



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990**Department of the Treasury  
Internal Revenue Service**Return of Organization Exempt From Income Tax**Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung  
benefit trust or private foundation)

OMB No 1545-0047

**2009**Open to Public  
Inspection

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

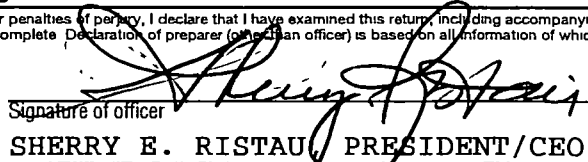
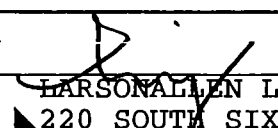
**A** For the 2009 calendar year, or tax year beginning **JUL 1, 2009** and ending **JUN 30, 2010**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type:  See Specific Instructions	<b>C</b> Name of organization <b>SOUTHWEST INITIATIVE FOUNDATION</b>		<b>D</b> Employer identification number <b>41-1555592</b>
		Doing Business As		<b>E</b> Telephone number <b>(320) 587-4848</b>
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>15 3RD AVE NW</b>		
		City or town, state or country, and ZIP + 4 <b>HUTCHINSON, MN 55350</b>		<b>G</b> Gross receipts \$ <b>59,290,835.</b>
<b>F</b> Name and address of principal officer: <b>SHERRY E. RISTAU</b> <b>SAME AS C ABOVE</b>				<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c)</b> Group exemption number
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (3) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				
<b>J</b> Website: <b>WWW.SWIFFOUNDATION.ORG</b>				
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other				
<b>L</b> Year of formation: <b>1986</b> <b>M</b> State of legal domicile: <b>MN</b>				

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities <b>A REGIONAL COMMUNITY FOUNDATION DEDICATED TO ADVANCING SOUTHWEST MINNESOTA.</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>12</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>12</b>
	<b>5</b> Total number of employees (Part V, line 2a)	<b>5</b>	<b>26</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>200</b>
	<b>7a</b> Total gross unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	<b>0.</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>4,675,264.</b>	<b>4,179,235.</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>320,280.</b>	<b>432,063.</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>868,040.</b>	<b>-761,544.</b>
	<b>12</b> Total revenue. Add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>5,959,513.</b>	<b>3,868,387.</b>
	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>872,494.</b>	<b>1,628,034.</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		
	<b>15</b> Salaries, other compensation, and employee benefits (Part IX, column (A), lines 5-10)	<b>1,559,116.</b>	<b>1,467,456.</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	<b>12,646.</b>	<b>13,959.</b>
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25)	<b>383,973.</b>	
<b>Expenses</b>	<b>17</b> Other expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>1,268,525.</b>	<b>1,593,808.</b>
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>3,712,781.</b>	<b>4,703,257.</b>
	<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>2,246,732.</b>	<b>-834,870.</b>
	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
<b>Net Assets or Fund Balances</b>	<b>21</b> Total liabilities (Part X, line 26)	<b>50,738,768.</b>	<b>53,649,911.</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>5,792,676.</b>	<b>5,916,242.</b>
		<b>44,946,092.</b>	<b>47,733,669.</b>

**Part II Signature Block**

<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
	<b>Signature of officer</b>  <b>SHERRY E. RISTAU, PRESIDENT/CEO</b> Type or print name and title		<b>Date</b> <b>1/6/11</b>	
<b>Paid Preparer's Use Only</b>	<b>Preparer's signature</b>  <b>LARSON ALLEN LLP</b> <b>220 SOUTH SIXTH STREET, SUITE 300</b> <b>MINNEAPOLIS, MN 55402</b>	<b>Date</b> <b>12/17/10</b>	<b>Check if self-employed</b> <input type="checkbox"/>	<b>Preparer's identifying number</b> <b>EIN</b> <b>612-376-4500</b>

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

SCANNED FEB 01 2011

916-20

8

**Part III** Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:

TO BE A CATALYST, FACILITATING OPPORTUNITIES FOR ECONOMIC AND SOCIAL GROWTH BY DEVELOPING AND CHALLENGING LEADERS TO BUILD ON THE REGION'S ASSETS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☒ Yes ☐ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

**SEE SCHEDULE O FOR CONTINUATION(S)**

4a (Code: ) (Expenses \$ 1,131,965. including grants of \$ 1,079,356. ) (Revenue \$ )

COMMUNITY FOUNDATIONS AND DESIGNATED FUNDS: MANY DONORS FIND COMMUNITY AND DESIGNATED FUNDS ATTRACTIVE OPTIONS THAT SUPPORTS THEIR CHARITABLE INTERESTS AND RELIEVES THEM OF THE ADMINISTRATIVE RESPONSIBILITIES THAT CAN OFTEN BECOME OVERWHELMING FOR FAMILIES AND VOLUNTEERS. SOUTH WEST INITIATIVE FOUNDATION (SWIF) CURRENTLY SERVES 21 COMMUNITY FOUNDATION FUND PARTNERS AND 73 DESIGNATED FUND PARTNERS.

SWIF'S COMMUNITY FOUNDATION PROGRAM IS A TRUE PARTNERSHIP BETWEEN SWIF AND THE LOCAL COMMUNITY - ONE THAT HAS PROVEN TO BE MUTUALLY BENEFICIAL AND AN EFFECTIVE MEANS TO RETAIN CHARITABLE DOLLARS FOR THE BENEFIT OF SOUTHWEST MINNESOTA COMMUNITIES. SWIF PROVIDES THE ADMINISTRATIVE AND 501(C)(3) INFRASTRUCTURE TO ITS COMMUNITY FOUNDATION FUNDS. IT ALSO PROVIDES ONGOING TECHNICAL AND PROFESSIONAL SUPPORT IN AREAS SUCH AS

4b (Code: ) (Expenses \$ 837,858. including grants of \$ 363,556. ) (Revenue \$ 0. )

OTHER ECONOMIC ADVANCEMENT: SOUTH WEST INITIATIVE FOUNDATION (SWIF) TAKES A LEADERSHIP ROLE IN HELPING THE SOUTHWEST MINNESOTA REGION ADVANCE ECONOMICALLY BY IDENTIFYING AND SUPPORTING KEY ASSET SECTORS, SPECIFICALLY RENEWABLE ENERGY AND ENTREPRENEURSHIP.

THE ACTIVITIES IN RENEWABLE ENERGY ARE HELPING TO TRANSFORM SOUTHWEST MINNESOTA INTO A MAJOR REGIONAL RENEWABLE ENERGY CENTER AND BRING TREMENDOUS ECONOMIC OPPORTUNITY TO A REGION WITH A RICH AGRICULTURAL ECONOMY. SWIF IS WORKING TO FURTHER FACILITATE ADVANCEMENT OF THE RENEWABLE ENERGY SECTOR AND KEEP THE RESULTING WEALTH IN THE REGION. OUR WORK HAS FOCUSED RECENTLY ON TWO PROGRAMS, YES! AND REDI.

YES! IS A TEAM-ORIENTED YOUTH PROGRAM THAT USES HANDS-ON, EXPERIENTIAL LEARNING AND ENERGY ACTION PROJECTS TO ADDRESS ENERGY OPPORTUNITIES AND

4c (Code: ) (Expenses \$ 617,744. including grants of \$ 0. ) (Revenue \$ 409,888. )

LOANS PROGRAM: SOUTH WEST INITIATIVE FOUNDATION (SWIF) LOAN PROGRAMS, INCLUDING ITS REVOLVING LOAN FUND PROGRAM, SUPPORT ECONOMIC DEVELOPMENT AND GROWTH THROUGHOUT SOUTHWEST MINNESOTA BY PROVIDING GAP FINANCING TO START, EXPAND, AND TRANSITION BUSINESSES LOCATED IN ITS 18-COUNTY SERVICE AREA. ELIGIBLE PROJECTS MUST CREATE AND RETAIN JOBS THAT PROVIDE A LIVING WAGE WITH BENEFITS, GENERATE NEW WEALTH FOR THE REGION AND DIVERSIFY THE ECONOMY OF SOUTHWEST MINNESOTA. LOAN FUNDS MAY BE USED FOR MACHINERY AND EQUIPMENT, INVENTORY, WORKING CAPITAL AND REAL ESTATE.

THE MICROENTERPRISE LOAN PROGRAM HELPS ENTREPRENEURS DEVELOP SMALL BUSINESSES AND SELF-EMPLOYMENT OPPORTUNITIES. THIS PROGRAM PROVIDES LOAN FUNDS NOT TO EXCEED \$35,000 TO BE USED FOR START-UP COSTS,

4d Other program services. (Describe in Schedule O.)

(Expenses \$ 1,018,261. including grants of \$ 185,122. ) (Revenue \$ 22,175. )

4e Total program service expenses \$ 3,605,828.

