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Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

Under 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

OMB No 1545-0047

2009

Open to Public

					01 01 2000 and anding 12 21 200	<u> </u>		Inspection
				r, or tax year beginning C Name of organization	01-01-2009 and ending 12-31-200	9	D Employer i	dentification number
	еск іга dress ch	pplicable Plea	ase :IRS	Downtown Sioux Falls Ind	:		36-36272	717
	me cha	lab	el or nt or	Doing Business As			E Telephone	
	tial retu	typ	e. See				(605) 338	3-4009
		Ins	cific truc-	Number and street (or P 230 S Phillips Ave No 102	O box if mail is not delivered to street addre	ss) Room/suite	G Gross receipt	
	mınate		15.					
	ended			City or town, state or cou Sioux Falls, SD 57104	intry, and ZIP + 4			
Apı	plication	n pending		·				
				ne and address of princ	ipal officer	H(a) Is th	— nıs a group retu	
				Statema Phillips Ave No 102		affılı	ates?	⊤Yes ▼ No
			Sioux F	Falls,SD 57104		H(b) Are a	all affiliates inclu	uded?
						If"N	lo," attach a lis	st (see instructions)
I Ta	x-exem	npt status 🖊	501(c) (4) ◀ (insert no)	947(a)(1) or 527	H(c) Gro	up exemption r	number 🟲
J W	ebsite	e: 🕨 www.dts	fcom					
K For	m of or	ganization 🔽	Corpora	tion Trust Association	Other ►	L Year of f	ormation 1988	M State of legal domicile SD
Pa	rt I	Summa	-у			l	'	
	1	•		•	n or most significant activities			
e e		To upgrade	& enha	ance the vitality of down	town Sioux Falls			
Governance								
Ĕ								
<u>ş</u>	2	Check this l	box ►	_ if the organization dis	continued its operations or disposed	of more than	25% of its ne	t assets
	3	Number of v	oting i	members of the governi	ng body (Part VI, line 1a)			31
නර් රෝ	4		_	_	f the governing body (Part VI, line 1t			4 1
Activities &	5			nployees (Part V , line 2		•		5 10
톭	6			olunteers (estimate if ne				6 15
ã	7a			·	om Part VIII, column (C), line 12 .			7a
		-			om Form 990-T, line 34			7b
					Pri	or Year	Current Year	
	8	Contribution	ons an	d arants (Part VIII, line	1h)		207,496	303,081
ā	9				, 22a)		396,561	
Rayeni	10			(,	A), lines 3, 4, and 7d)		6,175	2,025
æ	11				nes 5, 6d, 8c, 9c, 10c, and 11e)		-,	0
	12		•		nust equal Part VIII, column (A), line	e		
					<u> </u>		610,232	661,676
	13	Grants and	lsımıla	ar amounts paid (Part I)	(, column (A), lines 1-3)		900	2,693
	14	Benefits pa	aid to d	or for members (Part IX	column (A), line 4)			0
ø	15		therc	ompensation, employee	benefits (Part IX, column (A), lines 5	5-	240.257	262.006
Expenses		10)					249,257	263,906
<u>₹</u>	16a				olumn (A), line 11e)			0
ठ	Ь			enses (Part IX, column (D),				
	17				es 11a-11d, 11f-24f)		381,746	419,414
	18				equal Part IX, column (A), line 25)		631,903	686,013
	19	Revenue le	ss ex	penses Subtract line 18	3 from line 12		-21,671	-24,337
Not Assets or Fund Balances						_	ng of Current Year	End of Year
Set	20	Total acca	ts (P=	rt X, line 16)			300,277	271,881
AB GB	21						37,463	33,404
2 E E	22				ne 21 from line 20		262,814	238,477
	12 # I	Signatu					202,014	230,477
		_			examined this return, including accompanying	schedules and	statements, and to	o the best of my knowledge
					ration of preparer (other than officer) is base			
c:	_	 						
Sigr Here		****** Signature	of office	er		2010 Date)-09-30	
	_	1.						
				xecutive Director ne and title				
					Date	Check If	Dronaror's idea	atifying number
יי-ם		Preparer's signature	Laune	Hanson	2010-09-30	self-	(see instruction	ntifying number ns)
Paid	- I I -	, · ,				empolyed 🕨 🦳		
•	arer's	Firm's name (if self-employ		s EIDE BAILLY LLP			EIN Þ	
Use (only	address, and		200 EAST 10TH ST PO E	3OX 5125			
				SIOUX FALLS, SD 5711	75125		Phone no 🕨	(605) 339-1999
May ·	the IR	S discuss th	ıs retu		own above? (see instructions)			✓ Yes No

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

Downtown Sioux Falls is the heart of our city and belongs to everyone, resident and visitor. Our goal is to make downtown a place for anyone or everyone to work, live, shop, eat, visit, enjoy and experience the arts, culture and other festivals in a manner that is family friendly and environmentally sensitive.

2	Did the organization under the prior Form 990 or 990		_	e year which were not listed on	┌ Yes ┌ No
	If "Yes," describe these no	ew services on Sched	ule O		
3	Did the organization cease services?			vit conducts, any program	☐ Yes ☑ No
4	Describe the exempt purp Section 501(c)(3) and 50	ose achievements for 1 (c)(4) organizations	each of the organization's	three largest program services l usts are required to report the ai gram service reported	
4a	(Code) (Expenses \$	477,432 including grants of	f \$) (Revenue \$	356,570)
	Downtown Sioux Falls, Inc. is Dakota area by providing excr relations	a nonprofit organization the tement, activities, and a p	at is committed to continually up ositive image within the commur	grading and enhancing the vitality of th nity through promotions, design, econor	e downtown Sioux Falls, South nic development, and public
4b	(Code) (Expenses \$	ıncludıng grants of	\$) (Revenue \$)
4c	(Code) (Expenses \$	including grants of	\$) (Revenue \$	
4d	Other program services	•	•		
	(Expenses \$		g grants of \$) (Revenue \$)
4e	Total program service ex	penses)- \$	477,432		

