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<div> <div>Form 990</div> <div>  </div> <div> <div>Department of the Treasury</div> <div>Internal Revenue Service</div> </div> </div>	<div> <div>Return of Organization Exempt From Income Tax</div> <div>Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)</div> <div> <div>▶ Do not enter social security numbers on this form as it may be made public</div> <div>▶ Information about Form 990 and its instructions is at www.irs.gov/form990</div> </div> </div>	<div> <div>OMB No 1545-0047</div> <div>2015</div> <div>Open to Public Inspection</div> </div>
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A For the 2015 calendar year, or tax year beginning 07-01-2015 , and ending 06-30-2016			
B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization SOUTHWEST INITIATIVE FOUNDATION		D Employer identification number 41-1555592
	Doing business as		E Telephone number (320) 587-4848
	Number and street (or P O box if mail is not delivered to street address) 15 3RD AVE NW	Room/suite	
	City or town, state or province, country, and ZIP or foreign postal code HUTCHINSON, MN 55350		
	F Name and address of principal officer DIANA D ANDERSON 15 3RD AVE NW HUTCHINSON, MN 55350		G Gross receipts \$ 46,440,041
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no) <input type="checkbox"/> 4947(a){1} or <input type="checkbox"/> 527	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶		
J Website: ▶ WWW.SWIFOUNDATION.ORG			
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation 1986	M State of legal domicile MN

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities A REGIONAL COMMUNITY FOUNDATION DEDICATED TO ADVANCING SOUTHWEST MINNESOTA		
	2 Check this box <input type="checkbox"/> 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)	3	12
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	12
	5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	24
6 Total number of volunteers (estimate if necessary)	6	200	
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0	
b Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue		Prior Year	Current Year
	8 Contributions and grants (Part VIII, line 1h)	2,991,161	4,551,115
	9 Program service revenue (Part VIII, line 2g)	496,396	541,359
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,555,025	1,840,672
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	97,070	132,424
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,139,652	7,065,570
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,234,585	1,924,228
	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)	1,701,763	1,753,333
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) <u>570,197</u>		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,646,273	1,568,171
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	4,582,621	5,245,732
	19 Revenue less expenses Subtract line 18 from line 12	1,557,031	1,819,838
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	79,925,943	79,244,088
	21 Total liabilities (Part X, line 26)	11,036,874	9,643,924
	22 Net assets or fund balances Subtract line 21 from line 20	68,889,069	69,600,164

Part II 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 preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	*****		2017-02-01	
	Signature of officer		Date	
	DIANA D ANDERSON PRESIDENT/CEO			
	Type or print name and title			
Paid Preparer Use Only	Print/Type preparer's name KRISTIN L SCHMIDT		Preparer's signature KRISTIN L SCHMIDT	
	Date		Check <input type="checkbox"/> if self-employed	PTIN P01487323
	Firm's name ▶ CLIFTONLARSONALLEN LLP		Firm's EIN ▶ 41-0746749	
	Firm's address ▶ 818 SECOND STREET SOUTH SUITE 320 WAITE PARK, MN 56387		Phone no (320) 203-5500	

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

☐

☒

1

Briefly describe the organization's mission

SEE SCHEDULE O

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 organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a

(Code) (Expenses \$ 1,135,369 including grants of \$ 92,250) (Revenue \$ 492,938)

ECONOMIC DEVELOPMENT (SEE SCHEDULE O)

4b

(Code) (Expenses \$ 1,370,321 including grants of \$ 1,145,558) (Revenue \$ 0)

COMMUNITY FOUNDATIONS AND DESIGNATED FUNDS (SEE SCHEDULE O)

4c

(Code) (Expenses \$ 1,465,974 including grants of \$ 686,420) (Revenue \$ 106,795)

LEADERSHIP & COMMUNITY DEVELOPMENT PROGRAMS (SEE SCHEDULE O)

4d

Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e

Total program service expenses

3,971,664

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	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2 Yes	
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	No
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	No
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, Part III	5	No
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 Yes	
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	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, 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	9 Yes	
10 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 Yes	
11 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		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a Yes	
b 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	11b Yes	
c 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	11c	No
d 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	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e Yes	
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 Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	No
b 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 and XII is optional	12b Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, 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	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	No
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 (see instructions)	17	No
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	18	No
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	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
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? <i>If "Yes," complete Schedule J</i>	23		No
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
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? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26		No
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 entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
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? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
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? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	46	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	
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.	24	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	3b	
4a	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)?	4a	No
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	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 as charitable contributions?	6a	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	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?	7a	No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	No
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	No
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders.	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	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.	13a	
b	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	
c	Enter the amount of reserves on hand.	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	

Part VI Governance, Management, and Disclosure

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

Check if Schedule O contains a response or note to any line in this Part VI ☒

Section A. Governing Body and Management

		Yes	No
1a 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	1a 12		
b Enter the number of voting members included in line 1a, above, who are independent	1b 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?	2		No
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?	3		No
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6 Did the organization have members or stockholders?	6		No
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a The governing body?	8a	Yes	
b Each committee with authority to act on behalf of the governing body?	8b	Yes	
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	9		No

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

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a	No
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	No
b Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13 Did the organization have a written whistleblower policy?	13	Yes
14 Did the organization have a written document retention and destruction policy?	14	Yes
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	15a	Yes
b Other officers or key employees of the organization	15b	Yes
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?	16a	Yes
b 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	Yes

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 Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, address, and telephone number of the person who possesses the organization's books and records
MARGIE NELSEN CFO 15 3RD AVE NW HUTCHINSON, MN 55350 (320) 587-4848

Part VII

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

Check if Schedule O contains a response or note to any line 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, or 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 neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)							(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				
(1) ROBERT THURSTON CHAIR	7 00	X		X				602	0	0	
(2) JANICE NELSON VICE CHAIR	7 00	X		X				0	0	0	
(3) ROB SAUNDERS PAST CHAIR	3 00	X		X				1,169	0	0	
(4) TIM CONNELL SECRETARY	3 00	X		X				834	0	0	
(5) JAN LUNDEBREK TREASURER	3 00	X		X				0	0	0	
(6) CHRISTIE HANTGE BOARD MEMBER	3 00	X						0	0	0	
(7) PATTI LOEHR-DOLS BOARD MEMBER	3 00	X						0	0	0	
(8) MARY MAERTENS BOARD MEMBER	3 00	X						0	0	0	
(9) GREG RAYMO BOARD MEMBER	3 00	X						1,058	0	0	
(10) RANDY REINKE BOARD MEMBER	3 00	X						772	0	0	
(11) ROBERT TAUBERT BOARD MEMBER	3 00	X						829	0	0	
(12) MARK TITUS BOARD MEMBER	3 00	X						0	0	0	
(13) DIANA D ANDERSON PRESIDENT/CEO	50 00			X				126,928	0	13,063	
(14) SCOTT MARQUARDT VICE PRESIDENT	50 00			X				82,844	0	10,158	

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

[illegible]

1b	Sub-Total			
c	Total from continuation sheets to Part VII, Section A			
d	Total (add lines 1b and 1c)	291,341	0	32,093

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 1

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A)	(B)	(C)
Name and business address	Description of services	Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 0

