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Form	770

(Rev January 2020)

## **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047 2019

		of the Treasury nue Service		r social security numb <i>w.ir</i> s. <i>gov/Form</i> 990 for						Open to Inspe		
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	-					io, and end	anny			oloyer identification		
В		applicable	C Name of organization For	undation Seed Stocks	DIVISION					46-0230291		
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	Amende		Brookings, SD 57007	1 -46				111-1 1-11		ss receipts \$	1,068,610	
Ш	Applicat	ion pending	F Name and address of prince				i i		•	for subordinates?	_	
_	Tay aya	mat status	Jack Ingemansen, Mana  ☐ 501(c)(3) ☐ 501(d)		4947(a)	(1) or [] 507	(X	• •		ates included?		
÷		mpt status	501(c)(3) 501(c	c) ( 5 ) ◀ (insert no )	4947 (a)	(1) 01 524				list (see instructio	115)	
<u>-</u>	Website		Corporation Trust	Assessation Other b		I Vanuation		1944	<del></del>	n number ▶	SD	
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Š		provide pur	e seed stock of new var	ieties developed at Sc	outh Dakota S	tate Univer	Sity.					
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ne	١.,	Cantularita	una and amanta (Dant VIII	U l 45\				Prior Y	ear	Current	Tear	
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Revenue	9	-	ervice revenue (Part VII									
Be	10		income (Part VIII, colu			.9 9 202	ո⊟ն	3	34,944		37,053	
	11		nue (Part VIII, column (				<b>∪</b>	) //	393,107		369,879	
	12	Outai reven	ue-add lines 8 through	n 11 (must equal Part	VIII column	(A), line 12)	449	2	428,051		406,932	
	13	Grants and	similar amounts paid	(Part IX, column (A), I		DEN: U	/ <del>†</del>	+	353,675	5	132,314	
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ses	15		her compensation, emp	•		lines 5-10)	-		103,092	2	34,214	
ens	16a		al fundraising fees (Par							+		
Expenses	_ b		aising expenses (Part I							<del> </del>		
_	17		enses (Part IX, column (						187,205	<del>                                     </del>	222,264	
	18		nses. Add lines 13-17		column (A), II	ne 25)			643,972	1	388,792	
. 10	19	Hevenue le	enue less expenses. Subtract line 18 from line 12								18,140	
ts or		<b>~</b>	(D. 1.)( 1. 40)				Begi		urrent Year	1		
Sse	20		s (Part X, line 16) .						<u>2,945,866</u>		2,804,606	
Net Assets or Fund Balances	21		ties (Part X, line 26) .						516,996		357,596	
			or fund balances. Sub	tract line 21 from line	20	<u>·</u>			2,428,87 <u>0</u>	)	2,447,010	
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Ma	y tne IF	าว aiscuss t	this return with the prep	parer snown above?	(see instruct	ions) .				🔲 Yes	s ∐No	

Form **990** (2019)

DIO

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

Part	V Checklist of Required Schedules (continued)			
			Yes	No
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? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		<b>√</b>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		1
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		✓
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? If "Yes," complete Schedule L, Part I	25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		<b>√</b>
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).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		1
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		<b>✓</b>
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		<b>\</b>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<b>\</b>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		<b>√</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<b>\</b>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<b>✓</b>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		✓
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O.	38	<b>√</b>	
Part				
	Check if Schedule O contains a response or note to any line in this Part V			V
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0	1		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .   1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	<b>√</b>	

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	ļ		
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<u> </u>		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			١.
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		✓
b	If "Yes," enter the name of the foreign country ▶			
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<b>√</b>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<b>√</b>
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		✓
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		✓
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			<u> </u>
	and services provided to the payor?	7a		<b>✓</b>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<b>✓</b>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			,
	required to file Form 8282?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			···-
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		<b>√</b>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			<b>√</b>
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g 7h		<b>✓</b>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<del>- '''</del>		•
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		<b>√</b>
9	Sponsoring organizations maintaining donor advised funds.	۳		•
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		7
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		7
10	Section 501(c)(7) organizations. Enter:	<del>                                     </del>		<b>-</b>
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
_	against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<b>\</b>
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<b>\</b>
b	if "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O .	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		<b>✓</b>
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		✓
	If "Yes." complete Form 4720, Schedule O.	1	1	