**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	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	X	
5 <b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule G, Part III		
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	X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	X	
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	X	
• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? 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	X	
12A Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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		X
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 United States? If "Yes," complete Schedule F, Part II		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III		X
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		X
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		X
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		X
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H		X

Form 990 (2009)

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
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	X	
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	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	X	
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		X
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?		X
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		X
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		X
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		X
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	X	
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		X
28 Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
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 direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
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		X
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		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		X
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		X
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		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	X	

Note. All Form 990 filers are required to complete Schedule O.

Form 990 (2009)

**Part V** Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	34	
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
<b>2a</b>	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	26	
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
<b>4a</b>	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)?		X
<b>b</b>	If "Yes," enter the name of the foreign country: <u>See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.</u>		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>c</b>	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
<b>6a</b>	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?		X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	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?		X
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
<b>e</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>g</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
<b>h</b>	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the organization make any taxable distributions under section 4966?		
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	10a	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders	11a	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	

Form 990 (2009)

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

**Section A. Governing Body and Management**

	Yes	No
1a Enter the number of voting members of the governing body	12	
b Enter the number of voting members that are independent	12	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a material diversion of the organization's assets?		X
6 Does the organization have members or stockholders?		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code)

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?		X
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?		
11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
11A Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13 Does the organization have a written whistleblower policy?	X	
14 Does the organization have a written document retention and destruction policy?	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	X	
b Other officers or key employees of the organization	X	
If "Yes" to line 15a or 15b, 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?		X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

**Section C. Disclosure**

17 List the states with which a copy of this Form 990 is required to be filed **▶ MN**

18 Section 6104 requires an organization to make its Forms 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

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.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization. **▶**  
**DIANA ANDERSON, COO - (320) 587-4848**  
**15 3RD AVE NW, HUTCHINSON, MN 55350**

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**
**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

1a Complete this table for all persons required to be listed. 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. 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
WAYNE FREESE PAST CHAIR	3.00	X		X				320.	0.	0.
SANDER LUDEMAN CHAIR	3.00	X		X				520.	0.	0.
BILL MCCORMACK VICE-CHAIR	3.00	X		X				360.	0.	0.
ROB SAUNDERS TREASURER	3.00	X		X				440.	0.	0.
GARY GEIGER SECRETARY	3.00	X		X				370.	0.	0.
RICK ELLINGWORTH BOARD MEMBER	3.00	X						240.	0.	0.
H. CRIS REMUCAL BOARD MEMBER	3.00	X						160.	0.	0.
CONNIE VANDERBILL MEDIN BOARD MEMBER	3.00	X						280.	0.	0.
JIM KEUL BOARD MEMBER	3.00	X						305.	0.	0.
MARCY COSTELLO BOARD MEMBER	3.00	X						280.	0.	0.
JANICE NELSON BOARD MEMBER	3.00	X						240.	0.	0.
ROBERT THURSTON BOARD MEMBER	3.00	X						40.	0.	0.
SHERRY RISTAU PRESIDENT/CEO	50.00			X				132,224.	0.	9,258.
DIANA ANDERSON COO	50.00			X				88,720.	0.	10,785.





**Part VIII. Statement 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
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	495,078.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	368,4157.				
	g Noncash contributions included in lines 1a-1f \$		104,081.				
	h <b>Total.</b> Add lines 1a-1f			417,9235.			
Program Service Revenue	2 a <b>LOAN INTEREST</b>	Business Code	522100	389,438.	389,438.		
	b <b>PROJECT SPECIFIC REV</b>		900099	27,250.	27,250.		
	c <b>LOAN ADMIN FEES</b>		900099	15,375.	15,375.		
	d						
	e						
	f All other program service revenue						
	g <b>Total.</b> Add lines 2a-2f			432,063.			
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			914,992.		
4 Income from investment of tax-exempt bond proceeds							
5 Royalties							
6 a Gross Rents		(i) Real	(ii) Personal				
b Less: rental expenses							
c Rental income or (loss)							
d Net rental income or (loss)				18,633.			18,633.
7 a Gross amount from sales of assets other than inventory		(i) Securities	(ii) Other				
b Less: cost or other basis and sales expenses							
c Gain or (loss)							
d Net gain or (loss)				-1,676,536.			-1,676,536.
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18		a					
b Less direct expenses		b					
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19		a					
b Less direct expenses		b					
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances		a					
b Less: cost of goods sold	b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code				
11 a							
b							
c							
d All other revenue							
e <b>Total.</b> Add lines 11a-11d							
12 <b>Total revenue.</b> See instructions.				386,8387.	432,063.	0.	-742,911.

**Part IX** Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	1,628,034.	1,628,034.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	237,791.	100,704.	57,347.	79,740.
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	908,327.	632,901.	176,186.	99,240.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	242,552.	150,040.	56,482.	36,030.
10 Payroll taxes	78,786.	50,441.	16,023.	12,322.
11 Fees for services (non-employees):				
a Management	1,121.		1,121.	
b Legal	18,786.	3,379.	6,662.	8,745.
c Accounting	24,589.		24,589.	
d Lobbying	3,000.	3,000.		
e Professional fundraising services. See Part IV, line 17	13,959.			13,959.
f Investment management fees	122,698.		122,698.	
g Other	299,121.	275,882.	23,139.	100.
12 Advertising and promotion	14,193.	9,305.	4,888.	
13 Office expenses	142,751.	77,566.	18,343.	46,842.
14 Information technology	121,184.	82,542.	26,114.	12,528.
15 Royalties				
16 Occupancy	222,457.	136,827.	52,532.	33,098.
17 Travel	149,418.	104,339.	32,161.	12,918.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	178,170.	131,956.	39,143.	7,071.
20 Interest	35,852.	35,852.		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	123,789.	79,258.	25,249.	19,282.
23 Insurance				
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.)				
a PROVISION FOR LOAN LOSS	100,015.	100,015.	0.	0.
b STRATEGIC PLANNING	18,129.	0.	18,129.	0.
c ANNUAL REPORT	13,075.	0.	13,075.	
d AGENCY FUNDS ADMIN COST	5,166.		5,166.	
e MISCELLANEOUS EXPENSE	294.	3,787.	-5,591.	2,098.
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	4,703,257.	3,605,828.	713,456.	383,973.
26 Joint costs. Check here <input type="checkbox"/> 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				

**Part X** Balance Sheet

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1 Cash - non-interest-bearing	1,459,405.	1	3,400.
	2 Savings and temporary cash investments		2	1,343,399.
	3 Pledges and grants receivable, net	981,765.	3	695,182.
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	439,713.	5	402,691.
	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 Schedule L		6	
	7 Notes and loans receivable, net	4,423,420.	7	5,311,334.
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	20,096.	9	4,299.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 3,398,945.		
	b Less accumulated depreciation	10b 486,776.	10c	2,912,169.
	11 Investments - publicly traded securities	38,778,675.	11	41,531,229.
	12 Investments - other securities. See Part IV, line 11		12	1,360,500.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	591,588.	15	85,708.
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	50,738,768.	16	53,649,911.	
<b>Liabilities</b>	17 Accounts payable and accrued expenses	143,378.	17	157,099.
	18 Grants payable	133,860.	18	132,997.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities	3,280,031.	20	3,197,831.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	26,922.	21	533,883.
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	2,172,446.	23	1,844,987.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D	36,039.	25	49,445.
	26 <b>Total liabilities.</b> Add lines 17 through 25	5,792,676.	26	5,916,242.
	<b>Net Assets or Fund Balances</b>	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.		
27 Unrestricted net assets		10,333,913.	27	12,049,945.
28 Temporarily restricted net assets		15,035,638.	28	12,080,850.
29 Permanently restricted net assets		19,576,541.	29	23,602,874.
Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
30 Capital stock or trust principal, or current funds			30	
31 Paid-in or capital surplus, or land, building, or equipment fund			31	
32 Retained earnings, endowment, accumulated income, or other funds			32	
33 <b>Total net assets or fund balances</b>		44,946,092.	33	47,733,669.
34 <b>Total liabilities and net assets/fund balances</b>		50,738,768.	34	53,649,911.

Form 990 (2009)

**Part XI Financial Statements and Reporting**

1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other \_\_\_\_\_

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

b Were the organization's financial statements audited by an independent accountant?

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

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 separate basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Form 990 (2009)

**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

**SOUTHWEST INITIATIVE FOUNDATION**

Employer identification number

**41-1555592**

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 ☐ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: \_\_\_\_\_
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
- a ☐ Type I      b ☐ Type II      c ☐ Type III - Functionally integrated      d ☐ Type III - Other
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? ☐
- (ii) A family member of a person described in (i) above? ☐
- (iii) A 35% controlled entity of a person described in (i) or (ii) above? ☐
- h Provide the following information about the supported organization(s).