Part VIII

Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514		
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . .	1a						
	b	Membership dues	1b						
	c	Fundraising events	1c						
	d	Related organizations	1d						
	e	Government grants (contributions)	1e	311,874					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	4,239,241					
	g	Noncash contributions included in lines 1a-1f \$		50,236					
	h	Total. Add lines 1a-1f			4,551,115				
Program Service Revenue			Business Code						
	2a	LOAN INTEREST	522100	420,760	420,760				
	b	OTHER PROGRAM INCOME	900099	79,451	79,451				
	c	PROJECT SPECIFIC REV	900099	27,344	27,344				
	d	LOAN ADMIN FEES	900099	13,804	13,804				
	e								
	f	All other program service revenue							
	g	Total. Add lines 2a-2f			541,359				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		853,748			853,748		
	4	Income from investment of tax-exempt bond proceeds . . .							
	5	Royalties							
	6a	(i) Real		(ii) Personal				74,050	
		74,050							
		b Less rental expenses		0					
		c Rental income or (loss)		74,050					
	d	Net rental income or (loss)			74,050			74,050	
	7a	(i) Securities		(ii) Other				986,924	
		40,361,395							
		b Less cost or other basis and sales expenses		39,374,471					
		c Gain or (loss)		986,924					
	d	Net gain or (loss)			986,924			986,924	
	8a	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 . . .							
	9a	Gross income from gaming activities See Part IV, line 19		a					
	b	Less direct expenses		b					
	c	Net income or (loss) from gaming activities							
	10a	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						
	11a	MISCELLANEOUS INCOME		900099	58,374	58,374			
	b								
	c								
	d	All other revenue							
e	Total. Add lines 11a-11d			58,374					
12	Total revenue. See Instructions			7,065,570	599,733	0	1,914,722		

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).

Check if Schedule O contains a response or note to any line in this Part IX

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 domestic organizations and domestic governments. See Part IV, line 21.	1,924,228	1,924,228		
2	Grants and other assistance to domestic individuals. See Part IV, line 22.				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.	397,398	195,475	116,133	85,790
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.	1,037,952	654,547	208,860	174,545
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	51,618	32,561	10,382	8,675
9	Other employee benefits.	169,635	105,849	36,170	27,616
10	Payroll taxes.	96,730	57,785	21,604	17,341
11	Fees for services (non-employees):				
a	Management.				
b	Legal.	75,202	36,026		39,176
c	Accounting.	29,077	17,984	6,691	4,402
d	Lobbying.				
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees.	154,087		154,087	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	181,845	152,625	17,851	11,369
12	Advertising and promotion.	69,726	43,477	16,234	10,015
13	Office expenses.	135,193	80,201	22,131	32,861
14	Information technology.	137,973	81,857	32,163	23,953
15	Royalties.				
16	Occupancy.	53,996	31,754	13,726	8,516
17	Travel.	124,611	86,256	29,516	8,839
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	86,681	47,560	36,903	2,218
20	Interest.	201,187	121,205	49,771	30,211
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	114,267	67,356	28,573	18,338
23	Insurance.	21,941	12,996	5,438	3,507
24	Other expenses. Itemize expenses not covered 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).				
a	FUNDRAISING COSTS	53,675			53,675
b	PUBLIC RELATIONS	47,464	24,688	16,212	6,564
c	ADMINISTRATIVE FEES	0	168,469	-168,517	48
d					
e	All other expenses	81,246	28,765	49,943	2,538
25	Total functional expenses. Add lines 1 through 24e.	5,245,732	3,971,664	703,871	570,197
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		3,600	1	3,600
	2	Savings and temporary cash investments		1,639,179	2	1,207,488
	3	Pledges and grants receivable, net		430,308	3	545,594
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L.			6	
	7	Notes and loans receivable, net		7,078,765	7	7,001,544
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		13,451	9	35,898
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	10a3,512,205			
	b	Less: accumulated depreciation	10b1,025,057	2,530,481	10c	2,487,148
	11	Investments—publicly traded securities		60,423,224	11	60,188,830
	12	Investments—other securities. See Part IV, line 11.		7,680,888	12	7,670,318
	13	Investments—program-related. See Part IV, line 11.			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11.		126,047	15	103,668
	16	Total assets. Add lines 1 through 15 (must equal line 34).		79,925,943	16	79,244,088
Liabilities	17	Accounts payable and accrued expenses		727,546	17	179,623
	18	Grants payable		135,732	18	384,554
	19	Deferred revenue			19	115,546
	20	Tax-exempt bond liabilities		2,731,831	20	1,724,547
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		1,360,680	21	1,496,167
	22	Loans and other 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		2,035,774	23	1,783,856
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D.		4,045,311	25	3,959,631
	26	Total liabilities. Add lines 17 through 25.		11,036,874	26	9,643,924
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		22,385,310	27	21,385,962
	28	Temporarily restricted net assets		14,895,252	28	14,663,065
	29	Permanently restricted net assets		31,608,507	29	33,551,137
	Organizations that do not follow SFAS 117 (ASC 958), 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	Total net assets or fund balances		68,889,069	33	69,600,164
	34	Total liabilities and net assets/fund balances		79,925,943	34	79,244,088

Part XI **Reconciliation of Net Assets**

Check if Schedule O contains a response or note to any line in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	7,065,570
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,245,732
3	Revenue less expenses Subtract line 2 from line 1	3	1,819,838
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .	4	68,889,069
5	Net unrealized gains (losses) on investments	5	-1,066,183
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-42,560
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	69,600,164

Part XII **Financial Statements and Reporting**

Check if Schedule O contains a response or note to any line in this Part XII ☐

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
2c	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	Yes	
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?	Yes	
3b	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	

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2015

Open to Public Inspection

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.
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

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 (Form 990 or 990-EZ))

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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g

a

☐

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**

b

☐

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**

c

☐

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**

d

☐

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**

e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f

Enter the number of supported organizations

g

Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii)EIN	(iii) Type of organization (described on lines 1- 9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)	4,024,754	4,135,439	4,176,639	2,991,161	4,551,115	19,879,108
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 Total. Add lines 1 through 3	4,024,754	4,135,439	4,176,639	2,991,161	4,551,115	19,879,108
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)						6,696,316
6 Public support. Subtract line 5 from line 4						13,182,792

Section B. Total Support						
Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
7 Amounts from line 4	4,024,754	4,135,439	4,176,639	2,991,161	4,551,115	19,879,108
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,327,009	1,099,536	1,109,517	951,239	927,798	5,415,099
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 VI)						
11 Total support. Add lines 7 through 10						25,294,207
12 Gross receipts from related activities, etc (see instructions)					12	2,695,961
13 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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage		
14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	52.120 %
15 Public support percentage for 2014 Schedule A, Part II, line 14	15	53.260 %
16a 33 1/3% support test—2015.If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b 33 1/3% support test—2014.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 stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
17a 10%-facts-and-circumstances test—2015.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 stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 10%-facts-and-circumstances test—2014.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 stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
18 Private foundation.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"/>	

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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(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)2011	(b)2012	(c)2013	(d)2014	(e)2015	(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 VI.)						
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 ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2015. 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—2014. 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 ► ☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2	
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a	
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b	
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c	
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a	
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b	
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a	
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	
c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6	
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7	
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8	
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a	
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b	
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c	
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a	
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b	
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	
b A family member of a person described in (a) above?	11b	
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c	

Part IV

Supporting Organizations (continued)

Section B. Type I Supporting Organizations

	Yes	No
<div>1</div> <div>Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i></div>		
<div>2</div> <div>Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i></div>		

Section C. Type II Supporting Organizations

	Yes	No
<div>1</div> <div>Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i></div>		

Section D. All Type III Supporting Organizations

	Yes	No
<div>1</div> <div>Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?</div>		
<div>2</div> <div>Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i></div>		
<div>3</div> <div>By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i></div>		

Section E. Type III Functionally-Integrated Supporting Organizations

<div>1</div> <div>Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)</div> <div><div>a</div><div><input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.</div><div><div>b</div><div><input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.</div><div><div>c</div><div><input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).</div></div></div></div>		
<div>2</div> <div>Activities Test. Answer (a) and (b) below.</div>		
<div>a</div> <div>Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i></div>		
<div>b</div> <div>Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i></div>		
<div>3</div> <div>Parent of Supported Organizations. Answer (a) and (b) below.</div>		
<div>a</div> <div>Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i></div>		
<div>b</div> <div>Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i></div>		

Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E ☐

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI) _____		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount		Current Year	
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions) <input type="checkbox"/>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2015			
a			
b			
c			
d From 2013.			
e From 2014.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b			
c Excess from 2013.			
d From 2014.			
e From 2015.			

