACKPACK FOOD PROGRAM, LOGGERS JO VOLLEYBALL, ONE NATION PROGRAM, SCHOLARSHIPS, SUMMER LIBRARY
ISD #2903 - ORTONVILLE PUBLIC SCHOOL 200 TROJAN DR ORTONVILLE, MN 56278	41-6000273	EDUCATION	23,550				BPA NATIONAL TRIP, MAKERSPACE, PK-3 ALIGNMENT, SCHOLARSHIPS, SCOREBOARDS

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

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ISD #2904 - TRACY 934 PINE ST TRACY, MN 56175	41-6002013	EDUCATION	22,959				LITTLE PANTHERS PRESCHOOL, STAGE LIGHTING, COMMUNITY SIGN
ISD #330 - HERON LAKE- OKABENA 124 N MINNESOTA OKABENA, MN 56161	41-1330168	EDUCATION	12,097				DRYER REPLACEMENT, FCS CLASS, LIBRARY, POOL, POSITIVE BEHAVIOR INCENTEIVES, SPORTS UNIFORMS, SUMMER LUNCH PROGRAM, SOUND SYSTEM

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

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ISD #347 - WILLMAR 611 5TH ST SW WILLMAR, MN 56201	41-6001746	EDUCATION	9,800				BOYS SOCCER PROGRAM IMPROVEMENTS, TALKING IS TEACHING, EARLY CHILDHOOD PROFESSIONALS APPRECIATION EVENT
ISD #378 - DAWSON-BOYD 848 CHESTNUT STREET DAWSON, MN 56232	41-6001874	EDUCATION	14,047				ROBOTICS TEAM, ESSAY, FOOTBALL FIELD LIGHTS, MUSIC DEPARTMENT, REACH, SCHOLARSHIP

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
ISD #403 - IVANHOE PUBLIC SCHOOL PO BOX 9 IVANHOE, MN 56142	41-6001990	EDUCATION	8,985				IPAD MINIS W/CASES, CHROMEBOOKS, QBALL, NEWSLETTER
ISD #423 - HUTCHINSON 30 GLEN ST NW HUTCHINSON, MN 55350	41-6002222	EDUCATION	17,516				TEACHER GRANTS, ROBOTICS, STUDENT ADVISORY COUNCIL LEADERSHIP ACADEMY, NEWSPAPERS IN EDUCATION, BASKETBALLS, DRAWING TABLE, BALANCED LITERACY

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
ISD #465 LITCHFIELD SCHOOL 114 N HOLCOMBE AVE STE 110 LITCHFIELD, MN 55355	41-6002290	EDUCATION	15,500				BOOKS FOR ALL, TEACHER GRANTS
ISD #777 - BENSON 1400 MONTANA AVE BENSON, MN 56215	41-6004181	EDUCATION	34,864				BENSON AREA GYMNASTICS FACILITY, DISCOVERY KIDS, NORTHSIDE HOOPS, POSITIVE BEHAVIOR INCENTIVE, RECUMBENT BIKES, STANDING DESKS

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

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JACKSON COUNTY 405 4TH ST JACKSON, MN 56143	41-0714417	GOVERNMENT	10,800				LEGO FUN, ANCESTRY COM, STEAM, LIBRARY SUPPORT
KAREN ORGANIZATION OF MINNESOTA 1400 S SARATOGA ST MARSHALL, MN 56258	30-0438142	501C3	5,000				SUPPORTING ACROSS CULTURAL AND AGE DIFFERENCES

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

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KIDS-R-IT INCORPORATED 1118 JOHNSON AVE WORTHINGTON, MN 56187	41-1881615	501C3	20,000				CHILD CARE CENTER EXPANSION
LAKE AREA TECHNICAL INSTITUTE FINANCIAL AID WATERTOWN, SD 57201	36-3860861	EDUCATION	5,000				CANBY HIGH SCHOOL SCHOLARSHIPS

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

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LAKE BENTON VOLUNTEERS FOR EDUCATION 101 GARFIELD ST LAKE BENTON, MN 56149	81-0958267	501C3	6,225				AFTER SCHOOL PROGRAM STORAGE, BAND INSTRUMENTS, PLAYGROUND, SCOREBOARD
LET'S GO FISHING 1025 19TH AVE SW WILLMAR, MN 56201	48-1259413	501C3	7,500				GETTING HOOKED

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

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LITTLE LAMBS LEARNING CENTER PO BOX 67 DANUBE, MN 56230	46-4850957	501C3	5,000				LITTLE LAMBS AND CURRICULUM AND TRAINING PROJECT
LOWER SIOUX INDIAN COMMUNITY 39527 RES HWY 1 MORTON, MN 56270	41-0991683	GOVERNMENT	5,500				COMMUNITY DESIGN FOR INTERGENERATIONAL INCUBATOR, COMMUNITY SUPPORT

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

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LIVERNE AREA COMMUNITY FOUNDATION PO BOX 623 LIVERNE, MN 56156	41-1512905	501C3	25,000				CREATING ENTREPRENEURSHIP OPPORTUNITIES
LYON-LINCOLN ELECTRIC TRUST W HWY 14 TYLER, MN 56178	41-1930173	501C3	5,000				TYLER GOLF CLUB YOUTH MEMBERSHIP

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MARSHALL-LYON COUNTY LIBRARY 201 C ST MARSHALL, MN 56258	41-6005352	501C3	6,800				WORLD OF WONDER EARLY LEARNING KITS
MEEKER COUNTY PUBLIC HEALTH 114 N HOLCOMBE AVE STE 250 LITCHFIELD, MN 55335	26-1404373	GOVERNMENT	7,000				ADVANCING ORAL HEALTH FOR CHILDREN AGES 0-5 IN MEEKER COUNTY, MINNESOTA

