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Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

2011

Name of	the organization			Employer identification number		
Lakota (Community Foundatio	n		45-0436454		
Organiz	ation type (check or	ne):				
Filers o	f:	Section:				
Form 990 or 990-EZ		☐ 501(c)() (enter number) organization				
		4947(a)(1) nor	nexempt charitable trust not treated as a private fo	undation		
		☐ 527 political of	organization			
Form 990-PF		∑ 501(c)(3) exempt private foundation				
		4947(a)(1) nor	nexempt charitable trust treated as a private found	ation		
		501(c)(3) taxa	ble private foundation			
Note. Construction	ions.	7), (8), or (10) organ	ization can check boxes for both the General Rule	and a Special Rule See		
⊘	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 331/3 % 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 lines Complete Parts I and II.					
	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 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, total 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, steep purposes but these contributors, during the year, contributions for use exclusively for religious, charitable, steep purposes but these contributors, during the year, contributions for use exclusively for religious, charitable, steep purposes but these contributors, during the year.			n any one contributor, aritable sclentific Interary,		
	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 <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> 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					
Cautio	n. An organization the	at is not covered by	r the General Rule and/or the Special Rules does no	ot file Schedule B (Form 990,		

990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, 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).

Name of organization

Employer identification number

Lakota Co	ommunity Foundation		45-0436454
Part I	Contributors (see instructions). Use duplicate cop	ies of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	ELCA Foundation - Hulstrand Donor Advised Fund 8765 W Higgins Rd Chicago, IL 60631	\$ 8,188	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	State Bank of Lakota PO Box 468 Lakota, ND 58344	\$ 10,000	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	Curtis Bloomquist 4255 87th Ave NE Devils Lake, ND 58301	\$50	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ \$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person