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### Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052

2010

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements , 2010, and ending For calendar year 2010, or tax year beginning G Check all that apply: Final return X Initial return Initial Return of a former public charity Amended return Address change Name change Employer identification number THE MIKE CINDY AND KYLIE HUETHER FAMILY 27-3665401 FOUNDATION Telephone number (see the instructions) 2815 S SAINT CHARLES LN (605) 336-0828 SIOUX FALLS, SD 57103-4671 If exemption application is pending, check here 1 Foreign organizations, check here Н X Section 501(c)(3) exempt private foundation 2 Foreign organizations meeting the 85% test, check Check type of organization here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated Accounting method X Cash Accrual Fair market value of all assets at end of year under section 507(b)(1)(A), check here (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination ► Ś 3,100,000. (Part I, column (d) must be on cash basis ) under section 507(b)(1)(B), check here Part | Analysis of Revenue and (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net Expenses (The total of amounts in for charitable expenses per books income income columns (b), (c), and (d) may not neces-sarily equal the amounts in column (a) purposes (cash basis only) (seé the instructions)) Contributions, gifts, grants, etc, received (att sch) 3,100,000 If the foundn is not req to att Sch B Interest on savings and temporary cash investments Dividends and interest from securities 5a Gross rents b Net rental income 6a Net gain/(loss) from sale of assets not on line 10 REVENU b Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit/(loss) (att sch) 11 Other income (attach schedule) Total. Add lines 1 through 11 3,100,000 0. Compensation of officers, directors, trustees, etc Other employee, salaries and wages Pension plans, employee benefits 16a egal fees (attach schedule) ADMIN b. Accounting fees (attach sch) COther proffees (attach sch) Interest OPERAT I S T R A T 18 Taxes (attach schedule)(see instr)
19 Depreciation (attach
sch) and depletion Occupancy 1 Travel, Zonferences, and meetings 21 22 Printing and publications Other expenses (attach schedule) 24 Total operating and administrative expenses. Add lines 13 through 23 Contributions, gifts, grants paid 25 Total expenses and disbursements. 0. 0 0 Add lines 24 and 25 Subtract line 26 from line 12: a Excess of revenue over expenses 3,100,000. and disbursements 0 **b** Net investment income (if negative, enter -0-) 0 C Adjusted net income (if negative, enter -0-)

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BAA For Paperwork Reduction Act Notice, see the instructions.

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Day	1 11	Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only	Beginning of year		<u>⊏na o</u>	r year
FGH	1 17	Column should be for end-of-year amounts only (See instructions )	(a) Book Value	<b>(b)</b> Book Valu	е	(c) Fair Market Value
	1	Cash – non-interest-bearing		3,100,0	00.	3,100,000.
	2	Savings and temporary cash investments				
	3	Accounts receivable		······································		
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable				
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable		•		
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see the instructions)				
_	7	Other notes and loans receivable (attach sch)				
Ą		Less: allowance for doubtful accounts ▶				
š	8	Inventories for sale or use				
A S E T	9	Prepaid expenses and deferred charges				
Ś	10 a	a Investments – U.S. and state government obligations (attach schedule)				
	k	Investments — corporate stock (attach schedule)				
		: Investments — corporate bonds (attach schedule)	· · · · · ·			
	11	Investments – land, buildings, and equipment basis				
		Less accumulated depreciation (attach schedule)				
	12	Investments – mortgage loans				-
	13	Investments – other (attach schedule)				
	14	Land, buildings, and equipment: basis▶				
		Less: accumulated depreciation (attach schedule)				•
		Other assets (describe ►)  Total assets (to be completed by all filers -				
		see instructions. Also, see page 1, item I)	0.	3,100,0	00.	3,100,000.
Ļ	17	Accounts payable and accrued expenses				
Å	18	Grants payable				
Ŗ	19	Deferred revenue				
Ľ	20	Loans from officers, directors, trustees, & other disqualified persons				
Ţ	21	Mortgages and other notes payable (attach schedule)				
Ţ	22	Other liabilities (describe				
E S	23	Total liabilities (add lines 17 through 22)	0.		0.	
	23	Foundations that follow SFAS 117, check here	<u> </u>		<del>-</del>	
		and complete lines 24 through 26 and lines 30 and 31.				
N F E U		Unrestricted		3,100,0	υυ.	
TN	25	Temporarily restricted				
A D	26	Permanently restricted				
A B S A L T A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.				
EL	27	Capital stock, trust principal, or current funds				
SŅ	28	Paid-in or capital surplus, or land, building, and equipment fund				
O E	29	Retained earnings, accumulated income, endowment, or other funds				
ŘŠ	30	Total net assets or fund balances (see the instructions)	$\overline{0}$ .	3,100,0	00.	
	31	Total liabilities and net assets/fund balances	0.	3,100,0	00	
Day	6 828	(see the instructions)  Analysis of Changes in Net Assets or Fund Balance		3,100,0	00.	:
				·-·		<del></del>
	end-	l net assets or fund balances at beginning of year — Part II, colu of-year figure reported on prior year's return)	mn (a), line 30 (must ag	ree with	1_	0.
2		r amount from Part I, line 27a			2	3,100,000.
3		increases not included in line 2 (itemize)			3	2 400 000
4		lines 1, 2, and 3		1	4	3,100,000.
5		ases not included in line 2 (itemize)	Daw Harrison (2)		5	2 100 000
6	Lota	net assets or fund balances at end of year (line 4 minus line 5)	<ul> <li>Part II, column (b), li</li> </ul>	ne 30	6	3,100,000.