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

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MID-MINNESOTA LEGAL AID 415 7TH ST SW WILLMAR, MN 56201	41-1412710	501C3	20,000				NEW AMERICAN'S PROJECT
MILESTONES PO BOX 548 WAITE PARK, MN 56387	41-1321820	501C3	26,500				EXPAND AND CREATE CHILD CARE - ST CLOUD AND SAUK CENTER

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

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MINNESOTA WEST COMMUNITY AND TECHNICAL COLLEGE 1450 COLLEGEWAY DR WORTHINGTON, MN 56187	41-6007162	EDUCATION	102,500				CAREER PATHWAYS, SCHOLARSHIP, TEACHER PREP PROGRAM
MINNPOST 900 6TH AVE SE STE 220 MINNEAPOLIS, MN 55414	26-0573427	501C3	5,000				REPORTING ON NEW AMERICANS IN GREATER MINNESOTA

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

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NOBLES COUNTY LIBRARY 408 E MAIN ST STE 8 WORTHINGTON, MN 56187	41-6005845	501C3	15,098				ADRIAN BRANCH/NOBLES COUNTY LIBRARY, CANOPY TENTS
OPEN DOOR HEALTH CENTER 309 HOLLY LANE MANKATO, MN 56001	41-1461726	501C3	6,500				SCHOOL DENTAL OUTREACH PROGRAM - MARSHALL, MN

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OUR LADY OF GUADALUPE FREE CLINIC 941 4TH AVE 11 WORTHINGTON, MN 56187	46-1425247	501C3	7,000				EARLY CHILDHOOD ORAL HEALTH INITIATIVE, MEDICAL CARE SUPPORT
OUR SAVIOR'S LUTHERAN CHURCH 800 BLUFF ST NE HUTCHINSON, MN 55350	41-0846440	RELIGIOUS	5,000				TRANSITION TO CENTER BASED DAYCARE LICENSE

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

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PACT 4 FAMILIES COLLABORATIVE 2200 23RD ST NE STE 2030 WILLMAR, MN 56201	41-1857830	501C3	7,500				PRENATAL/PEDIATRIC EARLY INTERVENTION & SUPPORT, BRAIN CONFERENCE & WORKSHOP
PRAIRIE FIVE COMMUNITY ACTION COUNCIL PO BOX 159 MONTEVIDEO, MN 56265	41-0904802	501C3	15,500				KIDS FIRST CONFERENCE, SENIOR NUTRITION, VITA TAX CLINIC

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

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PRAIRIE HOME HOSPICE AND COMMUNITY CARE 408 E MAIN ST STE 8 MARSHALL, MN 56258	41-1494079	501C3	37,543				MCLAUGHLIN HOUSE, HOLIDAY LIGHT, ORGANIZATION SUPPORT
SOUTH DAKOTA STATE UNIVERSITY FINANCIAL AID OFFICE BROOKINGS, SD 57007	46-0273801	EDUCATION	14,975				CANBY, TEIGEN SCHOLARSHIPS

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

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SOUTHWEST INITIATIVE FOUNDATION 15 3RD AVE NW HUTCHINSON, MN 55350	41-1555592	501C3	18,750				BOLD, KMS, LAC QUI PARLE VALLEY, LITCHFIELD, MOUNTAIN LAKE, ORTONVILLE, REDWOOD AREA, ROCK COUNTY, THRIVE EARLY CHILDHOOD INITIATIVE COORDINATORS
SOUTHWEST MINNESOTA HOUSING PARTNERSHIP 2401 BROADWAY AVE STE 4 SLAYTON, MN 56172	41-1721815	501C3	28,000				SW MINNESOTA HOUSING BUSINESS ASSESSMENT, COMMUNITY CULTURE CENTER BUILDING DESIGN

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

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SOUTHWEST MN PRIVATE INDUSTRY COUNCIL INC 607 W MAIN ST MARSHALL, MN 56258	41-1487964	501C3	5,000				A DAY IN THE LIFE PIC JOB SHADOW SERVICE
SOUTHWEST REGIONAL DEVELOPMENT COMMISSION 2401 BROADWAY AVE STE 1 SLAYTON, MN 56172	41-1235045	GOVERNMENT	6,763				MURRAY COUNTY EARLY CHILDHOOD FUND

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

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ST JAMES EPISCOPAL CHURCH 101 N 5TH ST MARSHALL, MN 56258	41-6098516	RELIGIOUS	13,822				FISCAL YEAR 2018 DISBURSEMENT
SWIFT COUNTY HUMAN SERVICES 410 21ST ST S BENSON, MN 56215	41-6005906	GOVERNMENT	8,450				ENHANCED LIVING ROOM AT MEADOW LANE HEALTHCARE CENTER, BENSON ALANO CLUB, SWIFT CO RESTORATIVE PRACTICES

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

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THE REFUGE CHURCH 1117 BENSON ROAD MONTEVIDEO, MN 56265	41-1518874	RELIGIOUS	31,500				WILDWOOD MONTESSORI CHILD CARE
UNITED COMMUNITY ACTION PARTNERSHIP 1400 S SARATOGA ST MARSHALL, MN 56258	41-0888137	501C3	7,500				COMMUNITY BLOOMS GARDEN, PYRAMID MODEL PROFESSIONAL DEVELOPMENT, YOUTH RIDE PASSES

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

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WHEEL AND COG CHILDREN'S MUSEUM OF HUTCHINSON PO BOX 157 HUTCHINSON, MN 55350	81-3324797	EDUCATION	5,000				COMMUNITY HELPERS
WORTHINGTON AREA YMCA 1501 COLLEGEWAY WORTHINGTON, MN 56187	41-6007569	501C3	11,880				FISCAL YEAR 2018 DISBURSEMENT, SUMMER LUNCH PROGRAM, FAMILY 2 FAMILY MENTOR