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete 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	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasiendowments? If "Yes," complete Schedule D, Part V	10		No
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ 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.			
	◆ 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.			
	◆ 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.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ 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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	Į		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		N o
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II	15		No
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 U S ? If "Yes," complete Schedule F, Part III	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Νο
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		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 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		N o
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 line 25	24a		N o
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
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) and 501(c)(4) 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		Νο
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		N o
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		N o
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		N o
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		N o
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		N o
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νο
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		N o
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		N o
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		N o
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		N o
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Schedule R, Part V, line 2	35	Yes	
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		
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Form	Form 990 (2009)								
Par	t V Statements Regarding Other IRS Filings and Tax Compliance								
		Yes	No						
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal								

1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
	1a 10			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return			
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Νο
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
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		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	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?	6a		Νο
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 and services provided to the payor?	7a		N o
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N o
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νο
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νο
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
9	Sponsoring organizations maintaining donor advised funds.	8		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
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)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
Ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			

Sharlene Bajema 230 S Phillips Ave Sioux Falls,SD 57104 (605) 338-4009

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

### Enter the number of voting members of the governing body . ### Enter the number of voting members of the governing body . ### Enter the number of voting members of the governing body . ### Did any official did not contain the process of the governing body . ### Did the organization delegate control over management diuses customarily performed by or under the direct supervision of officers, director, trustees, or key employees to a management company or other person? . ### Did the organization hase any significant changes to its organizational documents since the prior Form 900 was filled? ### Did the organization hase any significant changes to its organizational documents since the prior Form 900 was filled? ### Does the organization have members or stockholders? ### Does the organization have members or stockholders? ### Does the organization have members or stockholders? ### Does the organization have members or stockholders, or other persons? . ### Does the organization have members or stockholders, or other persons? . ### Does the organization have members or stockholders, or other persons? . ### Does the organization have members, stockholders, or other persons? . ### Does the organization have members or stockholders, or other persons? . ### Does the organization have members, stockholders, or other persons? . ### Does the organization on contemporaneously document the meetings held or written actions undertaken during the year by the following . ### Does the organization on the persons of the governing body? ### Does the organization have the held of the governing body? ### Does the organization have the held of the governing body? ### Does the organization have the held of the governing body? ### Does the organization have written policies and procedures governing the activities of such chapters, branches, or affiliates? ### Does the organization have written policies and procedures governing the activities of such chapters, and branches to ensure their op	Se	ction A. Governing Body and Management						
Describe number of voting members that are independent.						Yes	No	
Describe number of voting members that are independent								
Describe number of voting members that are independent	1_	Enter the number of voting members of the governing hady	4-	1 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 employees to a management company or other person? 3 Did the organization dategate control over management dates customanily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 5 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a maternal diversion of the organization's assets? 6 Ves 100 Des the organization have members or stockholders? 7 Did the organization have members or stockholders? 8 Possible organization have members or stockholders? 9 Des the organization or embers or stockholders? 9 Did the organization or embers or stockholders, or other persons who may elect one or more members of the properties of								
Substitute of the properties of the governing body subject to approval by members, stockholders, or other persons who may elections or interest provided the properties of the governing body? 3 No. 8 No. 9 No.		· · · · · · · · · · · · · · · · · · ·						
supervision of officers, directors or trustees, or key employees to a management company or other person? A Dot the organization make any significant changes to its organizational documents since the prior Form 990 was 1.5 b. Did the organization become eware during the year of a material diversion of the organization sasets? B Does the organization have members or stockholders? C Does the organization have members or stockholders? C Does the organization have members or stockholders? D Does the organization of the governing body subject to approval by members, stockholders, or other persons? D Does the organization of the governing body subject to approval by members, stockholders, or other persons? D Does the organization of the governing body subject to approval by members, stockholders, or other persons? D Does the organization of the governing body subject to approval by members, stockholders, or other persons? D Does the organization of the governing body subject to approval by members, stockholders, or other persons? D Does the organization of the governing body subject to approval by members, stockholders, or other persons? D Does the organization of the governing body subject to approval by members of the governing the governing body? D Does the organization members of the governing body? D Does the organization have local chapters, prenches, or affiliates? D Does the organization have local chapters, brenches, or affiliates? D D Does the organization have local chapters, brenches, or affiliates? D D D D D D D D D D D D D D D D D D D	2				2		Νo	
Finds Find	3				3		Νο	
5 Deas the organization have members or stockholders? 7 Deas the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 8 Are any discussions of the governing body subject to approval by members, stockholders, or other persons? 9 Are any discussions of the governing body subject to approval by members, stockholders, or other persons? 10 Are any discussions of the governing body subject to approval by members, stockholders, or other persons? 10 Are governing body? 11 Be shere any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organizations manling address? If If Yes, Provide the names and addresses in Schedule 0 12 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 13 Does the organization have local chapters, branches, or affiliates? 14 If Yes, does the organization have local chapters, branches, or affiliates? 15 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? 15 If Yes, does the organization have a written written policies and procedures governing body before filing the form? 16 Describe in Schedule O the process, if any, used by the organization to review the Form 990 17 If Yes of the organization have a written which the organization to review the Form 990 18 Are officers, directors or trustees, and key employees required to disclose annually interest that could give rise to conflicts? 19 Describe in Schedule O the written governing the activities of a 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 in Schedule O the organization for any organization of the following persons include a review and approva	4		ınce t	he prior Form 990 was	4		No	