(a) List and descr	I Losses for Tax on Investmen tibe the kind(s) of property sold (e.g., rouse; or common stock, 200 shares Mi	eal estate,	(b) How acq P — Purch D — Dona	ase	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a N/A						··
b						
С						
d						
е						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other base plus expense of sa			(h) Gain or (e) plus (f) m	(loss) inus (g)
a						
b						
С						
d						
e						
Complete only for assets shown (i) Fair Market Value as of 12/31/69	wing gain in column (h) and owned by  (j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a	ı (ı) ny		(I) Gains (Colugain minus column (l gain minus column (l an -0-) <b>or</b> Losses (fi	k), but not less
a				•		
b						
c						
d						· · · · · · · · · · · · · · · · · · ·
e						-
2 Capital gain net income or (ne	et capital loss).   [If gain, also If (loss), en	enter in Part I, line 7 ter -0- in Part I, line 7		2		
3 Net short-term capital gain or	(loss) as defined in sections 1222(5) a	and (6):				
If gain, also enter in Part I, Iir in Part I, line 8	ne 8, column (c) (see the instructions).	If (loss), enter -0-	-	3		
······································	er Section 4940(e) for Reduce	d Tax on Net Investme	ent Incon	_		
If 'Yes,' the foundation does not qua	action 4942 tax on the distributable am alify under section 4940(e). Do not con	nplete this part			Yes	No
1 Enter the appropriate amount	in each column for each year; see the	instructions before making	any entries	š	<del></del>	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use ass	sets	(col	<b>(d)</b> Distribution umn (b) divided	
2009						
2008						
2007						
2006						
2005						
2 Total of line 1, column (d)				2		
	the 5-year base period – divide the tot on has been in existence if less than 5			3		
4 Enter the net value of noncha	ritable-use assets for 2010 from Part )	Cline 5		4		
	intable-use assets for 2010 from Fart 7	v, mie 5	ļ			
5 Multiply line 4 by line 3			-	5		
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b)		-	6		<del>_</del>
7 Add lines 5 and 6			-	7		-
8 Enter qualifying distributions	from Part XII, line 4		Ĺ	8		
If line 8 is equal to or greater Part VI instructions	than line 7, check the box in Part VI, I	ine 1b, and complete that p	art using a	1% t	ax rate. See the	

