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Form 990-EZ

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For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

# Short Form 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)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

OMB No 1545-1150 2009

Open to Public Inspection

Form 990-EZ (2009)

Department of the Treasury Internal Revenue Service ▶ The organization may have to use a copy of this return to satisfy state reporting requirements For the 2009 calendar year, or tax year beginning and ending Name of organization D Employer identification number Check if applicable Please use IRS SOUTH DAKOTA GOLF ASSOCIATION Address change label or JUNIOR GOLF FOUNDATION 46-0449824 Name change print or Initial return Number and street (or P O box, if mail is not delivered to street address) Room/suite Telephone number type. See 605-338-7499 4809 W 41ST STREET 202 Termination Specific Group Exemption Amended return City or town, state or country, and ZIP + 4 Instruc-SD 57106 SIOUX FALLS Application pending Number • Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach G Accounting method X Cash a completed Schedule A (Form 990 or 990-EZ). Other (specify) Website: > sdga.org Check > If the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF) 527 X 501(c) ( 3 ) **◄** (insert no ) 4947(a)(1) or Tax-exempt status (check only one) — Check If the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000 A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ 209,421 ▶ \$ Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.) Part I 57,340 1 Contributions, gifts, grants, and similar amounts received 1 143,907 2 Program service revenue including government fees and contracts 2 3 3 Membership dues and assessments 4 8,174 4 Investment income 5a Gross amount from sale of assets other than inventory 5a 5b ь Less cost or other basis and sales expenses Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 5c Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here Revenue Gross revenue (not including \$ of contributions reported on line 1) 6a Less direct expenses other than fundraising expenses Net income or (loss) from special events and activities (Subtract line 6b from line 6a) 6c 7a Gross sales of inventory, less returns and allowances 7a 7b b Less cost of goods sold Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7c C 8 Other revenue (describe 8 209,421 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 nenc 9 19,218 10 Stmt 10 Grants and similar amounts paid (attach schedule) 11 11 Benefits paid to or for members Salaries, other compensation, and employee benefits 12 12 5,394 13 Professional fees and other payments to independent contractors 13 14 Occupancy, rent, utilities, and maintenance 14 15 Printing, publications, postage, and shipping 15 Other expenses (describe ▶ See Statement 2 117,730 16 16 142,342 17 Total expenses. Add lines 10 through 16 17 67,079 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 307,097 19 end-of-year figure reported on prior year's return) See Statement 3 30,109 20 Other changes in net assets or fund balances (attach explanation) 20 404,285 21 21 Net assets or fund balances at end of year Combine lines 18 through 20 Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ (See the instructions for Part II) (A) Beginning of year (B) End of year 307,190 22 404,474 22 Cash, savings, and investments 23 23 Land and buildings 200 200 See Statement 4 24 24 Other assets (describe 404,674 307,390 25 Total assets 25 293 389 26 Total liabilities (describe See Statement 5 26 307 097 404,285 27 27 Net assets or fund balances (line 27 of column (B) must agree with line 21)

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Form 990-EZ (2009) SOUTH DAKOTA GOLF ASSOCIATION		-0449824			Page 2
Part III Statement of Program Service Accomplishments (Se	ee the instruction	ons for Part III.		Ex	penses
What is the organization's primary exempt purpose?				(Required t	for section
CARRY OUT CHARITABLE & EDUCATIONAL PURPOSES OF SDGA		501(c)(3) a	nd 501(c)(4)		
Describe what was achieved in carrying out the organization's exempt purposes. In a c				organizatio	ns and section
manner, describe the services provided, the number of persons benefited, or other rele	vant information for	•		4947(a)(1)	trusts, optional
each program title				for others.)	1
28 FUNDING PORTIONS OF THE SDGA JUNIOR GOLF PROGRAM,					
INCLUDING QUALITY GOLF INSTRUCTION TO JUNIOR GOLFERS VIA					
SCHOLARSHIPS, ENDOWMENTS, AND THE H. S. GOLF TOURNAMENT.					
(Grants \$ 718) If this amount includes foreign grants, check	ck here	•	$\Box$	28a	101,130
29					
•					
			l		
(Grants \$ ) If this amount includes foreign grants, chec	ck here	•	$\Box$	29a	
30					
			1		
(Grants \$ ) If this amount includes foreign grants, chec	ck here	•	$\cap$ $\Box$	30a	
31 Other program services (attach schedule)	51. 71.01.0		<del>'</del>		
(Grants \$ 18,500) If this amount includes foreign grants, che	rk here	•	$\Box$	31a	18,500
32 Total program service expenses (add lines 28a through 31a)	SK TIGIG		┢╫	32	119,630
Part IV List of Officers, Directors, Trustees, and Key Employees. List each	n one even if not co	mnensated (See t	he ins		
Part 14 List of Officers, Directors, Trustees, and key Employees. List each	(b) Title and average	(c) Compensation	(d)	Contributions to	(e) Expense
(a) Name and address	hours per week	(If not paid, enter -0)		ree benefit plans & ed compensation	account and other allowances
ACTUAL PRINCIPALIN	devoted to position	enter -0j	delent	30 Compensation	Other allowances
MATT EINSPAHR	PRESIDENT	,	1	o	o
			1		<u> </u>
CINDY OLSON	VICE PRES	_		ا	^
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KEVIN BUNTROCK	SEC-TREAS			_	
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DAA	<u> </u>	L	·		rm <b>990-EZ</b> (2009)
una				FU	<del> (</del> 2003)

Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here

Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of

Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If

and enter the amount of tax-exempt interest received or accrued during the tax year

"Yes," Form 990 must be completed instead of Form 990-EZ

	Yes	No
44		X_
45		x
 00	0 E7	(0000)

▶ 43

Form 990-EZ (2009)

43

Form 990-EZ

PRESIDENT

4th Street,

SD

Associates,

Date

Suite 2

57022

05/18/10

Check if

MATT EINSPAHR Type or print name and title

æ

Rapids,

Dell

May the IRS discuss this return with the preparer shown above? See instructions

Preparer's

signature

Firm's name (or yours

if self-employed),

iddress, and ZIP +

Form 990-EZ (2009)

Preparer's Identifying Number (See instr.)

▶ 46-0387944

605-428-5694

Yes

P00483608

EIN

Phone

no 🕨

Paid

Preparer's

**Use Only** 

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization SOUTH DAKOTA GOLF ASSOCIATION JUNIOR GOLF FOUNDATION

46-0449824

Employer identification number

<u> </u>	<u>art I</u>	Reas	on for Public Charity	Status (All organizations	must co	mplete	this p	art.) S	<u>ee ins</u>	tructio	ns.		
Γhe	orga	nization is not	a private foundation because	it is (For lines 1 through 11, che	eck only o	ne box )							
1		A church, cor	nvention of churches, or asso	ciation of churches described in	section 1	70(b)(1)(/	A)(i).						
2		A school des	спbed in section 170(b)(1)(A	(ii). (Attach Schedule E )									
3		A hospital or	a cooperative hospital service	e organization described in secti	ion 170(b)	(1)(A)(iii)							
4	П	A medical res	research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,										
	city, and state												
5		•		a college or university owned or	operated	by a gove	ernmenta	al unit de	escribed	ın			
		-	b)(1)(A)(iv). (Complete Part	•		, ,							
6		•		vernmental unit described in <b>sec</b>	tion 170	b)(1)(A)(v	·).						
7	X	•		ubstantial part of its support from	•		•	n the ae	neral ou	blic			
		•	section 170(b)(1)(A)(vi). (Co	• • • • • • • • • • • • • • • • • • • •									
8				70(b)(1)(A)(vi). (Complete Part II	)								
9	H	-		more than 33 1/3 % of its suppo		ntribution	s. memb	ership f	ees. and	l aross			
	ш	•	-	ot functions—subject to certain e						-			
				d unrelated business taxable inco									
			=	, 1975 See section 509(a)(2). (			,						
10		•	•	xclusively to test for public safety			a)(4).						
11	H	-	-	xclusively for the benefit of, to pe				carry ou	it the				
	ш	J	•	d organizations described in sec				· .	_	tion			
			, , , , ,	e type of supporting organization	•								
		a Type	l <b>b</b> Type II	c Type III–Functiona	ally integra	ited	d	Tvp	e III-Ot	her			
е			·	inization is not controlled directly			or more						
				ind other than one or more public						ction			
		509(a)(1) or s	section 509(a)(2)	•		J							
f			, , , ,	mination from the IRS that it is a	Type I, Ty	pe II, or T	ype III s	upportir	ıg				
			check this box			•							
g		Since August	17, 2006, has the organization	on accepted any gift or contributi	on from a	ny of the							
Ŭ		following per	· · · · · · · · · · · · · · · · · · ·			•							
				ntrols, either alone or together wi	th person:	s describe	ed in (ii)					Yes	No
		and (m) l	below, the governing body of	the supported organization?							11g(i)		
			member of a person describe	``							11g(ii)		
		(iii) A 35% c	ontrolled entity of a person di	escribed in (i) or (ii) above?							11g(ili)		
h		Provide the f	ollowing information about the	e supported organization(s)									
(i)	Name	e of supported	(ii) EIN	(iii) Type of organization	(iv) Is the d	organization	(v) Did y	ou notify	(vi)	s the	(vil) Amo	ount of	
	org	anization		(described on lines 1–9	1	sted in your		nization in of your	organizat	ion in col zed in the	supp	ort	
				above or IRC section (see Instructions))	governing	document?		part?		5 ?			
