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## 11323000

Form

Department of the Treasury Internal Revenue Service

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

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

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

2008 Open to Public Inspection

<u>A</u>	For the 200	8 calendar y	ear, or tax year beginning 7/01/08 , and ending 6/30/09		
В	Check if applica		c Name of organization Sicangu Oyate Ho	D Empi	oyer identification number
Ш	Address change	e label or	St. Francis School		
П	Name change	print or	Doing Business As	23-	<u>-7116414</u>
ᅥ	Initial return	type.	Number and street (or P O box if mail is not delivered to street address) Room/suite	E Telep	hone number
님		See Specific	P.O. Box 379		
닏	Termination	Instruc-	City or town, state or country, and ZIP + 4	G Gross rec	eipts \$ 10,176,129
Ш	Amended return	n tions.	St. Francis SD 57572	_	
$\Box$	Application pen	<sub>iding</sub> F Nam	e and address of principal officer	H(a) Is this	a group return for
_				affilia H(b) Are a	
				includ	
				→ If "No	," attach a list (see instructions)
<u></u>	Tax-exempt		501(c) ( <b>3</b> ) ◀ (insert no )   4947(a)(1) or   527	⊢	
<u>J</u>	Website:			H(c) Group	exemption number
*****	Type of organiz				M State of legal domicile
	Part I	Summa	<del> </del>		
	1	-	the organization's mission or most significant activities		
9	151	DUCATIO	N		
nan					
Activities & Governance			Ether and the 25% of the co	- oto	
တိ	2 Che		if the organization discontinued its operations or disposed of more than 25% of its assessment of the organization discontinued its operations or disposed of more than 25% of its assessment of the organization discontinued its operations or disposed of more than 25% of its assessment of the organization discontinued its operations or disposed of more than 25% of its assessment of the organization discontinued its operations or disposed of more than 25% of its assessment of the organization discontinued its operations or disposed of more than 25% of its assessment of the organization discontinued its operations or disposed of more than 25% of its assessment of the organization discontinued its operations.	3	7
<b>ಿ</b> ರ	3 Num		g members of the governing body (Part VI, line 1a)	4	7
ij	4 Num	•	endent voting members of the governing body (Part VI, line 1b)	5	314
ξį	5 Tota		employees (Part V, line 2a)	6	0
ĕ	70 Tota		volunteers (estimate if necessary) lated business revenue from Part VIII, line 12, column (C)	7a	
				7b	0
_	b Net	unrelated bt	Isiness taxable income from Form 990-T, line 34		Current Year
٠.	8 Cont	tributions ar	d grants (Part VIII, line 1h)	10,991	9,816,434
an u	l .			94,351	37,526
				23,026	81,780
ď			Part VIII, column (A), lines 5, 6d, 80, 9c, 10g, and, 11e)	61,949	153,262
	12 Tota	al revenue-	add lines 8 through 11 (musi equal Part VIII column (A), line 12) 12, 2	90,317	10,089,002
			ar amounts paid (Part IX) column (A), lines 1-3)		
	4 Bene	efits paid to	or for members (Part IX/cblumn (A), line 4) 2011   \infty		
Ś	5 Sala	aries, other o		68,266	6,914,879
benses	6a Prof	essional fun	draising fees (Part IX, column A) line (1.1e)		
		al fundraising	expenses (Part IX, column (D), line 25)		
Щ	ar our		V 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	45,121	4,076,566
				13,387	10,991,445
_	Rev	enue less e	penses Subtract line 18 from line 12 1, 3 Beginnin	76,930	- 902,443 End of Year
ts o	e co	danst- /C	04 1	09,263	23,275,944
Net Assets or	e 20 lota		0.6	99,857	2,768,980
Ę.	21 10ta		0.1 4	09,406	
	Part II		re Block	03/100	20/300/301
	ent n		Ities of perjury, I declare that I have examined this return, including accompanying schedules and statements	and to the be	est of my knowledge
		and belief,	t is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which	h preparer ha	any knowledge
Si	gn	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Invold & Condon	يعملا	2-28-11
	ere	Signat	ure of officer	Date	· · · · · · · · · · · · · · · · · · ·
			rold E. Condon		
		<b>—</b>	r print name and title	•	
		Preparer's	Date Che		Preparer's identifying number
Pa	aid	signature	$\sim$	loyed 🕨 🗌	see instructions) P00206450
	eparer's		BLAND & ASSOCIATES, P.C.	EIN	<b>▶</b> 47-0698853
Us	se Only	Firm's nam if self-emple	C712 W DODGE BOAD CULTER 200	Phone	
		address, ar	77	no Þ	402-397-8822
Ma	ay the IRS d	liscuss this i	eturn with the preparer shown above? (see instructions)		Yes No
DA	A For Priv	acy Act and	Paperwork Reduction Act Notice, see the separate instructions.	$\overline{\alpha}$	Form 990 (2008)

Pa	rt III S	tatement of Program S	Service Accomplishments (see instruction	ns)	
1	Briefly descr	ibe the organization's missio	n		
E	DUCATIO	ON			
	D.J.45		South reason conversed distinct the vector which were not	t listed on	<del></del>
	_	m 990 or 990-EZ?	ficant program services during the year which were not	t listed on	Yes X No
	-	cribe these new services on	Schedule O		les Et 140
2			or make significant changes in how it conducts, any pro	ogram	
3	services?	mization cease conducting, o	i make significant changes in now it conducts, any pro	gram	Yes X No
		cribe these changes on Sche	edule O		
4		<del>-</del>	ents for each of the organization's three largest program	n services by expenses	
			tions and section 4947(a)(1) trusts are required to repo		
			and revenue, if any, for each program service reported		
	(Code		9,634,576 including grants of \$	) (Revenue \$	)
			DUCATION TO GRADES K-12 ON	THE	
R	OSEBUD	INDIAN RESERV	ATION.		
			·		
	· · ·			\ (Payania ¢	
4b	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	,
4c	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	-	/m · · · ·	fortile O	·	
4d		am services (Describe in Scl		Pavanua ¢	,
4-	(Expenses	\$ am service expenses ▶ \$		Revenue \$	
46	rotal progr	ain service expenses	Ty out a fundat equal that IX, Line		Form <b>990</b> (2008)