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
<b>Total</b>									

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	3,908,737.	4,263,818.	3,933,135.	4,675,264.	4,179,235.	20,960,189.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 <b>Total.</b> Add lines 1 through 3	3,908,737.	4,263,818.	3,933,135.	4,675,264.	4,179,235.	20,960,189.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						9,729,355.
6 <b>Public support.</b> Subtract line 5 from line 4						11,230,834.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	3,908,737.	4,263,818.	3,933,135.	4,675,264.	4,179,235.	20,960,189.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,225,691.	2,416,152.	2,552,074.	1,658,635.	933,625.	8,786,177.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	360.	360.	360.	84,748.		85,828.
11 <b>Total support.</b> Add lines 7 through 10						29,832,194.
12 Gross receipts from related activities, etc. (see instructions)					12	1,701,600.
13 <b>First five years.</b> 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 <b>stop here</b> ► <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	37.65 %
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	38.37 %
16a <b>33 1/3% support test - 2009.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization ► <input checked="" type="checkbox"/>		
b <b>33 1/3% support test - 2008.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
17a <b>10% -facts-and-circumstances test - 2009.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b <b>10% -facts-and-circumstances test - 2008.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>		

Schedule A (Form 990 or 990-EZ) 2009

**Part III** Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ☐

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%

19a 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 ☐

b 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 ☐

20 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



**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.**

OMB No 1545-0047

**2009**

**Open to Public  
Inspection**

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

- 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), then**

- Section 501(c)(4), (5), or (6) organizations. Complete Part III.

Name of organization <b>SOUTHWEST INITIATIVE FOUNDATION</b>	Employer identification number <b>41-1555592</b>
--	---

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political expenditures ▶ \$ \_\_\_\_\_

3 Volunteer hours ▶ \_\_\_\_\_

**Part 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 ▶ \$ \_\_\_\_\_
- 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.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ \_\_\_\_\_
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file Form 1120-POL for this year? ☐ Yes ☐ No
- 5 Enter 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) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2009

LHA

**Part II-A** Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A Check ☐ if the filing organization belongs to an affiliated group.  
 B Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		3,000.													
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)		3,000.													
d Other exempt purpose expenditures		4,297,809.													
e Total exempt purpose expenditures (add lines 1c and 1d)		4,300,809.													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		365,040.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	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.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
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 line 1f)		91,260.													
h Subtract line 1g from line 1a. If zero or less, enter -0-		0.													
i Subtract line 1f from line 1c. If zero or less, enter -0-		0.													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> No												

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

**Lobbying Expenditures During 4-Year Averaging Period**

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount				365,040.	365,040.
b Lobbying ceiling amount (150% of line 2a, column(e))					547,560.
c Total lobbying expenditures				3,000.	3,000.
d Grassroots nontaxable amount				91,260.	91,260.
e Grassroots ceiling amount (150% of line 2d, column (e))					136,890.
f Grassroots lobbying expenditures				3,000.	3,000.

Schedule C (Form 990 or 990-EZ) 2009

**Part II-B** Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)
	Yes	No	Amount
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:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e 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. Add 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?			

**Part III-A** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	

**Part III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c 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 excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

**Part IV** Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

**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.

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

**SOUTHWEST INITIATIVE FOUNDATION**

Employer identification number  
**41-155592**

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	12	142
2 Aggregate contributions to (during year)	98,085.	4,069,250.
3 Aggregate grants from (during year)	25,425.	1,602,609.
4 Aggregate value at end of year	626,330.	47,107,339.
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

**Part II Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 8

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1	▶ \$
(ii) Assets included in Form 990, Part X	▶ \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

a Revenues included in Form 990, Part VIII, line 1	▶ \$
b Assets included in Form 990, Part X	▶ \$

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a ☐ Public exhibition  
 b ☐ Scholarly research  
 c ☐ Preservation for future generations  
 d ☐ Loan or exchange programs  
 e ☐ Other \_\_\_\_\_

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

**Part IV Escrow and Custodial Arrangements**—Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☒ No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? ☒ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV.

**Part V Endowment Funds**. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	27,283,214.	31,513,900.			
b Contributions	1072159.	1191470.			
c Net investment earnings, gains, and losses	2947747.	-3,894,669.			
d Grants or scholarships	0.	188,432.			
e Other expenditures for facilities and programs	1158736.	1339055.			
f Administrative expenses					
g End of year balance	30,144,384.	27,283,214.			

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ☒ 21.56 %  
 b Permanent endowment ☒ 78.30 %  
 c Term endowment ☒ .14 %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations  
 (ii) related organizations

	Yes	No
3a(i)		<input checked="" type="checkbox"/>
3a(ii)		<input checked="" type="checkbox"/>
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds.

**Part VI Investments - Land, Buildings, and Equipment**. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,015,000.		1,015,000.
b Buildings		1,669,402.	165,559.	1,503,843.
c Leasehold improvements		150,325.	36,593.	113,732.
d Equipment		564,218.	284,624.	279,594.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				2,912,169.

Schedule D (Form 990) 2009



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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	3,868,387.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	4,703,257.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-834,870.
4	Net unrealized gains (losses) on investments	4	4,389,830.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	-769,594.
8	Other (Describe in Part XIV.)	8	2,211.
9	Total adjustments (net). Add lines 4 through 8	9	3,622,447.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	2,787,577.

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	Total revenue, gains, and other support per audited financial statements	1	8,119,255.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	4,389,830.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	4,389,830.
3	Subtract line 2e from line 1	3	3,729,425.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	122,698.
b	Other (Describe in Part XIV.)	4b	16,264.
c	Add lines 4a and 4b	4c	138,962.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	3,868,387.

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1	Total expenses and losses per audited financial statements	1	4,562,084.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	4,562,084.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	122,698.
b	Other (Describe in Part XIV.)	4b	18,475.
c	Add lines 4a and 4b	4c	141,173.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	4,703,257.

**Part XIV Supplemental Information**

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, line 2; 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.

**PART IV, LINE 2B: ASSETS HELD ON DONOR'S BEHALF CONSISTS OF SIXTEEN**

**FUNDS IN WHICH THE BENEFICIARIES WERE DESIGNATED BY THE DONOR AT THE TIME THE FUNDS WERE ESTABLISHED. THEREFORE, THE FOUNDATION HAS NO CONTROL OVER THE DISTRIBUTION OF THESE FUNDS.**

**PART XI, LINE 8 - OTHER ADJUSTMENTS:**

**CHANGE IN AGENCY FUNDS: 2211.**

**Part XIV** Supplemental Information (continued)

PART XII, LINE 4B - OTHER ADJUSTMENTS:

AGENCY FUND REVENUES: 16264.

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

AGENCY FUND REVENUES: 18475.



**SCHEDULE I**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990.

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

**SOUTHWEST INITIATIVE FOUNDATION**

Employer identification number  
**41-1555592**

**Part I** General Information on Grants and Assistance

**1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☐ Yes ☒ No

**2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
APPLETON COMMUNITY FOUNDATION 23 W. SCHLIEMAN APPLETON, MN 56208	41-1555592	501(C)(3)	14,798.	0.			APPLETON STEWARDSHIP INITIATIVE
ARROWHEAD REGIONAL DEVELOPMENT COM 221 W. 1ST ST. DULUTH, MN 55802	41-0914274	GOV	15,000.	0.			REDI CATALYST/TRANSITION PROJECT
BIG STONE AREA GROWTH 228 GRACE ST N ORTONVILLE, MN 56278	41-1989943	501(C)(3)	15,000.	0.			ORTONVILLE ECI VISION TO ACTION YEAR 3
BLUE AND GOLD EDUCATIONAL FOUNDATION OF DISTRICT 891 - 307 1ST ST. W. - CANABY, MN 56220	41-1522315	501(C)(3)	21,164.	0.			CANBY HIGH SCHOOL SCHOLARSHIP AWARDS 2009-2010
CITY OF BALATON PO BOX 388 BALTON, MN 56115	41-6004955	GOV	6,891.	0.			LION'S PARK PLAYGROUND EQUIPMENT
COTTONWOOD COUNTY HISTORICAL SOCIETY, INC. - 812 4TH AVE. - WINDOM, MN 56101	41-0916727	501(C)(3)	7,027.	0.			TECHNICAL SUPPORT

**2** Enter total number of section 501(c)(3) and government organizations

30.

**3** Enter total number of other organizations

11.

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) 2009

**Part III**

**Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

**Part IV** **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

**SCHEDULE I, PART I, LINE 2: THE GRANTS MANAGEMENT FUNCTION OF THE DATABASE**

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

**SCHEDULE I-1**

(Form 990)  
Department of the Treasury  
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)  
▶ Attach to Form 990 to list additional information for  
Schedule I (Form 990), Part II or Part III.