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

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ZION LUTHERAN CHURCH 504 N GILMAN AVE LITCHFIELD, MN 55355	41-1289279	RELIGIOUS	5,000				TRAINING NEW STAFF AND ADDITION OF TODDLER ROOM AT KIDS OF THE KINGDOM

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

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.**
▶ **Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.**

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
SOUTHWEST INITIATIVE FOUNDATION

Employer identification number
41-1555592

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 border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
<p>b If any of the boxes in 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 in 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 border="0"> <tr> <td><input type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input checked="" type="checkbox"/> Form 990 of other organizations</td> <td><input type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input checked="" type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Approval by the board or compensation committee				
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<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input checked="" type="checkbox"/> Form 990 of other organizations	<input 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 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
PART I, LINE 3	THE EXECUTIVE COMMITTEE REVIEWED INFORMATION FROM SIMILAR ORGANIZATION'S REPORTED SALARIES WHICH INCLUDED LOOKING AT OTHER ORGANIZATION'S 990'S AS WELL AS A SURVEY OF OTHER SIMILAR ORGANIZATION'S COMPENSATION PRACTICES

Schedule K (Form 990)
 Department of the Treasury
 Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds
 ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
 ▶ Attach to Form 990.
 ▶ Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047
2017
Open to Public Inspection

Name of the organization
 SOUTHWEST INITIATIVE FOUNDATION

Employer identification number
 41-1555592

Part I Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A MCLEOD COUNTY	41-6005841	582258AR0	03-10-2016	1,830,000	REFUNDED BONDS ISSUED ON 12/29/2005		X		X		X

Part II Proceeds

	A	B	C	D
1 Amount of bonds retired	455,000			
2 Amount of bonds legally defeased				
3 Total proceeds of issue	1,830,000			
4 Gross proceeds in reserve funds				
5 Capitalized interest from proceeds				
6 Proceeds in refunding escrows				
7 Issuance costs from proceeds	18,300			
8 Credit enhancement from proceeds				
9 Working capital expenditures from proceeds	4,908			
10 Capital expenditures from proceeds				
11 Other spent proceeds	1,806,792			
12 Other unspent proceeds				
13 Year of substantial completion				
	Yes	No	Yes	No
14 Were the bonds issued as part of a current refunding issue?	X			
15 Were the bonds issued as part of an advance refunding issue?		X		
16 Has the final allocation of proceeds been made?	X			
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X			

Part III Private Business Use

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X						
2 Are there any lease arrangements that may result in private business use of bond-financed property?		X						

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X						
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		X						
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶								
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶								
6 Total of lines 4 and 5								
7 Does the bond issue meet the private security or payment test?		X						
8a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?		X						

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X						
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X						
b Exception to rebate?	X							
c No rebate due?		X						
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?		X						
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X						
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								

Part IV Arbitrage (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X						
7 Has the organization established written procedures to monitor the requirements of section 148?		X						

Part V Procedures To Undertake Corrective Action

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?		X						

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No 1545-0047

2017

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

▶ **Attach to Form 990.**

▶ **Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990**

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
SOUTHWEST INITIATIVE FOUNDATION

Employer identification number
41-1555592

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	13	1,084,159	HI/LOW AVERAGE SALE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests	X	1	1,196,371	TRUST INTEREST
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 ▶ (GRAIN)	X	1	198	MKT VALUE PER BUSHEL
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** 0

	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 is not 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?		No
b If "Yes," describe in Part II		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II		

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

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization
SOUTHWEST INITIATIVE FOUNDATION

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.