Does the organization have members, stockholders, or other persons who may elect one or more members of the poverning body? A reamy decisions of the governing body subject to approval by members, stockholders, or other persons? 70 No 10 the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 10 The governing body? 10 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the governing body? 10 Is the organization smalling address? If Yes, "provide the names and addresses in Schedule O. 10 Does the organization have local chapters, branches, or affiliates? 10 Does the organization have local chapters, branches, or affiliates? 11 Has the organization have local chapters, branches, or affiliates? 12 Does the organization have local chapters, branches, or affiliates? 13 Does the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 14 Pass the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 15 Does the organization requisity and consistently monitor and enforce compliance with the policy? If Yes," addressed a describe in Schedule O the process, if any, used by the organization to review the Form 990 12 Does the organization requisity and consistently monitor and enforce compliance with the policy? If Yes," addressed a describe in Schedule O with its is done. 12 Does the organization have a written document retention and destruction policy? 13 Ones the organization have a written document retention and destruction policy? 14 Does the organization have a written document retention and destruction policy? 15 Dol the organization have a written document retention and destruction policy and the organization of the deliberation and decision? 15 Dol the organization have a written document retention and destruction policy and policy and policy and policy and financial	5	Did the organization become aware during the year of a material diversion of the organization	nızatı	ion's assets?	5		Νo	
by Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7 by 1 colors 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8 The governing body? 8 The speciment of the governing body? 8 The governing body? 8 The governing body? 9 Is there any officer, director, frustee, 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 in Schedule O. 8 Each committee with authority to act on behalf of the governing body? 1 Is there any officer, director, frustee, 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 in Schedule O. 8 Each committee with authority to act on behalf of the governing body? 8 The Coldes of the Government of the governing body before filling the form of the governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization from the form of the governing body before filling the form of t	6	Does the organization have members or stockholders?			6	Yes		
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? . 88 Yes b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Saction A, who cannot be reached at the organization's mailing address? If Yes," provide the names and addresses in Schedule O . 9 No Section B. Policies (This Section B requiests information about policies not required by the Internal Revenue Code.) 10a Does the organization have local chapters, branches, or affiliates? 10b 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? 10b If Yes, "does the organization have written policies and procedures governing body before filing the form" of the strength of the process, if any, used by the organization to review the Form 990 11 Yes 11A Describe in Schedule O the process, if any, used by the organization to review the Form 990 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12b Yes 12c Yes 12c Yes 12c Ves 12b Yes 12c Ves 12c Ves 12c Ves 12c Ves 12c Ves 12d Yes	7a				7a	Yes		
year by the following a The governing body? 1	b	Are any decisions of the governing body subject to approval by members, stockholder	ers, o	rother persons?	7b		Νo	
Best Section	8		ns ur	ndertaken during the				
State the any officer, director, trustee, or key employed listed in Part VIII, Section A, who cannot be reached at the organization's maining address? If "Yes," provide the names and addresses in Schedule O. Section B, Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Very No.	а	The governing body?			8a	Yes		
section B. Policies (This Section B requests information about policies not required by the Interval Revenue Code.) Folicion B. Policies (This Section B requests information about policies not required by the Interval Revenue Code.) Folicion B. Policies (This Section B requests information about policies not required by the Interval Code.) Folicion B. Policio B. P	b	Each committee with authority to act on behalf of the governing body?	•		8b		Νo	
Note		organization's mailing address? If "Yes," provide the names and addresses in Sched	ıle O		9		Νο	
Yes No No No No No No No N			requi	red by the Internal				
10a No b If "Yes," does the organization have local chapters, branches, or affiliates? 10b 11 Has the organization between the policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filling the form 11 Yes 11A Describe in Schedule O the process, if any, used by the organization to review the Form 990 11 Yes 11B Does the organization have a written conflict of interest policy? If "No," got oline 13 12a Yes 12a Does the organization have a written conflict of interest policy? If "No," got oline 13 12b Yes 12b Yes 12c Ves 13c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 13c Does the organization have a written whistleblower policy? 13d No 14c Does the organization have a written whistleblower policy? 14d No No 15c 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? 15a Yes 15b No 15c Other officers or key employees of the organization 15a Yes 15d Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 15c No 15d No	ке	venue Code.)				Vac	No	
b 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? Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11A Describe in Schedule O the process, if any, used by the organization to review the Form 990	102	Does the organization have local chanters, branches, or affiliates?			102	163		
affiliates, and branches to ensure their operations are consistent with those of the organization? 10					IVa		110	
11A Yes 11A Ye		affiliates, and branches to ensure their operations are consistent with those of the organization?						
Does the organization have a written conflict of interest policy? If "No," go to line 13		Tras the organization provided a copy of this Form 990 to an members of its governm	ig bou	y before filling the form.	11	Yes		
A re officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? C Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," absorbed in Schedule O how this is done 13 Does the organization have a written whistleblower policy? 14 Does the organization have a written whistleblower policy? 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? 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? 15 Did the organization's CEO, Executive Director, or top management official 15 The organization's CEO, Executive Director, or top management official 15 Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16 Did the organization injoint venture arrangements with a taxable entity during the year? 17 List the States with which a copy of this Form 990 is required to be filed 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? 18 Section 6.104 requires an organization to make its Form 10.23 (or 10.24 if applicable), 990, and 990-T (50.1(c) (3)s only) available for public inspection Indicate how you make these available Check all that apply 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 See Additional Data Table	11A	Describe in Schedule O the process, if any, used by the organization to review the Fo	rm 9	90				
to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," according to be sthe organization have a written whistleblower policy? Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? Did the organization in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organizations of exempt status with respect to such arrangements? Discriber C. Disclosure 15	12a	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a	Yes		
describe in Schedule O how this is done	b			_	12b	Yes		
14 Does the organization have a written document retention and destruction policy?	c		h the	policy? If "Yes,"	12c	Yes		
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	13	Does the organization have a written whistleblower policy?			13		Νo	
independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official	14	Does the organization have a written document retention and destruction policy? $\ \ .$	•		14		Νo	
b Other officers or key employees of the organization	15	· · · · · · · · · · · · · · · · · · ·		• • •				
If "Yes" to line a or b, 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 with a taxable entity during the year?	а	The organization's CEO, Executive Director, or top management official			15a	Yes		
Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	b				15b		No	
taxable entity during the year?		If "Yes" to line a or b, describe the process in Schedule O (See instructions)						
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?	16a		rsım •	ılar arrangement wıth a	16a		Νο	
Section 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 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 V 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. See Additional Data Table	b							
List the States with which a copy of this Form 990 is required to be filed 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. ✓ Upon request 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. See Additional Data Table		participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the						
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. Upon request 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. See Additional Data Table.	Se	ction C. Disclosure						
(3)s only) available for public inspection. Indicate how you make these available. Check all that apply ☐ Own website. ☐ Another's website. ☑ 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. See Additional Data Table.	17	List the States with which a copy of this Form 990 is required to be filed.						
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 See Additional Data Table	18	(3)s only) available for public inspection. Indicate how you make these available. Ch						
interest policy, and financial statements available to the public. See Additional Data Table	19		ia dor	uments, conflict of				
		interest policy, and financial statements available to the public See Additional Data	Table	·	e Oras	nization	n ⊫ -	

