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Fom 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)

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

OMB No 1545-0047 2011

Open to Public Inspection

and ending For the 2011 calendar year, or tax year beginning C Name of organization D Employer identification number Check if applicable RAPID CITY SUMMER NIGHTS, INC Address change 27-2179597 Doing Business As Name change Room/suste Number and street (or P O box if mail is not delivered to street address) Telephone number Initial return 605-343-1823 PO BOX 2290 Terminated City or town, state or country, and ZIP + 4 RAPID CITY SD 57709 285,343 Amended return G Gross receipts \$ Name and address of principal officer Application pending H(a) Is this a group return for affiliates? SANDRA SCHWAN PO BOX 2290 H(b) Are all affiliates included? SD 57709 If "No," attach a list (see instructions) RAPID CITY X 501(c) 501(c)(3) (insert no) WWW.RAPIDCITYSUMMERNIGHTS.COM Website > H(c) Group exemption number ▶ Year of formation 2010 X Corporation Trust Association M State of legal domicile SD Form of organization Part I Summary 1 Briefly describe the organization's mission or most significant activities: TO ORGANIZE, MANAGE, AND EXECUTE A WEEKLY COMMUNITY MUSIC, FOOD, AND SCAREYEND JUL Activites & Governance ENTERTAINMENT FESTIVAL WITHIN DOWNTOWN RAPID CITY FOR THE ENJOYMENT AND BENEFIT OF THE PUBLIC 2 Check this box ▶ I if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) $1\overline{1}$ 4 4 Number of independent voting members of the governing body (Part VI, line 1b) 0 5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 30 6 6 Total number of volunteers (estimate if necessary) 7a 7a Total unrelated business revenue from Part VIII, column (C), line 12 0 b Net unrelated business taxable income from Form 990-T, line 34 7b Prior Year Current Year 93,099 44,473 8 Contributions and grants (Part VIII, line 1h) 20,369 9 Program service revenue (Part VIII, line 2g) 2012

10 Investment income (Part VIII, column (A), lines 24 and 7d) 34,680 88 94 73,203 124,991 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e, 186,759 204,238 12 Total revenue - add lines 8 through 11 (must edual Part VIII) column (A) line 12) 0 27,132 Grants and similar amounts paid (Part IX, column (A), lines 1-3) ō 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0 0 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 b Total fundraising expenses (Part IX, column (D), line 25) ▶ 118,892 180,995 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 118,892 208,127 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 67,867 -3,889 19 Revenue less expenses Subtract line 18 from line 12 Beginning of Current Year End of Year 67,867 63. 978 20 Total assets (Part X, line 16) 0 21 Total liabilities (Part X, line 26) 67,867 63,978 22 Net assets or fund balances Subtract line 21 from line 20 Signature Block 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 prepare) (other than officer) is based on all information of which preparer has any knowledge ignature of officer Sign PRESIDENT SANDRA SCHWAN Here Type or print name and title Print/Type preparer's name Check Paid self-employed P01245137 NINA BRAUN, CPA Preparer KETEL THORSTENSON 46-0257538 LLP Firm's EIN Firm's name PO BOX 3140 **Use Only** 57709-3140 605-342-5630 RAPID CITY, SD May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No

Pa	rt IV	Checklist of Required Schedules
		•
1	Is the or	ganization described in section 501(c)(3) or 4947(a)(1) (other than a private founda

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

	·		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Į
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			ĺ
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	j	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			!
	complete Schedule D, Part III	8	1	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,"		Ì	
	complete Schedule D, Part IV	9		X
0	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
•	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
•	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"		1	
_	complete Schedule D, Part VI	11a		X
h	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	111		_
-	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	116	•	X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
Ĭ	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	[]		
ŭ	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
Lu	Schedule D. Parts XI, XII, and XIII	12a		X
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
~	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
о 4а	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	1.12		
٠	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	1,75		-==
•	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	<u> </u>		
•	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
7	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 (see instructions)	17		X
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	 ' 		
-	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
5	If "Yes," complete Schedule G, Part III	19		X
02	Did the groanization operate one or more hospital facilities? If "Yes." complete Schedule H	20a		X