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

OMB No 1545-0047

2017

Open to Public Inspection

Employer identification number

41-1555592

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 1, ORGANIZATION'S MISSION	<p>OUR MISSION IS CONNECTING PEOPLE, INVESTING IN IDEAS AND BUILDING COMMUNITIES SINCE 1986, SOUTHWEST INITIATIVE FOUNDATION HAS BEEN COMMITTED TO SOCIAL AND ECONOMIC GROWTH IN SOUTH WEST MINNESOTA THE 18 COUNTIES AND TWO NATIVE NATIONS WE CALL HOME ARE CONTINUOUSLY EVOLVING, AND SWIF HAS GROWN AND RESPONDED TO OUR REGION'S CHANGING NEEDS SWIF IS A SPARK FOR CHANGE THROUGH PHILANTHROPY, LEADERSHIP, INNOVATION AND COLLABORATION THESE QUALITIES ARE WIDELY RECOGNIZED AS CORE TO SWIF'S APPROACH AND SUCCESS SWIF'S ORIGINAL MISSION WAS TO STRENGTHEN SOUTHWEST MINNESOTA IN THREE WAYS IMPROVING THE REGION'S ECONOMIC SELF-RELIANCE, OVERCOMING HUMAN DISTRESS, AND PROMOTING REGIONAL LEADERSHIP, COORDINATION AND PARTNERSHIPS WHILE OUR WORK CONTINUES TO ADDRESS THESE BROAD AREAS, THE CHANGING REGIONAL REALITY CALLS SWIF TO ACT IN NEW WAYS SWIF ADOPTED A NEW FOCUS WE'RE CALLING GROW OUR OWN TO HELP ALL SOUTHWEST MINNESOTA KIDS SUCCEED OUR WORK TODAY REPRESENTS A DEEP HISTORY AND VIBRANT VISION FOR THE FUTURE OUR VISION IS A SOUTHWEST MINNESOTA WHERE ALL PEOPLE THRIVE SWIF'S 12-MEMBER VOLUNTEER BOARD OF DIRECTORS-WHICH REPRESENTS DIVERSE GEOGRAPHIC LOCATIONS, PROFESSIONS AND BACKGROUNDS-TOGETHER WITH SWIF'S PROFESSIONAL STAFF AND RESEARCH PARTNERS, EXPLORED DEMOGRAPHICS AND TRENDS IMPACTING THE REGION IN SOUTHWEST MINNESOTA, THERE IS A GROWING INCOME DISPARITY AMONG FAMILIES WITH CHILDREN MEDIAN INCOMES FOR FAMILIES IN THE BOTTOM 20 PERCENT OF THE INCOME DISTRIBUTION DECLINED BY 9 PERCENT BETWEEN 1999 AND 2014, WHILE MEDIAN INCOMES FOR FAMILIES IN THE TOP 20 PERCENT ROSE BY 9 PERCENT DURING THAT SAME PERIOD AS COMMUNITIES ACROSS THE REGION CHANGE, KIDS FROM LOW INCOME FAMILIES ARE FACING OBSTACLES THAT REMOVE STEPPING STONES TO UPWARD MOBILITY-OR THEIR ABILITY TO DO BETTER THAN THEIR PARENTS THROUGH HARD WORK RESEARCH SHOWS THAT THESE CHILDREN HAVE LESS ACCESS TO EVERYTHING FROM QUALITY EARLY CHILDHOOD EDUCATION TO ADVANCED PLACEMENT COURSES IN HIGH SCHOOL TO SPORT AND ENRICHMENT ACTIVITIES THAT PROVIDE MENTORING, TEAMBUILDING AND OTHER LIFE-LONG SKILLS THEY NEED TO BE GOOD CITIZENS AND GOOD EMPLOYEES THIS DIVIDE IS COMMONLY KNOWN AS "THE OPPORTUNITY GAP " SWIF BELIEVES THE REGION'S FUTURE ECONOMIC SUCCESS DEPENDS ON THE SUCCESS OF OUR NEXT GENERATION AND MOST VULNERABLE RESIDENTS FOR THE REGION, 17 PERCENT OR 11,000 KIDS UNDER AGE 18 ARE LIVING IN POVERTY EVEN MORE ALARMING, 21 PERCENT OR 4,499 KIDS ARE LIVING IN POVERTY BEFORE THEY REACH ELEMENTARY SCHOOL AS SOUTHWEST MINNESOTA'S FUTURE EMPLOYEES, ENTREPRENEURS, COMMUNITY LEADERS, VOLUNTEERS, HOMEOWNERS AND TAXPAYERS, THEIR SUCCESS WILL DIRECTLY IMPACT NOT JUST INDIVIDUALS AND FAMILIES, BUT ALSO BUSINESSES AND ENTIRE COMMUNITIES SWIF IS UNIQUELY POSITIONED TO PROVIDE LEADERSHIP FOR THE REGION ON THIS ISSUE, OFFERING A TRUSTED PERSPECTIVE THAT CAN UNITE EFFORTS AND LEADERS THROUGHOUT SOUTHWEST MINNESOTA AS AN INDEPENDENT COMMUNITY FOUNDATION, SWIF CARRIES A LONG-TERM COMMITMENT TO THE REGION A</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 1, ORGANIZATION'S MISSION	ND CAN LEVERAGE OUTSIDE FUNDING AND EXPERTISE SWIF ALSO HAS A DEEP HISTORY OF BRINGING PEOPLE TOGETHER FROM ALL SECTORS TO EXPLORE AND IMPLEMENT LOCAL SOLUTIONS SWIF'S EXPERIENCE DELIVERING EDUCATION AND PROGRAMMING DIRECTLY ALIGNS WITH THE FRAMEWORK OF WHAT KIDS NEED TO SUCCEED STABLE FAMILY AND PARENTING, HIGH QUALITY EARLY CHILDHOOD EDUCATION, ENGAGEMENT IN THE K-12 YEARS IN AND OUT OF SCHOOL, SAFE AND CARING COMMUNITIES, AND CAREER AND WORKFORCE READINESS THE "HOW" OF SWIF'S MISSION CONTINUES THROUGH ITS BUSINESS FINANCE AND ECONOMIC DEVELOPMENT, GRANTMAKING AND COMMUNITY PROGRAMMING, AND COMMUNITY GIVING AND PHILANTHROPY THE "WHY" IS OUR VISION AND GROW OUR OWN, WHICH WILL HELP ALL OUR KIDS LEARN, GROW, BUILD A CAREER AND EXPERIENCE A GOOD QUALITY OF LIFE RIGHT HERE IN SOUTHWEST MINNESOTA