Part VIII 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 Report compensation for the calendar year ending with or within the organization's tax year. 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 all of the organization's current key employees. See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if the organization did i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
(A) Name and Title	(B) Average hours per	(C) Position (check all that apply)						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

For	n 990 (2009)			Page 8
1b	Total	0		3,483
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization •0			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule I for such individual	4		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule I for such person	5		No
S	ection B. Independent Contractors			
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization			
	(A) Name and business address (B) Description of services		(C Compe	
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization •0			
		F	orm 99 0	0 (2009)

Form 99								Page 9
Part V	<u>/1111</u>	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
2 2	1a	Federated cam	paigns 1a	41,634				
죮	ь	Membership du	es 1b					
₽Σ	c	Fundraising eve	ents 1c					
ž =	d	Related organiz	ations 1d					
% E	e	Government grants	s (contributions) 1e	163,820				
<u>≅</u> .≅	f	All other contribution	ons, gifts, grants, and 1f	97,627		İ		i
F E		similar amounts no						
# 	9	g Noncash contributions included in lines 1a-1f \$						
Contributions, gifts, grants and other similar amounts	h		s 1a-1f	▶	303,081			
				Business Code				
III.e	2a	Membership Dues	& Asse	711,300	206,340	206,340		
e, ke	Ь	Promotions & Annu	ual Me	711,300	108,560	108,560		
ል ጨ	_ c	DEDIF Managemer		561,000	24,400	24,400		
r S	ď	Misc Income		900,099	17,270	17,270		
Program Service Revenue	e			300,033	17,270	17,270		
ran.	, ,	All other progra	am service revenue					
Ď	'	All other progre	am service revenue					
	g	Total. Add lines	s 2a-2f		356,570			
	3		ome (including dividend		2.025			2.025
			ar amounts)	-	2,025			2,025
	4		tment of tax-exempt bond p	oroceeds -				
	5	Royalties	(ı) Real	(II) Personal				
	6a	Gross Rents	(I) Real	(II) Personal				
	ь	Less rental						
		expenses Rental income						
	C	or (loss)						
	d	Net rental inco	me or (loss)					
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(II) O ther				
	Ь	Less cost or other basis and sales expenses						
	C	Gain or (loss)						
	d		s)					
ıne	8a	Gross income f events (not inc						
Other Revenue			reported on line 1c)					
ē	Ь	less directer	penses b					
₹	c		loss) from fundraising (events 🛌				
	9a		rom gaming activities					
	ь		a penses b					
	C		loss) from gaming activ	/ities				
	10a	Gross sales of returns and allo						
	ь	Less cost of g	oods sold b					
	С	-	ا loss) from sales of inve	entory ►				
		Miscellaneous	s Revenue	Business Code				
	11a						<u></u> _	
	ь							
	c							
	d	All other reven	ue					
	e	Total. Add lines	s 11a-11d '					
	12	Total revenue.	See Instructions	▶				
]				661,676	356,570	0	2,025

	990 (2009)				Page 10
Part	Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations mus	t complete all o	columns.		
Α	Il other organizations must complete column (A) but are not required to c			(D).	
Do no	ot include amounts reported on lines 6b, o, 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	2,693	2,693		
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	107,210	15,055	79,153	13,002
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	123,663	101,404	22,259	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	5,263			
9	Other employee benefits	9,390	7,700	+ +	
10	Payroll taxes	18,380	15,072	 	
11	Fees for services (non-employees)	10,500	15,072	3,300	
	Management				
a		640		640	
b	Legal	648		648	
С.	Accounting	5,830		5,830	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	95,295	93,389	1,906	
13	Office expenses	15,469	11,552	3,917	
14	Information technology	32,655		32,655	
15	Royalties				
16	Occupancy	32,527	24,395	8,132	
17	Travel	347	260	87	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,893	3,893		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	19,861		19,861	
23	Insurance	12,577		12,577	
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	Events	145,913	145,913		
ь	Programs, Services, Pro	44,079	44,079	+ + +	
С	Parking	3,789	2,842	+	
d		, 			
e					
f	All other expenses	6,531	4,869	1,662	
25	Total functional expenses. Add lines 1 through 24f	686,013	477,432	195,579	13,002
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational				
	campaign and fundraising solicitation		L		