				(000 ///011 00000///	Yes	No	Yes	No	Yes	No			
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	sources	5,803	27,423	14,597	9,134	8,174	65,131
9	Net income from unrelated business activities, whether or not the business is regularly carried on					0	
0	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
1	Total support. Add lines 7 through 10				·		540,090
2	Gross receipts from related activities, etc. (s	see instructions)		<del></del>		12	300,992
3	First five years. If the Form 990 is for the o	organization's first, seco	nd, third, fourth, or	fifth tax year as a	section 501(c)(3)		
	organization, check this box and stop here						
Sec	tion C. Computation of Public Su	pport Percentage					
4	Public support percentage for 2009 (line 6,	column (f) divided by lin	e 11, column (f))			14	87.94%
5	Public support percentage from 2008 Scheo	dule A, Part II, line 14				15	64.37%
6a	33 1/3 % support test—2009. If the organic	zation did not check the	box on line 13, ar	id line 14 is 33 1/3 <sup>9</sup>	% or more, check th	is box	_
	and stop here. The organization qualifies a	s a publicly supported o	rganization				► X
b	33 1/3 % support test—2008. If the organic	zation did not check a b	ox on line 13 or 16	Sa, and line 15 is 33	1/3 % or more, che	ck this	
	box and stop here. The organization qualifi	es as a publicly support	ed organization				<b>&gt;</b>
7a	10%-facts-and-circumstances test—2009	3. If the organization did	not check a box o	n line 13, 16a, or 1	6b, and line 14 is 10	)% or	
	more, and if the organization meets the "fac	ts-and-circumstances" t	est, check this bo	x and <b>stop here.</b> E	xplain in Part IV how	v the	,
	organization meets the "facts-and-circumsta	ances" test. The organiz	ation qualifies as a	a publicly supported	l organization		▶
b	10%-facts-and-circumstances test—2008	3. If the organization did	not check a box o	n line 13, 16a, 16b,	or 17a, and line 15	ıs 10% or	
	more, and if the organization meets the "fac	ts-and-circumstances" t	est, check this bo	k and <b>stop here</b> . Ex	xplain in Part IV how	v the	_
	organization meets the "facts-and-circumsta	ances" test. The organiz	ation qualifies as a	a publicly supported	organization		▶ _
8	Private foundation. If the organization did	not check a box on line	13, 16a, 16b, 17a,	or 17b, check this	box and see instruc	tions	<b>&gt;</b>
	<del></del>				Sahadul	e A (Form 990 or	990 EZ\ 2000
					Scheduse	8 w (Laini 220 at	330-EZJ 2003

SOUTH DAKOTA GOLF ASSOCIATION 46-0449824 Schedule A (Form 990 or 990-EZ) 2009 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) Part III (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (d) 2008 (a) 2005 (b) 2006 (c) 2007 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year Add lines 7a and 7b 8 Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b. whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (Add lines 9, 10c, 11, 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 16 % Public support percentage from 2008 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2008 Schedule A, Part III, line 17 18 33 1/3 % support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization

33 1/3 % support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization

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

Schedule A (Form 990 or 990-EZ) 2009 SOUTH DAKOTA GOLF ASSOCIATION

46-0449824

Page 4

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

5/18/2010 10:17 AM Explanation Book Value Explanation Statement 1 - Form 990-EZ, Part I, Line 10 - Grants and Similar Amounts Paid to Organizations Book Value Noncash Contribution Federal Statements 18,500 6,000 12,500 Cash Contribution Class of Activity Description of Property 3723 SOUTH DAKOTA GOLF ASSOCIATION Date of Gift Name and Address CLINIC INSTRUCTION FYE: 12/31/2009 SCHOLARSHIPS 46-0449824 Total