Part VI Supplemental Information.

Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference

Explanation

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
SOUTHWEST INITIATIVE FOUNDATION

Employer identification number
41-1555592

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	20	189
2 Aggregate value of contributions to (during year)	1,085,605	2,302,928
3 Aggregate value of grants from (during year)	105,291	1,759,042
4 Aggregate value at end of year	1,688,893	67,911,268
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" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of a certified historic structure

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

a Total number of conservation easements

b Total acreage restricted by conservation easements

c Number of conservation easements on a certified historic structure included in (a)

d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

	Held at the End of the Year
2a	
2b	
2c	
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, handling of violations, and enforcing conservation easements during the year
►

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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 XIII, 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" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), 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) Revenue included on 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 (ASC 958) relating to these items

a Revenue included on 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 XIII

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 the organization answered "Yes" on 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 XIII and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

Amount

1c

1d

1e

1f

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☒ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☒

Part V

Endowment Funds.

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

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	46,535,872	45,965,928	40,394,208	36,815,739	36,818,901
b Contributions	1,874,516	1,092,643	871,173	1,070,416	1,277,905
c Net investment earnings, gains, and losses	435,959	1,274,953	6,579,176	4,095,036	492,822
d Grants or scholarships					
e Other expenditures for facilities and programs	2,352,854	1,797,652	1,878,629	1,586,983	1,773,889
f Administrative expenses					
g End of year balance	46,493,493	46,535,872	45,965,928	40,394,208	36,815,739

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment ▶ 28 860 %

b

Permanent endowment ▶ 67 040 %

c

Temporarily restricted endowment ▶ 4 100 %

The percentages on lines 2a, 2b, and 2c should equal 100%

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)

No

3a(ii)

No

b

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

3b

4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(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	415,969	1,253,433
c Leasehold improvements		191,929	106,991	84,938
d Equipment		635,874	502,097	133,777
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) ▶				2,487,148

Schedule D (Form 990) 2015

Part VII

Investments—Other Securities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) DONATED REAL ESTATE HELD AS INVESTMENTS	1,360,500	C
(B) FARMLAND WITH LIFE ESTATE	6,120,915	C
(C) CHARITABLE REMAINDER UNITRUST	188,903	C
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	7,670,318	

Part VIII

Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		

Part IX

Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	

Part X

Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
Federal income taxes	
ANNUITY PAYABLE	15,944
CAPITAL LEASE PAYABLE	18,325
LIFE ESTATE LIABILITY	3,736,459
OBLIGATIONS OF SPLIT-INTEREST AGREEMENTS	188,903
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	3,959,631

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☒

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	5,669,841
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments	2a	-1,066,183	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d	60,728	
e	Add lines 2a through 2d		2e	-1,005,455
3	Subtract line 2e from line 1		3	6,675,296
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	154,087	
b	Other (Describe in Part XIII)	4b	236,187	
c	Add lines 4a and 4b		4c	390,274
5	Total revenue Add lines 3 and 4c.(This must equal Form 990, Part I, line 12)		5	7,065,570

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	4,958,746
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 XIII)	2d		
e	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		3	4,958,746
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	154,087	
b	Other (Describe in Part XIII)	4b	132,899	
c	Add lines 4a and 4b		4c	286,986
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	5,245,732

Part XIII

Supplemental Information

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, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
PART IV, LINE 2B	ASSETS HELD ON DONOR'S BEHALF CONSISTS OF 23 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 XIII **Supplemental Information** *(continued)*

Return Reference	Explanation
PART X, LINE 2	THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND SIMILAR STATE INCOME TAX LAWS. THE FOUNDATION IS A NON-PRIVATE FOUNDATION AND CONTRIBUTIONS TO THE ORGANIZATION QUALIFY AS A CHARITABLE TAX DEDUCTION BY THE CONTRIBUTOR. AWSM LLC AND SWIF REAL ESTATE HOLDINGS, LLC ARE 100% OWNED LLC'S AND AS SUCH ARE CONSIDERED DISREGARDED ENTITIES FOR TAX PURPOSES. IT IS THE POLICY OF THE FOUNDATION, IN ACCORDANCE WITH GAAP, TO ASSESS ANY UNCERTAIN TAX PROVISIONS AND, IF NECESSARY, RECORD A TAX ASSET OR LIABILITY, AND THE RELATED INCOME TAX EXPENSE, FOR ANY UNCERTAIN TAX PROVISIONS. THE FOUNDATION DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS OR UNRELATED BUSINESS INCOME. THE FOUNDATION FOLLOWS THE ACCOUNTING STANDARDS FOR CONTINGENCIES IN EVALUATING UNCERTAIN TAX POSITIONS. THIS GUIDANCE PRESCRIBES RECOGNITION THRESHOLD PRINCIPLES FOR THE FINANCIAL STATEMENT RECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN ON A TAX RETURN THAT ARE NOT CERTAIN TO BE REALIZED. THE FOUNDATION'S TAX RETURNS ARE SUBJECT TO REVIEW AND EXAMINATION BY FEDERAL AND STATE AUTHORITIES.
PART XI, LINE 2D - OTHER ADJUSTMENTS	CHANGE IN SPLIT INTEREST AGREEMENT 60,728
PART XI, LINE 4B - OTHER ADJUSTMENTS	AGENCY FUND REVENUES 177,813 PROVISION FOR LOAN LOSS 58,374
PART XII, LINE 4B - OTHER ADJUSTMENTS	AGENCY FUND EXPENSES 74,525 PROVISION FOR LOAN LOSS 58,374

2015

41-1555592

Schedule I (Form 990) 2015

Part III

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated 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. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
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

Additional Data

Software ID:
Software Version:
EIN: 41-1555592
Name: SOUTHWEST INITIATIVE FOUNDATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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
ACE OF SOUTHWEST MINNESOTA 3001 MAPLE ROAD SUITE 400 SLAYTON, MN 56172	41-1242095	GOVERNMENT	8,800				CREATING DEMENTIA-FRIENDLY COMMUNITIES
ALLINA HEALTH HOSPICE FOUNDATION 333 N SMITH SVE STE 4640 SAINT PAUL, MN 55102	27-4116873	501C(3) PUBLIC CHARI	10,000				HOSPICE MUSIC THERAPY PROGRAM
AMERICAN LEGION POST #0199 208 NORTH JEFFERSON STREET MENNEOTA, MN 56264	41-6040981	501C(19) PUBLIC CHAR	5,000				MEMORIAL PARK

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BERGEN LUTHERAN CHURCH 4603 310TH AVE GRANITE FALLS, MN 56241	41-1290187	RELIGIOUS	5,000				MISSION WORK
BLANDIN FOUNDATION 100 N POKEGAMA AVE GRAND RAPIDS, MN 55744	41-9038619	501(C)3 PRIVATE CHAR	5,600				LEADERSHIP IN ETHNICALLY DIVERSE COMMUNITIES (LEDC)
BLUE AND GOLD EDUCATIONAL FOUNDATION - DIST 891 307 1ST ST W CANBY, MN 56220	41-1522315	501C(3) PUBLIC CHARI	42,425				CANBY HIGH SCHOOL SCHOLARSHIP AWARDS