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.			
	Check if Schedule O contains a response or note to any line in this Part VI			
Section	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year .			
	If there are material differences in voting rights among members of the governing body, or	1		
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent . 1b 5			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			<b>-</b>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	3		<b>✓</b>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		<b>V</b>
6	Did the organization have members or stockholders?	6		<del>-</del>
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	⊢	-	<del>-</del>
7a	one or more members of the governing body?	7a		✓
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			,
_	stockholders, or persons other than the governing body?	7b		<del>                                     </del>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	<u> </u>	_
b	Each committee with authority to act on behalf of the governing body?	8b	1	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		✓
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven	<u>ue C</u>	ode.)	
_			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		1
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		✓_
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			لب
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		<b>✓</b>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		<u> </u>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		1
13	Did the organization have a written whistleblower policy?	13		<b>√</b>
14	Did the organization have a written document retention and destruction policy?	14		<b>√</b>
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		7
b	Other officers or key employees of the organization	15b		<b>V</b>
U	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			$\dot{\Box}$
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		$\overline{}$
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			1
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		7
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-1			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  ☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain on Schedule O)	•		
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict o and financial statements available to the public during the tax year.	fınter	est p	olicy,
20	State the name, address, and telephone number of the person who possesses the organization's books and red	cords	<b>&gt;</b>	
	Jack Ingemansen, Box 2125, SDSU Brookings, SD 57007 605-688-5418			

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

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

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

☐ Check this box if neither the organization nor	any relate	d orga	anız	atic	on c	ompe	nsa	ted any current	officer, director,	or trustee.
(A) Name and title	(B) Average hours	box,	unles	Pos neck ss pe	rson	e than on the state of the stat	n an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week (list any hours for related organizations below dotted line)	Individua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Jack Ingemansen, Manager	45	1		1		1		93,667	. 0	(
(2) David Wright, Chairman	1	1						0	0	(
(3) Leon Koeppe, Vice-Chairman	11	1						o	0	(
(4) Jon Kleinjan, Secretary-Treasurer	11	1						o	o	(
(5) Barry Dunn	1	1						0	o	
(6) John Kelefer	1	1						0	0	
(7) Karla Trautman	1	1						0	o	
(8) William Gibbons	1	1						0	0	
(9) Lee Brockmueller	11	/						0	0	
(10) Henry Roghair	1	1						0	0	
(11) Chris Lee	1	1						0	0	
(12) Evan Salverson	1	1						0		
(13)		Ť								
(14)										