# 3723 SOUTH DAKOTA GOLF ASSOCIATION 46-0449824 Federal Statements

FYE: 12/31/2009

### Statement 2 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
Expenses	\$
Insurance	786
MISCELLANOUS	2,682
FIRST TEE PROGRAMMING	6,500
USGA INTERNSHIP	13,850
THE FIRST TEE OF SD	93,912
Total	\$ 117,730

#### Statement 3 - Form 990-EZ, Part I, Line 20 - Other Changes in Net Assets or Fund Balances

				Description	 Amount
MARKET	VALUE	GAIN	ON	INVESTMENTS	\$ 30,109
Т	otal				\$ 30,109

#### Statement 4 - Form 990-EZ, Part II, Line 24 - Other Assets

Description	Beginnir of Yea	End of Year		
Accounts Receivable	\$	200	\$	200
		200		200

#### Statement 5 - Form 990-EZ, Part II, Line 26 - Total Liabilities

Description	Beginning of Year		
Accounts Payable and Accrued Expenses	\$ 293	\$	389
	 293		389

Form **8868** (Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury Internal Revenue Service  File a separate application for each return.					
		tomatic 3-Month Extension, complete only Part I and check this box		1	► X
-	•	ditional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this fo	orm)		
•	-	ess you have already been granted an automatic 3-month extension on a previously filed		8	
Part I		c 3-Month Extension of Time. Only submit original (no copies neede			
A corporation Part I only	required to file	Form 990-T and requesting an automatic 6-month extension—check this box and compl	ete	1	▶ □
All other corpo	orations (includ	ing 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an e	extension o	of	_
Electronic Fil	ing (e-file). Ge	enerally, you can electronically file Form 8868 if you want a 3-month automatic extension	of time to t	file	
one of the retu	irns noted belo	ow (6 months for a corporation required to file Form 990-T). However, you cannot file For	n 8868		
electronically i	f (1) you want	the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8	870, grou	p	
returns, or a c	omposite or co	onsolidated Form 990-T. Instead, you must submit the fully completed and signed page 2	(Part II) of	Form	
8868. For mor	e details on the	e electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nor	nprofits		
Type or		empt Organization		er identification numb	oer
print		DAKOTA GOLF ASSOCIATION	' '		
File by the		GOLF FOUNDATION	46-0	449824	
due date for		eet, and room or suite no. If a P.O. box, see instructions			
filing your		41ST STREET 202			
return See instructions	City, town or	post office, state, and ZIP code For a foreign address, see instructions			
	SIOUX				
Check type of	f return to be f	filed (file a separate application for each return)			
Form 99	00	Form 990-T (corporation)		Form 4720	
Form 99	00-BL	Form 990-T (sec 401(a) or 408(a) trust)		Form 5227	
X Form 99	0-EZ	Form 990-T (trust other than above)		Form 6069	
Form 99	0-PF	Form 1041-A		☐ Form 8870	
Telephone If the orga If this is for the whole of a list with the limit of the organization of the organiz	nization does in a Group Retigroup, check the names and EIM tan automatic	5 - 338 - 7499  FAX No. ▶  not have an office or place of business in the United States, check this box  surn, enter the organization's four digit Group Exemption Number (GEN)  his box  If it is for part of the group, check this box  Ns of all members the extension will cover  3-month (6 months for a corporation required to file Form 990-T) extension of time  to file the exempt organization return for the organization named above The extension eturn for	If this is lattach		<b>▶</b> □
	tax year begin				
, L	tax year begin	, and online			
2 If this ta	x year is for le	ss than 12 months, check reason	in accoun	ting period	
		Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,			
		e credits See instructions	3a	\$	
	-	Form 990-PF or 990-T, enter any refundable credits and estimated tax			
		de any prior year overpayment allowed as a credit	3b	\$	
		t line 3b from line 3a Include your payment with this form, or, if required,			
		on or, if required, by using EFTPS (Electronic Federal Tax Payment	_		
	See instruction		3c	\$	<del></del>
Caution. If you	u are going to	make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8	8/9-EO		