20b

	•		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			ĺ
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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			l
	employees? If "Yes," complete Schedule J	23		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	24a		X
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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	25b		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	26		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	27		x
00	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		
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)	28a	1	x
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	202		-
þ	Schedule L, Part IV	28b		x
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		
·	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
••	conservation contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
•	Part I	31	'	х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		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	33		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	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		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	36_		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		İ	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	L

Form 990 (2011)

Statements Regarding Other IRS Filings and Tax Compliance Part V *Check if Schedule O contains a response to any question in this Part V Yes No 11 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 0 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and 1c reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a 3b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 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 X 4a account)? If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the X organization solicit any contributions that were not tax deductible? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). 7 Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods 7a and services provided to the payor? 7b If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was 7c required to file Form 8282? 7d If "Yes," indicate the number of Forms 8282 filed during the year 7e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring 8 organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. 9a Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter. 10 10a Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b b Section 501(c)(12) organizations. Enter 11 11a Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12a b if "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. 13 13a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b 13c Enter the amount of reserves on hand C Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b

Part VI

DAA

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. Check if Schedule O contains a response to any question in this Part VI X Section A. Governing Body and Management Yes No 11 Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 11 1b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 2 any other officer, director, trustee, or key employee? 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? 3 4 Did the organization make any significant changes to its governing documents since the pnor Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 6 Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a The governing body? X Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a X Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? X Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." 12c describe in Schedule O how this was done X 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X The organization's CEO, Executive Director, or top management official 15a X 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a X 16a with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year State the name, physical address, and telephone number of the person who possesses the books and records of the 20 PO BOX 3410 KETEL THORSTENSON, LLP organization > SD 57709 605-342-5630 RAPID CITY

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

Check if Schedule O contains a response to any question in this Part VII

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.
- 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, if any 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.

K Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for	bo	x, unle	Pos check ess pe nd a d	rson Irecto	than o	an e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organization and related organizations
(1) SANDRA SCHWAN					-					
PRESIDENT	10.00	X		X				0	0	0
(2) MARY SEBERT										
SECRETARY	7.00	X			<u> </u>			0	0	0
(3) NICK SCHWAN										
MEMBER AT LARGE	4.00	X			L			0	0	0
(4) BRET PUGH								į	!	
VICE-PRESIDENT	7.00	X		X		<u> </u>		0	0	0
(5) LAURA PEEL							i			
MEMBER AT LARGE	4.00	X						0	0	0
(6) KELLY MILLER										
MEMBER AT LARGE	4.00	X		L.		_		0	0	0
(7) JOEL LANDEEN						ļ				
MEMBER AT LARGE	4.00	X				<u> </u>	$ldsymbol{ld}}}}}}$	0	0	0
(8) JEAN NASH										
MEMBER AT LARGE	4.00	X			_			0	0	0
(9) DAWN CONNOR		'				1				
TREASURER	7.00	X			L	ļ		0	0	0
(10) TERRI PHELPS		Ι.			ļ	1	ļ ,			
MEMBER AT LARGE	4.00	X		<u> </u>		<u> </u>		0	0	0
(11) KRISTINA WIEBE		1								
MEMBER AT LARGE	4.00	X			L			0	0	0
(12)				<u> </u>						
(13)			-			 				
(14)		 -			-	 	-			