	<del>/</del>		
	Checklist of		
	Chaabliat at	DAMILIFAN	Chadillee
Part IV	CHECKISLO	Reduired 3	Lileuules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1_	_X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete	١.		x
_	Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to			
U	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			
	Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, 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		<u>X</u>
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 257 If "Yes," complete Schedule D,			
	Parts VI, VIII, IX, or X as applicable	11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return		v	
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a	Λ.	x
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?  Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	144		
b	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	1		
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		_X_
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		<u> </u>
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		<u> </u>
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			v
04-	Schedule J	23		<u> </u>
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 questions			
	24b–24d and complete Schedule K. If "No," go to question 25	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	The state of the s			
•	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	The state of the s			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_X_
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified			
	person from a prior year? If "Yes," complete Schedule L, Part I	25b		_ <u>X</u> _
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			7,
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or			х
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		990	(2008)
		LOIL		(2000)

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Part IV

organization? If "Yes," complete Schedule R, Part V, line 2

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

			Yes	No_
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			
	employee), or an indirect business relationship through ownership of more than 35% in another entity			
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			
	Part IV	28 <u>a</u>		X
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
	complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
•	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
<b>0</b> 2	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
33	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
J4	III, IV, and V, line 1	34		x
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	<del></del>		
JO		35		х
20	Schedule R, Part V, line 2	33		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			

Form **990** (2008)

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ra	Statements Regarding Other INST Imigs and Tax Compilance					1
	The state of the s				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	4.	84			
	U.S. Information Returns. Enter -0- if not applicable	1a 1b	0			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  Did the organization comply with backup withholding rules for reportable payments to vendors and rej					
С		ontabi	е	1c		x
2-	gaming (gambling) winnings to prize winners?			10		1
28	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	314			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns			2b	x	İ
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	113.				$\vdash$
	instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covere	d by				
••	this return?	,		3a	1	х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authori	tv			
	over, a financial account in a foreign country (such as a bank account, securities account, or other fin		•			
	account)?			4a		х
b	If "Yes," enter the name of the foreign country					
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign	Bank				
	and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	tion?		5b		X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity					
	Regarding Prohibited Tax Shelter Transaction?			5c		
	Did the organization solicit any contributions that were not tax deductible?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or				
	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).	4L				
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more	tnan		70		x
L	\$75?			7a 7b		<u> </u>
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7.5		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	3		7c		x
а	If "Yes," indicate the number of Forms 8282 filed during the year	7d		70		-
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p					
·	benefit contract?		•	7e		x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri	act?		7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		х
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0	as				
	required?			7h		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sec	ion				
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a spon	soring				
	organization, have excess business holdings at any time during the year?			8		X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		X
10	Section 501(c)(7) organizations. Enter		t e			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
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	ایرا				
а	Gross income from members or shareholders	11a		<del> </del>		
b	Gross income from other sources (Do not net amounts due or paid to other sources against	,, .				
40-	amounts due or received from them )  Section 4947(a)(4) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	11b	<u> </u>	12a		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form If "Yes," enter the amount of tax-exempt interest received or accrued during the year	10417		124		<b></b>
O	it res, either the amount of tax-exempt interest received of accrued during the year	IZU		Form	990	(2008)
						\V

23-7116414 Form 990 (2008) Sicangu Oyate Ho Page 6 Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.) Section A. Governing Body and Management Yes No For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions Enter the number of voting members of the governing body 7 Enter the number of voting members that are independent 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct X supervision of officers, directors or trustees, or key employees to a management company or other person? 3 X 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a material diversion of the organization's assets? 5 6 Does the organization have members or stockholders? 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a 7b b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X The governing body? 8a X b Each committee with authority to act on behalf of the governing body? 8b Х Does the organization have local chapters, branches, or affiliates? 9a If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 9b 10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations X 10 must describe in Schedule O the process, if any, the organization uses to review the Form 990 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at 11 the organization's mailing address? If "Yes," provide the names and addresses in Schedule O X 11 Section B. Policies No 12a X 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give X rise to conflicts? 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 12c Х 13 Does the organization have a written whistleblower policy? 13 14 Does the organization have a written document retention and destruction policy? 14 X 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 a The organization's CEO, Executive Director, or top management official? 15a b Other officers or key employees of the organization? 15b X Describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X with a taxable entity during the year? 16a b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed **None** 17 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website Another's website X Upon request 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public State the name, physical address, and telephone number of the person who possesses the books and records of the 20 organization > HAROLD CONDON P.O. BOX 379

SD 57572

ST FRANCIS

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated 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. Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A) Name and Title	(B) Average	(C) (D) (E) Position (check all that apply) Reportable Reportable								( <b>F</b> ) Estimated
Name and Title	hours per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Larry B Park						I				
Superintende	40					X		93,513	0	0
Richard M. B								75 207		•
Principal	40			ļ		X		75,387	0	0
Andrew L. Re						\ \ **		77 470	^	^
Administrato	40	$\vdash$				X	<u> </u>	71,479	0	0
Danielle L.		•				\ •		71 061		0
Asst Princip	40	_		<u> </u>		X		71,061	0	0
Barry L. Man	n 40					x		62,978	o	0
Principal BYRON WRIGHT	40					^	$\vdash$	02,370		
BOARD MEMBER		x						2,077	o	0
ROSE CORDIER		Λ	_			┢		2,011		
BOARD MEMBER		x		ļ				1,800	o	0
JOHN SPOTTED	TAIL	<u> </u>		-				1,000		
BOARD MEMBER	111111	x						1,800	0	0
HATTIE DUNHA	М									<del></del>
BOARD MEMBER		x						1,575	0	0
MICHAEL BOLT	Z, SR.									
BOARD MEMBER	•	x						1,350	0	0
	G EAGLE-ESPI	102	Ά							
BOARD MEMBER		X						1,050	0	0
COURTNEY SPO	TTED ELK									
BOARD MEMBER		X						900	0	0
GEORGIA KILL	S IN WATER								•	
BOARD MEMBER		X			$oldsymbol{ol}}}}}}}}}}}}}}}}}}$	<u> </u>		825	0	0
CHARLENE LAP	OINTE									
BOARD MEMBER	<del></del>	Х	_					75	0	0
						<u> </u>				
		-			!					