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BROOKSIDE SENIOR LIVING 804 BENSON RD MONTEVIDEO, MN 56265	41-0871848	501C(3) PUBLIC CHARI	5,000				BROOKSIDE MANOR
CHILD CARE & NUTRITION INC 324 N NORMAN PO BOX 138 IVANHOE, MN 561420138	41-1496910	501C(3) PUBLIC CHARI	5,000				EARLY CHILD CARE - CONFERENCES
CHILDREN'S DENTAL SERVICES 636 BROADWAY ST NE MINNEAPOLIS, MN 55413	41-0857929	501C(3) PUBLIC CHARI	8,000				DENTAL OUTREACH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CHRISTIAN COMMUNITY OUTREACH CENTER 815 E LINCOLN AVE OLIVIA, MN 56277	41-1951484	RELIGIOUS	12,500				AFTER SCHOOL ENRICHMENT PROGRAM
CITY OF HUTCHINSON 111 HASSAN ST SE HUTCHINSON, MN 55350	41-6005253	GOVERNMENT	31,196				HUTCHINSON LAW ENFORCEMENT MEMORIAL PARK
CITY OF MADISON 404 6TH AVE N MADISON, MN 56256	41-6005335	GOVERNMENT	23,800				SWIMMING POOL RENOVATIONS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CITY OF MOUNTAIN LAKE 930 3RD AVE PO BOX C MOUNTAIN LAKE, MN 56159	41-6005401	GOVERNMENT	5,000				HEALTHY TREES
CITY OF PIPESTONE 119 2ND AVE SW STE 9 PIPESTONE, MN 56164	41-6005460	GOVERNMENT		415,328		BUILDING	HIAWATHA LODGE BUILDING
CITY OF REDWOOD FALLS PARKS & RECREATION DEPT 901 COOK ST REDWOOD FALLS, MN 56283	41-6005484	GOVERNMENT	5,000				SENIOR CENTER SURVEILLANCE SYSTEM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CLARKFIELD CARE CENTER 805 5TH ST PO BOX 458 CLARKFIELD, MN 56223	41-1279578	501C(3) PUBLIC CHARI	5,000				CLARKFIELD AMBULANCE
COUNCIL ON FOUNDATIONS 2121 CRYSTAL DR STE 700 ARLINGTON, VA 22202	13-6068327	501C(3) PUBLIC CHARI	14,350				2016 MEMBERSHIP
CURE 117 S 1ST ST MONTEVIDEO, MN 56265	31-1693392	501C(3) PUBLIC CHARI	5,000				NONPROFIT CAPACITY BUILDING - STRATEGIC PLANNING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ELIM HOMES INC 7485 OFFICE RIDGE CIRCLE EDEN PRAIRIE, MN 55344	41-1539761	501C(3) PUBLIC CHARI	5,000				ELIM OASIS ADULT DAY PROGRAM
ENTERPRISE MINNESOTA 310 4TH AVE S STE 7050 MINNEAPOLIS, MN 554012551	41-1595930	501C(3) PUBLIC CHARI	10,000				HIGH PERFORMANCE MANUFACTURING TRAINING
EQUUL ACCESS INC 13769 PHEASANT RD HUTCHINSON, MN 55350	37-1434531	501C(3) PUBLIC CHARI	20,100				EARLY CARE AND EDUCATION & AGING CAREGIVER SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FRIENDS OF THE ORCHESTRA LTD 803 CHERYL AVE MARSHALL, MN 56258	41-1799541	501C(3) PUBLIC CHARI	5,355				FISCAL YEAR 2016 DISBURSEMENT
GREATER MINNESOTA FAMILY SERVICES 2320 E HWY 12 WILLMAR, MN 562011810	41-1851475	501C(3) PUBLIC CHARI	29,706				REACH FUNDS
GROVE CITY AREA LIVING AT HOMEBLOCK NURSING PROGRAM 200 SOUTH AVE PO BOX 192 GROVE CITY, MN 56243	31-1561723	501C(3) PUBLIC CHARI	5,000				AGING IN-PLACE EQUIPMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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HEARTLAND GIRLS' RANCH 185 HWY 9 NE BENSON, MN 56215	41-1723574	501C(3) PUBLIC CHARI	5,000				NONPROFIT CAPACITY BUILDING - TECHNOLOGY
HOSPICE COTTAGE INC 1935 WOODLAND CT PO BOX 203 WORTHINGTON, MN 56187	31-1806490	501C(3) PUBLIC CHARI	13,000				ORGANIZATION SUPPORT
HUTCHINSON CENTER FOR THE ARTS 15 FRANKLIN ST SW PO BOX 667 HUTCHINSON, MN 55350	26-2263988	501C(3) PUBLIC CHARI	5,000				NONPROFIT CAPACITY BUILDING - TECHNOLOGY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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HUTCHINSON ECONOMIC DEVELOPMENT AUTHORITY 111 HASSAN ST SE HUTCHINSON, MN 55350	27-0987417	GOVERNMENT	10,000				TIGERPATH ACADEMIES / TIGER MANUFACTURING
ISD #129 - MONTEVIDEO 412 S 13TH ST MONTEVIDEO, MN 56265	41-6000507	EDUCATION	5,000				EARLY CHILD CARE - PREK ALIGNMENT AND QUALITY
ISD #173 - MOUNTAIN LAKE 450 N 12TH ST PO BOX 400 MOUNTAIN LAKE, MN 56159	41-6000682	EDUCATION	25,000				RESURFACING THE TRACK

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ISD #2159 - BUFFALO LAKE HECTOR STEWART 220 3RD ST W PO BOX 307 HECTOR, MN 553420307	41-1751593	EDUCATION	7,239				TEACHER GRANT REQUESTS
ISD #2169 - MURRAY COUNTY CENTRAL 2420 28TH ST SLAYTON, MN 561721457	41-1778191	EDUCATION	5,000				ECI COORDINATION
ISD #2180 - MACCRAY 711 WOLVERINE DR PO BOX 690 CLARA CITY, MN 56222	41-1783004	EDUCATION	14,030				SCHOOL PROJECTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ISD #2895 JCC RIVERSIDE ELEMENTARY 820 PARK STREET JACKSON, MN 56143	41-1872029	EDUCATION	8,500				EDUCATION ENHANCEMENTS
ISD #2902 - RTR PUBLIC SCHOOLS 100 STRONG ST PO BOX 659 TYLER, MN 56178	20-4928015	EDUCATION	19,825				RTR BASEBALL FIELD
ISD #2903 - ORTONVILLE PUBLIC SCHOOL 200 TROJAN DR ORTONVILLE, MN 56278	41-6000273	EDUCATION	24,529				AUDITORIUM SEATING

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ISD #2904 - TRACY 934 PINE ST TRACY, MN 56175	41-6002013	EDUCATION	12,754				STAGE LIGHTING
ISD #330 - SOUTHWEST STAR CONCEPT SCHOOLS 124 N MINNESOTA PO BOX 97 OKABENA, MN 56161	41-1330168	EDUCATION	9,857				STAGE RENOVATION
ISD #465 - LITCHFIELD 114 N HOLCOMBE STE 100 LITCHFIELD, MN 55355	41-6002290	EDUCATION	12,499				2016 TEACHER REQUESTS

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JACKSON COMMUNITY FOUNDATION PO BOX 91 JACKSON, MN 56143	41-1555592	501C(3) PUBLIC CHARI	15,000				KRISTI ELAINE TEIGEN SCHOLARSHIP AWARDS
JACKSON COUNTY PUBLIC LIBRARY 311 3RD ST JACKSON, MN 561431606	41-6005813	GOVERNMENT	15,153				FURNITURE FUND
KNUTE NELSON FOUNDATION 420 12TH AVE E ALEXANDRIA, MN 56308	41-1451486	501C(3) PUBLIC CHARI	5,000				NONPROFIT CAPACITY BUILDING - STAFF DEVELOPMENT