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS	<p>STRONG EMPLOYERS WITH QUALITY JOB OPPORTUNITIES ARE CRITICAL TO SWIF'S GROW OUR OWN INITIATIVE, A COMPREHENSIVE APPROACH TO HELP ALL SOUTHWEST MINNESOTA KIDS SUCCEED MORE EMPLOYEE S ARE ALSO NEEDED TO ENTER THE WORKFORCE AND SUCCESSFULLY STAY THERE SOUTHWEST INITIATIVE FOUNDATION PROVIDES FLEXIBLE AND INNOVATIVE ECONOMIC DEVELOPMENT FINANCE SOLUTIONS FOR BU SINESS RETENTION, EXPANSION, STARTUP AND OWNERSHIP SUCCESSION PROJECTS THROUGH ITS BUSINES S FINANCE PROGRAM AND ITS MICROENTERPRISE LOAN PROGRAM ITS FINANCING PROGRAMS SUPPORT PRO JECTS IN THE RETAIL, SERVICE AND INDUSTRIAL SECTORS, WITH A SPECIAL INTEREST IN SUPPORTING BUSINESS PROJECTS IN FOOD AND AGRICULTURE, MANUFACTURING, RENEWABLE ENERGY AND BIOSCIENCE IN ADDITION, THE MICROENTERPRISE LOAN PROGRAM PROVIDES VALUABLE TECHNICAL ASSISTANCE FOR BORROWERS IN THE AREAS OF BUSINESS MANAGEMENT AND OPERATIONS, FINANCE AND ACCOUNTING AND MARKETING SWIF ALSO OPERATES THE CENTER OF RURAL ENTREPRENEURSHIP (CORE) WEBSITE MNCORE O RG AND THE INITIATE PROSPERITY WEBSITE (IN PARTNERSHIP WITH NORTHERN ECONOMIC INITIATIVES CORPORATION) INITIATE PROSPERITY ORG CORE FOCUSES ON PROVIDING VALUABLE RESOURCES AND EDU CATIONAL OPPORTUNITIES TO NEW ENTREPRENEURS INITIATE PROSPERITY IS EXCLUSIVE TO SWIF'S LO AN CLIENTS PROVIDING BLENDED TECHNICAL ASSISTANCE WITH INTERACTIVE TOOLS, TEMPLATES, VIDEO S AND GUIDES SWIF IS A LENDER FOR THE MINNESOTA EMERGING ENTREPRENEUR LOAN PROGRAM THROU G H THE MINNESOTA DEPARTMENT OF EMPLOYMENT AND ECONOMIC DEVELOPMENT THROUGH A NETWORK OF NO NPROFIT LENDERS, THIS PROGRAM IS DESIGNED TO PROVIDE FINANCING AND SUPPORT THE GROWTH OF B USINESSES OWNED AND OPERATED BY WOMEN, VETERANS, PERSONS WITH DISABILITIES, MINORITIES AND LOW-INCOME PERSONS SWIF WAS A PARTICIPANT IN THE SECOND NATIONAL COHORT OF THE COMMUNITY FOUNDATION CIRCLE COORDINATED BY THE BUSINESS ALLIANCE FOR LOCAL LIVING ECONOMIES (BALLE) THIS GROUP IS COMPRISED OF BOTH COMMUNITY AND PLACE-BASED FOUNDATIONS FROM RURAL AND MET ROPOLITAN AREAS AND IS FOCUSED ON DEVELOPING CAPACITY AND SYSTEMS, RELATIONSHIPS AND OPPOR TUNITIES FOR IMPACT INVESTING SWIF WAS ONE OF NINE COMMUNITY FOUNDATIONS NATIONALLY PARTI CIPATING IN THE RURAL ECONOMIC DEVELOPMENT PHILANTHROPY INNOVATORS NETWORK (REDPIN) COORDI NATED BY THE ASPEN INSTITUTE AND THE CENTER FOR RURAL ENTREPRENEURSHIP SWIF HAS SELECTED THE AVAILABILITY OF AFFORDABLE, QUALITY CHILD CARE IN THE REGION AS ITS AREA OF FOCUS FOR THE REDPIN INITIATIVE CHILD CARE IS ONE OF THE MOST CRITICAL ECONOMIC DEVELOPMENT ISSUES FACING SOUTHWEST MINNESOTA, BUSINESSES AND FAMILIES IN ADDITION TO CHILD CARE, SOUTHWEST MINNESOTA EMPLOYERS FACE CHALLENGES WITH WORKFORCE RECRUITMENT, RETENTION AND DEVELOPMENT SWIF RECEIVED FUNDING FROM THE GREATER TWIN CITIES UNITED WAY FOR THE DEVELOPMENT OF CARE ER PATHWAYS FOR STUDENTS IN THE WORTHINGTON, WINDOW, AND JACKSON COUNTY CENTRAL SCHOOL DIS TRICTS. IN COLLABORATION WITH MINNESOTA WEST COMMUNITY AND TECHNICAL COLLEGE AND OTHER LOC AL PARTNERS AND STAKEHOLDERS</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS	CAREER READINESS IS A KEY STRATEGY TO ADVANCE GROW OUR OWN, CONNECTING FUTURE WORKFORCE WITH THE JOB OPPORTUNITIES LOCATED IN THEIR OWN COMMUNITIES AND REGION SWIF HAS SUPPORTED P ROFESSIONAL DEVELOPMENT OF THE REGION'S ECONOMIC DEVELOPMENT PROFESSIONALS AND SPONSORED T ARGETED CONFERENCES AND EVENTS RURAL COMMUNITIES FACE UNIQUE CHALLENGES, AS WELL AS OPPOR TUNITIES TO COLLABORATE AROUND THESE AND OTHER ISSUES WORKFORCE HOUSING AND BROADBAND REP RESENT TWO AREAS CRITICAL TO BUILDING THE WORKFORCE AND PREPARING FUTURE GENERATIONS OF FA MILIES, BUSINESSES AND COMMUNITIES