Par	t VII Section A	. Officers, Directors, Trus	tees	s, Ke	y Er	nplo	yees	, ar	nd Highest Compensated	Employees (continued)	T					
	(A)	(B)				C)			(D)	(E)		(F)				
	Name and title	Average	$\vdash$				hat a		- Nopolabio	Reportable		stıma				
		hours per week	or d	Inst	Officer	Key employee	뚩	Former	compensation	compensation from related	[ a	moun othe				
		week	leg d	럁	<u>e</u>	e	o est	ner	the	organizations	con	npens				
			or to	onal		횽	88		organization	(W-2/1099-MISC)	1	rom t				
			Individual trustee or director	Institutional trustee		ee	Pe		(W-2/1099-MISC)			ganıza ıd rela				
			ň	tee			Highest compensated employee				ı	aniza				
				_	<u> </u>		<u> </u>									
	•											-		•		
				ļ		<b></b>										
						<u> </u>								<del></del>		
											. <u>.</u>					
	## # · · · ·				<u> </u>									-		
1b	Total							<b>&gt;</b>	385,870							
2		ividuals (including those in	1a) v	who	rece	ived	mor	e th	an \$100,000 in reportable o	compensation from the						
	organization ▶ 0												V			
3	Did the organization	list any former officer, dire	ector	or t	ruste	e k	ev ei	mple	oyee, or highest compensat	ted	Г	$\dashv$	Yes	No		
,		a? If "Yes," complete Sched							Syce, or mighest compensar	icu		3		X		
4	For any individual lis	sted on line 1a, is the sum	of re	port	able	com	pens	atio	on and other compensation	from						
	the organization and individual	d related organizations grea	ater (	than	\$15	0,00	07 If	"Ye	s," complete Schedule J fo	r such	Ī	4		X		
		d on line 1a receive or acc	rue c	comp	ens	atıor	fror	n an	ny unrelated organization fo	r		7				
		o the organization? If "Yes,										5		_ <u>X</u> _		
Sect 1	Complete this table			ted i	nder	nend	ent d	cont	ractors that received more	than \$100 000 of						
	compensation from	the organization	51134		iiue		CIII (	701111					(C)			
		(A) Name and business address							Descrip	(B) tion of services		Cor	(C) npensat	ion		
											_					
					<del></del> -		-									
	<del></del>					~			<u></u>		+					
	<u> </u>				_	-				***						
	<del></del>											<del>,,</del>				
2	Total number of inde		aing	tho:	se in	1) V	vno r	ece	ived more than \$100,000 in	l		0				
DAA	отпроизации поли	and organization F						-					990	(2008)		

_	rt V		enue						
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ध्य	1a	Federated campaigns	1a	******		- 17 - 17 - 17 - 17 - 17 - 17 - 17 - 17		- <del>W 1111 111</del>	
ran	b	Membership dues	1b						
s, g amo	С	Fundraising events	1c						
gift ar	d	Related organizations	1d						
is, (	е	Government grants (contributions)	1e	9,7	01,875				
tior	f	All other contributions, gifts, grants,							
the state		and similar amounts not included above	1f	1	14,559				
a tr	g	Noncash contributions included in lines	la-1f \$						
Program Service Revenue   Contributions, gifts, grants	h	Total. Add lines 1a-1f			<b>•</b>	9,816,434			
ue					Busn Code				
ever	2a	Program Service Re	venue			37,526	37,526		
e Re	b								
Ş	С								
Se	d				-	**			<del> </del>
Гап	е								
õ	f	All other program service rev	enue			27 526			
<u>-</u>		Total. Add lines 2a-2f			<b>•</b>	37,526			·····
	3	•	g aiviaei	nas, intere	est, and	81,780			81,780
	4	other similar amounts) Income from investment of to		nt band n	roccodo	01,700			01,700
	4 5	Royalties	ax-exem	ipt bond p	loceeus P				+
	3	(i) Real		(ii) F	Personal				
	6a		5,493	(7)					
			7,127						
		Rental inc or (loss)	-634						
	d	Net rental income or (loss)			<b></b>	-634	-634		
	7a	Gross amount from (i) Securit	ies	(11)	Other				
		other than inventory							
	b	Less cost or other							
		basis & sales exps							
		Gain or (loss)		<u> </u>			1		
		Net gain or (loss)							
•	8a	Gross income from fundraising e	vents						
ğ		(not including \$	13						
eve		of contributions reported on line 1							
2		See Part IV, line 18	a	-			1		
Other Revenue		Less direct expenses  Net income or (loss) from full	b	L	<b>—</b>		•		
O		Gross income from gaming activi		g events					
	00	See Part IV, line 19	а						
	ь	Less direct expenses	b						
		Net income or (loss) from ga	ming ac	tivities	<b>•</b>				
	10a	Gross sales of inventory, les	s						
		returns and allowances	а	L					
	b	Less cost of goods sold	b						
	С	Net income or (loss) from sa	-	ventory	<b>.</b>				<del>-</del>
		Miscellaneous Reven	ue		Busn. Code				
	11a					153,896	153,896		<del> </del>
	b								<del> </del>
	C	All the course			<b></b>		·	<del></del>	<del> </del>
		All other revenue			<b></b>	153,896			-
		Total. Add lines 11a-11d Total Revenue. Add lines 18	20.2	4 E E4 .	· · ·	133,636			
	12	9c, 10c, and 11e	ı, 2y, 3,	٦, J, ou, ،	/u, oc,	10,089,002	190,788		81,780
		00, 100, and 110							Form <b>990</b> (2008)

#### Form 990 (2008) 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) but are not required to complete columns (B), (C), and (D).