Pa	rt VII Section A. Oπicers	, Directors, Tru	Tees	5, 1	y E	npic	yees	s, ar	nd Highest Compensated	Employees (continued)		
	(A) Name and title	(B) Average hours per week (describe	bo	x, unt	Pos check ess pe	rson i	than o s both r/truste	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F Estim amou oth compen	ated int of er isation
		hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from organiz and re organiz	zation elated
(15)	201		-			-		_			<u> </u>	
			<u> </u>			_	ļ					
(16)												
(17)		ļ										
(18)												
(19)				-							1	
(20)		<u> </u>		-								<u> </u>
(21)						-						
(22)			_				-					
(23)			\vdash			-					<u> </u>	
(24)			_				-					
					_		<u> </u>	_				
(25)		<u> </u>										
1b	Sub-total	-4- 4- D4\/// C	41.	4								
c d	Total from continuation shee Total (add lines 1b and 1c)	ets to Part VII, S	ectic	ON A				>				
2	Total number of individuals (ind	cluding but not lin			iose	liste	d abo	ve)	who received more than \$1	00,000 in		
	reportable compensation from	the organization	<u> </u>	0_								Vec Ne
3	Did the organization list any for								ee, or highest compensated	1		Yes No
4	employee on line 1a? If "Yes," For any individual listed on line	1a, is the sum o	f repo	ortab	ole co	ompe	ensat	ion a		m the	3	X
_	organization and related organ individual										4	х
5	Did any person listed on line 1a for services rendered to the organization									dividual 	5	x
	tion B. Independent Contract								stare that recovered was a star	- \$400,000 of		
1	Complete this table for your five compensation from the organization	ation Report cor							r year ending with or within t	the organization's tax year		(0)
	Name and	(A) business address						├	Descrip	(B) tion of services	α	(C) ompensation
					_			<u> </u>		- 		
		·										
				_		_						
_				-					** <u></u>			
2	Total number of independent of								listed above) who			
DAA	received more than \$100,000 (of compensation	from	the o	orgai	nızat	ion 🕨	<u> </u>		0	Fo	m 990 (2011)

Pa	t VI	II Statement of Reve	nue						
						(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<u> </u>	4	Federated compares	40				revenue		512, 513, 0r 514
Contributions, Gifts, Grants and Other Similar Amounts		Federated campaigns	1a 1b						
윤립		Membership dues	1c						
₽₹		Fundraising events							
اقِيق		Related organizations	1d						
Siris		Government grants (contributions)	1e	<u>.</u>					
풀힐	T	All other contributions, gifts, grants, and similar amounts not included above	1f		44,473				
을	_				44,473				
<u>E</u> E	_	Noncash contributions included in lines 1a-1	ır ,	\$		44,473			
	<u> </u>	Total. Add lines 1a-1f			Busn. Code	• 7 • 7 5	Mind of the second		
ᇍ	20	TIPS, VENDORS, ENTE	DT'S TN	MENT	900099	34,680	34,680	•	
Š	2a b	TIPS, VENDORS, ENTE.	KIMIK	MENT	300033	55,000	55/555	 	
8									
Š	c d					-			
Š	u								
E I	f	All other program service rever	uie		i				
Program Service Revenue		Total. Add lines 2a-2f				34,680			
-	3	Investment income (including d	ıvıdend	ls. interes	it.				
ı	Ū	and other similar amounts)				94			94
	4	Income from investment of tax-	exemp	t bond pro	oceeds 🕨				***
	5	Royalties	оло <i>т</i> р		•				
	Ŭ	(i) Real		(II) I	Personal	·			
İ	6a	Gross rents							
	b	Less rental exps							
	C	Rental inc or (loss)			· 				
	d	Net rental income or (loss)			•				
ĺ	7a	Gross amount from (i) Secunties	-	(u) Other				
		sales of assets other than inventory		1					
	ь	Less cost or other							
		basis & sales exps							
	С	Gain or (loss)							
	d	Net gain or (loss)			•				
	8a	Gross income from fundraising ever	nts					, .	·
ag		(not including \$							
Se		of contributions reported on line 1c)							
Other Revenue		See Part IV, line 18	а						
the	b	Less direct expenses	b						
0	С	Net income or (loss) from fund	raising	events_					
	9a	Gross income from gaming activitie	s.						
		See Part IV, line 19	а						
	b	Less direct expenses	b						
	С	Net income or (loss) from gam	ing acti	vities	<u> </u>				
	10a	Gross sales of inventory, less					‡		
		returns and allowances	а		206,096				
	b	Less cost of goods sold	þ	L	81,105		!		
	С	Net income or (loss) from sales	s of inv	entory		124,991	124,991		· · · · · · · · · · · · · · · · · · ·
		Miscellaneous Revenue			Busn. Code		 		
	11a							·· _	
	b								
	С				<u> </u>				
	d	All other revenue				ļ			
	е	Total. Add lines 11a-11d			•	204,238	159,671	0	94
	12	Total revenue. See instruction	าร		•	1 204,238	1 129,0/1	ı	1 94