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LEARNING FUNHOUSE INC 199 MAIN STREET PO BOX 151 BIRD ISLAND, MN 55310	41-1930163	501C(3) PUBLIC CHARI	10,000				BOLD ECI FISCAL HOST
LOWER SIOUX INDIAN COMMUNITY 39527 RES HWY 1 PO BOX 308 MORTON, MN 56270	41-0991683	GOVERNMENT	100,000				NURTURING INTERGENERATIONAL LEARNING
LUTHERAN SOCIAL SERVICE OF MINNESOTA 2485 COMO AVE SAINT PAUL, MN 551081445	41-0872993	501C(3) PUBLIC CHARI	6,410				LLS & WINDOM AREA HOSPITAL PATIENT RECOVERY SUPPORT

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LUVERNE INITIATIVES FOR TOMORROW 213 EAST LUVERNE STREET LUVERNE, MN 56156	99-0381643	501C(3) PUBLIC CHARI	5,000				LUVERNE TOURISM DESTINATION DEVELOPMENT
LYON-LINCOLN ELECTRIC TRUST W HWY 14 PO BOX 639 TYLER, MN 561780639	41-1930173	501C(3) PUBLIC CHARI	5,000				YOUTH GOLF
MARSHALL ADULT BASIC EDUCATION PROGRAM 607 W MAIN MARSHALL, MN 56258	41-6002001	GOVERNMENT	10,000				CAREER PATHWAY LITERACY CURRICULUM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MINNESOTA 4-H FOUNDATION 1420 ECKLES AVE COFFEY HALL ROOM 9 SAINT PAUL, MN 55108	41-1408161	501C(3) PUBLIC CHARI	10,000				RS FIBER INNOVATION CENTERS/MAKER SPACE
MINNESOTA AMERICAN INDIAN CHAMBER OF COMMERCE 2345 RICE STREET SUITE 200 SAINT PAUL, MN 55113	41-1563420	501C(3) PUBLIC CHARI	25,000				NATIVE AMERICAN ENTREPRENEURSHIP PROJECT
MINNESOTA RIVER AREA AGENCY ON AGING 201 N BROAD ST SUITE 102 MANKATO, MN 56001	26-1632413	501C(3) PUBLIC CHARI	5,000				NONPROFIT CAPACITY BUILDING - STRATEGIC PLANNING

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NEW HORIZONS CRISIS CENTER 109 S 5TH ST STE 40 MARSHALL, MN 56258	41-1404769	501C(3) PUBLIC CHARI	5,000				NONPROFIT CAPACITY BUILDING - STRATEGIC PLANNING
PRAIRIE FIVE COMMUNITY ACTION COUNCIL 7TH ST WASHINGTON AVE STE 302 PO BOX 159 MONTEVIDEO, MN 562650695	41-0904802	501C(3) PUBLIC CHARI	110,000				COMMUNITY BASED CARE COORDINATION AND CHILD CARE RECRUITMENT
PRAIRIE HOME HOSPICE 408 E MAIN ST 8 MARSHALL, MN 562581934	41-1494079	501C(3) PUBLIC CHARI	10,736				FISCAL YEAR 2016 DISBURSEMENT

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PRAIRIE HOME HOSPICE 408 E MAIN ST 8 MARSHALL, MN 562581934	41-1494079	501C(3) PUBLIC CHARI	5,000				NONPROFIT CAPACITY BUILDING - TECHNOLOGY
PRAIRIE HOME HOSPICE 408 E MAIN ST 8 MARSHALL, MN 562581934	41-1494079	501C(3) PUBLIC CHARI	10,000				PALLIATIVE CARE/CHRONIC DISEASE MANAGEMENT PROGRAM
PRAIRIE WOODS ENVIRONMENTAL LEARNING CENTER 12718 10TH ST NE SPICER, MN 56288	41-1366265	501C(3) PUBLIC CHARI	25,000				FUNDING DEVELOPMENT PLAN FOR YES' PROGRAM

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REDWOOD AREA COMMUNITIES FOUNDATION 200 S MILL ST PO BOX 481 REDWOOD FALLS, MN 562830281	36-3611923	501C(3) PUBLIC CHARI	31,000				REDWOOD AREA HOSPITAL FOUNDATION'S TELE MEDICINE/HEALTH PILOT
SAFE AVENUES PO BOX 568 WILLMAR, MN 56201	41-1931304	501C(3) PUBLIC CHARI	5,000				NONPROFIT CAPACITY BUILDING - MARKETING
SOUTHWEST INITIATIVE FOUNDATION 15 3RD AVE NW HUTCHINSON, MN 55350	41-1555592	501C(3) PUBLIC CHARI	43,000				CARE RELIEF FUND

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SOUTHWEST INITIATIVE FOUNDATION 15 3RD AVE NW HUTCHINSON, MN 55350	41-1555592	501C(3) PUBLIC CHARI	10,000				EARLY CHILDHOOD DENTAL NETWORK - SOUTHWEST
SOUTHWEST MINNESOTA STATE UNIVERSITY 1501 STATE ST MARSHALL, MN 56258	41-1687554	EDUCATION	5,000				GOLD ON THE ROAD
SOUTHWEST MINNESOTA STATE UNIVERSITY FOUNDATION 1501 STATE ST ROOM ST157 MARSHALL, MN 56258	23-7108470	501C(3) PUBLIC CHARI	5,000				MINNESOTA AGRICULTURE & RURAL LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SOUTHWEST MN HOUSING PARTNERSHIP 2401 BROADWAY AVE STE 4 SLAYTON, MN 561721142	41-1721815	501C(3) PUBLIC CHARI	5,000				NONPROFIT CAPACITY BUILDING - TECHNOLOGY
SOUTHWEST REGIONAL DEVELOPMENT COMM 2401 BROADWAY AVE STE 1 SLAYTON, MN 561721142	41-1235045	GOVERNMENT	10,815				MURRAY COUNTY ECI
ST JAMES EPISCOPAL CHURCH 101 N 5TH ST MARSHALL, MN 56258	41-6098516	RELIGIOUS	13,433				FISCAL YEAR 2016 DISBURSEMENT

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UNITED WAY OF WEST CENTRAL MINNESOTA 311 SW 4TH ST PO BOX 895 WILLMAR, MN 56201	41-0844871	501C(3) PUBLIC CHARI	5,000				NONPROFIT CAPACITY BUILDING - FUNDRAISING PLAN
UNIVERSITY OF MINNESOTA FOUNDATION 1300 S 2ND ST ROOM 200 MINNEAPOLIS, MN 55454	41-6042488	501C(3) PUBLIC CHARI	5,000				SPONSORSHIP OF 2016 MN CUP
UNIVERSITY OF SOUTH DAKOTA FOUNDATION PO BOX 5555 VERMILLION, SD 57069	46-6018891	501C(3) PUBLIC CHARI	10,000				BLACK HILLS PLAYHOUSE ALUMNI ASSOCIATION

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VACKER PLACE 69531 213TH STREET DARWIN, MN 55324	41-1758705	501C(3) PUBLIC CHARI	5,000				NONPROFIT CAPACITY BUILDING - STAFF DEVELOPMENT
VETERANS OF FOREIGN WARS PO BOX 452 DAWSON, MN 56232	41-0688670	501C(19) PUBLIC CHAR	6,450				RENOVATION OF THE VFW POSTS EVENT CENTER
WALNUT GROVE ALFRED NELSON POST 267 700 MAIN ST WALNUT GROVE, MN 56180	41-6038846	501C(19) PUBLIC CHAR	5,000				WALNUT GROVE VETERANS MEMORIAL