Part	VII Section A. Officers, Directors,	Trustees,	Key I	Emi	plo	yee	s, an	ıd F	lighest Compe	nsated Emplo	yees (	contir	nued,
						C)							
	(A)	(B)	(do n	ot ch		ition		nna	(D)	(E)		(F)	
	Name and title										ted am	ount	
		hours	office				tor/trus		compensation from the	compensation from related		f other	
		per week (list any	요물	Б	오	6	육포	Ъ	organization	organizations		pensati om the	
		hours for	d k	贫	Officer	y eq	D a	Former	(W-2/1099-MISC)	(W-2/1099-MISC)		ızatıon	
		related	당교	ğ		Key employee	8 8	7			related (	organiz	ations
		organizations below	) ` <u>ह</u>	altr	İ	ĕ	ğ						
		dotted line)	Individual trustee or director	Institutional trustee		"	Highest compensated employee						
				ď			ted						
(15)													
3			1			1							
(16)	·												
32.22	·	<b></b>	1										
(17)							•						
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(24)		<b></b>	!										
(OE)			<del></del>	-	}—			-					
(25)		<del> </del>	-										
46	Subtotal	1	<u> </u>						00.007				
1b		 VII Contin	 - A	•	•		•		93,667	0			0
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)			•	•	•	•		00.007				
				•				N	93,667	0 0 000			0
2	Total number of individuals (including but		ı to tn	ose	IIST	ea	above	e) W	no receivea more	e than \$100,000	Οĭ		
	reportable compensation from the organi	zation <b>–</b>										T	
_			_									Yes	No
3	Did the organization list any former of							mpi		t compensated			لبِ
	employee on line 1a? If "Yes," complete 3							•			3		<u>√</u>
4	For any individual listed on line 1a, is the											1	
	organization and related organizations				000	? /:	f "Ye	s, "	complete Sched	fule J for such	_		لب
	ındıvıdual						•		, .		4		<b>✓</b>
5	Did any person listed on line 1a receive of												
	for services rendered to the organization	? If "Yes," c	ompl	ete .	Scr	edu	ıle J f	or s	uch person .	<u> </u>	5		<u>√</u>
	on B. Independent Contractors												
1	Complete this table for your five high												
	compensation from the organization Repo	ort compen	sation	ı for	the	ca	lenda	r yea	ar ending with or	within the organ	ization'	s tax y	year.
	(A)								(B)		(C)		
	Name and business add	ress							Description of serv	ices (	Compens	ation	
								<u> </u>					
								<u> </u>					
2	Total number of independent contracto							th	ose listed above	e) who			
	received more than \$100,000 of compens	ation from t	he or	ganı	zatı	on l	<u> </u>		0				_
	· · ·												

Part	VIII	Statement of Revenue Check if Schedule O contains a resp	onse or note to ar	ny line in this Pa	ırt VIII....		🗆
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts ts	1a	Federated campaigns 1	la				
ran	b	Membership dueş	lh				
Contributions, Gifts, Grants and Other Simi ar Amounts	С	Fundraising events 1	lc				
ifts	d		lự	•			
ς Ε	e	•	le				
Sil	f	All other contributions, gifts, grants,					
outi The		<del>-</del>	1f				
	g	Noncash contributions included in lines 1a–1f	- c				
Sor and	۱ ,	Total. Add lines 1a–1f	ig  \$				
	h	Total. Add lines 1a-11	Business Code				
ķ	2a			_			
Z.	b						
gram Ser Revenue	Ç						
am eve	d			-			
Program Service Revenue	е						
P	f	All other program service revenue .			_		
	g	Total. Add lines 2a-2f					
	3	Investment income (including divide	nds, interest, and				
		other similar amounts) .		37,053	37,053	_	
	4	Income from investment of tax-exempt	bond proceeds				
	5	Royalties	(ıi) Personal		_	-	<u> </u>
	6a	Gross rents 6a	(ii) Fersoriai				
	b	Less. rental expenses 6b					
	c	Rental income or (loss) 6c					
	d	Net rental income or (loss)	•				
	7a	Gross amount from (i) Secunties	(ii) Other				
	,,,	sales of assets					
		other than inventory 7a					
ě	b	Less. cost or other basis					
Revenue		and sales expenses . 7b					
ž	С	Gain or (loss) 7c					
	d	Net gain or (loss)	<u> ▶</u>			_	
Othe	8a	Gross income from fundraising					
J		events (not including \$ of contributions reported on line					
			Ba				
	h	·	Bb Bb	1			
	c	Net income or (loss) from fundraising e					
	9ā	Gross income from garning					
		•	a l				
	b	Less: direct expenses	)b				
	С	Net income or (loss) from gaming activ	/ities ▶	. —			
	10a	Gross sales of inventory, less				1	
		<b></b>	0a 1,031,557				
	i	<u> </u>	0b 661,678			<u> </u>	
	С	Net income or (loss) from sales of inve		369,879	369,879		
Sno	110		Business Code		<del></del>		
nec	11a b						<del> </del>
Miscellaneous Revenue	C						
Sc.	d	All other revenue	-				
Σ	e	T. ( ) A.(.) ( )	<b>&gt;</b>		-		
	12	Total revenue. See instructions .		406,932	406,932		