Part IX Statement of Functional Expenses

Form 990 (2011)

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)

	Check if Schedule O contains a response			· •	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
•	organizations in the U.S. See Part IV, line 21	27,132	27,132	1	
2	Grants and other assistance to individuals in				
_	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
J	organizations, and individuals outside the			I	
	U.S. See Part IV, lines 15 and 16			1	
4	Benefits paid to or for members				······································
5	Compensation of current officers, directors,			1	
9	trustees, and key employees				
6	Compensation not included above, to disqualified				
U	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salanes and wages				
8	Pension plan accruals and contributions (include				
0	section 401(k) and 403(b) employer contributions)				
a	Other employee benefits				· · · · · · · · · · · · · · · · · · ·
9 10	Payroll taxes				
	Fees for services (non-employees)				
11	Management				
a	<u>■</u>				
þ	Legal Accounting	2,740		2,740	
ų C	Lobbying				
d	Professional fundraising services See Part IV, line 17				
e	Investment management fees				
f ~	Other			·	
g 12	Advertising and promotion	18,281	18,281	·	
12	Office expenses	903		903	
13 14	Information technology		-		
	**				
15 16	Royalties	712	712		
16 17	Occupancy Travel	15,478		15,478	
17	Payments of travel or entertainment expenses				
18	for any federal, state, or local public officials				
40	-	2,018		2,018	
19	Conferences, conventions, and meetings	11		11	
20	Interest Rayments to affiliates				
21	Payments to affiliates Depreciation, depletion, and amortization			-	
22 23	Insurance				·
23 24	Other expenses. Itemize expenses not covered				
44	above. (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
а	EVENT ENTERTAINMENT	101,308	101,308		
b	TAXES AND LICENSES	18,498			
C	EQUIPMENT	16,181			-
d	VOLUNTEER RECOGNITION	2,728			
e	All other expenses	2,137	231	1,906	
25	Total functional expenses. Add lines 1 through 24e	208,127		23,056	
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)				
DAA					Form 990 (2011)

Form 990 (2011)