OMB No 1545-0047

2009

Open to Public  
Inspection

Name of the organization

**SOUTHWEST INITIATIVE FOUNDATION**

Employer identification number

41-1555592

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COUNCIL ON FOUNDATIONS 2121 CRYSTAL DRIVE, SUITE 700 ARLINGTON, VA 22202	13-6068327	501(C)(3)	5,590.	0.			2010 ANNUAL MEMBERSHIP
CROW RIVER ARTS INC. PO BOX 282 HUTCHINSON, MN 55350	41-1518678	501(C)(3)	19,793.	0.			HISTORICAL HUTCHINSON - KAY PETERSON MEMORIAL MURAL
HERON LAKE/OKABENA COMMUNITY FOUNDATION - PO BOX 378 - HERON LAKE, MN 56137	41-1555592	501(C)(3)	6,091.	0.			OPERATIONAL SUPPORT
INITIATIVE FOUNDATION 405 1ST ST. SE LITTLE FALLS, MN 56345	36-3451562	501(C)(3)	40,000.	0.			REDI CATALYST/TRANSITION PROJECT
ISD #173 - MOUNTAIN LAKE 450 N. 12TH ST. MOUNTAIN LAKE, MN 56159	41-6000682	SCHOOL	19,782.	0.			MOUNTAIN LAKE ECI LOCAL COORDINATOR: YEAR 4 MOUNTAIN LAKE ECI - VISION TO ACTION: YEAR 3
ISD #2159 - BUFFALO LAKE/HECTOR/STEWART - 220 3RD ST. W. - HECTOR, MN 55342	41-1751593	SCHOOL	54,409.	0.			SCHOOL ENHANCEMENTS
ISD #2180 - M.A.C.C.R.A.Y. 711 WOLVERINE DR CLARA CITY, MN 53222	41-1783004	SCHOOL	10,782.	0.			SCHOOL ENHANCEMENTS
ISD #2180 - M.A.C.C.R.A.Y. SCHOOL FOUNDATION - PO BOX 251 - CLARA CITY, MN 56222	41-1555592	501C3	6,790.	0.			OPERATIONAL SUPPORT AND SCHOOL ENHANCEMENTS

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

Schedule I-1 (Form 990) 2009

**SCHEDULE I-1**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)**  
▶ Attach to Form 990 to list additional information for  
Schedule I (Form 990), Part II or Part III.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

**SOUTHWEST INITIATIVE FOUNDATION**

Employer identification number

41-1555592

Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ISD #2689 - PIPESTONE 1401 7TH ST. SW. PIPESTONE, MN 56164	41-1801895	SCHOOL	69,565.	0.			SCORE BOARD AND MEINDERS COMMUNITY LIBRARY - 1000 BOOKS BEFORE KINDERGARTEN
ISD #2853 - LAC QUI PARLE VALLEY 316 4TH ST. MADISON, MN 56256	41-1837788	SCHOOL	10,597.	0.			SCHOOL ENHANCEMENTS
ISD #2895 - JACKSON COUNTY CENTRAL 1128 N HWY JACKSON, MN 56143	41-1872029	SCHOOL	5,921.	0.			SCHOOL ENHANCEMENTS
ISD #2897 - REDWOOD VALLEY 100 GEORGE RAMSETH DR. REDWOOD FALLS, MN 56283	41-1812909	SCHOOL	7,750.	0.			REDWOOD FALLS AREA ECI LOCAL COORDINATOR: YEAR 6 AND REDWOOD FALLS AREA YES!
ISD #347 - WILLMAR 611 FIFTH ST. SW. WILLMAR, MN 56201	41-6001746	SCHOOL	29,000.	0.			WILLMAR PUBLIC SCHOOLS MUSIC PROGRAM; YOUTH ENERGY SUMMIT (YES!) AWARD 2009-2010;
ISD #62 - ORTONVILLE PUBLIC SCHOOL 200 TROJAN DR ORTONVILLE, MN 53278	41-6000273	SCHOOL	14,750.	0.			PLAYGROUND AND YES! ENERGY ACTION PROJECT
ISD #640 - WABASSO 1333 MAY ST. WABASSO, MN 56293	41-6003522	SCHOOL	16,000.	0.			WABASSO AREA ECI CO-COORDINATOR YEAR 4 AND
LISMORE AREA COMMUNITY FOUNDATION PO BOX 75 LISMORE, MN 56155	41-1555592	501(C)(3)	9,362.	0.			LISMORE PARK IMPROVEMENT

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

Schedule I-1 (Form 990) 2009

**SCHEDULE I-1**

(Form 990)  
Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)**

► Attach to Form 990 to list additional information for  
Schedule I (Form 990), Part II or Part III.

OMB No. 1545-0047

2009

Open to Public  
Inspection

Name of the organization

**SOUTHWEST INITIATIVE FOUNDATION**

Employer identification number

41-1555592

**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LYON-LINCOLN ELECTRIC TRUST WEST HWY 14 TYLER, MN 56178	41-1930173	501(C)(3)	217,721.	0.			TYLER GOLF CLUB CLUBHOUSE REMODEL
MADISON COMMUNITY FOUNDATION PO BOX 61 MADISON, MN 56256	41-1555592	501(C)(3)	21,470.	0.			MADISON ATHLETIC FIELD
MARSHALL-LYON COUNTY LIBRARY 301 W LYON ST MARSHALL, MN 56258	41-6005352	30V	250,000.	0.			LIBRARY CAPITAL CAMPAIGN
NORTHLAND FOUNDATION 610 SELLWOOD BUILDING DULUTH, MN 55802	41-1554455	501(C)(3)	25,000.	0.			REDI CATALYST/TRANSITION PROJECT
NORTHWEST MINNESOTA FOUNDATION 4225 TECHNOLOGY DRIVE NW. BEMIDJI, MN 56601	41-1556013	501(C)(3)	40,000.	0.			REDI CATALYST/TRANSITION PROJECT
OUR LADY OF THE LAKES 6680 153RD AVE. NE SPICER, MN 56288	41-1308081	501(C)(3)	15,000.	0.			PARISH NURSE COORDINATOR YEAR 2
PIPESTONE AREA COMMUNITY FOUNDATION - 802 3RD AVE SW - PIPESTONE, MN 56164	41-1555592	501(C)(3)	11,246.	0.			OPERATIONAL SUPPORT AND HIGH SCHOOL SCOREBOARD
PRAIRIE ECOLOGY EUS CENTER PO BOX 429 LAKEFIELD, MN 56150	41-1675295	501(C)(3)	157,000.	0.			ECOLOGY BUS

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

Schedule I-1 (Form 990) 2009

**SCHEDULE I-1**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)  
▶ Attach to Form 990 to list additional information for  
Schedule I (Form 990), Part II or Part III.

OMB No. 1545-0047

2009

Open to Public  
Inspection

Name of the organization

**SOUTHWEST INITIATIVE FOUNDATION**

Employer identification number  
**41-155592**

**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PRAIRIE WOODS ENVIRONMENTAL LEARNING CENTER - 12718 10TH ST. NE. - SPICER, MN 56288	41-1366265	501(C)(3)	25,000.	0.			YOUTH ENERGY SUMMIT (YES!) 2010-2011
REDWOOD AREA COMMUNITIES FOUNDATION - 200 S. MILL ST. - REDWOOD FALLS, MN 56283	36-3611923	501(C)(3)	15,000.	0.			PEER LEADERSHIP AND ALEXANDER RAMSEY PARK ZOO RENOVATION
RIDGEWATER COLLEGE FOUNDATION 2101 15TH AVE NE WILLMAR, MN 56201	41-1847315	501(C)(3)	7,881.	0.			ENTREPRENEURIAL ASSISTANCE
SOUTHERN MINNESOTA INITIATIVE FOUNDATION - 525 FLORENCE AVE. - OWATONNA, MN 55060	36-3454285	501(C)(3)	90,000.	0.			REDI CATALYST/TRANSITION PROJECT AND ADDITIONAL REDI LOAN CAPACITY
SOUTHWEST INITIATIVE FOUNDATION 15 3RD AVE. NW. HUTCHINSON, MN 55350	41-1555592	501(C)(3)	72,860.	0.			CARE RELIEF FUND; COMMUNITY FOUNDATION INSIGHTS; NONPROFIT LEADER'S
SOUTHWEST REGIONAL DEVELOPMENT COMM.-REG 8 - 2401 BROADWAY AVE. STE. 1 - SLAYTON, MN 56172	41-1235045	GOV	7,750.	0.			LINCOLN COUNTY HOUSING STRATEGIC PLANNING AND MURRAY COUNTY EARLY CHILDHOOD 2010 PROGRAMING
UNIVERSITY OF MINNESOTA REGIONAL SUSTAINABLE DEVELOPMENT PARTNERSHIPS - 411 BORLAUG HALL, 1991 BUFORD CIRCLE - SAINT PAUL, MN 55105	41-6007513	501(C)(3)	36,850.	0.			REDI WEBSITE
WEST CENTRAL INDUSTRIES, INC. 1300 22ND ST. SW. WILLMAR, MN 56201	41-0872939	501(C)(3)	5,750.	0.			MN COUNCIL OF NON PROFIT LEADERSHIP INSTITUTE AND WILLMAR COMMUNITY SENIOR NETWORK LIVING AT HOME

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

Schedule I-1 (Form 990) 2009

Employer identification number  
41-155592

Part I	Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)
--------	---

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WEST CENTRAL INITIATIVE 1000 WESTERN AVE FERGUS FALLS, MN 56537	36-3453471	501(C)(3)	40,900.	0.			REDI CATALYST/TRANSITION PROJECT AND MINNESOTA TRANSFER OF WEALTH STUDY
WESTERN COMMUNITY ACTION, INC. 115 SOUTH HIGHWAY JACKSON, MN 56143	41-0888137	501(C)(3)	6,129.	0.			HORIZONS OF JACKSON AND CARING FOR OUR CHILDREN THROUGH CIRCLES OF SUPPORT
WORTHINGTON REG ECON DEV CORP 1121 3RD AVE. WORTHINGTON, MN 56187	36-3339749	GOV	6,000.	0.			2010 WORTHINGTON REGIONAL BIOSCIENCE CONFERENCE
	-						