	Air other organizations must	complete column (A) but	are not required to comp		(-7-
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U S See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U S See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U S 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	6,914,879	6,330,703	• 584,176	
8	Pension plan contributions (include section 401(k)	]			
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)	]			
а	Management				
b	Legal				
C	Accounting				
d	, ,			***************************************	
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other			<del>****</del>	
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	647,512	206,149	441,363	<del>- · · · · · · · · · · · · · · · · · · ·</del>
17	Travel		200,140	111,303	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials		:		
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	594,171	594,171		
23	Insurance		,		
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed	ļ			
	5% of total expenses shown on line 25 below )		160 501	100 041	
a	CONTRACTUAL SERVICES	573,662	469,721	103,941	
b	SUPPLIES	427,619		96,308	
C	TELEPHONE	332,450			
d	FOOD SERVICE	280,885			=
e	STUDENT ACTIVITIES	276,656 943,611	276,656 812,530	131,081	
f	All other expenses	40 004 445			
<u>25</u>	Total functional expenses. Add lines 1 through 24f	10,331,443	9,034,370	1,330,609	
26	Joint Costs. Check here  if following SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs	1			
	from a combined educational campaign and fundraising solicitation				
_	remembering conditation	i			

<u> </u>	art)	Balance Sheet					
					(A)		(B)
_	<del></del>				Beginning of year		End of year
	1	Cash—non-interest bearing		-	499,139		145,88
	2	Savings and temporary cash investments		-	2,307,998		2,046,17
	3	Pledges and grants receivable, net			29,861	3	104,02
	4	Accounts receivable, net		_		4	
	5	Receivables from current and former officers, directors,		*			
		employees, or other related parties Complete Part II of		F	<del></del>	5	
	6	Receivables from other disqualified persons (as defined		į.			
		4958(f)(1)) and persons described in section 4958(c)(3)	(B) Cor	nplete			
		Part II of Schedule L		-	24 222	6	1 22 22
ets	7	Notes and loans receivable, net		-	31,329	7	20,82
Assets	8	Inventories for sale or use		-	14,105		18,02
Ÿ	9	Prepaid expenses and deferred charges	1 1	06 000 510		9	ļ
	1	Land, buildings, and equipment cost basis	10a	26,838,510			
	b	Less accumulated depreciation Complete	1	6 000 000	5 005 440		00 564 55
		Part VI of Schedule D	10b	6,073,959	5,297,440		<del></del>
	11	Investments—publicly traded securities		-	237,297	11	176,46
	12	Investments—other securities See Part IV, line 11		-	····	12	
	13	Investments—program-related See Part IV, line 11		-		13	
	14	Intangible assets		-	15 602 004	14	+
	15	Other assets See Part IV, line 11	4.	-	15,692,094	15	22 275 04
	16	Total assets. Add lines 1 through 15 (must equal line 34	4)		24,109,263 590,650	16	23,275,94
	17	Accounts payable and accrued expenses		}	390,030		240,630
	18	Grants payable	<del> </del>		18		
	19	Deferred revenue		19			
Š	20	Tax-exempt bond liabilities		20 21			
Liabilities	21	Escrow account liability Complete Part IV of Schedule I				21	
Ы	22	Payables to current and former officers, directors, truste employees, highest compensated employees, and disqu					
<u>Lia</u>	}	persons Complete Part II of Schedule L	Jaimeu			22	
_	23	Secured mortgages and notes payable to unrelated third	d nadies	<u>,</u>		23	<del> </del>
	24	Unsecured notes and loans payable to difference think	ı parue:	•		24	
	25	Other liabilities Complete Part X of Schedule D			2,109,207	25	2,522,130
	26	Total liabilities. Add lines 17 through 25			2,699,857	26	2,768,980
s	1-5	Organizations that follow SFAS 117, check here ▶	and		2,055,001		27700750
ces		complete lines 27 through 29, and lines 33 and 34.					
<u>a</u>	27	Unrestricted net assets				27	
Ba	28	Temporarily restricted net assets				28	<u> </u>
Fund Balar	29	Permanently restricted net assets				29	
בַּ		Organizations that do not follow SFAS 117, check he	re▶ 🗓	Ī Ī			
or F		and complete lines 30 through 34.	_	_			
	30	Capital stock or trust principal, or current funds			20,927,206	30	20,705,914
Net Assets	31	Paid-in or capital surplus, or land, building, or equipmen	t fund		482,201	31	-198,950
Š	32	Retained earnings, endowment, accumulated income, o	r other	funds		32	
et/	33	Total net assets or fund balances			21,409,406	33	20,506,964
ž	34	Total liabilities and net assets/fund balances			24,109,263	34	23,275,944
P	art )	Financial Statements and Reporting					
							Yes No
1		- <del>-</del>	Cash	Accrual Oth			
		ere the organization's financial statements compiled or re-			ant?		2a X
		ere the organization's financial statements audited by an i			for overeight of		2b X
•		Yes" to lines 2a or 2b, does the organization have a comi e audit, review, or compilation of its financial statements a					2c X
2		a result of a federal award, was the organization required					20 22
3		a result of a rederal award, was the organization required Single Audit Act and OMB Circular A-133?	. to und	orgo an addit of addits as s	octorial in		3a
ı		Yes," did the organization undergo the required audit or a	udits?				3b
	<u> </u>			<del></del>			000

**SCHEDULE A** (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

OMB No 1545-0047

2008

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Sicangu Oyate Ho

St. Francis School

A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)

The organization is not a private foundation because it is (Please check only one organization )

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

23-7116414 Reason for Public Charity Status (All organizations must complete this part.) (see instructions)

A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H)