Form 990 (2009) Page 11 Part X Balance Sheet (A) (B) End of year Beginning of year 1 Cash—non-interest-bearing 1 206,827 2 172,292 2 3 3 4 1.238 4 28.270 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Notes and loans receivable, net Inventories for sale or use 8 Prepaid expenses and deferred charges 3.206 2,173 9 9 Land, buildings, and equipment cost or other basis Complete Part 118.136 10a 10a VI of Schedule D 10b 48.990 89.006 69.146 b Less accumulated depreciation 10c 11 11 12 Investments—other securities See Part IV, line 11 12 13 13 Investments—program-related See Part IV, line 11 . . 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 300,277 16 271,881 16.244 17 7.604 17 Accounts payable and accrued expenses 18 18 21,219 25,800 19 19 20 20 Liabilities 21 21 Escrow or custodial account liability $Complete\ Part\ IV\ of\ Schedule\ D$. . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities Complete Part X of Schedule D 25 26 Total liabilities. Add lines 17 through 25 37,463 26 33,404 Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 Balances through 29, and lines 33 and 34. 27 27 Unrestricted net assets 28 28 Temporarily restricted net assets Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here 🕨 🔽 and complete lines 30 through 34. ö 30 0 30 0 Capital stock or trust principal, or current funds . . . Assets 0 0 Paid-in or capital surplus, or land, building or equipment fund 31 31 32 262,814 238,477 Retained earnings, endowment, accumulated income, or other funds 32 ¥ 33 Total net assets or fund balances 262,814 33 238,477 34 Total liabilities and net assets/fund balances 300,277 34 271.881

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	Separate basis Consolidated basis Both consolidated and separated basis			
3а	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?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Form **990** (2009)

Software ID: Software Version:

EIN: 36-3627217

Name: Downtown Sloux Falls Inc

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) A verage hours	Posi	(C tion (hat a	:) (che	cka			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	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
Larry Rehfeld President	2 00	Х		Х				0	0	0
Scott Gullickson Vice President	2 00	Х		Х				0	0	0
Elizabeth Lewis Secretary	2 00	X		х				0	0	0
Bill Peterson Past President	2 00	X		х				0	0	0
Mike Cooper Director	1 00	X						0	0	0
Matthew Gabbert Director	1 00	X						0	0	0
Jeff Hazard Director	1 00	Х						0	0	0
Grant Houwman Director	1 00	X						0	0	0
Lorı Jensen Dırector	1 00	Х						0	0	0
Michael Ness Director	1 00	X						0	0	0
Terrı Schuver Dırector	1 00	Х						0	0	0
Laurie Knutson Director	1 00	X						0	0	0
Paula Brown Director	1 00	X						0	0	0
Robert Baker Director	1 00	X						0	0	0
Dave Bangasser Director	1 00	X						0	0	0
Sharlene Bajema Chief Financial Officer	24 00			X				20,531	0	0
Daniel Statema Executive Director	40 00			Х				83,196	0	3,483

DLN: 93493279005000

OMB No 1545-0047

Open to Public

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

Inspection If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities),

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only
- If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then
- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- ◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A
- If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35a (regarding proxy tax), then
- ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

Did the filing organization file Form 1120-POL for this year?

Name of the organization
Downtown Sioux Falls Inc

┌ Yes

┌ No

	ame of the organization wintown Sloux Falls Inc 36-36	•		ition numbe	er	
ar	rt I-A Complete if the organization is exempt under section 501(c) or is a section	n 52	7 org	ganizatio	n.	
1	Provide a description of the organization's direct and indirect political campaign activities in Part IV					
2	Political expenditures	>	\$			
3	Volunteer hours		_			_
Par	rt I-B Complete if the organization is exempt under section 501(c)(3).					_
1	Enter the amount of any excise tax incurred by the organization under section 4955	Þ	\$			
2	Enter the amount of any excise tax incurred by organization managers under section 4955	-	\$			
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?			┌ Yes	┌ No	
4a	Was a correction made?			☐ Yes	┌ No	
b	If "Yes," describe in Part IV					
Par	rt I-C Complete if the organization is exempt under section 501(c) except section	on 50	1 (c)	(3).		
1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	; þ	\$			
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities	-	\$			
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	•	¢			

State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Pa	rt II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c)(3) and file	d Form 5768	(election
	Check If the filing organization belongs to a Check If the filing organization checked box		d" provisions apply	,		
<u> </u>	Limits on Lobbying E (The term "expenditures" means ar	Expenditures			(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	ıbyıng)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	yıng)			
c	Total lobbying expenditures (add lines 1a and 18	b)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount f	from the following table	ın both			
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxa 20% of the amount on lir				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000					
	Over \$17,000,000	\$1,000,000				
		•				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1 f)				
h	Subtract line 1g from line 1a If zero or less, enter	er -0-				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -				
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file F	orm 4720 repoi	rtıng	┌ Yes ┌ No
	(Some organizations that made a columns below. See the	he instructions fo	ection do not l r lines 2a thro	nave to com ugh 2f on pa		ne five
	Lobbying Exp	enditures During	4-Year Averag	ing Period	I	ı
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots non-taxable amount					

Sche	edule C (Form 990 or 990-EZ) 2009				age 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and hat (election under section 501(h)).	s NOT f	iled Fo	rm 576 (b)	8
			(a)		
		Yes	No	A mou	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	V olunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities? If "Yes," describe in Part IV				
j	Total lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	n 501(c)(5), o	r sectio	on
			_	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		<u> </u>	1 Yes	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		_	2 Yes	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3	Νo
Par	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Para answered "Yes".				on
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	nl			
а	Current year	2a			
b	Carryover from last year	2b			
С	Total	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	s s 4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			
Pa	art IV Supplemental Information				
	omplete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5 so, complete this part for any additional information	, and Part	II-B, line	11	
		anation			