Schedule I-1 (Form 990) 2009

**Part IV** Supplemental Information

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: ISD #173 - MOUNTAIN LAKE

(H) PURPOSE OF GRANT OR ASSISTANCE: MOUNTAIN LAKE ECI LOCAL COORDINATOR:

YEAR 4

MOUNTAIN LAKE ECI - VISION TO ACTION: YEAR 3

SCHOOL ENHANCEMENT

NAME OF ORGANIZATION OR GOVERNMENT: ISD #2897 - REDWOOD VALLEY

(H) PURPOSE OF GRANT OR ASSISTANCE: REDWOOD FALLS AREA ECI LOCAL

COORDINATOR: YEAR 6 AND

REDWOOD FALLS AREA YES! ENERGY ACTION PROJECT

NAME OF ORGANIZATION OR GOVERNMENT: ISD #347 - WILLMAR

(H) PURPOSE OF GRANT OR ASSISTANCE: WILLMAR PUBLIC SCHOOLS MUSIC

PROGRAM;

YOUTH ENERGY SUMMIT (YES!) AWARD 2009-2010;

YES! ENERGY ACTION PROJECT;

CHILD GUIDE PROGRAM; AND

PILOT PROJECT TO DEVELOP EDUCATIONAL PROGRAMMING SHARED SERVICES PLANS

NAME OF ORGANIZATION OR GOVERNMENT: ISD #640 - WABASSO

(H) PURPOSE OF GRANT OR ASSISTANCE: WABASSO AREA ECI CO-COORDINATOR YEAR

4 AND

WABASSO ECI VISION TO ACTION YEAR 3

NAME OF ORGANIZATION OR GOVERNMENT: SOUTHWEST INITIATIVE FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: CARE RELIEF FUND;

COMMUNITY FOUNDATION INSIGHTS;



**Part IV** Supplemental Information

NONPROFIT LEADER'S ACADEMY;

ORTONVILLE ECI LOCAL COORDINATOR YEAR 4;

FUNDRAISING PROFESSIONALS WEBINARS;

LIFE CONNECTIONS XI;

WINDOM ECI LOCAL COORDINATOR YEAR 4; AND

"A BRISK WALK THROUGH THE BASICS"

NAME OF ORGANIZATION OR GOVERNMENT: WEST CENTRAL INDUSTRIES, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: MN COUNCIL OF NON PROFIT LEADERSHIP

INSTITUTE AND

WILLMAR COMMUNITY SENIOR NETWORK LIVING AT HOME BLOCK NURSE PROGRAM

**SCHEDULE K**

(Form 990)  
Department of the Treasury  
Internal Revenue Service

**Supplemental Information on Tax-Exempt Bonds**

► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information on Schedule O (Form 990).  
► Attach to Form 990. See separate instructions.

OMB No 1545-0047

**2009**

Open to Public Inspection

Name of the organization

**SOUTHWEST INITIATIVE FOUNDATION**

Employer identification number  
**41-1555592**

**Part II Bond Issues**

SEE SCHEDULE O FOR COLUMN (F) CONTINUATIONS

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer	
						Yes	No	Yes	No
<b>A MCLEOD COUNTY</b>	<b>41-6005841</b>	<b>582258AG4</b>	<b>12/29/05</b>	<b>3500000.</b>	<b>LAND, BUILDING AND EQUIPMENT FOR OFFICE</b>		<b>X</b>		<b>X</b>
<b>B</b>									
<b>C</b>									
<b>D</b>									
<b>E</b>									

**Part III Proceeds**

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
<b>1 Total proceeds of issue</b>		<b>3,500,000.</b>								
<b>2 Gross proceeds in reserve funds</b>										
<b>3 Proceeds in refunding or defeasance escrows</b>										
<b>4 Other unspent proceeds</b>										
<b>5 Issuance costs from proceeds</b>		<b>70,000.</b>								
<b>6 Working capital expenditures from proceeds</b>										
<b>7 Capital expenditures from proceeds</b>		<b>3,500,000.</b>								
<b>8 Year of substantial completion</b>		<b>2006</b>								
<b>9 Were the bonds issued as part of a current refunding issue?</b>										
<b>10 Were the bonds issued as part of an advance refunding issue?</b>										
<b>11 Has the final allocation of proceeds been made?</b>	<b>X</b>									
<b>12 Does the organization maintain adequate books and records to support the final allocation of proceeds?</b>	<b>X</b>									

**Part III Private Business Use**

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

932121  
02-03-10

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

Schedule K (Form 990) 2009

41-1555592

## SOUTHWEST INITIATIVE FOUNDATION

Schedule K (Form 990) 2009

## Part III Private Business Use (Continued)

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
<b>3a</b> Are there any management or service contracts with respect to the financed property which may result in private business use?		X								
<b>b</b> Are there any research agreements with respect to the financed property which may result in private business use?		X								
<b>c</b> Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?		X								
<b>4</b> Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		%		%		%		%		%
<b>5</b> Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		%		%		%		%		%
<b>6</b> Total of lines 4 and 5		%		%		%		%		%
<b>7</b> Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X									

## Part IV Arbitrage

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
<b>1</b> Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?										
<b>2</b> Is the bond issue a variable rate issue?										
<b>3a</b> Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?										
<b>b</b> Name of provider										
<b>c</b> Term of hedge										
<b>4a</b> Were gross proceeds invested in a GIC?										
<b>b</b> Name of provider										
<b>c</b> Term of GIC										
<b>d</b> Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
<b>5</b> Were any gross proceeds invested beyond an available temporary period?										
<b>6</b> Did the bond issue qualify for an exception to rebate?										

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

Department of the Treasury  
Internal Revenue Service

**Transactions With Interested Persons**

▶ Complete if the organization answered  
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,  
or Form 990-EZ, Part V, line 38a or 40b.  
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

**2009**

Open To Public  
Inspection

Name of the organization

**SOUTHWEST INITIATIVE FOUNDATION**

Employer identification number  
**41-1555592**

**Part I Excess Benefit Transactions** (section 501(c)(3) and section 501(c)(4) organizations only).

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

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958

▶ \$

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

▶ \$

**Part II 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.

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
TIM ULRICH - BUSI		X	460,000.	402,691.		X	X		X	
Total				▶ \$ 402,691.						

**Part III Grants or Assistance Benefiting 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) Amount and type of assistance

**Part IV Business Transactions Involving Interested Persons.**

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2009

SEE SCHEDULE O FOR SCHEDULE L CONTINUATIONS

**SCHEDULE M  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Noncash Contributions**

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

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

**SOUTHWEST INITIATIVE FOUNDATION**

Employer identification number

**41-1555592**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	6	104,081.	AVG HI/LOW ON GIFT D
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► ( )				
26 Other ► ( )				
27 Other ► ( )				
28 Other ► ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgment

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II.

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		X
31		X
32a		X

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

Schedule M (Form 990) 2009

**SCHEDULE O**  
**(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.

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

**SOUTHWEST INITIATIVE FOUNDATION**

Employer identification number  
**41-155592**

**FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:**

IN RESPONSE TO SOUTHWEST MINNESOTA'S CHANGING ECONOMIC REALITY OF AN  
AGING WORKFORCE, SOUTH WEST INITITATIVE FOUNDATION (SWIF) LAUNCHED  
ENCORE ENTREPRENEURSHIP. THIS PROGRAM IS DEDICATED TO ASSISTING PEOPLE  
AGED 55 AND BETTER WHO WANT TO EXPLORE BUSINESS AND SELF-EMPLOYMENT  
- OPPORTUNITIES- WITH EDUCATION, FINANCING AND NETWORKING- TOOLS DESIGNED - - -  
TO FIT THEIR NEEDS. ENCORE ENTREPRENEURS HAVE ACCESS TO BUSINESS  
CONSULTATIONS, STARTING/EXPANDING A SMALL BUSINESS CLASSES AND  
COLLEGE-LEVEL TRAINING OPPORTUNITIES; FINANCIAL OPTIONS FOR START-UP  
AND EXISTING VENTURES OFFERED THROUGH SWIF LOAN PROGRAMS AND BANK  
PARTNERS; SPECIALIZED TECHNICAL ASSISTANCE FOR THE DURATION OF SWIF  
LOANS; STREAMLINED ACCESS TO ENTREPRENEURIAL RESOURCES; A SYSTEM OF  
SUPPORT FROM OTHER SOUTHWEST MINNESOTA ENTREPRENEURS AND CONFIDENCE TO  
HELP MAKE THE MOST OF THEIR BUSINESS VENTURES.

**FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:**

STRATEGIC PLANNING, FUNDRAISING, MARKETING, PUBLIC RELATIONS AND  
GRANTMAKING. COMMUNITY FOUNDATION FUNDS ARE ADVISED BY LOCAL COMMITTEES  
OF COMMUNITY LEADERS THAT ARE RESPONSIBLE FOR RAISING FUNDS,  
RECOMMENDING GRANTEES AND RAISING PUBLIC AWARENESS. SINCE SWIF'S  
GRANTMAKING IS TARGETED TO PROJECTS RELATED TO ITS CURRENT PRIORITY  
AREAS, COMMUNITY FOUNDATION FUNDS OFTEN FILL A VALUABLE NICHE BY  
FUNDING WORTHWHILE PROJECTS THAT DON'T FIT WITHIN SWIF'S CURRENT GRANT  
CRITERIA.

SWIF OFFERS A VARIETY OF DESIGNATED FUNDS DESIGNED TO HELP DONORS MEET  
THEIR UNIQUE PHILANTHROPIC GOALS. DESIGNATED FUNDS CAN BE ENDOWED OR

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

Schedule O (Form 990) 2009

932211  
02-03-10

**SCHEDULE O**  
**(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.

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

**SOUTHWEST INITIATIVE FOUNDATION**

Employer identification number  
**41-155592**

NON-ENDOWED (PASS-THROUGH) AND ARE CREATED WITH A SPECIFIC PURPOSE IN  
MIND. IN MOST CASES, A DESIGNATED FUND IS ADVISED BY A LOCAL COMMITTEE  
OF VOLUNTEER LEADERS. THE COMMITTEE RAISES MONEY FOR THE FUND,  
RECOMMENDS GRANT DISTRIBUTIONS, AND RAISES PUBLIC AWARENESS. SWIF  
PROVIDES ASSISTANCE IN THE PLANNING AND DEVELOPMENT OF DESIGNATED  
FUNDS. IT ALSO ADMINISTERS THE FUNDS AND PROVIDES ONGOING TECHNICAL AND  
PROFESSIONAL SUPPORT AS NEEDED, IN AREAS SUCH AS FUNDRAISING,  
MARKETING, PUBLIC RELATIONS AND GRANTMAKING.  
DESIGNATED FUNDS CAN RECEIVE MANY TYPES OF GIFTS, INCLUDING CASH,  
APPRECIATED STOCK, REAL ESTATE AND PLANNED GIFTS, SUCH AS CHARITABLE  
GIFT ANNUITIES AND BEQUESTS.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:  
ISSUES IN RURAL MINNESOTA COMMUNITIES. THE PROGRAM EMPOWERS YOUTH AND  
INSPIRES WIDESPREAD ADOPTION OF RENEWABLE ENERGY TECHNOLOGY AND ENERGY  
CONSERVATION PRACTICES WHICH CONTRIBUTE TO THE ENVIRONMENTAL AND  
ECONOMIC HEALTH OF RURAL MINNESOTA COMMUNITIES. IN FISCAL YEAR 2010,  
YES! ENGAGED 275 STUDENTS AS ACTIVE TEAM PARTICIPANTS, 125 BUSINESSES  
THAT HELPED/WORKED WITH TEAMS AND 120 COMMUNITY MEMBERS WHO  
HELPED/WORKED WITH TEAMS. MORE THAN 9,000 ADDITIONAL STUDENTS IN THE  
SCHOOL SYSTEMS AND MORE THAN 42,000 COMMUNITY MEMBERS WERE IMPACTED  
THROUGH OUTREACH AND EDUCATION EFFORTS.

THE GOAL OF REDI WAS TO MAXIMIZE RURAL ECONOMIC DEVELOPMENT AND  
STABILIZE RURAL ECONOMIES BY BUILDING RENEWABLE ENERGY CAPACITY,  
EXPERTISE AND LEADERSHIP THROUGHOUT MINNESOTA. REDI ENCOMPASSED THREE  
BROAD CATEGORIES OF RURAL WIND ENERGY DEVELOPMENT SUPPORT: OUTREACH AND

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

Schedule O (Form 990) 2009

932211  
02-03-10

**SCHEDULE O**  
(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.

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

**SOUTHWEST INITIATIVE FOUNDATION**

Employer identification number  
**41-1555592**

**PUBLIC EDUCATION, PROJECT DEVELOPMENT ASSISTANCE, AND EARLY STAGE**

**PROJECT DEVELOPMENT FINANCING. REDI STAFF AND PARTNERS DESIGNED AND**

**DELIVERED A SERIES OF FORUMS TO HELP LANDOWNERS AND OTHER INTERESTED**

**PARTIES UNDERSTAND WIND ENERGY DEVELOPMENT OPPORTUNITIES, REAL ESTATE**

**AND FINANCE ISSUES, AND VARIOUS OTHER ASPECTS OF THE WIND ENERGY**

**DEVELOPMENT PROCESS. OVER 2,000 PEOPLE WERE EDUCATED ABOUT WIND ENERGY**

**DEVELOPMENT AT REDI FORUMS. REDI'S PRIMARY METHOD FOR PROVIDING**

**TECHNICAL ASSISTANCE WAS THROUGH REGIONALLY-BASED LOAN FUNDS PROVIDING**

**LOW INTEREST, FIXED RATE FINANCING FOR EARLY STAGE DEVELOPMENT AND**

**FEASIBILITY COSTS.**

**SWIF IS DEEPLY COMMITTED TO THE ENTREPRENEURS OF THE REGION AND**

**BELIEVES THEY HOLD ONE OF THE KEYS TO REGIONAL ECONOMIC ADVANCEMENT.**

**THE ENTREPRENEURSHIP INITIATIVE PROVIDES A NETWORK OF SUPPORT WHERE**

**ASPIRING, EXISTING AND TRANSITIONING ENTREPRENEURS CAN FIND EDUCATIONAL**

**AND FINANCIAL RESOURCES TO HELP THEIR BUSINESS VENTURES SUCCEED.**

**MONTHLY ENTREPRENEURSHIP EDUCATION OPPORTUNITIES ARE OFFERED IN 12**

**COMMUNITIES THROUGHOUT THE REGION. IN ADDITION, SEMINAR SERIES AND**

**OTHER EDUCATION AND NETWORKING SESSIONS ON A VARIETY OF TOPICS ARE HELD**

**THROUGHOUT THE REGION AS NEEDED AND/OR REQUESTED.**

**OTHER EFFORTS AROUND ECONOMIC ADVANCEMENT INCLUDE PARTNERSHIP IN THE**

**SOUTHERN MINNESOTA REGIONAL COMPETITIVENESS PROJECT TO IDENTIFY**

**POTENTIAL OPPORTUNITIES FOR THE 38 COUNTIES OF SOUTHERN MINNESOTA**

**AROUND THE INDUSTRIES OF RENEWABLE ENERGY, BIOSCIENCE, FOOD AND**

**AGRICULTURE, MANUFACTURING, HEALTH CARE AND HIGH TECHNOLOGY.**

**FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:**

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

Schedule O (Form 990) 2009

932211  
02-03-10



**SCHEDULE O**  
**(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.

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

SOUTHWEST INITIATIVE FOUNDATION

Employer identification number  
41-1555592

EQUIPMENT, INVENTORY, FURNITURE AND FIXTURES AND WORKING CAPITAL. THIS  
PROGRAM ALSO PROVIDES CUSTOMIZED SUPPORT FOR ENTREPRENEURS THROUGH  
ON-GOING TECHNICAL ASSISTANCE AND TRAINING AS NEEDED FOR THE LENGTH OF  
THE LOAN. ELIGIBLE BUSINESSES MAY BE START-UP OR EXPANSION PROJECTS  
INCLUDING, BUT NOT LIMITED TO, MANUFACTURING, SERVICE, RETAIL AND CHILD  
CARE.

IN FISCAL YEAR 2010, SWIF AWARDED 45 LOANS (INCLUDING MICROENTERPRISE  
LOANS) AND SERVED 38 BUSINESSES, WHICH CREATED OR RETAINED 180 JOBS.

ANOTHER SPECIFIC PROGRAM, THE RURAL ENERGY DEVELOPMENT INITIATIVE  
(REDI) PROVIDES LOAN FINANCING FOR COSTS RELATED TO EARLY-STAGE PROJECT  
DEVELOPMENT AND FEASIBILITY ANALYSIS FOR WIND ENERGY ELECTRIC  
GENERATION PROJECTS THAT INTEND TO SELL THE ELECTRICITY TO AN ELECTRIC  
UTILITY. THE GOAL OF REDI IS TO MAXIMIZE RURAL ECONOMIC DEVELOPMENT AND  
STABILIZE RURAL ECONOMIES.