4 ⊔		•	d in conjunction with a nospital	aescribea	in sectio	n 170(b	I)(A)(F)(	II). Ente	er the no	ospitars name,
	city, and state									
5 📙			of a college or university owned	or operat	ed by a g	overnme	ental uni	t descri	bed in	
_ [	1	b)(1)(A)(iv). (Complete Part								
<sup>6</sup> H		•	overnmental unit described in s							
7 📙		•	substantial part of its support fr	om a gove	ernmenta	unit or t	from the	genera	al public	:
_	described in	section 170(b)(1)(A)(vi). (C	omplete Part II)							
8 📙	A community	trust described in section '	1 <b>70(b)(1)(A)(vi)</b> . (Complete Part	tII)						
9 📙	An organizati	on that normally receives (	1) more than 33 1/3 % of its sup	port from	contribut	ions, me	mbersh	ıp fees,	and gro	oss
	receipts from	activities related to its exer	npt functions—subject to certain	n exceptio	ns, and (	2) no mo	re than	33 1/3 '	% of its	
	support from	gross investment income a	nd unrelated business taxable ii	ncome (le:	ss section	511 tax	() from b	usines	ses	
	acquired by t	he organization after June 3	0, 1975 See section 509(a)(2)	. (Comple	te Part III	)				
IO 🗌	An organizati	on organized and operated	exclusively to test for public saf	ety Sees	ection 50	09(a)(4).	(see ins	struction	ns)	
ı <b>1</b> 🗍	An organizati	on organized and operated	exclusively for the benefit of, to	perform t	he functio	ns of, or	to carry	out the	9	
	_	-	ted organizations described in s							1
	509(a)(3). Ch	eck the box that describes t	he type of supporting organizat	ion and co	mplete li	nes 11e	through	11h		
	a Type	I b Type II	c Type III-Function	ally Integr	ated	d	Тур	e III–Ot	her	
e 🗍			ganization is not controlled direc			ne or m				
_			and other than one or more pu	-						1
	509(a)(1) or s	section 509(a)(2)								
f	If the organiz	ation received a written dete	ermination from the IRS that it is	a Type I,	Type II,	or Type	III suppo	orting		
	-	check this box		•••		•				П
g	Since August	t 17, 2006, has the organiza	tion accepted any gift or contrib	ution from	n any of th	ne				_
9	following per	•	, , , ,		•					
	• .		ontrols, either alone or together	with perso	ons descr	ibed in (	n)			Yes No
	,, ,	•	of the supported organization?	, , , , , , , , , , , , , , , , , , ,			,			11g(i)
	, ,	member of a person descri	•							11g(ii)
		· · · · · · · · · · · · · · · · · · ·	described in (i) or (ii) above?							11g(iii)
h			the organizations the organization	on suppor	ts					( · · · · · · · · · · · · · · · · · · ·
			1	T		63.54		6.00	- #-	(1-11) A
	ne of supported ganization	(ıi) EIN	(iii) Type of organization (described on lines 1–9	1 ' '	organization sted in your		ou notify	organizat	s the	(vii) Amount of support
<b>U</b> .,	garnzauon		above or IRC section	1	document?		of your	-	zed in the	
			(see instructions))	<u> </u>			ort?	•	S?	
				Yes	No	Yes	No	Yes	No	: 
				1						
				1						
				ļ						
				<u> </u>						
	· · · · · · · · · · · · · · · · · · ·			ļ				L		
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otal				<u> </u>	<u> </u>	<b></b>	<u></u>			
D-1	acy Act and Pan	erwork Reduction Act Notice	, see the Instructions for Form 9	90.				Scl	hedule A	A (Form 990 or 990-EZ) 2008

Schedule A (Form 990 or 990-EZ) 2008 Sicangu Oyate Ho 23-7116414 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part 1.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1-3 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) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Amounts from line 4 Gross income from interest, dividends. payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. Add lines 7 through 10 11 12 Gross receipts from related activities, etc. (see instructions) 12 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) 13 organization, check this box and stop here Section C. Computation of Public Support Percentage 14 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f 15 16a 33 1/3 % support test—2008. 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—2007. 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 10%-facts-and-circumstances test-2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test—2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

Schedule A (Form 990 or 990-EZ) 2008

Page 3

Schedule A (Form 990 or 990-EZ) 2008 Sicangu Oyate Ho

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

1 a	(Complete only if you che				-, 		
Sec	tion A. Public Support						
Cal	endar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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 1-5						·
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
_	Add lines 7a and 7b					<del> </del>	
8	Public support (Subtract line 7c from line 6)				:		
Sec	tion B. Total Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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						
С	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				3		
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,	······································			<u> </u>		
	and 12)	L		1	<u> </u>	<u>l</u>	
14	First five years. If the Form 990 is for the		it, second, third, fo	urtn, or tiπn tax ye	ar as a section 50	1(C)(3)	
<u></u>	organization, check this box and stop her tion C. Computation of Public St		tage				
	Public support percentage for 2008 (line 8			on (fl)		15	%
15	Public support percentage for 2006 (line of Public support percentage from 2007 Sch			iii (1 <i>))</i>		16	%
16 Sec	tion D. Computation of Investme						
<u>3ec</u>	Investment income percentage for 2008 (I			3. column (fl)		17	%
18	Investment income percentage for 2000 (investment income percentage from 2007			, ====== \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\		18	%
19a	33 1/3 % support tests—2008. If the orga			e 14, and line 15 i	s more than 33 1/3	3 %, and line	
	17 is not more than 33 1/3 %, check this b						▶ [
b	33 1/3 % support tests—2007. If the orga						_
	line 18 is not more than 33 1/3 %, check t	his box and <b>stop</b> l	here. The organiza	ition qualifies as a	publicly supported	l organization	▶
20							

Page 4

Schedule A (Form 990 or 990-EZ) 2008 Sicangu Oyate Ho

Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

Inspection Name of the organization Employer identification number Sicangu Oyate Ho 23-7116414 St. Francis School Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) 4 Aggregate value at end of year 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? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to 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 (e.g., recreation or pleasure) Preservation of an historically important land area Preservation of certified historic structure Protection of natural habitat Preservation of open space 2 Complete lines 2a-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 2b Total acreage restricted by conservation easements 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 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year > \$ 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)? In Part XIV, 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" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, 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) Revenues included in 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 relating to these items a Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