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As Filed Data -

DLN: 93493279005000

OMB No 1545-0047

2009

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

Name of the organization
Downtown Sloux Falls Inc

Bent I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the

	(a) Donor advised funds	(b) Funds a	and other accounts
Total number at end of year			
Aggregate contributions to (during year)			
Aggregate grants from (during year)			
Aggregate value at end of year			
Did the organization inform all donors and don- funds are the organization's property, subject	<u> </u>	onor advised	ΓYes ΓN
Did the organization inform all grantees, donor used only for charitable purposes and not for t conferring impermissible private benefit	•	•	ΓYes ΓNα
rt III Conservation Easements. Com	plete if the organization answered "Yes"	to Form 990, Pa	rt IV, line 7.
Purpose(s) of conservation easements held by Preservation of land for public use (e.g., respectively) Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held	ecreation or pleasure) Preservation of a	an historically impo a certified historic s rm of a conservation	structure
easement on the last day of the tax year	a 444		
Total number of conservation easements			the End of the Year
		2a	
Total acreage restricted by conservation ease Number of conservation easements on a certif		2b	
	, ,	2c	
Number of conservation easements included i		2d	
Number of conservation easements modified,	ransferred, released, extinguished, or termina	ted by the organiza	tion during
the taxable year 🗠			
Number of states where property subject to co	nservation easement is located ►		
Does the organization have a written policy re enforcement of the conservation easements it		ndling of violations	, and Yes N
Staff and volunteer hours devoted to monitoring	g, inspecting and enforcing conservation ease	ements during the y	ear ►
A mount of expenses incurred in monitoring, in	specting, and enforcing conservation easemer	nts during the year	▶ \$
Does each conservation easement reported or 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	ı line 2(d) above satisfy the requirements of s	ection	┌ Yes ┌ N
In Part XIV, describe how the organization rep balance sheet, and include, if applicable, the t			
the organization's accounting for conservation			
rt III Organizations Maintaining Coll		, or Other Simi	lar Assets.
tt IIII Organizations Maintaining Coll	easements lections of Art, Historical Treasures ered "Yes" to Form 990, Part IV, line 8. SFAS 116, not to report in its revenue stater is held for public exhibition, education or resea	nent and balance sl arch in furtherance	neet works of
Complete if the organization answ If the organization elected, as permitted under art, historical treasures, or other similar asset	easements lections of Art, Historical Treasures ered "Yes" to Form 990, Part IV, line 8. SFAS 116, not to report in its revenue stater is held for public exhibition, education or resea outs financial statements that describes these r SFAS 116, to report in its revenue statement and for public exhibition, education, or research	nent and balance sl arch in furtherance items t and balance sheet	heet works of of public service, works of art,
Complete if the organization answ If the organization elected, as permitted under art, historical treasures, or other similar asset provide, in Part XIV, the text of the footnote to If the organization elected, as permitted under historical treasures, or other similar assets he	lections of Art, Historical Treasures ered "Yes" to Form 990, Part IV, line 8. SFAS 116, not to report in its revenue statements held for public exhibition, education or resease its financial statements that describes these expects of SFAS 116, to report in its revenue statements and for public exhibition, education, or researched items	ment and balance sl arch in furtherance intems t and balance sheet n in furtherance of p	heet works of of public service, works of art,
Complete if the organization answ If the organization elected, as permitted under art, historical treasures, or other similar asset provide, in Part XIV, the text of the footnote to If the organization elected, as permitted under historical treasures, or other similar assets he provide the following amounts relating to these	lections of Art, Historical Treasures ered "Yes" to Form 990, Part IV, line 8. SFAS 116, not to report in its revenue statements held for public exhibition, education or resease its financial statements that describes these expects of SFAS 116, to report in its revenue statements and for public exhibition, education, or researched items	nent and balance slarch in furtherance items tand balance sheet in in furtherance of p	neet works of of public service, works of art, ublic service,
Complete if the organization answ If the organization elected, as permitted under art, historical treasures, or other similar asset provide, in Part XIV, the text of the footnote to If the organization elected, as permitted under historical treasures, or other similar assets he provide the following amounts relating to these (i) Revenues included in Form 990, Part VIII	easements lections of Art, Historical Treasures ered "Yes" to Form 990, Part IV, line 8. SFAS 116, not to report in its revenue stater is held for public exhibition, education or resea outs financial statements that describes these SFAS 116, to report in its revenue statement eld for public exhibition, education, or research eld for public exhibition education, or research eld for public exhibition education, or research eld for public exhibition education edu	ment and balance slarch in furtherance items tand balance sheet in in furtherance of p	neet works of of public service, works of art, ublic service,
Complete if the organization answ If the organization elected, as permitted under art, historical treasures, or other similar asset provide, in Part XIV, the text of the footnote to If the organization elected, as permitted under historical treasures, or other similar assets he provide the following amounts relating to these (i) Revenues included in Form 990, Part VIII (ii) Assets included in Form 990, Part X If the organization received or held works of an	lections of Art, Historical Treasures ered "Yes" to Form 990, Part IV, line 8. SFAS 116, not to report in its revenue statements held for public exhibition, education or resease its financial statements that describes these SFAS 116, to report in its revenue statements eld for public exhibition, education, or research exitems In Initial I	ment and balance slarch in furtherance items tand balance sheet in in furtherance of p	neet works of of public service, works of art, ublic service,