REDI PARTNERS APPROVED 13 LOANS THROUGHOUT THE STATE ENCOMPASSING 1188  
MW OF COMMUNITY WIND IN VARIOUS STAGES OF DEVELOPMENT. THESE PROJECTS  
HAVE AN ESTIMATED TOTAL DEVELOPMENT COST OF NEARLY \$2.5 BILLION.  
FUNDING PROVIDED TO THESE PROJECTS WILL RETURN TO REGIONAL PARTNERS AND  
BE IN PLACE TO SUPPORT ADDITIONAL RENEABLE ENERGY OR ENERGY EFFICIENCY  
PROJECTS WELL INTO THE FUTURE.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

SWIF IS ENGAGED IN A NUMBER OF PROGRAMS THAT SERVE SPECIFIC SECTORS OF  
ITS STAKEHOLDERS WHILE ALSO BENEFITING THE REGION AS A WHOLE. THE  
MINNESOTA EARLY CHILDHOOD INITIATIVE, A NETWORK OF COALITIONS FOCUSED

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

Schedule O (Form 990) 2009

932211  
02-03-10

**SCHEDULE O**  
(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.

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

**SOUTHWEST INITIATIVE FOUNDATION**

Employer identification number  
**41-1555592**

ON QUALITY CARE AND EDUCATIONAL OPPORTUNITIES FOR CHILDREN AGES BIRTH  
TO FIVE, HELPS ENSURE THAT ALL OF SOUTHWEST MINNESOTA'S YOUNGEST  
CHILDREN THRIVE, AND HAVE A HEALTHY LIFE OF LEARNING, ACHIEVING, AND  
SUCCEEDING. THE MINNESOTA THRIVE INITIATIVE IS PART OF THE MINNESOTA  
EARLY CHILDHOOD INITIATIVE WORKING TO CREATE SEAMLESS SYSTEMS OR  
NETWORKS OF LOCAL SERVICES THAT SUPPORT THE HEALTHY SOCIAL AND  
EMOTIONAL DEVELOPMENT OF MINNESOTA'S YOUNGEST CHILDREN. ENCORE  
ENTREPRENEURSHIP IS DEDICATED TO ASSISTING PEOPLE AGED 55 AND BETTER  
WHO WANT TO EXPLORE BUSINESS AND SELF-EMPLOYMENT OPPORTUNITIES WITH  
EDUCATION, FINANCING AND NETWORKING TOOLS DESIGNED TO FIT THEIR NEEDS.  
THESE ENTREPRENEURS HAVE ACCESS TO FINANCING THROUGH SWIF'S LOAN  
PROGRAMS AND BANK PARTNERS AND RECEIVE SPECIALIZED TECHNICAL ASSISTANCE  
FOR THE DURATION OF THE LOANS. THIS PROGRAM ALSO OFFERS STREAMLINED  
ACCESS TO RESOURCES AND A SUPPORT NETWORK THROUGHOUT THE REGION. THE  
NONPROFIT LEADER'S ACADEMY HELPS SOUTHWEST MINNESOTA LEADERS IN THE  
NONPROFIT INDUSTRY BUILD PERSONAL LEADERSHIP SKILLS FROM THE INSIDE  
OUT, EQUIPPING THEM TO BECOME MORE STRATEGIC AND RESILIENT LEADERS IN  
THEIR ORGANIZATIONS AND COMMUNITIES. THIS PROGRAM USES A 360-DEGREE  
LEADERSHIP ASSESSMENT TOOL TO BUILD THEIR SKILLS AND RESILIENCY THROUGH  
FEEDBACK, SELF-REFLECTION, PRACTICING NEW SKILLS AND PEER LEARNING.  
EXPENSES \$ 1018261. INCLUDING GRANTS OF \$ 185122. REVENUE \$ 22175.

OTHER ECONOMIC ADVANCEMENT: SOUTH WEST INITIATIVE FOUNDATION (SWIF)  
TAKES A LEADERSHIP ROLE IN HELPING THE SOUTHWEST MINNESOTA REGION  
ADVANCE ECONOMICALLY BY IDENTIFYING AND SUPPORTING KEY ASSET SECTORS,  
SPECIFICALLY RENEWABLE ENERGY AND ENTREPRENEURSHIP.

**SCHEDULE O**  
**(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.

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

**SOUTHWEST INITIATIVE FOUNDATION**

Employer identification number  
**41-155592**

**THE ACTIVITIES IN RENEWABLE ENERGY ARE HELPING TO TRANSFORM SOUTHWEST**

**MINNESOTA INTO A MAJOR REGIONAL RENEWABLE ENERGY CENTER AND BRING**

**TREMENDOUS ECONOMIC OPPORTUNITY TO A REGION WITH A RICH AGRICULTURAL**

**ECONOMY. SWIF IS WORKING TO FURTHER FACILITATE ADVANCEMENT OF THE**

**RENEWABLE ENERGY SECTOR AND KEEP THE RESULTING WEALTH IN THE REGION.**

**OUR WORK HAS FOCUSED RECENTLY ON TWO PROGRAMS, YES! AND REDI.**

**YES! IS A TEAM-ORIENTED YOUTH PROGRAM THAT USES HANDS-ON, EXPERIENTIAL**

**LEARNING AND ENERGY ACTION PROJECTS TO ADDRESS ENERGY OPPORTUNITIES AND**

**ISSUES IN RURAL MINNESOTA COMMUNITIES. THE PROGRAM EMPOWERS YOUTH AND**

**INSPIRES WIDESPREAD ADOPTION OF RENEWABLE ENERGY TECHNOLOGY AND ENERGY**

**CONSERVATION PRACTICES WHICH CONTRIBUTE TO THE ENVIRONMENTAL AND**

**ECONOMIC HEALTH OF RURAL MINNESOTA COMMUNITIES. IN FISCAL YEAR 2010,**

**YES! ENGAGED 275 STUDENTS AS ACTIVE TEAM PARTICIPANTS, 125 BUSINESSES**

**THAT HELPED/WORKED WITH TEAMS AND 120 COMMUNITY MEMBERS WHO**

**HELPED/WORKED WITH TEAMS. MORE THAN 9,000 ADDITIONAL STUDENTS IN THE**

**SCHOOL SYSTEMS AND MORE THAN 42,000 COMMUNITY MEMBERS WERE IMPACTED**

**THROUGH OUTREACH AND EDUCATION EFFORTS.**

**THE GOAL OF REDI WAS TO MAXIMIZE RURAL ECONOMIC DEVELOPMENT AND**

**STABILIZE RURAL ECONOMIES BY BUILDING RENEWABLE ENERGY CAPACITY,**

**EXPERTISE AND LEADERSHIP THROUGHOUT MINNESOTA. REDI ENCOMPASSED THREE**

**BROAD CATEGORIES OF RURAL WIND ENERGY DEVELOPMENT SUPPORT: OUTREACH AND**

**PUBLIC EDUCATION, PROJECT DEVELOPMENT ASSISTANCE, AND EARLY STAGE**

**PROJECT DEVELOPMENT FINANCING. REDI STAFF AND PARTNERS DESIGNED AND**

**DELIVERED A SERIES OF FORUMS TO HELP LANDOWNERS AND OTHER INTERESTED**

**PARTIES UNDERSTAND WIND ENERGY DEVELOPMENT OPPORTUNITIES, REAL ESTATE**

**AND FINANCE ISSUES, AND VARIOUS OTHER ASPECTS OF THE WIND ENERGY**

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

Schedule O (Form 990) 2009

932211  
02-03-10

**SCHEDULE O**  
**(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.

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

**SOUTHWEST INITIATIVE FOUNDATION**

Employer identification number  
**41-1555592**

DEVELOPMENT PROCESS. OVER 2,000 PEOPLE WERE EDUCATED ABOUT WIND ENERGY

DEVELOPMENT AT REDI FORUMS. REDI'S PRIMARY METHOD FOR PROVIDING

TECHNICAL ASSISTANCE WAS THROUGH REGIONALLY-BASED LOAN FUNDS PROVIDING

LOW INTEREST, FIXED RATE FINANCING FOR EARLY STAGE DEVELOPMENT AND

FEASIBILITY COSTS.

SWIF IS DEEPLY COMMITTED TO THE ENTREPRENEURS OF THE REGION AND

BELIEVES THEY HOLD ONE OF THE KEYS TO REGIONAL ECONOMIC ADVANCEMENT.

THE ENTREPRENEURSHIP INITIATIVE PROVIDES A NETWORK OF SUPPORT WHERE

ASPIRING, EXISTING AND TRANSITIONING ENTREPRENEURS CAN FIND EDUCATIONAL

AND FINANCIAL RESOURCES TO HELP THEIR BUSINESS VENTURES SUCCEED.

MONTHLY ENTREPRENEURSHIP EDUCATION OPPORTUNITIES ARE OFFERED IN 12

COMMUNITIES THROUGHOUT THE REGION. IN ADDITION, SEMINAR SERIES AND

OTHER EDUCATION AND NETWORKING SESSIONS ON A VARIETY OF TOPICS ARE HELD

THROUGHOUT THE REGION AS NEEDED AND/OR REQUESTED.

OTHER EFFORTS AROUND ECONOMIC ADVANCEMENT INCLUDE PARTNERSHIP IN THE

SOUTHERN MINNESOTA REGIONAL COMPETITIVENESS PROJECT TO IDENTIFY

POTENTIAL OPPORTUNITIES FOR THE 38 COUNTIES OF SOUTHERN MINNESOTA

AROUND THE INDUSTRIES OF RENEWABLE ENERGY, BIOSCIENCE, FOOD AND

AGRICULTURE, MANUFACTURING, HEALTH CARE AND HIGH TECHNOLOGY.