Form	990-PF (2010) THE MIKE CINDY AND KYLIE HUETHER FAMILY	27 <b>-</b> 3	665401		F	age <b>4</b>
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -	- see	the instru	ctions	)	
1 a	Exempt operating foundations described in section 4940(d)(2), check here					
	Date of ruling or determination letter (attach copy of letter if necessary — see instr.)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V,	`	1			0.
	check here ► and enter 1% of Part I, line 27b	ľ				
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable	l				_
_	foundations only. Others enter -0-)	}	2			0.
3	Add lines 1 and 2	,	3			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0	<del>'</del> }	5			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-Credits/Payments.	ŀ	-3			<del>- 0.</del>
٠,	2010 estimated tax pmts and 2009 overpayment credited to 2010					
	Exempt foreign organizations – tax withheld at source 6b					
	Tax paid with application for extension of time to file (Form 8868)  6c					
	Backup withholding erroneously withheld  6d					
	Total credits and payments. Add lines 6a through 6d		7			0.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  If Form 2220 is attached	f	8			<del></del>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶	9			0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•	10			
11	Enter the amount of line 10 to be: Credited to 2011 estimated tax	▶	11			
Par	t VII-A   Statements Regarding Activities					
12	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	ıt			Yes	No
	participate or intervene in any political campaign?	••		1a		<u>X</u>
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes					
-	(see the instructions for definition)?			1b		X
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any material	s pub	lished			
	or distributed by the foundation in connection with the activities					
	Did the foundation file Form 1120-POL for this year?			1c		<u>X</u>
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation  (2) On foundation   (3)		0.			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impo	sed o				
	foundation managers $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		<u>X</u>
	If 'Yes,' attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, are	ticles				7.7
_	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the change	S		3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a	NT.	<u>X</u> /A
_	olf 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?			4b	14	X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?  If 'Yes,' attach the statement required by General Instruction T			-		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
·	By language in the governing instrument, or					
			61 b			
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions the with the state law remain in the governing instrument?</li> </ul>	ial CO	Hillict	6		Х
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV			7	X	
8 a	Enter the states to which the foundation reports or with which it is registered (see the instructions)	▶				
	SD					
t	o If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G? If 'No,' attach explanation</i>			8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(	3) or	4942(1)(5)			
J	for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If 'Yes,' con	nplete	Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing to and addresses  See Statem	neir na ent	ames 1	10	Х	
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Part VII-B   Statements Regarding Activit	ies for Which Fon	n 4720 May Be Red	uired (continued)		
5a During the year did the foundation pay or incu	•			, [ ]	
(1) Carry on propaganda, or otherwise attempt	ot to influence legislation	on (section 4945(e))?	∐ Yes X	No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	lic election (see section ation drive?	n 4955); or to carry		No	
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	∐ Yes X	No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section			Yes X	No	
(5) Provide for any purpose other than religio educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53.4945 or in (see instructions)?	the transactions fail to a current notice regar	qualify under the exception disaster assistance	tions	5b	N/A
Organizations relying on a current notice rega	rding disaster assistani	ce check here	▶ [		
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	the foundation claim ex sibility for the grant?	emption from the	N/A Yes	] No	
If 'Yes,' attach the statement required by Regi	ulations section 53 494	5-5(d)			
6a Did the foundation, during the year, receive aron a personal benefit contract?			Yes X	No	
<b>b</b> Did the foundation, during the year, pay prem	iums, directly or indired	tiy, on a personal benef	rit contract?	6ь	<u> X</u>
If 'Yes' to 6b, file Form 8870  7a At any time during the tax year, was the found	dation a narty to a prob	ihitad tav shaltar transa	ction? Yes X	No	
<b>b</b> If yes, did the foundation receive any proceed				7b	1
Part VIII Information About Officers, D					<del></del>
and Contractors	,	•			<u> </u>
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	ructions).		
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allo	
MIKE HUETHER	President	0.	0.		0.
2815 SOUTH ST. CHARLES LANE	5.00				
SIOUX FALLS, SD 57103					
_CINDY_HUETHER	Vice Preside	0.	0.		0.
2815 SOUTH ST. CHARLES LANE	5.00				
SIOUX FALLS, SD 57103	D: .				
KYLIE HUETHER 2815 SOUTH ST. CHARLES LANE	Director 0	0.	0.		0.
SIOUX FALLS, SD 57103			<del> </del>		
2 Compensation of five highest-paid employee	 es (other than those inc	luded on line 1 – see in	structions). If none, e	nter 'NONF.'	
(a) Name and address of each employee	(b) Title and average	(c) Compensation	(d) Contributions to	(e) Expens	e account.
paid more than \$50,000	hours per week devoted to position	(o) companies	employee benefit plans and deferred compensation	other allo	owances
None					
				<del> </del>	
					_
				<del> </del>	
Total number of other employees paid over \$50,000	).		<b>&gt;</b>		0
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Part X   Minimum Investment Return (All domestic foundations mussee instructions.)	st complete this part. Foreign four	idations,
1 Fair market value of assets not used (or held for use) directly in carrying out cha a Average monthly fair market value of securities	arıtable, etc, purposes:	
<b>b</b> Average of monthly cash balances	1 b	
c Fair market value of all other assets (see instructions)	1c	
d Total (add lines 1a, b, and c)	1 d	0.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)	1 e	
2 Acquisition indebtedness applicable to line 1 assets	2	
3 Subtract line 2 from line 1d	3	
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here ar	nd on Part V, line 4	0.
6 Minimum investment return. Enter 5% of line 5	6	0.
	and (j)(5) private operating found do not complete this part.)	dations
1 Minimum investment return from Part X, line 6	<u> 1                                   </u>	
2a Tax on investment income for 2010 from Part VI, line 5	2a	
<b>b</b> Income tax for 2010. (This does not include the tax from Part VI.)	2b	
c Add lines 2a and 2b	2c	
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	<del></del>
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on	Part XIII, line 1	0.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc. a Expenses, contributions, gifts, etc – total from Part I, column (d), line 26	purposes:	
b Program-related investments — total from Part IX-B	1b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out cha	arıtable, etc, purposes	
3 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required)	3a	11.
<b>b</b> Cash distribution test (attach the required schedule).	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line	<u> </u>	0.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net Enter 1% of Part I, line 27b (see instructions)	+ I	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
, , , , ,	are when enjoyilating whether the foundation	
Note. The amount on line 6 will be used in Part V, column (b), in subsequent ye	ears when calculating whether the foundat	1011