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WESTERN COMMUNITY ACTION INC 1400 S SARATOGA ST MARSHALL, MN 56258	41-0888137	501C(3) PUBLIC CHARI	5,000				NONPROFIT CAPACITY BUILDING - TECHNOLOGY
WILLMAR AREA COMMUNITY FOUNDATION 1601 HWY 12 E STE 9 WILLMAR, MN 56201	36-3412544	501C(3) PUBLIC CHARI	24,626				WILLMAR MUSIC MATTERS
WILLMAR AREA MULTICULTURAL BUSINESS CENTER 311 BENSON AVENUE SW WILLMAR, MN 56201	01-0893778	501C(3) PUBLIC CHARI	28,000				WAM-BC ENTREPRENEURSHIP INITIATIVE

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WILLMAR COMMUNITY EDUCATION & RECREATION 1234 KANDIYOHI AVE SW WILLMAR, MN 56201	41-6001746	EDUCATION	5,000				WILLMAR EARLY CHILDHOOD FAMILY OUTREACH
WILLMAR PUBLIC SCHOOLS FOUNDATION 611 W 5TH ST WILLMAR, MN 56201	41-1465834	EDUCATION	6,165				WILLMAR MUSIC MATTERS OPERATING/FUNDRAISING
WINDOM AREA HOSPITAL 2150 HOSPITAL DRIVE PO BOX 339 WINDOM, MN 56101	41-6005647	GOVERNMENT	9,650				SENIOR DRIVING PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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WORTHINGTON AREA CHAMBER OF COMMERCE 1121 3RD AVE WORTHINGTON, MN 561872435	41-0620765	501C(4) PUBLIC CHARI	12,000				DIVERSE BUSINESS RETENTION AND EXPANSION PROGRAM
YMCA OF WORTHINGTON 1501 COLLEGEWAY WORTHINGTON, MN 56187	41-6007569	501C(3) PUBLIC CHARI	7,889				FISCAL YEAR 2016 DISBURSEMENT
ZION LUTHERAN CHURCH 504 N GILMAN AVE LITCHFIELD, MN 55355	41-1289279	REIGIOUS	5,000				EARLY CHILD CARE - KIDS OF THE KINGDOM

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493032007287

Schedule K
(Form 990)

Supplemental Information on Tax Exempt Bonds

OMB No 1545-0047

2015

Open to Public Inspection

Department of the Treasury

Internal Revenue Service

Name of the organization

SOUTHWEST INITIATIVE FOUNDATION

► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

► Attach to Form 990.

► Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number

41-1555592

Part I Bond Issues											
(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		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A MCLEOD COUNTY	41-6005841	582258AG4	12-29-2005	3,500,000	LAND, BUILDING AND EQUIPMENT FOR OFFICE SPACE		X		X		X
B MCLEOD COUNTY	41-6005841	582258AR0	03-10-2016	1,830,000	REFUNDED BONDS ISSUED ON 12/29/2005		X		X		X

Part II		Proceeds							
		A		B		C		D	
1	Amount of bonds retired	3,500,000							
2	Amount of bonds legally defeased								
3	Total proceeds of issue	3,500,000		1,830,000					
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds	55,108							
6	Proceeds in refunding escrows								
7	Issuance costs from proceeds	70,000		18,300					
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds			4,908					
10	Capital expenditures from proceeds	3,500,000							
11	Other spent proceeds			1,806,792					
12	Other unspent proceeds								
13	Year of substantial completion	2006							
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		X	X					
15	Were the bonds issued as part of an advance refunding issue?		X		X				
16	Has the final allocation of proceeds been made?	X		X					
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X					

Part III Private Business Use										
					A		B		C	
					Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?					X		X		
2	Are there any lease arrangements that may result in private business use of bond-financed property?					X		X		

Part III Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		X		X				
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c	Are there any research agreements that may result in private business use of bond-financed property?		X		X				
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	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 ▶								
5	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 ▶								
6	Total of lines 4 and 5								
7	Does the bond issue meet the private security or payment test?		X		X				
8a	Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?.		X		X				
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?.								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?.		X		X				

Part IV Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X				
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?		X		X				
b	Exception to rebate?		X	X					
c	No rebate due?		X		X				
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?		X		X				
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X				
b	Name of provider								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was the hedge terminated?								

Part IV **Arbitrage** *(Continued)*

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X				
b	Name of provider								
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		X		X				
7	Has the organization established written procedures to monitor the requirements of section 148? . . .		X		X				

Part V **Procedures To Undertake Corrective Action**

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?		X		X				

Part VI **Supplemental Information.** Provide additional information for responses to questions on Schedule K (see instructions).

SCHEDULE M
(Form 990)

Noncash Contributions

OMB No 1545-0047

2015

Open to Public Inspection

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

► Attach to Form 990.

►Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990

Department of the Treasury
Internal Revenue Service

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 or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art	X	1	500	APPRAISAL
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	5	47,973	HI/LOW AVERAGE SALE
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 ► (GRAIN)	X	3	1,763	MKT VALUE PER BUSHEL
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 Acknowledgement

29

0

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 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?

30a

Yes

No

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?

31

Yes

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

32a

No

b If "Yes," describe in Part II

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

Part II

Supplemental Information.

Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
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**SCHEDULE O
(Form 990 or
990-EZ)**Department of the
Treasury
Internal Revenue
Service**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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at
www.irs.gov/form990.

OMB No 1545-0047

2015**Open to Public
Inspection**Name of the organization
SOUTHWEST INITIATIVE FOUNDATION**Employer identification number**

41-1555592

Return Reference**Explanation**FORM 990, PART III,
LINE 1,
ORGANIZATION'S
MISSION

SWIF'S MISSION IS TO BE A CATALYST, FACILITATING OPPORTUNITIES FOR ECONOMIC AND SOCIAL GROWTH BY DEVELOPING AND CHALLENGING LEADERS TO BUILD ON THE REGION'S ASSETS. SWIF IS A SINGLE CONNECTION OFFERING UNLIMITED POSSIBILITIES TO GROW AND PROMOTE PEOPLE, BUSINESSES, ENTREPRENEURS AND COMMUNITIES IN RURAL SOUTHWEST MINNESOTA. AS A REGIONAL COMMUNITY FOUNDATION, SWIF BRINGS TOGETHER THE EXPERTISE, RESOURCES AND INSPIRATION TO MAKE ITS COMMUNITIES AND REGION STRONGER. SWIF WORKS TO ENSURE THAT ITS 18-COUNTY SERVICE AREA IS A HIGHLY PRODUCTIVE AND ENGAGED REGION WHERE GROWING NUMBERS OF PEOPLE CHOOSE TO LIVE AND WORK. THE ORGANIZATION IS GOVERNED BY A 12-MEMBER BOARD OF DIRECTORS REPRESENTING DIVERSE GEOGRAPHICAL LOCATIONS, PROFESSIONS AND BACKGROUNDS TO HELP GUIDE SWIF'S ECONOMIC DEVELOPMENT, INCLUDING BUSINESS FINANCE, MICROLENDING AND REGIONAL ECONOMIC DEVELOPMENT, COMMUNITY IMPACT PROGRAMMING, INCLUDING GRANTMAKING AND OUR EARLY CHILDHOOD INITIATIVE, AND COMMUNITY PHILANTHROPY, INCLUDING OUR COMMUNITY AFFILIATES, DESIGNATED FUNDS, PLANNED GIVING AND FARMLAND GIVING. LEARN MORE ABOUT SWIF'S MISSION AND WORK AT WWW.SWIFFOUNDATION.ORG