		<b>~</b>			<b>~</b> 41	<u> </u>			
	rt III Organizations Maintaining						<u>Assets</u>	(contii	nued)
	Using the organization's accession and other items (check all that apply)	records, check any of the	following that are a s	significan	t use of its	collection			
а	Public exhibition .	d \ Loan o	r exchange program	ıs					
b	Scholarly research	e Other	- ·-···· <b>3</b> - <b>p</b> · - <b>3</b> · · · · ·	-					
c	Preservation for future generations	о <u>—</u> , оо.							
4	Provide a description of the organization's co	llections and explain how t	hey further the orgar	nization's	exempt pu	irpose in			
5	Part XIV  During the year, did the organization solicit o	r receive donations of art, h	nistorical treasures, c	or other s	ımılar		_	•	
	assets to be sold to raise funds rather than to							Yes	No
Pai	Trust, Escrow and Custod Part IV, line 9, or reported				answer	ed "Yes"	to Forr	n 990,	
1a	Is the organization an agent, trustee, custodi				not				
	included on Form 990, Part X?	<b>,</b>					$\Box$	Yes	□No
	If "Yes," explain the arrangement in Part XIV	and complete the following	ı tahle						
U	in res, explain the analigement in rait XIV	and complete the following	tabic					Amour	nt .
							+	Airioui	
	Beginning balance					1c	<del></del>		
	Additions during the year					<u>1d</u>			
е	Distributions during the year					<u>1e</u>	<del> </del>		
f	Ending balance					1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line 21?						Yes	∐ No
b	If "Yes," explain the arrangement in Part XIV				<del> </del>				
Pai	rt V Endowment Funds. Comp	lete if organization ar	<u>nswered "Yes" to</u>	<u>o Form</u>	<u>990, Pa</u>	rt IV, line	<u>10.</u>		
		(a) Current year	(b) Prior year	( <b>c</b> ) Two y	ears back	(d) Three y	ears back	(e) Fou	r years back
1a	Beginning of year balance								
	Contributions								
С	Investment earnings or losses								
	Grants or scholarships					***************************************			
	Other expenditures for facilities								•••••
	and programs								
	Administrative expenses								••••••
	·								
_	End of year balance		1			l		L	
	Provide the estimated percentage of the year	4.4							
	Board designated or quasi-endowment	%							
	Permanent endowment  %								
	Term endowment ▶ %								
	Are there endowment funds not in the posses	ssion of the organization th	at are held and admi	inistered	for the				
	organization by							<u> </u>	Yes No
	(i) unrelated organizations							3a(i)	<del> </del>
	(ii) related organizations							3a(ii)	<del>    ,</del>
b	If "Yes" to 3a(II), are the related organizations	s listed as required on Sche	edule R?					_ 3b_	
4	Describe in Part XIV the intended uses of the								
Pai	rt VI Investments—Land, Build	<u>ings, and Equipmen</u>	<u>t. See Form 990</u>	<u>), Part (</u>	X, line 10	<u>).                                    </u>			
	Description of investment	(a) Cost or other basis	(b) Cost or other	er	(c) Dep	preciation		(d) Book	value
		(investment)	basis (other)						
1a	Land		209,	,203				2	09,203
	Buildings		24,518,		4,	957,24	9		61,610
	Leasehold improvements							-	
	Equipment	***	2,110,	,448	1,:	116,71	.0	9	93,738
	Other								
	Add lines 1a-1e (Column (d) should equal f	Form 990, Part X, column (I	B), line 10(c))				<b>▶</b>	20,7	64,551

Total. (Column (b) should equal Form 990, Part X, col (B) line 25) In Part XIV, 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

 $\blacktriangleright$ 

2,522,130

Schedule D (Form 990) 2008

Schedule D (F	orm 990) 200	8 Si	cang	u Oy	ate	Но						2	3 - '	711	641	4					Pag	e <b>5</b>
Schedule D (F	Supplem	ental Ir	nforma	ition (d	ontinue	ed)																
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### **SCHEDULE E**

(Form 990 or 990-EZ)

**Schools** 

► To be completed by organizations that answer "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Sicangu Oyate Ho St. Francis School Employer identification number 23 – 7116414

			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter,			
	bylaws, other governing instrument, or in a resolution of its governing body?	1	X	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its			
	brochures, catalogues, and other written communications with the public dealing with student admissions,			
	programs, and scholarships?	2	X	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media			
	during the period of solicitation for students, or during the registration period if it has no solicitation program,			
	in a way that makes the policy known to all parts of the general community it serves? If "Yes," please			l
	describe If "No," please explain	3		X
	The non-discriminatory policy is provided in personnel policies			
	and procedures and made available during job postings.			
4	Does the organization maintain the following?			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	х	
b	Records documenting that scholarships and other financial assistance are awarded on a racially			
-	nondiscriminatory basis?	4b	х	•
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	4c	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Х	
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate			
	statement )			
5	Does the organization discriminate by race in any way with respect to			
а	Students' rights or privileges?	5a		X
		l		<b>.</b>
þ	Admissions policies?	5b		X
				x
С	Employment of faculty or administrative staff?	5c		^
	Cabalaratina as athas financial accistance?	5d		x
d	Scholarships or other financial assistance?			<del>                                     </del>
е	Educational policies?	5e		x
-	Educational policies			
f	Use of facilities?	5f		x
•				
g	Athletic programs?	5g		X
_				
h	Other extracurricular activities?	5h		X
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate			
	statement )			
			v	
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	X	x
b	Has the organization's right to such aid ever been revoked or suspended?  If you answered "Yes" to either line 6a or line 6b, please explain using an attached statement  See Stmt 1	6b	ļ	
_	if you allow order 100 to older mile of present and an amendant and an amendant			
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of	7	х	İ
	Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation		_ <u>~</u>	1

### **SCHEDULE O**

(Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Information to Form 990**

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public inspection

Name of the organization

Sicangu Oyate Ho St. Francis School Employer identification number 23 - 7116414

Form 990, Part III, Line 4d - All Other Achievements
THE SCHOOL PROVIDES EDUCATION TO GRADES K-12 ON THE
ROSEBUD INDIAN RESERVATION.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
Yes, policies are followed as outlined in the policies and procedures.