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS	<p>SOUTHWEST INITIATIVE FOUNDATION MOBILIZES VOLUNTEERS AND DONORS THROUGHOUT SOUTHWEST MINNESOTA TO CREATE A CULTURE OF GIVING THAT IS, AT ITS HEART, INCLUSIVE, TRANSFORMATIVE AND LOCALLY-INVESTED THIS WIDE-REACHING NETWORK EXTENDS SWIF'S REACH INTO LOCAL COMMUNITIES AND OFFERS A UNIQUE MODEL FOR PEOPLE TO SUPPORT THE CAUSES THEY CARE ABOUT MOST, IN THE PLACE THEY CALL HOME SWIF'S COMMUNITY FOUNDATION PROGRAM ESTABLISHES A LOCAL "FOUNDATION" KNOWN AS AN AFFILIATE A TRUE PARTNERSHIP IS DEVELOPED THAT HAS PROVEN MUTUALLY BENEFICIAL AND FUNCTIONS AS AN EFFECTIVE METHOD OF RETAINING CHARITABLE DOLLARS IN THE REGION VOLUNTEER ADVISORY BOARDS DRIVE LOCAL MISSION, ACTIVITIES AND IMPACT FOR 26 AFFILIATES, INCLUDING ONE NEW IN FISCAL YEAR 2018 SWIF PROVIDES THE ADMINISTRATIVE AND 501(C)(3) INFRASTRUCTURE, AS WELL AS ONGOING TECHNICAL AND PROFESSIONAL SUPPORT IN AREAS LIKE STRATEGIC PLANNING, FUNDRAISING, MARKETING, PUBLIC RELATIONS AND GRANTMAKING SWIF'S 13 SCHOOL FOUNDATION PARTNERS OPERATE WITH A SIMILAR STRUCTURE DONOR-ADVISED FUNDS ALLOW AN INDIVIDUAL DONOR OR FAMILY TO PROVIDE INPUT REGARDING GRANT DISTRIBUTIONS, RESEMBLING A PRIVATE FOUNDATION FUNDS CAN BE ENDOWED OR NON-ENDOWED (PASS-THROUGH) AND ARE CREATED WITH A SPECIFIC PURPOSE IN MIND MANY DONORS FIND SWIF FUNDS ARE ATTRACTIVE OPTIONS TO SUPPORT THEIR CHARITABLE INTERESTS WHILE RELIEVING THEM OF THE ADMINISTRATIVE RESPONSIBILITIES THAT CAN OFTEN BECOME OVERWHELMING FOR FAMILIES AND VOLUNTEERS ALL FUNDS CAN RECEIVE MANY TYPES OF GIFTS, INCLUDING CASH, APPRECIATED STOCK, REAL ESTATE, FARMLAND-WHICH CAN STAY IN PRODUCTION THROUGH SWIF'S KEEP IT GROWING PROGRAM-AND PLANNED GIFTS, SUCH AS CHARITABLE GIFT ANNUITIES AND BEQUESTS SWIF CAN CREATE A FUND THAT FULFILLS ANY CHARITABLE GOAL OF A DONOR LOCAL AFFILIATE VOLUNTEERS BECOME NATURAL COMMUNITY LEADERS, MAKING PROJECTS LIKE PARK IMPROVEMENTS, SWIMMING POOLS, BACK PACK FOOD PROGRAMS, BAND INSTRUMENTS, STUDENT FIELD TRIPS AND SO MUCH MORE POSSIBLE THROUGH SPECIAL PROJECTS AND ANNUAL GRANTMAKING AFFILIATES ALSO REPRESENT A KEY GROUP OF SWIF PARTNERS DIGGING INTO LOCAL YOUTH POVERTY DATA AND SUPPORTING THE NEW GROW OUR OWN FOCUS TO HELP ALL SOUTHWEST MINNESOTA KIDS SUCCEED IN FISCAL YEAR 2018, MANY ADVISORY BOARDS ALIGNED SOME OF THEIR RESOURCES FOR ACTIVITIES THAT SUPPORT FAMILIES, YOUTH MENTORSHIP PROGRAMS AND EDUCATIONAL OUTREACH TWELVE AFFILIATES PARTICIPATED IN A SWIF CHALLENGE AND GRANTED \$30,000 TO LOCAL ORGANIZATIONS WORKING TO CLOSE THE OPPORTUNITY GAP SWIF FUNDS OFFER UNIQUE POTENTIAL TO KEEP SOUTHWEST MINNESOTA COMMUNITIES, SCHOOLS AND ORGANIZATIONS STRONG AND VIBRANT THEY CONNECT COMMUNITY-MINDED PEOPLE AND LOCAL NEEDS WITH THE RESOURCES NECESSARY FOR ENDURING IMPACT</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS	<p>SOUTHWEST INITIATIVE FOUNDATION HAS EMBARKED UPON A SHIFT IN FOCUSED PROGRAMMATIC WORK. WORK IN COMMUNITY IMPACT, ECONOMIC DEVELOPMENT AND PHILANTHROPY ARE BEING ALIGNED WITH THE DIRECTION THE BOARD AND LEADERSHIP AGREED TO GO-A COMPREHENSIVE APPROACH TO HELP ALL SOUTHWEST MINNESOTA KIDS SUCCEED, KNOWN AS THE GROW OUR OWN INITIATIVE. SWIF IS WELL-KNOWN AS A CONVENER AND FACILITATOR AND HOSTED ITS FIRST GROW OUR OWN SUMMIT IN DECEMBER 2016. IT ATTRACTED MORE THAN 500 INDIVIDUALS, ELECTED OFFICIALS, EMPLOYERS, COMMUNITY LEADERS, EDUCATORS AND STUDENTS TO HEAR A FULL LINE-UP OF EXPERTS LED BY ROBERT D. PUTNAM, MALKIN PROFESSOR OF PUBLIC POLICY AT HARVARD UNIVERSITY AND AUTHOR OF OUR KIDS: THE AMERICAN DREAM IN CRISIS. SWIF COMMISSIONED RESEARCH FROM THE CARSEY SCHOOL OF PUBLIC POLICY AT THE UNIVERSITY OF NEW HAMPSHIRE TO UNDERSTAND WHAT SOUTHWEST MINNESOTA KIDS FACE. THE REPORT, "A PROFILE OF YOUTH POVERTY AND OPPORTUNITY IN SOUTHWESTERN MINNESOTA," WAS ALSO HIGHLIGHTED AT THE SUMMIT AND HAS BEEN SHARED WIDELY WITH THE PUBLIC. THIS DATA HAS BEEN PAIRED WITH ADDITIONAL LOCAL STATISTICS AND SHARED THROUGH DOZENS OF COMMUNITY PRESENTATIONS. SWIF STAFF BEGAN AN INTENSIVE COMMUNITY ENGAGEMENT PROCESS WITH SEVERAL REGIONAL COMMUNITIES TO COME UP WITH LOCAL SOLUTIONS TO SUPPORT THEIR OWN LOCAL KIDS. ANOTHER VALUABLE TOOL FOR THESE CONVERSATIONS IS THE GROW OUR OWN 30-MINUTE TELEVISION PROGRAM PRODUCED AND BROADCASTED TO 2.5 MILLION HOUSEHOLDS IN PIONEER PUBLIC TELEVISION'S COVERAGE AREA. THIS IS A PRIME EXAMPLE OF HOW SWIF LEVERAGES AND ENHANCES ITS WORK THROUGH STRONG PARTNERSHIPS. SWIF IS CREATING PARTNERSHIPS THROUGH ITS EMERGING LEADERS CABINET. IT IS A COMMITTEE OF THE BOARD OF DIRECTORS COMPRISED SPECIFICALLY OF PEOPLE UNDER THE AGE OF 40 WHO REPRESENT THE DIVERSITY OF THE REGION. THE ROLE OF THE COMMITTEE IS TO EXPLORE CURRENT REALITIES AND TRENDS AND TO CREATE AVENUES OF INFLUENCE, INCLUDING THROUGH GRANTMAKING. IN THE PAST YEAR, SWIF GRANTS WERE ALIGNED WITH GROW OUR OWN: AN OPEN GRANT ROUND ATTRACTED PROJECTS AND PROGRAMS THAT SUPPORT STABLE PARENTING AND FAMILIES, YOUTH ENGAGEMENT, SAFE COMMUNITIES AND CAREER READINESS. EXAMPLES INCLUDE SUPPORT FOR WEEKEND FOOD PROGRAMS, FINANCIAL PLANNING, YOUTH ACTIVITIES AND JOB SHADOWING. AN OPEN GRANT ROUND SPECIFIC TO EARLY CHILDHOOD CARE AND EDUCATION ALSO ATTRACTED IMPACTFUL PROJECTS. GRANTEEES ATTENDED TEACHER AND ADMINISTRATOR TRAININGS, EXPANDED CHILD CARE CENTER HOURS AND SLOTS, DEVELOPED CURRICULUM AND PROVIDED PARENT AND COMMUNITY OUTREACH. IN ADDITION, SWIF ENGAGED IN THE STATEWIDE MINNESOTA EARLY CHILDHOOD INITIATIVE, A NETWORK OF COALITIONS FOCUSED ON QUALITY CARE AND EDUCATIONAL OPPORTUNITIES FOR CHILDREN AGES BIRTH TO 5. SWIF STARTED 16 SOUTHWEST MINNESOTA COALITIONS AND SUPPORTS THEIR LOCAL WORK, LIKE HOSTING READ-ALONG EVENTS, INSTALLING DIAPER CHANGING STATIONS IN PUBLIC RESTROOMS, TRAINING FIRST RESPONDERS ON HOW TO INTERACT WITH YOUNG CHILDREN IN A CRISIS, HOME AND CHILD CARE VISITS AND MO</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS	RE SOUTHWEST INITIATIVE FOUNDATION ALSO DEMONSTRATED THE BEST PRACTICES LEARNED THROUGH THE PHILANTHROPIC PREPAREDNESS, RESILIENCY & EMERGENCY PARTNERSHIP SWIF IS ONE OF 18 COMMUNITY FOUNDATIONS FROM ACROSS A 10-STATE NETWORK PARTICIPATING IN A DISASTER- PREPAREDNESS, RESPONSE AND RECOVERY PROGRAM SWIF'S PAUL AND ALMA SCHWAN AGING TRUST ENDOWMENT FUND CONT INUES TO PROMOTE PRODUCTIVE AGING IN SOUTHWEST MINNESOTA ESTABLISHED IN 1991, THIS IS A KEY EXAMPLE OF THE LEGACY AND IMPACT DONORS CAN MAKE THROUGH SWIF IT FUNDED AGE FRIENDLY C OMMUNITY WORK LAUNCHED IN 2016, WHICH CONTINUES THROUGH A PARTNERSHIP WITH MINNESOTA RIVER AREA AGENCY ON AGING SWIF ALSO DEVELOPED A PLAN TO INCORPORATE THIS RESOURCE INTO GROW O UR OWN EFFORTS MOVING FORWARD, THROUGH INTERGENERATIONAL ACTIVITIES LIKE MENTORSHIP