Part X	Balance Sheet				
			(A)		(B)
			Beginning of year		End of year
1	Cash—non-interest bearing		41,080	1	63,573
2	Savings and temporary cash investments		26,787	2	405
3	Pledges and grants receivable, net			3	
4	Accounts receivable, net			4	······
5	Receivables from current and former officers, directors, tru	istees, key			
- }	employees, and highest compensated employees Comple	ete Part II of		1	
	Schedule L			5	
6	Receivables from other disqualified persons (as defined ur	nder section		I	
	4958(f)(1)), persons described in section 4958(c)(3)(B), an	nd contributing		1	
-	employers and sponsoning organizations of section 501(c)	(9) voluntary		1	
93	employees' beneficiary organizations (see instructions)			6	
Assets 7	Notes and loans receivable, net			7	
∛ 8	Inventories for sale or use			8	
9	Prepaid expenses and deferred charges			9	·····
10a	Land, buildings, and equipment cost or			I	
	other basis Complete Part VI of Schedule D	10a		1	
b	Less accumulated depreciation	10b		10c	
11	Investments—publicly traded securities			11	
12	Investments—other securities See Part IV, line 11			12	
13	Investments—program-related See Part IV, line 11			13	
14	Intangible assets			14	
15	Other assets See Part IV, line 11			15	
16	Total assets. Add lines 1 through 15 (must equal line 34)		67,867	16	63,978
17	Accounts payable and accrued expenses			17	·
18	Grants payable			18	
19	Deferred revenue			19	
20	Tax-exempt bond liabilities			20	
21	Escrow or custodial account liability. Complete Part IV of S	Schedule D		21	
ဖွာ 22	Payables to current and former officers, directors, trustees	s, key			4
<u></u> 를	employees, highest compensated employees, and disqual	ified persons		1	
Liabilities	Complete Part II of Schedule L			22	
⊐ ₂₃	Secured mortgages and notes payable to unrelated third p	parties		23	
24	Unsecured notes and loans payable to unrelated third part	ties		24	
25	Other liabilities (including federal income tax, payables to	related third			
1	parties, and other liabilities not included on lines 17-24) C	omplete Part X		ŀ	
	of Schedule D			25	
26_			0	26	0
	Organizations that follow SFAS 117, check here ▶ 🛚	and complete			
န္မ	lines 27 through 29, and lines 33 and 34.				
E 27	Unrestricted net assets		67,867	27	63,978
<u> </u> 28	Temporanly restricted net assets			28	
열 29	Permanently restricted net assets	بسد		29	
교	Organizations that do not follow SFAS 117, check her	re ▶ 📗 and			
ō	complete lines 30 through 34.				
र्के 30	Capital stock or trust principal, or current funds			30	<u> </u>
8 31	Paid-in or capital surplus, or land, building, or equipment f			31	·
Net Assets or Fund Balances 22 30 31 32	Retained earnings, endowment, accumulated income, or	other funds		32	
33	Total net assets or fund balances		67,867	33	63,978
34	Total liabilities and net assets/fund balances	<u> </u>	67,867	34	63,978

orn	990 (2011) RAPID CITY SUMMER NIGHTS, INC. 27-2179597			<u>Pa</u>	ge 12
Pa	rt XI Reconciliation of Net Assets				_
	Check if Schedule O contains a response to any question in this Part XI				
		1 1	0.4		
1	Total revenue (must equal Part VIII, column (A), line 12)	1			238
2	Total expenses (must equal Part IX, column (A), line 25)	2			127
3	Revenue less expenses. Subtract line 2 from line 1	3			889
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		<u>57,</u>	<u>867</u>
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,				
	column (B))	6		<u>53,</u>	<u>978</u>
P	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response to any question in this Part XII				حللم
_	Accounting method used to prepare the Form 990 X Cash Accrual Other			Yes	No
1	If the organization changed its method of accounting from a prior year or checked "Other," explain in		-		
	Schedule O				
2-	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		x
	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
C	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in		1		
	Schedule O				
	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were				
a	issued on a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
2-	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			;	İ
3a			3a		
	the Single Audit Act and OMB Circular A-133? If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
D			3b		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	· · · · · · · · · · · · · · · · · · ·		m 99	0 (2011)

SCHEDULEI (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

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

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

▶ Attach to Form 990.

INC.