Sectio	n 501(c)(3) and 501(c)(4) organizations must comp	olete all columns All	other organizations	must complete col	umn (A).
	Check if Schedule O contains a response	e or note to any line	in this Part IX .		
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	132 ,314	132,314		
2	Grants and other assistance to domestic individuals. See Part IV, line 22			مد	,
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
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	18,366	18,366		
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	15,848	15,848		
10	Payroll taxes	·	•		
11	Fees for services (nonemployees)				
а	Management				<u></u>
b	Legal	·			
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				<u> </u>
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	21,171	21,171		
12	Advertising and promotion				
13	Office expenses	4,718	4,718	-	
14	Information technology			<del></del>	
15	Royalties				
16	Occupancy	18,152	18,152		
17	Travel	11,870	11,870		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	221	221		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	116,134	116,134		
23	Insurance	1,981	1,981		
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
а	Farm Supplies	1,930	1,930		-
b	Lab Services	3,887	3,887		
С	Freight	13,816	13,816		
d	Repairs	28,384	28,384		
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	388,792	388,792		
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 F [] if				
	following SOP 98-2 (ASC 958-720)				1

Form 990 (2019) Page 11 Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X . . . . . (A) (B) End of year Beginning of year 1 Cash-non-interest-bearing . 1 2 Savings and temporary cash investments . 1,620,504 2 1,402,802 3 Pledges and grants receivable, net 3 4 4 Accounts receivable, net . . . . 35,094 54,789 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . . 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) . 6 Notes and loans receivable, net . 7 8 Inventories for sale or use 8 191,673 122,074 9 Prepaid expenses and deferred charges 60,840 Land, buildings, and equipment cost or other 10a basis. Complete Part VI of Schedule D . . . 10a Less: accumulated depreciation . . . 10b 1,037,755 10c 2.397,302 1,224,941 11 Investments—publicly traded securities . . . . 11 12 12 Investments—other securities See Part IV, line 11 13 Investments - program-related See Part IV, line 11. 13 Intangible assets 14 . . . . 14 15 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) . 16 2,804,606 2.945.866 17 Accounts payable and accrued expenses . . 17 166,996 107,596 18 Grants payable . . . . . 350,000 18 250,000 19 Deferred revenue . . 19 20 20 Tax-exempt bond liabilities . . . . . . 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D . . . 22 Loans and other payables to any current or former officer, director, Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% 22 controlled entity or family member of any of these persons . . . 23 Secured mortgages and notes payable to unrelated third parties 23 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 25 26 **Total liabilities.** Add lines 17 through 25 26

Net assets with donor restrictions		28	<u> </u>
Organizations that do not follow FASB ASC 958, check here ▶ ✓ and complete lines 29 through 33.			
Capital stock or trust principal, or current funds		29	<u> </u>
Paid-in or capital surplus, or land, building, or equipment fund		30	
Retained earnings, endowment, accumulated income, or other funds	2,428,870	31	2,447,010
Total net assets or fund balances		32	

Organizations that follow FASB ASC 958, check here ▶ □

Total liabilities and net assets/fund balances . . . . . .

and complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

**Net Assets or Fund Balances** 

27

28

Form **990** (2019)