Form 990, Part VI, Line 15b - Compensation Process for Officers

The process for determining compensation goes through supervisors, then the personnel committee, and then on to the Board of Directors for final approval during contract negotiations.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Governing documents are made available to public upon request. The conflict of interst policy is posted on organizations website.

Schedule O - Additional Information

Form 990, VI, line 10 - The organization does not have a process in place to review Form 990.

Form 990, Part IV, line 5 & lines 24-24d, Not applicable.

Form 990, Part V, line 3b, 5c, 6b, 7b, and 10a-12b, Not applicable.

Form 990, Part VI, line 9b & 16b, Not applicable.

Department of the Treasury Internal Revenue Service

## **Depreciation and Amortization**

(Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

OMB No 1545-0172

Name(s) shown on return

Sicangu Oyate Ho St. Francis School Identifying number 23-7116414

	ess or activity to which this form relates ndirect Depreciat:	ion							
*******	ert I Election To Exper	se Certain Pro							
	Note: If you have a				u com	plete P	art I.	Τ.	250 000
1	Maximum amount See the instruc	<del>-</del>		esses				1	250,000
2	Total cost of section 179 property	•	-					3	800,000
3	Threshold cost of section 179 proj							4	800,000
4 5	Reduction in limitation Subtract li  Dollar limitation for tax year Subtract lii				ega inetri	uctions		5	
5	(a) Description		or less, enter -o If the	(b) Cost (business us			lected co:		
6	(4) 500011,510			(3) 5551 (555)		(-/-			
<u> </u>									1
7	Listed property Enter the amount	from line 29	**		7				
8	Total elected cost of section 179 g		nts in column (c). lir	nes 6 and 7	<u> </u>			8	
9	Tentative deduction Enter the sm	• •						9	
10	Carryover of disallowed deduction							10	
11	Business income limitation Enter	•		ss than zero) or line	5 (see i	instruction	ns)	11	
12	Section 179 expense deduction A	dd lines 9 and 10, b	ut do not enter mo	re than line 11				12	
13	Carryover of disallowed deduction	to 2009 Add lines 9	and 10, less line	12	13				
Vote	: Do not use Part II or Part III below								
Pa	art II Special Depreciat	ion Allowance a	and Other Dep	reciation (Do no	ot incl	ude liste	ed pro	perty.)	(See instructions.)
14	Special depreciation allowance fo	r qualified property (	other than listed pro	operty) placed in ser	vice				
	during the tax year (see instruction	ns)						14	
15	Property subject to section 168(f)(	1) election						15	
16	Other depreciation (including ACF							16	594,171
Pa	art III MACRS Depreciat	ion (Do not incl			uction	<u>1s.)</u>			· · ·
				ion A				1	
17	MACRS deductions for assets pla						. ⊾ □	17	0
18	If you are electing to group any assets	olaced in service during Assets Placed in Se	the tax year into one	or more general asset a	Counts,	check here	ciation S	vetem	
	Section 6—	(b) Month and	(c) Basis for dep		Τ	lai Depie	CIALION	ystem	
	(a) Classification of property	year placed in	(business/investm	ent use	(e) C	onvention	(f) M	استحادت	1
		service	only-see instruc	ctions) period			```	etnoa	(g) Depreciation deduction
19a	3-year property		only-see instruc	ctions) period				etnoa	(g) Depreciation deduction
19a b	3-year property 5-year property		only-see instruc	ctions) period				etnod	(g) Depreciation deduction
			only-see instruc	ctions) period				етпоа	(g) Depreciation deduction
b c	5-year property		only-see instruc	ctions) period				etnoa	(g) Depreciation deduction
b c d	5-year property 7-year property		only-see instruc	ctions) period				etnoa	(g) Depreciation deduction
b c d	5-year property 7-year property 10-year property		only-see instruc	dons					(g) Depreciation deduction
b c d	5-year property 7-year property 10-year property 15-year property		only-see instruc	25 yrs			S/	L	(g) Depreciation deduction
b c d e f	5-year property 7-year property 10-year property 15-year property 20-year property 25-year property Residential rental		only-see instruc	25 yrs 27 5 yrs		MM	S/	L L	(g) Depreciation deduction
b c d e f	5-year property 7-year property 10-year property 15-year property 20-year property 25-year property		only-see instruc	25 yrs 27 5 yrs 27 5 yrs		ММ	S/ S/ S/	L L	(g) Depreciation deduction
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b c d e f	5-year property 7-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property	service		25 yrs 27 5 yrs 27 5 yrs 27 5 yrs 39 yrs		MM MM MM	S/ S/ S/ S/ S/	L L L	
b c d e f g h	5-year property 7-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C—A			25 yrs 27 5 yrs 27 5 yrs 27 5 yrs 39 yrs		MM MM MM	S/ S/ S/ S/ S/ eciation	L L L L	
b c d e f g h	5-year property 7-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C—As	service		25 yrs 27 5 yrs 27 5 yrs 27 5 yrs 39 yrs		MM MM MM	S/ S/ S/ S/ S/ eciation	L L L L Syster	
b c d e f g h	5-year property 7-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C—A: Class life 12-year	service		25 yrs 27 5 yrs 27 5 yrs 39 yrs Fax Year Using the	Alterna	MM MM MM Itive Depr	S/ S/ S/ S/ S/ eciation	L L L L Syster L	
b c d e f g h i 200a b c	5-year property 7-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C—A: Class life 12-year 40-year	service		25 yrs 27 5 yrs 27 5 yrs 27 5 yrs 39 yrs	Alterna	MM MM MM	S/ S/ S/ S/ S/ eciation	L L L L Syster L	
b c d e f g h i	5-year property 7-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property  Section C—A: Class life 12-year 40-year  art IV Summary (See inserting property)	service  service  service		25 yrs 27 5 yrs 27 5 yrs 39 yrs Fax Year Using the	Alterna	MM MM MM Itive Depr	S/ S/ S/ S/ S/ eciation	L L L Syster L	
b c d e f g h i	5-year property 7-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C—A: Class life 12-year 40-year art IV Summary (See ins	ssets Placed in Ser estructions.)	vice During 2008	25 yrs 27 5 yrs 27 5 yrs 39 yrs  Tax Year Using the 12 yrs 40 yrs	Alterna	MM MM MM Itive Depr	S/ S/ S/ S/ S/ eciation	L L L L Syster L	
b c d e f g h i	5-year property 7-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C—A: Class life 12-year 40-year art IV Summary (See instance) Listed property Enter amount froit Total. Add amounts from line 12,	ssets Placed in Ser  Structions.) m line 28 lines 14 through 17,	vice During 2008	25 yrs 27 5 yrs 27 5 yrs 39 yrs  Tax Year Using the 12 yrs 40 yrs	Alterna 21	MM MM MM Itive Depr	S/ S/ S/ S/ S/ eciation	L L L Syster L L	n
b c d e f g h i	5-year property 7-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C—A: Class life 12-year 40-year art IV Summary (See insection of the content of t	ssets Placed in Ser  Structions.) m line 28 lines 14 through 17, e lines of your return	lines 19 and 20 in Partnerships and	25 yrs 27 5 yrs 27 5 yrs 39 yrs  Tax Year Using the 12 yrs 40 yrs	Alterna 21	MM MM MM Itive Depr	S/ S/ S/ S/ S/ eciation	L L L Syster L	
b c d e f g h i 200a b c	5-year property 7-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C—A: Class life 12-year 40-year art IV Summary (See instance) Listed property Enter amount froit Total. Add amounts from line 12,	ssets Placed in Ser  Structions.) m line 28 lines 14 through 17, lines of your return ed in service during	lines 19 and 20 in Partnerships and the current year,	25 yrs 27 5 yrs 27 5 yrs 39 yrs  Tax Year Using the 12 yrs 40 yrs	Alterna 21	MM MM MM Itive Depr	S/ S/ S/ S/ S/ eciation	L L L Syster L L	n