RAPID CITY SUMMER NIGHTS,

Employer identification number 27-2179597

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0	•
S	

OMB No 1545-0047

Open to Public Inspection

Part General Information on Grants and Assistance	and Assistan	çe							
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the granteer the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	ite the amount of the stance?	ne grants or	assistant ands in the	ce, the grantees' eligil	or assistance, the grantees' eligibility for the grants or assistance, and funds in the United States	assistance, and		X Yes	og
i (G	o Government any recipient the	s and Or hat receiv eeded	rganiza ed mon	tions in the Unit e than \$5,000 _. Cl	Organizations in the United States. Complete if the organization answered "Yes" sived more than \$5,000. Check this box if no one recipient received more than \$5,0	lete if the orgar o one recipient r	nization answe received more	red "Yes" than \$5,000.	
1 (a) Name and address of organization or government	(p) EIN		(c) IRC section of 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	
ID CITY POLICE DEPT KANSAS CITY ST								FALLEN OFFICERS FUND	FUND
RAPID CITY SD 57701				20,000					
(2)	-								
(3)		<u>-</u>	-						
(4)									
(5)									
(9)									
(2)									
(8)									
(6)									
 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table 	nent organizations e line 1 table	listed in the	line 1 tab	le				1	
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	ions for Form 99	G						Schedule I (Form 990) (2011)	0) (2011)

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Schedule I (Form 990) (2011) RAPID CITY SUMMER NIGHTS, INC. Part # Grants and Other Assistance to Individuals in the United S

Part III can be duplicated if additional space is needed

	rail III cail de duplicateu II additional space is needed	חומו אלמכם וא ווכניתנת				
	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of non-cash assistance
		recipients	cash grant	non-cash assistance	FMV, appraisal, other)	
_						
, m						
4						
l ro						
စ						
7						
Part IV	Supplemental Information. Complete this part to provi	plete this part to provi	de the information re	equired in Part I, line 2	ide the information required in Part I, line 2, and any other additional information.	information.

- PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS PART I, LINE 2

THE ORGANIZATION GIVES SUPPORT TO VARIOUS COMMUNITY EVENTS AND

THE ORGANIZATIONS BASED ON BOARD APPROVAL AND CURRENT COMMUNITY NEEDS. DONATIONS ARE GIVEN TO LOCAL RAPID CITY ORGANIZATIONS WHICH ARE DEEMED BY

THE BOARD TO BE REPUTABLE AND ESTABLISHED.

Ā

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

2011 Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

RAPID CITY SUMMER NIGHTS, INC.

Employer Identification number 27–2179597

FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFICERS

SANDRA SCHWAN

NICK SCHWAN

PRESIDENT

MEMBER AT LG

FAMILY RELATIONSHIP

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE FORM 990 IS PREPARED BY A LICENSED CPA. THE FORM IS PROVIDED TO ALL
MEMBERS OF THE GOVERNING BOARD PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST, AN
INTERESTED PERSON MUST DISCLOSE THE EXISTENCE OF THE FINANCIAL INTEREST AND
BE GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE BOARD OR
EXECUTIVE COMMITTEE.

ANY BOARD MEMBER MAY RECUSE HIMSELF/HERSELF AT ANY TIME FROM INVOLVEMENT IN
ANY DECISION OR DISCUSSION IN WHICH THE BOARD MEMBER BELIEVES HE/SHE HAS OR
MAY HAVE A CONFLICT OF INTEREST, WITHOUT GOING THROUGH THE PROCESS FOR
DETERMINING WHETHER A CONFLICT OF INTEREST EXISTS

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL ANY DIRECTOR OF THE CORPORATION IS AUTHORIZED TO RECEIVE REASONABLE COMPENSATION FROM THE CORPORATION FOR SERVICES RENDERED TO THE CORPORATION WHEN AUTHORIZED BY THE BOARD OF DIRECTORS. NO DIRECTOR OF THE CORPORATION MAY RECEIVE COMPENSATION MERELY FOR ACTING AS A DIRECTOR. NO COMPENSATION WAS PAID DURING THE YEAR.

RAPID CITY SUMMER NIGHTS, INC.

Employer Identification number 27–2179597

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

ANY STAFF OF THE CORPORATION IS AUTHORIZED TO RECEIVE REASONABLE

COMPENSATION FROM THE CORPORATION FOR SERVICES RENDERED TO THE CORPORATION

WHEN AUTHORIZED BY THE BOARD OF DIRECTORS. NO COMPENSATION WAS PAID DURING

THE YEAR.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.