2,804,606

357,596

516,996

2.945.866

27

m 990 (2019)	•	Page <b>12</b>

Total expenses (must equal Part IX, column (A), line 25)	Form 98	90 (2019)			P	age 12
1 Total revenue-(must equal Part VIII, column (A), line 12)	Part	XI Reconciliation of Net Assets				
2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses. Subtract line 2 from line 1 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain on Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 11 Financial Statements and Reporting 12 Check if Schedule O contains a response or note to any line in this Part XII 13 Accounting method used to prepare the Form 990		Check if Schedule O contains a response or note to any line in this Part XI				. 🗆
Revenue less expenses. Subtract line 2 from line 1  Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	1	Total revenue (must equal Part VIII, column (A), line 12)	1		4	06,932
Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	2	Total expenses (must equal Part IX, column (A), line 25)	2		3	88,792
Separate basis  Consolidated basis  Both consolidated and separate basis  Consolidated basis  Consolidated basis  Consolidated basis  Consolidated basis  Consolidated basis  Consolidated basis  Consolidated basis  Consolidated basis  Consolidated	3	Revenue less expenses. Subtract line 2 from line 1	3			18,140
6 Donated services and use of facilities 6 7 Investment expenses 7 8 Prior period adjustments 8 9 Other changes in net assets or fund balances (explain on Schedule O) 9 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 2,44:  Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII	4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		2,4	28,870
7 Investment expenses	5	Net unrealized gains (losses) on investments	5			
8 Prior period adjustments	6	Donated services and use of facilities	6			
9 Other changes in net assets or fund balances (explain on Schedule O)	7	Investment expenses	7			
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))    Part XIII   Financial Statements and Reporting   Check if Schedule O contains a response or note to any line in this Part XII	8	Prior period adjustments	8			
32, column (B))  Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII  1 Accounting method used to prepare the Form 990	9	Other changes in net assets or fund balances (explain on Schedule O)	9			
Check if Schedule O contains a response or note to any line in this Part XII  Check if Schedule O contains a response or note to any line in this Part XII  Accounting method used to prepare the Form 990:   Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  Were the organization's financial statements compiled or reviewed by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  Separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  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 on Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
Check if Schedule O contains a response or note to any line in this Part XII			10	******	2,4	47,010
1 Accounting method used to prepare the Form 990.  Accrual  Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant?	Part					
1 Accounting method used to prepare the Form 990'		Check if Schedule O contains a response or note to any line in this Part XII			<u> </u>	. 🗆
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant?					Yes	No
Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant?	1	Accounting method used to prepare the Form 990 <sup>.</sup> ☐ Cash ☑ Accrual ☐ Other				
Were the organization's financial statements compiled or reviewed by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  b Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  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 on Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			xplaın	ın	1	
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  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 on Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					.	
reviewed on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  b Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	2a					✓
<ul> <li>Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis</li> <li>b Were the organization's financial statements audited by an independent accountant?</li> <li>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</li> <li>☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis</li> <li>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?</li> <li>If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.</li> <li>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?</li> <li>b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the</li> </ul>			npiled	or	1	
b Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  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 on Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		· _ · _ · _				
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separate basis, consolidated basis, or both  Separate basis  Consolidated basis  Both consolidated and separate basis  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	b	Were the organization's financial statements audited by an independent accountant?		2b	ļ	1
□ Separate basis □ Consolidated basis □ Both consolidated and separate basis  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		· · · · · · · · · · · · · · · · · · ·	ted on	a	İ	
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 on Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					i	
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 on Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		<del>-</del> · · · · · · · · · · · · · · · · · · ·			-	. —_
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	С					
Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?					-	ļ .
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?			kplain i	on		,
Single Audit Act and OMB Circular A-133?				<u> </u>	-	.
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	3а		rth in t			,
	_	· ·			<del></del>	<b>-</b>
required audit or audits, explain why on Schedule U and describe any steps taken to undergo such audits	b					
required addition about the control of the control		required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a	iuaits .	30		<u> </u>

Form **990** (2019)

# SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

### **Supplemental Financial Statements**

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

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Obd the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for chanitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<u>Found</u>	ation Seed Stocks Division		46-0230291
Total number at end of year	Par			ds or Accounts.
1 Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) 4 Aggregate value of grants from (during year) 4 Aggregate value of grants from (during year) 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? 6 Did the organization may be controlled the conservation according to the organization and the conservation grants and one of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?  Purpose(s) of conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  Purpose(s) of conservation easements held by the organization (check all that apply).  Preservation of land for public use (for example, recreation or education)  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 in the list day of the tax year.  a Total number of conservation easements.  b Total acreage restricted by conservation easements.  c Number of conservation easements on a certified historic structure included in (a)  2b  1 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 easements in located   5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year   5 Staff and volunteer house devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements that describes the organization elected, as permitted under the Sta Scs (5 st, per or in strevenue statement and balance sheet work of art, historical treasures, or other simil		Complete if the organization answered "	Yes" on Form 990, Part IV, line 6.	
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and section 170(h)(4)(B)(ii)?		·		4.70(1)(4)(5)()
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 FASB ASC 958, not to report in its revenue statement and balance sheet work 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 FASB 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 services provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part VIII, line 1	8	·	• •	
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n Asseis inclinded in Form 990. Part X	b	Assets included in Form 990, Part X		• \$

Part	t III Organizations Maintair	ing Co	llections of	Art, His	torical 1	<b>Treasures</b>	, or Ot	ther Similar A	Assets (con	inued)
3	Using the organization's acquisition collection items (check all that ap		ession, and ot	her reco	rds, chec	k any of th	e follov	ving that make	significant u	se of its
а	☐ Public exhibition			d	☐ Loan	or exchang	je progr	ram		
b	☐ Scholarly research									
С	☐ Preservation for future generat	ions								
4	Provide a description of the organ XIII.	nızatıon	's collections a	and expl	ain how t	hey further	the org	ganization's ex	empt purpos	e ın Part
5	During the year, did the organiza	tion soli	icit or receive	donation	ns of art,	historical ti	reasure	s, or other sim	nılar	
	assets to be sold to raise funds ra	ther tha	in to be mainta	ained as	part of the	e organızat	ion's co	llection? .	. 🗌 Yes	☐ No
Part					=					
	Complete if the organiza 990, Part X, line 21.	tion an	swered "Yes	" on For	m 990, I	Part IV, line	e 9, or	reported an a	amount on F	orm
	Is the organization an agent, true included on Form 990, Part X? .		•							□ No
b	If "Yes," explain the arrangement	in Part )	KIII and comple	ete the fo	ollowing to	able <sup>.</sup>	_			
							<u> </u>	<del></del>	Amount	
C	Beginning balance						10	_		
d	Additions during the year			•	•		1d	-		
e	Distributions during the year .			•	•		1e			
f	Ending balance						1f			
2a	Did the organization include an ar								•	∐ No
_	If "Yes," explain the arrangement t V Endowment Funds.	III Fait 7	MII. CHECK HER	e ii tile e	хріапаціо	II IIas Deeli	provide	ed on Fart Alli		<u> </u>
ı aı	Complete if the organiza	tion an	swered "Yes	" on For	m 990 l	Part IV line	e 10			
	Complete ii the organiza		a) Current year		or year	(c) Two year		(d) Three years ba	ack (e) Four ye	ars back
1a	Beginning of year balance			(=)	,	(0) )		(0)	uon (c) i cai ye	
b	Contributions				-			_	<del></del>	
c	Net investment earnings, gains, a losses									
d	Grants or scholarships	<del></del>				<del> </del>	_		_	
e	Other expenditures for facilities a	nd						-	<del></del>	
	programs							_		
f	Administrative expenses	·							<del></del>	
g	End of year balance									
2	Provide the estimated percentage				e (line 1g	j, column (a	ı)) neia a	as:		
a	Board designated or quasi-endow	mieni 🕨		%						
b	Permanent endowment		%							
С	The percentages on lines 20, 2h	%	bould squal 1	000/						
•	The percentages on lines 2a, 2b, a									
3a	Are there endowment funds not a organization by.	n the po	ssession of th	ie organi	zation the	at are neid	and ad	ministered for		es No
										3 110
	(i) Unrelated organizations .								.  3a(i)	<del></del>
_	(ii) Related organizations . If "Yes" on line 3a(ii), are the relate	· ·			rad an Ca	 shodula D2			. 3a(ii)	-
ь 4	Describe in Part XIII the intended						•		. 3b	
Part				on s ende	WITH CITE II	<u> </u>				
i ai t	Complete if the organiza			" on For	m 990 F	Part IV line	e 11a s	See Form 99	∩ Part Y lin	o 10
	Description of property	tion an	(a) Cost or ot	-		or other basis		Accumulated	(d) Book v	
	beautiful of property		(investm			ther)		epreciation	(d) Book v	alue
	Land		1			<del>-</del>			<u> </u>	
b	Buildings					2,352,069		1,324,356	1	,027,713
c	Leasehold improvements .					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		.,,	•	,,,,,,,,,,
d	Equipment					1,270,174		1,072,946		197,228
е	Other							,		
Total.	Add lines 1a through 1e. (Column	(d) must	equal Form 95	90, Part 2	X, column	(B), line 10	Oc.)	<b>&gt;</b>	1	,224,941