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Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	THE EXECUTIVE COMMITTEE IS COMPRISED OF THE OFFICERS OF THE CORPORATION, CHAIRPERSON, VICE-CHAIRPERSON, SECRETARY AND TREASURER AS WELL AS THE IMMEDIATE PAST CHAIRPERSON THE EXECUTIVE COMMITTEE MAY ACT ON BEHALF OF THE BOARD TO REVIEW AND ACT UPON GRANTS AND LOANS, REVIEW AND ACT UPON POLICIES, REVIEW AND ACT UPON BUDGETARY VARIANCES, AND CONDUCT OTHER BUSINESS OF THE CORPORATION BETWEEN REGULARLY SCHEDULED BOARD MEETINGS ALL ACTIONS OF THE EXECUTIVE COMMITTEE ARE REVIEWED BY THE FULL BOARD THROUGH THE APPROVAL OF EXECUTIVE COMMITTEE MEETING MINUTES AT THE NEXT SCHEDULED FULL BOARD MEETING FORM 990 PART VI SECTION A, LINE 2 BOARD MEMBERS DO NOT HAVE FAMILY OR BUSINESS RELATIONSHIPS WITH EACH OTHER A CONFLICT OF INTEREST QUESTIONNAIRE IS DISTRIBUTED ANNUALLY AND EACH BOARD MEETING HAS A STANDING AGENDA ITEM ASKING FOR DISCLOSURES AS WELL