Return Reference	Explanation
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS	<p>SWIF LOAN PROGRAMS, INCLUDING ITS BUSINESS FINANCE 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 \$50,000 TO BE USED FOR START-UP COSTS, 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. THIS PROGRAM ALSO PROVIDES THE CENTER OF RURAL ENTREPRENEURSHIP (CORE) WEBSITE, A RESOURCE SPECIFICALLY DESIGNED TO CONNECT ENTREPRENEURS AND BUSINESSES TO THE TOOLS, EDUCATION, AND RESOURCES THEY NEED TO START, EXPAND OR TRANSITION THEIR BUSINESS. THIS PROGRAM ALSO PROVIDES TECHNICAL ASSISTANCE TO DIVERSE ENTREPRENEURS. WITH FUNDING FROM DEED AND IN-KIND SUPPORT FROM SWIF AND OTHER PARTNERS, A CONSULTANT IS PROVIDING DIVERSE ENTREPRENEURS WITH BUSINESS AND FINANCIAL READINESS ASSESSMENT AND PLANNING, DETERMINING APPROPRIATE RESOURCES, INTERPRETING, AND CONTINUATION OF ASSISTANCE AS NEEDED. SWIF IS WORKING TO FURTHER FACILITATE ADVANCEMENT OF KEY ASSET SECTORS AND KEEP THE RESULTING WEALTH IN THE REGION. SWIF IS MAKING INVESTMENTS THAT SUPPORT THE REGION'S ECONOMIC ASSET SECTORS OF RENEWABLE ENERGY, FOOD AND AGRICULTURE, BIOSCIENCE, AND MANUFACTURING BY PROMOTING THESE INDUSTRIES AND THE OPPORTUNITIES THEY PRESENT, AS WELL AS FACILITATING DISCUSSIONS AND SOLUTIONS TO THE CHALLENGES THAT MAY ACCOMPANY THEM, INCLUDING HOUSING, WORKFORCE AND CHILD CARE SHORTAGES. HOSTING AND PARTICIPATING IN LEADERSHIP FORUMS, SEMINARS AND OTHER CONVENTIONS PROVIDE OPPORTUNITIES FOR LEADERS TO NETWORK AND GAIN ACCESS TO RESOURCES THAT WILL SUPPORT KEY REGIONAL INDUSTRIES AND CAPITALIZE ON ECONOMIC OPPORTUNITIES.</p>

Return Reference	Explanation
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS	<p>MANY DONORS FIND COMMUNITY AND DESIGNATED FUNDS ATTRACTIVE OPTIONS TO SUPPORT THEIR CHARITABLE INTERESTS WHILE RELIEVING THEM OF THE ADMINISTRATIVE RESPONSIBILITIES THAT CAN OFTEN BECOME OVERWHELMING FOR FAMILIES AND VOLUNTEERS SWIF CURRENTLY SERVES 25 COMMUNITY AFFILIATES AND MORE THAN 100 DESIGNATED FUND PARTNERS SWIF'S COMMUNITY AFFILIATE 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 AFFILIATES IT ALSO PROVIDES ONGOING TECHNICAL AND PROFESSIONAL SUPPORT IN AREAS SUCH AS STRATEGIC PLANNING, FUNDRAISING, MARKETING, PUBLIC RELATIONS AND GRANTMAKING COMMUNITY AFFILIATES ARE ADVISED BY LOCAL COMMITTEES OF COMMUNITY LEADERS WHO ARE RESPONSIBLE FOR RAISING FUNDS, RECOMMENDING GRANTEEES AND RAISING PUBLIC AWARENESS SINCE SWIF'S GRANTMAKING IS TARGETED TO PROJECTS RELATED TO ITS CURRENT PRIORITY AREAS, AFFILIATE 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 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 ALL SWIF FUNDS CAN RECEIVE MANY TYPES OF GIFTS, INCLUDING CASH, APPRECIATED STOCK, REAL ESTATE, FARMLAND AND PLANNED GIFTS, SUCH AS CHARITABLE GIFT ANNUITIES AND BEQUESTS</p>