Form **4562** 

Department of the Treasury Internal Revenue Service

## **Depreciation and Amortization**

(Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

OMB No 1545-0172

achment 67

Name(s) shown on return

Sicangu Oyate Ho

St. Francis School

Identifying number 23-7116414

Business or activity to which this form relates RENTAL INCOME **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I 250,000 Maximum amount. See the instructions for a higher limit for certain businesses 1 2 Total cost of section 179 property placed in service (see instructions) 2 800,000 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-4 5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions (c) Elected cost (b) Cost (business use only) (a) Description of property 6 7 Listed property Enter the amount from line 29 8 R Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 Tentative deduction Enter the smaller of line 5 or line 8 10 Carryover of disallowed deduction from line 13 of your 2007 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2009 Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 14 during the tax year (see instructions) 15 Property subject to section 168(f)(1) election 15 49,070 16 Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property.) (See instructions) Part III Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2008 17 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here 18 Section B—Assets Placed in Service During 2008 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and (d) Recovery (e) Convention (f) Method (g) Depreciation deduction yéar placed in service (a) Classification of property (business/investment use penod only-see instructions) 19a 3-year property b 5-year property 7-year property d 10-year property 15-year property f 20-year property 25 yrs 25-year property MM S/L h Residential rental 27 5 yrs property MM S/L 27 5 yrs ММ S/L Nonresidential real 39 yrs property MM S/L Section C—Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System 20a Class life 12 yrs S/L b 12-year ММ S/L 40 yrs c 40-vear Part IV **Summary** (See instructions.) 21 21 Listed property Enter amount from line 28 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 22 49,070 22 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instr For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

(9) (10)

Totals

11323000						
Forms 990-PF	Oth	er Notes and	d Loans Receiv	able		2008
330 / 330-1 1	For calendar year 2008, o	or tax year beginning	7/01/08	, and ending 6 /	/30/09	_
Name					Employer Ide	entification Number
Sicangu Oyate St. Francis S					23-711	5414
Form 990, Par	ct X, Line 7 -	Additional	Informatio	n.		
	Name of borrower			Relationship to disc	rualified nerso	n
	PLOYEE RECEIVAB	LE		Trelationship to disc	qualifica perso	···
(2) OTHER RECEI						
(3)						
(4)	.,.,.,.					
	· <u> </u>			· · ·		
( <del>7</del> ) (8)		<del></del>		••		
(9)						
(10)						
		<u></u>	····			
Original amount borrowed	Date of loan	Maturity date	Re	epayment terms		Interest rate
(1)	Buto or roun	uato	- <u> </u>			
(2)						
(3)						
(4)						
<u>(5)</u> (6)						1
(7)						
(8)						
(9)						
(10)					· · · · ·	
Sec	curity provided by borrower			Purpose of	loan	
(1)	canty provided by borrower			1 0,000 0,	10411	
(2)						
(3)						
(4)						
(5)		<del></del>		w.=		
(6)		_ <del>_</del> .				· · · · · · · · · · · · · · · · · · ·
( <del>7</del> ) (8)				<del></del>		
(9)						
(10)						
		Т		_	<u> </u>	
Considera	ation furnished by lender		Balance due at beginning of year	Balance due at end of year	t Fa	ır market value _(990-PF only)
(1)			16,307	4,7		
(2)			15,022	16,0	069	
(3)						
(4)	<del></del>		<del></del>	<del> </del>		
(5)		<del></del>				<del> </del>
(6) (7)	<del></del>		<del> </del>			
(8)						

31,329

20,829

11323000 Sicangu Oyate Ho

23-7116414

## Federal Statements

FYE: 6/30/2009

## Statement 1 - Schedule E, Line 6 - Governmental Financial Aid

Description

The organization receives grants and funding from governmental agencies.