CIL	Organizations Maintaining Co	llections of Art	t, His	tori	cal Tr	reasur	res, or Ot	iner	Similar As	sets	(continued)
3	Using the organization's accession and other items (check all that apply)	records, check an	y of th	ie fol	lowing	that are	a sıgnıfıca	nt us	e of its collec	tıon	
а	Public exhibition		d	Γ	Loan	orexch	ange progra	ams			
b	Scholarly research		e	Γ	Other	r					
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIV	ollections and expla	ain hov	v the	y furthe	er the or	ganızatıon'	sex	empt purpose	ın	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t			,					llar	┌ Yes	
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an						answered	l "Y€	es" to Form 9	990,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	ediary	for c	ontribu	itions oi	r other asse	ets n	ot	┌ Yes	⊢No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ing t	able		Г		Ar	nount	
с	Beginning balance							1c			
d	Additions during the year							1d			
e	Distributions during the year							1e			
f	Ending balance						<u> </u>	1f			
2a	Did the organization include an amount on Fo	orm 990. Part X. lin	e 21?							┌ Yes	□ No
	If "Yes," explain the arrangement in Part XIV									,	,
	rt V Endowment Funds. Complete		n ans	were	ed "Ye	s" to F	orm 990.	Part	IV, line 10.		
		(a)Current Year		Prior `			Years Back		hree Years Back	(e) Fou	r Years Back
1a	Beginning of year balance										
b	Contributions										
c	Investment earnings or losses										
d	Grants or scholarships										
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the yea	r end balance held	as								
а	Board designated or quasi-endowment 🕨	%									
b	Permanent endowment 🕨 %										
С	Term endowment ► %										
3a	Are there endowment funds not in the posses	ssion of the organiz	ation	thata	are held	d and ac	lmınıstered	for t	:he		
	organization by								_	Ye	s No
	(i) unrelated organizations			•				•	3a		
ь	(ii) related organizations If "Yes" to 3a(ii), are the related organization				 lula B2	• •			3a		<u> </u>
4	Describe in Part XIV the intended uses of th	·						•	3		
	t VI Investments—Land, Buildings					90. Pa	rt X. line 1	10.			
	<u> </u>	<u>, = 43.6e</u>			a) Cost o		(b)Cost or o		(c) Accumulate	ed .	
	Description of investment				sis (inve		basis (othe		depreciation) Book value
1a	Land										
	Buildings										
b											
	Leasehold improvements						14	,671	5,	868	8,803
c								,671 ,465		868 122	8,803 60,343
c d	Leasehold improvements		· ·								

Part VII Investments—Other Securities. Sec	e Form 990, Part X, line 17	
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	*	
Part VIII Investments—Program Related. Se	ee Form 990, Part X, line	13.
(a) Description of investment type	(b) Book value	(c) Method of valuation
——————————————————————————————————————	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	▶ Inc. 1E	
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, (a) Descri	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, (a) Description (b) Should equal Form 990, Part X, col.(B) line	ine 15.	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part	Ine 15. Iption 15.) X, line 25.	
Part IX Other Assets. See Form 990, Part X, (a) Description (b) Should equal Form 990, Part X, col.(B) line	ine 15.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
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Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	15.) X, line 25. (b) A mount	

Schedule D (Form 990) 2009

1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	661,676
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	686,013
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	-24,337
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV)		8	
9	Total adjustments (net) Add lines 4 - 8		9	(
10	Excess or (deficit) for the year per financial statements Combine lines 3 an	d 9	10	-24,337
Par	t XII Reconciliation of Revenue per Audited Financial State		per Return	
1	Total revenue, gains, and other support per audited financial statements		1	677,359
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b 15,683		
C	Recoveries of prior year grants	2c]	
d	Other (Describe in Part XIV)	2d]	
e	Add lines 2a through 2d		2e	15,683
3	Subtract line 2e from line 1		3	661,676
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b.	4a	<u> </u>	
b	Other (Describe in Part XIV)	4b	<u> </u>	
С	Add lines 4a and 4b		4c	(
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line		5	661,676
	Reconciliation of Expenses per Audited Financial Stat	ements With Expense	s per Retu	
1	Total expenses and losses per audited financial statements		1	701,696
2	A mounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a 15,683	3	
b	Prior year adjustments	2b	7	
c	Other losses	2c	7	
d	Other (Describe in Part XIV)	2d	7	
e	Add lines 2a through 2d		2e	15,683
3	Subtract line 2e from line 1		3	686,013
4	A mounts 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 XIV)	4b	_	
c	Add lines 4a and 4b		4c	C
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, lin	e 18)	5	686,013
	t XIV Supplemental Information			

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
	Positions Under FIN 48	The Organization has adopted the provisions of FASB Accounting Standards Codification Section ASC 740-10 (previously Financial Interpretation No. 48, Accounting for Uncertainty in Income Taxes), on January 1, 2009. The implementation of this standard had no impact on the financial statements. As of both the date of adoption, and as of December 31, 2009, the unrecognized tax benefit accrual was zero. The Organization will recognize future accrued interest and penalities related to unrecognized tax benefits in income tax expense if incurred. The Organization is no longer subject to Federal or state tax examinations by tax authorities for years before 2006.

DLN: 93493279005000

OMB No 1545-0047

Transactions with Interested Persons

Schedule L

(Form 990 or 990-EZ)

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.

Open to Public

Inspection

Yes

No

Department of the Treasury Internal Revenue Service

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

Name (of the	organiz	zat ion
Downton	∦n Siou	ıx Falls Ir	nc

Employer identification number

36-3627217

art I	Exc	ess	Benefit '	Transactions	(sec	tıon	501	(c)(3)	and	d sed	ction	501	(c)(4)	orgar	nizations only).	
	_		e		1 11 5 7		_		_			~ -	0 - :	_		

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

(c) Corrected? (a) Name of disqualified person (b) Description of transaction

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . .

Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(f) (b) Loan to (e) In Approved (g)Written or from the (a) Name of interested person and (c)Original default? by board or agreement? (d)Balance due organization? principal amount purpose committee? Yes From No No Yes No Τо Yes

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person

(b)Relationship between interested person and the organization

(c)A mount of grant or type of assistance

Business Transactions Involving Interested Persons. Part IV

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(e) Sharing of (b) Relationship organization's between interested (c) A mount of (a) Name of interested person (d) Description of transaction person and the transaction revenues? organization No Robert Baker Board member is Vice 1,167,546 Deposits to checking and Νo President at First savings accounts National Bank in Sioux Falls Robert Baker Board member is Vice 1,203,616 Withdrawals and transfers from Νo President at First checking and savings accounts National Bank in Sioux Falls

OMB No 1545-0047

OMB No 1545-004

2009

Open to Public Inspection

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

Name of the organization Downtown Sloux Falls Inc ${\bf Employer\ identification\ number}$

36-3627217

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 6		Membership in the program shall be available to any person or business that believes in and will promote the purposes and objectives of the program. The program consists of one class of members in the following categories. BID Members defined as those members who are required to pay in to a Business Improvement. District Non-BID Members defined as those members who are not required to pay in to a Business Improvement. District Dues required for Non-BID membership may be determined from time to time by the Board of Directors. No dues will be required for BID membership. The calendar year for dues shall begin January 1. Non-BID membership shall be considered terminated upon default of payment of dues for a period of three (3) months after the dues become payable. BID membership shall be considered terminated upon default of payment into the Business Improvement District for a period of three (3) months after the dues become payable. Memberships are not transferable or assignable.
Form 990, Part VI, Section A, Iine 7a		Each member shall be entitled to one vote per membership in the election of directors
Form 990, Part VI, Section A, line 8b		Details of Executive Committee meetings are provided to full Board of Directors at next meeting following an Executive Committee Meeting
Form 990, Part VI, Section B, Iine 11		An electronic copy will be forwarded to each member of Board of Directors for review prior to meeting. At BOD meeting, Form 990 will be reviewed, any questions answered, and motion to accept and file made.
Form 990, Part VI, Section B, line 12c		The conflict of interest policy covers board members, officers and members of a committee with governing board delegated powers. A request is made annually for all board members to disclose any potential conflict of interest. The board makes a determination of whether there is a conflict of interest and if so, implements the procedure for evaluating the issue or transaction involved. The board member, officer, or committee member with the conflict must refrain from voting. The process was undertaken in 2009.
Form 990, Part VI, Section B, Iine 15a		The Executive Committee performs an annual review of the Executive Director at the end of each year Based on the review, the Executive Committee determines the bonus for current year and the compensation for the ED for the upcoming year
Form 990, Part VI, Section C, Iine 19		The organizations documents are available upon request
Form 990, Part VII, Section A, Column B		The estimated hours devoted by Officers, Directors, Trustees, and Key Employees to the related organization, Downtown Sioux Falls, is as follows. Dan Statema - 0.5 hour per wieek Sharlene Bajema - 1 hour per wieek The organization was compensated via a management fee of \$24,400.

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DLN: 93493279005000

2009

OMB No 1545-0047

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SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

Department of the Treasury Internal Revenue Service

Name of the organization Downtown Sloux Falls Inc

Employer identification number

36-3627217

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

► Attach to Form 990.

Name, address, and EIN of disregarded entity

(b) Primary activity

(c) Legal domicile (state or foreign country)

See separate instructions.

Total income

(e) End-of-year assets

(f) Direct controlling entity

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a)
Name, address, and EIN of related organization

Primary activity

Legal domicile (state or foreign country)

(d) Exempt Code section

Public charity status (if section 501(c)(3)) Direct controlling entity

Downtown Economic Development Incentive Fund Corporation

230 S Phillips Ave

Sioux Falls, SD 57104 46-0438409

To promote the redevelopment of Downtown Sioux Falls through gap

financing

SD

501(c)(6)

N/A

(j)

General or

managing

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

(a) Name, address, and EIN of related organization **(b)** Primary activity (c)
Legal
domicile
(state or
foreign
country)

al (d)
cile Direct controlling
or entity
gn

(e)
Predominant income
(related, unrelated,
excluded from tax
under sections 512514)

(f) Share of total income (g) Share of end-of-year assets (h)
Disproprtionate
allocations? ai

(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)

hedule K-1 partner? form 1065)

Yes No

Yes

No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a)
Name, address, and EIN of related organization

(b) Primary activity (c) Legal domicile (state or foreign country) (d) Direct controlling entity (e)
Type of entity
(C corp, S corp,
or trust)

(f) Share of total income

(g) Share of end-of-year assets (h) Percentage ownership

ched	dule R (Form 990) 2009		Pa	ige 3
Pai	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)			
	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 Du	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to other organization(s)	1 b		No
c	Gift, grant, or capital contribution from other organization(s)	1c		No
d	Loans or loan guarantees to or for other organization(s)	1d		No
e	Loans or loan guarantees by other organization(s)	1e		No
f	Sale of assets to other organization(s)	1f		No
g	Purchase of assets from other organization(s)	1g		No
h	Exchange of assets	1h		No
i	Lease of facilities, equipment, or other assets to other organization(s)	1i		No
				<u> </u>
j	Lease of facilities, equipment, or other assets from other organization(s)	1j		No
k	Performance of services or membership or fundraising solicitations for other organization(s)	1k	Yes	↓
I	Performance of services or membership or fundraising solicitations by other organization(s)	11		No
m	Sharing of facilities, equipment, mailing lists, or other assets	1m	Yes	
n	Sharing of paid employees	1n	Yes	_
o	Reimbursement paid to other organization for expenses	10		No
p	Reimbursement paid by other organization for expenses	1р		No
q	O ther transfer of cash or property to other organization(s)	1 q		No
	O ther transfer of cash or property from other organization(s)	1r		No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds			
	(b)			

(a) Name of other organization (c) Amount involved Transaction type(a-r) (1) Downtown Economic Developement Incentive Fund Corporation

24,400

(1) See Additional Data Table (2)

(3)

(4)

(5)

(6)

Schedule R (Form 990) 2009

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a)
Name, address, and EIN of entity

(b) Primary activity (c) Legal domicile (state or foreign country) (d)
Are all
partners
section
501(c)(3)
organizations?

Yes No

(e) Share of end-of-year assets **(f)** Disproprtionate allocations?

No

Yes

(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (h) General or managing partner?

Yes No