FORM 990, PART VI, SECTION A, LINE 1: THE EXECUTIVE COMMITTEE IS

COMPRISED OF THE OFFICERS OF THE CORPORATION; CHAIRPERSON,

VICE-CHAIRPERSON, SECRETARY AND TREASURER AS WELL AS THE IMMEDIATE PAST

CHAIRPERSON. THE EXECUTIVE COMMITTEE MAY ACT ON BEHALF OF THE BOARD TO

REVIEW AND ACT UPON GRANTS AND LOANS, REVIEW AND ACT UPON POLICIES, REVIEW

AND ACT UPON BUDGETARY VARIANCES, AND CONDUCT OTHER BUSINESS OF THE

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

Schedule O (Form 990) 2009

932211  
02-03-10

**SCHEDULE O**  
**(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.

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

**SOUTHWEST INITIATIVE FOUNDATION**

Employer identification number  
**41-155592**

CORPORATION BETWEEN REGULARLY SCHEDULED BOARD MEETINGS. ALL ACTIONS OF THE  
EXECUTIVE COMMITTEE ARE REVIEWED BY THE FULL BOARD THROUGH THE APPROVAL OF  
EXECUTIVE COMMITTEE MEETING MINUTES AT THE NEXT SCHEDULED FULL BOARD  
MEETING.

FORM 990, PART VI, SECTION B, LINE 11: THE IRS FORM 990 WAS REVIEWED BY  
APPROPRIATE STAFF IN THE ORGANIZATION AND THEN PRESENTED TO THE  
AUDIT/FINANCE COMMITTEE FOR REVIEW AND RECOMMENDATION TO THE BOARD. THE  
FULL BOARD OF DIRECTORS ALSO RECEIVED A COPY THROUGH THE SECURE BOARD  
PORTAL OF THE WEBSITE ONE WEEK PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C: AT THE START OF EACH YEAR, THE  
CONFLICT OF INTEREST POLICY, ACCOMPANYING QUESTIONNAIRE, AND THE CODE OF  
ETHICS AND CONDUCT ARE DISTRIBUTED TO ALL BOARD MEMBERS TO COMPLETE.  
DISCLOSURE OF CONFLICTS IS THE STANDING FIRST ITEM ON EVERY BOARD AGENDA.  
THE BOARD OF DIRECTORS ARE INSTRUCTED AT EACH MEETING TO DISCLOSE IF THEY  
FEEL THERE IS A CONFLICT OF INTEREST ON ANY AGENDA ITEM BEFORE IT IS  
BROUGHT TO DISCUSSION. THE CONFLICT IS NOTED IN THE MINUTES. THE EMPLOYEE  
CONFLICT OF INTEREST POLICY IS DISTRIBUTED, REVIEWED, AND SIGNED ANNUALLY  
WITH UPDATES TO ANY POTENTIAL CONFLICTS OF INTEREST NOTED. POTENTIAL  
CONFLICTS OF INTEREST FOR STAFF MUST BE REPORTED TO THE PRESIDENT/CEO OR  
THE CHIEF OPERATING OFFICER/COO AND ARE HANDLED ACCORDING TO THE BOARD  
APPROVED POLICY REQUIREMENTS.

FORM 990, PART VI, SECTION B, LINE 15: SOUTHWEST INITIATIVE FOUNDATION'S  
EXECUTIVE COMPENSATION PROGRAM IS ADMINISTERED BY THE EXECUTIVE COMMITTEE

**SCHEDULE O**  
**(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.

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

SOUTHWEST INITIATIVE FOUNDATION

Employer identification number  
41-1555592

OF THE BOARD. THE EXECUTIVE COMMITTEE IS RESPONSIBLE FOR ESTABLISHING AND  
MAINTAINING A COMPETITIVE COMPENSATION PROGRAM FOR THE KEY EXECUTIVES OF  
THE ORGANIZATION. THE EXECUTIVE COMMITTEE UNDERTAKES AN ANNUAL REVIEW TO  
EVALUATE THE ORGANIZATION'S EXECUTIVE COMPENSATION PROGRAM AGAINST THE  
COMPETITIVE MARKET USING INFORMATION GATHERED ON COMPARABLE POSITIONS  
WITHIN THE SPECIFIC INDUSTRY SECTOR AND FROM INDEPENDENTLY PUBLISHED  
SURVEYS. THE EXECUTIVE COMMITTEE MEETS INDEPENDENT OF THE PRESIDENT/CEO TO  
DISCUSS PERFORMANCE RELATIVE TO THE POSITION DESCRIPTION. DURING THESE  
DELIBERATIONS, THE COMMITTEE ALSO CONSIDERS INPUT OBTAINED FROM OTHER BOARD  
MEMBERS, STAFF, PROFESSIONAL ADVISORS, GRANT RECIPIENTS, AND OTHER INFORMED  
COMMUNITY LEADERS. THE DATE OF DELIBERATIONS AND SUBSEQUENT MEETING WITH  
PRESIDENT/CEO ARE DOCUMENTED IN THE MINUTES OF THE BOARD MEETING AND THE  
OUTCOME MAINTAINED IN THE CONFIDENTIAL PERSONNEL FILES OF THE ORGANIZATION.

THE EXECUTIVE COMMITTEE IS RESPONSIBLE FOR ESTABLISHING AND MAINTAINING A  
COMPETITIVE COMPENSATION PROGRAM FOR THE KEY EXECUTIVES OF THE  
ORGANIZATION. THE EXECUTIVE COMMITTEE UNDERTAKES AN ANNUAL REVIEW TO  
EVALUATE THE ORGANIZATION'S EXECUTIVE COMPENSATION PROGRAM AGAINST THE  
COMPETITIVE MARKET USING INFORMATION GATHERED ON COMPARABLE POSITIONS  
WITHIN THE SPECIFIC INDUSTRY SECTOR AND FROM INDEPENDENTLY PUBLISHED  
SURVEYS. THE FULL BOARD REVIEWS THE WAGE AND SALARY PROGRAM ANNUALLY AND  
SETS A GUIDE TO BE USED FOR INCREASES BASED ON EACH INDIVIDUAL'S OVERALL  
PERFORMANCE AND PLACEMENT ON THE WAGE/SALARY RANGE FOR THEIR SPECIFIC  
POSITION. THE PRESIDENT/CEO REVIEWS ALL SALARY ADJUSTMENTS FOR KEY  
EMPLOYEES.

**SCHEDULE O**  
**(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.

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

**SOUTHWEST INITIATIVE FOUNDATION**

Employer identification number  
**41-155592**

THE LAST REIVEW WAS COMPLETED IN 2010.

FORM 990, PART VI, SECTION C, LINE 19: CONDENSED FINANCIAL STATEMENTS ARE  
AVAILABLE ON THE ORGANIZATION'S WEBSITE AND AUDITED FINANCIAL STATEMENTS  
ARE AVAILABLE UPON REQUEST. THE ORGANIZATION'S CONFLICT OF INTEREST POLICY  
IS NOT OPEN TO PUBLIC INSPECTION.

GOVERNING DOCUMENTS SUCH AS BYLAWS, ARTICLES OF INCORPORATION, AND BOARD  
POLICIES ARE NOT AVAILABLE TO THE GENERAL PUBLIC UNLESS REQUESTED.

STATEMENT OF FINANCIAL POSITION AND STATEMENT OF ACTIVITIES ARE MAILED TO  
ALL CONSTITUENTS WITHIN THE ANNUAL REPORT AND IS AVAILABLE ON OUR WEBSITE.  
THE IRS FORM 990 IS AVAILABLE THROUGH GUIDESTAR AND THE MINNESOTA ATTORNEY  
GENERAL'S OFFICE. LINKS ON OUR WEBSITE DIRECT VISITORS TO GUIDESTAR AND  
ALSO INSTRUCT THEM TO CONTACT SWIF FOR A COMPLETE COPY OF THE AUDITED  
FINANCIAL STATEMENTS.

**SCHEDULE K, PART I, BOND ISSUES:**

(A) ISSUER NAME: MCLEOD COUNTY

(B) DESCRIPTION OF PURPOSE: LAND, BUILDING AND EQUIPMENT FOR OFFICE SPACE

**SCHEDULE L, PART II, LOANS TO AND FROM INTERESTED PERSONS:**

(A) NAME OF PERSON: TIM ULRICH

(A) PURPOSE OF LOAN: BUSINESS LOAN

(B) LOAN TO OR FROM ORGANIZATION? = FROM

(C) ORIGINAL PRINCIPAL AMOUNT \$ 460000. (D) BALANCE DUE \$ 402691.

(E) LOAN IN DEFAULT? = NO

(F) APPROVED BY BOARD OR COMMITTEE? = YES

**SCHEDULE O**  
**(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.

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

**SOUTHWEST INITIATIVE FOUNDATION**

Employer identification number  
**41-1555592**

**(G) WRITTEN AGREEMENT? = YES**