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Form **990-PF** (2010)

## Part XIII Undistributed Income (see instructions)

	(a) Corpus	<b>(b)</b> Years prior to 2009	<b>(c)</b> 2009	<b>(d)</b> 2010
1 Distributable amount for 2010 from Part XI, line 7				0.
2 Undistributed income, if any, as of the end of 2010.				
a Enter amount for 2009 only			0.	
<b>b</b> Total for prior years: 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2010				
<b>a</b> From 2005				
<b>b</b> From 2006				
<b>c</b> From 2007				
<b>d</b> From 2008				
<b>e</b> From 2009		]	-	
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2010 from Part				
XII, line 4: ► \$				
a Applied to 2009, but not more than line 2a	,		0.	
<b>b</b> Applied to undistributed income of prior years (Election required – see instructions)		0.		
c Treated as distributions out of corpus (Election required – see instructions)	0.			
<b>d</b> Applied to 2010 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2010	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a) )				
Same amount must be shown in column (a)			•	
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	0.			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b		0.	,,	
c Enter the amount of prior years' undistribut-				
ed income for which a notice of deficiency has been issued, or on which the section				
4942(a) tax has been previously assessed		0.		
<b>d</b> Subtract line 6c from line 6b. Taxable				
amount – see instructions		0.		
e Undistributed income for 2009 Subtract line 4a from			0	
line 2a Taxable amount — see instructions			0.	<u> </u>
f Undistributed income for 2010. Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2011.				0.
7 Amounts treated as distributions out of				<u></u>
corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
8 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2006				
<b>b</b> Excess from 2007				
c Excess from 2008				
d Excess from 2009				
e Excess from 2010				

Form 990-PF (2010) THE MIKE CINDY A				27-3665401	
Part XIV Private Operating Foundation					N/A
1a If the foundation has received a ruling or on its effective for 2010, enter the date of the	ruling			*	4040()(5)
<b>b</b> Check box to indicate whether the foundat		rating foundation d		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	412 0000	Prior 3 years	(4) 2007	(a) Takal
investment return from Part X for each year listed	(a) 2010	<b>(b)</b> 2009	(c) 2008	(d) 2007	(e) Total
<b>b</b> 85% of line 2a		<u> </u>			
<ul> <li>Qualifying distributions from Part XII, line 4 for each year listed</li> </ul>					·
d Amounts included in line 2c not used directly for active conduct of exempt activities					
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c</li> </ul>					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying under</li></ul>	-				
section 4942(j)(3)(B)(i).  b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X,					
line 6 for each year listed					<del></del>
c 'Support' alternative test — enter:					
<ol> <li>Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)</li> </ol>					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					<del></del>
(4) Gross investment income			• •• •	125.000	
Part XV Supplementary Information assets at any time during the	(Complete this	part only if the	organization ha	ad \$5,000 or mor	e in
Information Regarding Foundation Managers of the foundation who is close of any tax year (but only if they have See Statement 2	gers:	ore than 2% of the t	total contributions r section 507(d)(2))	eceived by the found	dation before the
<b>b</b> List any managers of the foundation who ca partnership or other entity) of which the None	own 10% or more o foundation has a 1	f the stock of a corp 0% or greater intere	poration (or an equ est	ally large portion of	the ownership of
2 Information Regarding Contribution, Gran Check here ▶ X if the foundation only n requests for funds. If the foundation make complete items 2a, b, c, and d.	nakes contributions	to preselected char	rıtable organızatıon	is and does not acce anizations under oth	pt unsolicited er conditions,
<b>a</b> The name, address, and telephone number	r of the person to v	whom applications s	should be addresse	q.	
<b>b</b> The form in which applications should be	submitted and infor	mation and materia	ls they should inclu	ude:	
c Any submission deadlines:					
d Any restrictions or limitations on awards,	such as by geograp	hical areas, charita	ble fields, kinds of	institutions, or other	factors:
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Total