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE IRS FORM 990 IS REVIEWED BY APPROPRIATE STAFF IN THE FOUNDATION AND THEN PRESENTED TO THE AUDIT/FINANCE COMMITTEE FOR REVIEW AND RECOMMENDATION TO THE BOARD THE FULL BOARD OF DIRECTORS RECEIVE A COPY THROUGH THE SECURE BOARD PORTAL OF THE WEBSITE ONE WEEK PRIOR TO FILING THE AUDIT/FINANCE COMMITTEE RECEIVES A FULL COPY OF THE FORM 990 THE BOARD RECEIVES A PUBLIC INSPECTION COPY OF THE FORM 990 THAT DOES NOT INCLUDE THE CONFIDENTIAL LIST OF MAJOR DONORS OTHER THAN THIS LIST, THE FORM IS GIVEN IN ITS ENTIRETY TO THE BOARD AND COMMITTEE FOR REVIEW

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	AT THE START OF EACH FISCAL YEAR, THE CONFLICT OF INTEREST POLICY, ACCOMPANYING QUESTIONNAIRE, AND THE CODE OF ETHICS AND CONDUCT ARE DISTRIBUTED TO ALL BOARD MEMBERS TO COMPLETE DISCLOSURE OF CONFLICTS IS THE STANDING FIRST ITEM ON EVERY BOARD AGENDA THE BOARD OF DIRECTORS ARE INSTRUCTED AT EACH MEETING TO DISCLOSE IF THEY FEEL THERE IS A CONFLICT OF INTEREST ON ANY AGENDA ITEM BEFORE IT IS BROUGHT TO DISCUSSION THE BOARD AND/OR CEO QUESTION AND DETERMINE IF THE CONFLICT IS VALID, AND IF SO, THE BOARD MEMBER DOES NOT PARTICIPATE IN THE VOTE THE CONFLICT IS NOTED IN THE MINUTES IF THE ITEM IS LOCATED ON THE CONSENT AGENDA, IT IS REMOVED PRIOR TO THE VOTE TO APPROVE ALL ITEMS ON THE CONSENT AGENDA AND MOVED TO THE REGULAR AGENDA WHERE THE CONFLICT IS NOTED AND THE BOARD MEMBER WITH THE CONFLICT ABSTAINS FROM DISCUSSION AND VOTING THE EMPLOYEE CONFLICT OF INTEREST POLICY IS DISTRIBUTED TO KEY DECISION MAKING EMPLOYEES, REVIEWED, AND SIGNED ANNUALLY WITH UPDATES TO ANY POTENTIAL CONFLICTS OF INTERESTS NOTED POTENTIAL CONFLICTS OF INTEREST FOR STAFF MUST BE REPORTED TO THE PRESIDENT/CEO AND ARE HANDLED ACCORDING TO THE BOARD APPROVED POLICY REQUIREMENTS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	<p>SOUTHWEST INITIATIVE FOUNDATION'S EXECUTIVE COMPENSATION PROGRAM IS ADMINISTERED BY THE EXECUTIVE COMMITTEE OF THE BOARD THE EXECUTIVE COMMITTEE IS RESPONSIBLE FOR ESTABLISHING AND MAINTAINING A COMPETITIVE COMPENSATION PROGRAM FOR THE KEY EXECUTIVES OF THE FOUNDATION THE EXECUTIVE COMMITTEE UNDERTAKES AN ANNUAL REVIEW TO EVALUATE THE FOUNDATION'S EXECUTIVE COMPENSATION PROGRAM AGAINST THE COMPETITIVE MARKET USING INFORMATION GATHERED ON COMPARABLE POSITIONS WITHIN THE SPECIFIC INDUSTRY SECTOR AND FROM INDEPENDENTLY PUBLISHED SURVEYS THE EXECUTIVE COMMITTEE MEETS INDEPENDENT OF THE PRESIDENT/CEO TO DISCUSS PERFORMANCE RELATIVE TO THE POSITION DESCRIPTION DURING THESE DELIBERATIONS, THE COMMITTEE ALSO CONSIDERS INPUT OBTAINED FROM OTHER BOARD MEMBERS, STAFF, PROFESSIONAL ADVISORS, GRANT RECIPIENTS AND OTHER INFORMED COMMUNITY LEADERS THE DATE OF DELIBERATIONS AND SUBSEQUENT MEETING WITH PRESIDENT/CEO ARE DOCUMENTED IN THE MINUTES OF THE BOARD MEETING AND THE OUTCOME MAINTAINED IN THE CONFIDENTIAL PERSONNEL FILES OF THE FOUNDATION THE LAST REVIEW WAS COMPLETED IN 2018 FOR THE PRESIDENT/CEO, D ANDERSON</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	CONDENSED FINANCIAL STATEMENTS ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE NOT MADE PUBLIC

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	CHANGE IN AGENCY FUNDS 158,649 CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS 45,339

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2017

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

Name of the organization
SOUTHWEST INITIATIVE FOUNDATION

Employer identification number

41-1555592

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) AWSM LLC 15 3RD AVE NW HUTCHINSON, MN 55350 41-1555592	APARTMENT BLDG	MN	0		SOUTHWEST INITIATIVE FOUNDATION
(2) SWIF REAL ESTATE HOLDINGS LLC 15 3RD AVE NW HUTCHINSON, MN 55350 47-5210879	OFFICE BUILDING	MN	0		SOUTHWEST INITIATIVE 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 VII **Supplemental Information**

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