Part VII	Investments – Other Securities. Complete if the organization answered "Yes" on Fo	erm 990, Part IV, line	e 11b. See Form 990, Part X, line 1	2.
	(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 h	ield equity interests			
(3) Other		_		
(A)				
	·			
(E)			-	
		-		
	***************************************	-		
(H)	mp (b) must equal Form 000. Part V. cal. (P) line 12.)			
Part VIII	mn (b) must equal Form 990, Part X, col (B) line 12.) Investments—Program Related.		L	
rait viii	Complete if the organization answered "Yes" on Fo	rm 990 Part IV line	e 11c. See Form 990. Part X. line 1	3
	(a) Description of investment	(b) Book value	(c) Method of valuation	<u>o.</u>
	(a) Description of investment	(b) Book value	Cost or end-of-year market value	
(1)				-
(2)				
(3)				
(4)				
(5)				
(6)				٠
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col (B) line 13.) . ▶			
Part IX	Other Assets.  Complete if the organization answered "Yes" on Fo	rm 990, Part IV, line	e 11d. See Form 990, Part X, line 1	5.
	(a) Description		(b) Book value	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	mn (b) must equal Form 990, Part X, col. (B) line 15.)			
Part X	Other Liabilities. Complete if the organization answered "Yes" on Fo	rm 990, Part IV, line		,
1.	line 25.	<del></del>	th Pack with	
(1) Federal in	(a) Description of liability		(b) Book value	
	come taxes			
(2)				
(3)				
(4)		·- ·-		
(5)		<del></del>		
<u>(6)</u> (7)				
<u>(7)</u> <u>(8)</u>	<del></del>			
(9)		<u> </u>		
	mn (b) must equal Form 990, Part X, col (B) line 25.)		▶	
	uncertain tax positions In Part XIII, provide the text of the footr	note to the organization	's financial statements that reports the	
organization's	s liability for uncertain tax positions under FASB ASC 740. Chec	k here if the text of the	footnote has been provided in Part XIII	