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► 3b

Page **12** 

1	أبرو	YV	LΔ	Analy	sis of	Income	-Producing	<b>Activities</b>
J	CAIL	AY		AHAD Y	וט כוכ	IIICOIII <del>C</del>	-r i ouucing	MCU VIUCS

		11	<u> </u>	Contrated to		
=nter gros	s amounts unless otherwise indicated	(a) Business code	(b) Amount	(c) Exclu-	y section 512, 513, or 514 (d) Amount	(e) Related or exempt function income (see the instructions)
1 Prog	ram service revenue:			code	<del></del>	
a		4 -			- <del></del>	
b		<del>   </del>				
c		-		<b>-</b>		
d		ļ				
	· -			+		<del></del> .
f		+		<del>                                     </del>		
-	and contracts from government agencies	<del></del>				
	bership dues and assessments st on savings and temporary cash investments			+		
	lends and interest from securities			<del>  </del>		
	rental income or (loss) from real estate:			1		
	-financed property	<del></del>		<b>+</b>		
	debt-financed property					· · · · · · · · · · · · · · · · · · ·
	ental income or (loss) from personal property					
	r investment income					
8 Gain d	or (loss) from sales of assets other than inventory			1 1		
9 Net	income or (loss) from special events					
10 Gros	s profit or (loss) from sales of inventory					
<b>11</b> Othe	r revenue.					
a						
b		<u> </u>		<u> </u>		
	<del> </del>					
e				ļ		
e 12 Subt	otal. Add columns (b), (d), and (e)	, , , , , , , ,				
e	I. Add line 12, columns (b), (d), and (e)		,		13	0.
e		ens.)			13	0.
e	I. Add line 12, columns (b), (d), and (e)			Purpose	· •	0.
e 12 Subt 13 Tota (See work: Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accomplish	nment of Exempt		s	
e	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accomplish	nment of Exempt		s	
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e 12 Subt 13 Tota (See work: Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accomplish	nment of Exempt		s	
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e	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accomplish	nment of Exempt		s	

# Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

	-		-				Yes	No
describ	organization directly ed in section 501(c) ( i to political organizat	of the Code (oth	gage in any of the follow er than section 501(c)(3	ring with any o organization:	other organization s) or in section 527,		163	100
-	•		noncharitable exempt of	rganization of	:			
(1) Cas	, -	, , , , , , , , , , , , , , , , , , , ,	The state of the s	. 9	•	1a(1)	1	Х
• •	er assets					1a (2)		X
• •	ransactions							<del></del>
	es of assets to a non	scharitable evem	nt organization			1b(1)		х
• •						1b(1)		X
` '			le exempt organization					X
` '	ntal of facilities, equip	•	assets			1b (3)		X
	mbursement arrange					1b (4)		X
` '	ans or Ioan guarantee					1b (5)		X
` '		•	or fundraising solicitation			1b (6)		X
c Sharing	of facilities, equipm	ent, mailing lists	s, other assets, or paid of	mployees		1c		
the goo	ds, other assets, or s	services given b	/ the reporting foundation	n. If the found	nn <b>(b)</b> should always show the dation received less than fair mis, other assets, or services rec	narket value in	ue of	
(a) Line no	(b) Amount involved	Y	noncharitable exempt organizat		Description of transfers, transactions		naement	ts
N/A	And a second	1		——————————————————————————————————————		, , , , , , , , , , , , , , , , , , , ,	J	
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		<del> </del>						
	<u>-</u>				_			
					··· · · · · · · · · · · · · · · · · ·			
							·	
describ	oundation directly or ed in section 501(c) of complete the followi	of the Code (oth	ed with, or related to, or er than section 501(c)(3	ne or more tax )) or in section	r-exempt organizations n 527?	Yes	X	No
	a) Name of organizati		(b) Type of organ	ization	(c) Description of	of relationship		
N/A	y Harris of organizati		(2) ()   0 0 0 0 0 9 2 1		(0)			
11/11		-			<del> </del>			
					-		_	
	<del></del>	<del></del>						
			<del></del>		<u> </u>	<del></del>		
10-4-		#	ad the control maked an accomm		and attachments, and to the best of my kno	uladas and ballat i	t in this	
Sign	t, and complete Declaration	of preparer (other the	an taxpayer or fiduciary) is base	d on all information	nd statements, and to the best of my kno n of which preparer has any knowledge		t is uue,	
Here _					5/09/// Presid	ent		
' s	ignature of officer or trustee			Date		7   5		
	Print/Type preparer's nai		Pleparer's subrature	11/2	Date Check if	if PTIN		
Paid	Jered D. Fra	anken	/ WERN TIRE	L'E	self-employed		958	
Preparer	Firm's name	Tait, Reite		A's, Inc.	Firm's EIN ► 4	6-0454613		
Use Only	Ermela addressa	2101 W 4/1st						
	Firm's address S	Sioux Falls	, SD 57105-6195	<u> </u>	Phone no (	605) 338-	9370	1
BAA						Form 99	0-PF	(2010)

#### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

### Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF

OMB No 1545-0047

2010

Employer identification number Name of the organization THE MIKE CINDY AND KYLIE HUETHER FAMILY 27-3665401 FOUNDATION Organization type (check one): Filers of: Section: ) (enter number) organization 501(c)( Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.) **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc, purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc, purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc, contributions of \$5,000 or more during the year Caution: An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it must answer 'No' on Part IV, line 2 of their Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

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

Payroll Noncash

(Complete Part II if there is a noncash contribution)

Page 1

of 1

of Part II

Name of organization

THE MIKE CINDY AND KYLIE HUETHER FAMILY

Employer identification number

27-3665401

(c) FMV (or estimate) (see instructions)	(d) Date received
(See instructions)	Date received
e	
<sup>3</sup>	<u></u>
(c) FMV (or estimate) (see instructions)	(d) Date received
s	
······································	
(c) FMV (or estimate) (see instructions)	(d) Date received
<u> </u>	
	-
(c) FMV (or estimate) (see instructions)	(d) Date received
Ş	
(c) FMV (or estimate) (see instructions)	(d) Date received
<sup>\$</sup>	
(c) FMV (or estimate) (see instructions)	(d) Date received
Schedule <b>B</b> (Form 990. 990-E	Z, or 990-PF) (201
	\$  (c) FMV (or estimate) (see instructions)  \$  (c) FMV (or estimate) (see instructions)  \$  (c) FMV (or estimate) (see instructions)  \$  (c) FMV (or estimate) (see instructions)

Name of organization

THE MIKE CINDY AND KYLIE HUETHER FAMILY

Employer Identification number 27-3665401

Part III Exclusively religious, charitable, etc, individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete cols (a) through (e) and the following line entry.

	For organizations completing Part III, enter contributions of \$1,000 or less for the year.	total of exclusively religious, cl (Enter this information once. S	haritable, etc, See instruction	, ns) . ▶\$	N/A
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift	
	N/A				
	Transferee's name, addre	(e) Transfer of gift ss, and ZIP + 4	Rel	ationship of transferor to trans	sferee
(a)	(b)	(c)		(d)	
No. from Part I	Purpose of gift	Use of gift		Description of how gift	is held
	Transferee's name, addre	(e) Transfer of gift ss, and ZIP + 4	Rela	ationship of transferor to trans	iferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift	is held
	Transferee's name, addre	(e) Transfer of gift ss, and ZIP + 4	Rela	ationship of transferor to trans	iferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift	is held
	Transferee's name, addre	Relationship of transferor to transferee			

2010

### **Federal Statements** THE MIKE CINDY AND KYLIE HUETHER FAMILY **FOUNDATION**

Page 1

27-3665401

Statement 1 Form 990-PF, Part VII-A, Line 10 Substantial Contributors During the Tax Year

Name of Substantial Contributor Address of Substantial Contributor

MIKE AND CINDY HUETHER

2815 SOUTH ST CHARLES LANE SIOUX FALLS, SD 57103

Statement 2 Form 990-PF, Part XV, Line 1a Foundation Managers - 2% or More Contributors

MIKE HUETHER CINDY HUETHER