Part	XI Reconciliation of Revenue per Audited Financial Stateme	ents '	With Revenue per	Retur	n.
	Complete if the organization answered "Yes" on Form 990,	Part l	V, line 12a.		
1	Total revenue, gains, and other support per audited financial statements			1	· ·
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b	**	1	
С	Recoveries of prior year grants	2c		1	
d	Other (Describe in Part XIII.)	2d		]	
е	Add lines 2a through 2d			2e	
3	Subtract line <b>2e</b> from line <b>1</b>			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines <b>4a</b> and <b>4b</b>			4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	
Part				er Retu	urn.
	Complete if the organization answered "Yes" on Form 990,	Part I	V, line 12a.		
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a		]	
b	Prior year adjustments	2b		]	
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line <b>2e</b> from line <b>1</b>			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		]	
b	Other (Describe in Part XIII.)	4b		<u>  </u>	
С	Add lines <b>4a</b> and <b>4b</b>	•		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 18.)		4c 5	
5 Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.		,	5	
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.  le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; P	art IV, lines 1b and 2b	5 o; Part \	
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.	d 4; P	art IV, lines 1b and 2b	5 o; Part \	
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.  le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; P	art IV, lines 1b and 2b	5 o; Part \	
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.  le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; P	art IV, lines 1b and 2b	5 o; Part \	
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.  le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; P	art IV, lines 1b and 2b	5 o; Part \	
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.  le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; P	art IV, lines 1b and 2b	5 o; Part \	
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.  le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; P	art IV, lines 1b and 2b	5 o; Part \	
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.  le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; P	art IV, lines 1b and 2b	5 o; Part \	
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.  le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; P	art IV, lines 1b and 2b	5 o; Part \	
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.  le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; P	art IV, lines 1b and 2b	5 o; Part \	
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.  le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; P	art IV, lines 1b and 2b	5 o; Part \	
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5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.  le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; P	art IV, lines 1b and 2b	5 o; Part \	
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.  le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; P	art IV, lines 1b and 2b	5 o; Part \	
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.  le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; P	art IV, lines 1b and 2b	5 o; Part \	
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.  le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; P	art IV, lines 1b and 2b	5 o; Part \	
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.  le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; P	art IV, lines 1b and 2b	5 o; Part \	
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.  le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; P	art IV, lines 1b and 2b	5 o; Part \	
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.  le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; P	art IV, lines 1b and 2b	5 o; Part \	
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.  le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; P	art IV, lines 1b and 2b	5 o; Part \	
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.  le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; P	art IV, lines 1b and 2b	5 o; Part \	
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.  le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; P	art IV, lines 1b and 2b	5 o; Part \	
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.  le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; P	art IV, lines 1b and 2b	5 o; Part \	
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.  le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; P	art IV, lines 1b and 2b	5 o; Part \	
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.  le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; P	art IV, lines 1b and 2b	5 o; Part \	

#### SCHEDULE I (Form 990)

# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

2019

Schedule I (Form 990) (2019)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

► Attach to Form 990. ► Go to www.irs.gov/Form990 for the latest information. Open to Public Inspection
Employer identification number

Foundation Seed Stocks Division							46-0230291
Part I General Information	on Grants and	Assistance					
<ol> <li>Does the organization maintain the selection criteria used to a Describe in Part IV the organization.</li> </ol>	award the grants zation's procedu	or assistance? res for monitoring	the use of grant fu	nds in the United	States		
Part II Grants and Other As Part IV, line 21, for any	sistance to Do y recipient that	mestic Organiz received more the	ations and Dom nan \$5,000 Part	nestic Governm Il can be duplic	nents. Complete if ated if additional s	the organization ai pace is needed	nswered "Yes" on Form 990
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) SDSU	46-600364	State of	353,675				Research and Scholarships
(2)		South Dakota					
(3)							
(4)							
(5)	-						
(6)		*****					
(7)				-			
(8)							
(9)							
(10)							
(11)							
(12)						*******	
2 Enter total number of section 3 Enter total number of other or				ine 1 table	1		1 0

Cat No 50055P

Schedule I (Form 990) (2019)

#### **SCHEDULE O** (Form 990 or 990-EZ)

#### Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047 2019 Open to Public

Inspection

**Employer identification number** 

46-0230291

Department of the Treasury Internal Revenue Service Name of the organization

Foundation Seed Stocks Division

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

Part V1, Line 11b. The Foundation Seed Stock manager prepares the 990 form. A copy is provided to the SDSU Accounting Department for review one week prior to filing. Part VI, I ine 19 The financial statements and governing documents are not published, but would be available upon request. The Foundation Seed Stocks Division Board of Directors do not have a conflict of interest policy. Part V, Line 1a, 1b, and 1c. IRS filings and tax compliance for payments is provided by South Dakota State University. Part V, Line 2a and 2b. Reporting and transmittal of employee Wage and Tax Statements is provided by South Dakota State University