Return Reference	Explanation
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS	<p>LEADERSHIP DEVELOPMENT AND COMMUNITY ENGAGEMENT ARE WOVEN THROUGHOUT ALL OF SWIF'S WORK, BUT WE HAVE CONTINUED TO HAVE SPECIFIC PROGRAMS DESIGNED TO FOCUS ON INDIVIDUAL, COMMUNITY AND BUSINESS LEADERSHIP SKILL-BUILDING SWIF IS ENGAGED IN THE MINNESOTA EARLY CHILDHOOD INITIATIVE, A NETWORK OF COALITIONS FOCUSED ON QUALITY CARE AND EDUCATIONAL OPPORTUNITIES FOR CHILDREN AGES BIRTH TO 5, TO HELP 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 THE OVERARCHING GOAL OF THRIVE IS TO CREATE SEAMLESS SYSTEMS OR NETWORKS OF LOCAL SERVICES THAT SUPPORT THE HEALTHY SOCIAL AND EMOTIONAL DEVELOPMENT OF MINNESOTA'S YOUNGEST CHILDREN AGES BIRTH TO 5, WITH AN EMPHASIS ON THE FIRST THREE YEARS OF LIFE SWIF ACCOMPLISHES THESE GOALS BY WORKING WITH 16 SELECTED COALITION COMMUNITIES LOCATED THROUGHOUT THE 18 COUNTIES OF SOUTHWEST MINNESOTA IN ADDITION, GRANT FUNDS ARE AVAILABLE TO PURSUE PARTNERSHIPS ON EARLY CARE AND EDUCATION PROJECTS THAT HAVE A REGION-WIDE SCOPE, WHICH HAVE INCLUDED TRAININGS FOR PROFESSIONALS, FAMILY-FRIENDLY EVENTS AND OTHER ACTIVITIES THAT ENGAGE THE COMMUNITIES AND RAISE AWARENESS OF YOUNG CHILDREN'S NEEDS KEY ISSUES FOR THE EARLY CHILDHOOD INITIATIVE ARE ACCESS TO EARLY LEARNING OPPORTUNITIES, ACCESS TO QUALITY CHILD CARE, AND ACCESS TO DENTAL CARE SWIF HELPED START THE FIRST CREATING ENTREPRENEURIAL OPPORTUNITIES (CEO) COHORT IN THE STATE FIFTEEN STUDENTS FROM THE ATWATER-COSMOS-GROVE CITY, NEW LONDON-SPICER, AND WILLMAR PUBLIC SCHOOL DISTRICTS COMPLETED KANDIY OHI CEO THESE STUDENTS LEARNED FROM LOCAL BUSINESS OWNERS WHAT IT TAKES TO BECOME A SUCCESSFUL ENTREPRENEUR AND WERE EXPOSED TO THE KANDIY OHI COUNTY AREA AS A PLACE OF OPPORTUNITY STUDENTS VISITED MORE THAN 45 BUSINESSES AND GLEANED BUSINESS IDEAS FROM MORE THAN 35 GUEST SPEAKERS AS THEY DEVELOPED THEIR STUDENT BUSINESSES/PLANS STUDENTS PRESENTED THEIR BUSINESSES AT THE INAUGURAL KCEO TRADE SHOW AT THE MINNWEST TECHNOLOGY CAMPUS TO OVER 300 COMMUNITY MEMBERS, INVESTORS, AND FAMILY MEMBERS IN THE PAST YEAR, SWIF'S REGIONAL IMPACT GRANTS SUPPORTED THE IMMIGRANT LAW CENTER IN WORTHINGTON NEW RESIDENTS TO OUR REGION, INCLUDING IMMIGRANTS AND REFUGEES, ARE KEY TO FILLING OUR WORKFORCE NEEDS AND IMPORTANT MEMBERS OF OUR COMMUNITIES THE IMMIGRANT LAW CENTER OF MINNESOTA (ILCM) BASED IN WORTHINGTON IS MINNESOTA'S LARGEST PROVIDER OF IMMIGRATION LEGAL AND ADVOCACY SERVICES TO LOW-INCOME CLIENTS IN OUR REGION ALONE, ILCM SERVED MORE THAN 354 MEN, WOMEN AND CHILDREN NOW, THANKS TO A TWO-YEAR, \$40,000 GRANT FROM SWIF, ILCM IS POISED TO HIRE A PARALEGAL AND DOUBLE THEIR IMPACT IN SOUTHWEST MINNESOTA SWIF IS THE ADMINISTRATOR FOR MOVE, LLC, (MANUFACTURING OPPORTUNITIES & VOCATIONAL EMPLOYMENT) A PARTNERSHIP WITH 15 MCLEOD AND MEEKER COUNTY MANUFACTURERS AND DUNWOODY COLLEGE OF TECHNOLOGY DUNWOODY COLLEGE OF TECHNOLOGY ESTABLISHED A TRAINING CENTER IN WINSTED IN AN EFFORT TO QUICKLY RESPOND TO THE REGION'S MANUFACTURING EMPLOYMENT NEEDS BY OFFERING A 16-WEEK WELDING TECHNICIAN PROGRAM CLASS SIZES ARE SMALL WITH AN EMPHASIS ON HANDS-ON, APPLIED LEARNING USING CUSTOMIZED CURRICULUM FOCUSED ON SKILLS NEEDED BY LOCAL MANUFACTURING COMPANIES DUNWOODY WILL CONDUCT ANOTHER WELDING COURSE IN THE FALL BECAUSE THE DEMAND FOR WELDERS IS STILL SO HIGH THERE ARE FINANCIAL ASSISTANCE OPPORTUNITIES AVAILABLE FOR THE STUDENTS FROM BOTH THE LITCHFIELD AND WINSTED CHAMBERS OF COMMERCE ALSO, THIS COURSE MEETS THE ELIGIBILITY FOR DISLOCATED WORKER FINANCIAL ASSISTANCE THROUGH DEED THIS MODEL HAS CREATED A WIN-WIN SITUATION FOR EMPLOYERS DESPERATE FOR SKILLED WORKERS AS WELL AS FOR THE GRADUATES OF THIS PROGRAM WHO ARE OFFERED IMMEDIATE EMPLOYMENT WITH A GOOD WAGE AND BENEFITS SOUTHWEST INITIATIVE FOUNDATION HAS BEEN SELECTED AS ONE OF EIGHTEEN COMMUNITY FOUNDATIONS FROM ACROSS THE MIDWEST TO PARTICIPATE IN A DISASTER- PREPAREDNESS, RESPONSE, AND RECOVERY PROGRAM DESIGNED TO HELP COMMUNITY FOUNDATIONS EXPAND THEIR ABILITY TO RESPOND QUICKLY, EFFICIENTLY, AND EFFECTIVELY TO NATURAL DISASTERS, IN THE IMMEDIATE AFTERMATH AND DURING LONG-TERM COMMUNITY REBUILDING THIS TWO-YEAR PROGRAM, KNOWN AS THE PHILANTHROPIC PREPAREDNESS, RESILIENCY, AND EMERGENCY PARTNERSHIP (PPREP) PROVIDES RESOURCES, LEARNING, AND BEST PRACTICES SO THAT PARTICIPATING COMMUNITY FOUNDATIONS CAN BUILD THEIR SKILLS AND LEADERSHIP CAPACITY IN ORDER TO BE BETTER PREPARED SHOULD A NATURAL DISASTER OCCUR SWIF HAS GAINED A REPUTATION, NOT ONLY AS A NEUTRAL CONVENER, BUT AS A PROVIDER OF QUALITY FACILITATION FOR ORGANIZATIONAL STRATEGIC PLANNING THIS ROLE HAS PRIMARILY BEEN PROVIDED TO SWIF PARTNERS THROUGH OUR EARLY CHILDHOOD INITIATIVE AND COMMUNITY FOUNDATION PARTNERSHIPS, BUT AS WORD SPREADS, THE DEMAND IS GROWING THIS PAST YEAR, SWIF FACILITATED STRATEGIC PLANNING WITH SIX ORGANIZATIONS BEYOND OUR PARTNERS INCLUDING THE MEEKER COUNTY EDA/CDC, LAC QUI PARLE COUNTY EDA, WORTHINGTON REGIONAL HEALTHCARE FOUNDATION, KANDIY OHI COUNTY AND CITY OF WILLMAR ECONOMIC DEVELOPMENT COMMISSION, WILLMAR AREA MULTICULTURAL MARKETPLACE/BUSINESS CENTER, AND THE MINNESOTA WEST COMMUNITY AND TECHNICAL COLLEGE FOUNDATION</p>

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	<p>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 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.</p> <p>FORM 990 PART VI SECTION A, LINE 2: BOARD MEMBERS DO NOT HAVE FAMILY OR BUSINESS RELATIONSHIPS WITH EACH OTHER. A CONFLICT OF INTEREST QUESTIONNAIRE IS DISTRIBUTED ANNUALLY AND EACH BOARD MEETING HAS A STANDING AGENDA ITEM ASKING FOR DISCLOSURES AS WELL.</p>

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	THE IRS FORM 990 IS REVIEWED BY APPROPRIATE STAFF IN THE FOUNDATION AND THEN PRESENTED TO THE AUDIT/FINANCE COMMITTEE FOR REVIEW AND RECOMMENDATION TO THE BOARD THE FULL BOARD OF DIRECTORS ALSO RECEIVES A COPY THROUGH THE SECURE BOARD PORTAL OF THE WEBSITE ONE WEEK PRIOR TO FILING THE AUDIT/FINANCE COMMITTEE AND THE BOARD ARE GIVEN PUBLIC INSPECTION COPIES OF THE FORM 990 THAT DO NOT INCLUDE THE CONFIDENTIAL LIST OF MAJOR DONORS OTHER THAN THIS LIST, THE FORM IS GIVEN IN ITS ENTIRETY TO THE COMMITTEE AND BOARD FOR REVIEW

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	<p>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 BOARD AND/OR CEO QUESTION AND DETERMINE IF THE CONFLICT IS VALID, AND IF SO, THE BOARD MEMBER DOES NOT PARTICIPATE IN THE VOTE THE CONFLICT IS NOTED IN THE MINUTES THE EMPLOYEE CONFLICT OF INTEREST POLICY IS DISTRIBUTED TO KEY DECISION MAKING EMPLOYEES, REVIEWED, AND SIGNED ANNUALLY WITH UPDATES TO ANY POTENTIAL CONFLICTS OF INTERESTS NOTED POTENTIAL CONFLICTS OF INTEREST FOR STAFF MUST BE REPORTED TO THE PRESIDENT/CEO AND ARE HANDLED ACCORDING TO THE BOARD APPROVED POLICY REQUIREMENTS</p>

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	<p>SOUTHWEST INITIATIVE FOUNDATION'S EXECUTIVE COMPENSATION PROGRAM IS ADMINISTERED BY THE EXECUTIVE COMMITTEE OF THE BOARD. THE EXECUTIVE COMMITTEE IS RESPONSIBLE FOR ESTABLISHING AND MAINTAINING A COMPETITIVE COMPENSATION PROGRAM FOR THE KEY EXECUTIVES OF THE FOUNDATION. THE EXECUTIVE COMMITTEE UNDERTAKES AN ANNUAL REVIEW TO EVALUATE THE FOUNDATION'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 FOUNDATION. THE LAST REVIEW WAS COMPLETED IN 2016 FOR THE PRESIDENT/CEO, D. ANDERSON.</p>

Return Reference	Explanation
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 GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE NOT MADE PUBLIC

Return Reference	Explanation
FORM 990, PART XI, LINE 9	CHANGE IN AGENCY FUNDS -103,288 CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS 60,728

SCHEDULE R
(Form 990)

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization SOUTHWEST INITIATIVE FOUNDATION	Employer identification number 41-1555592
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Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) AWSM LLC 413 1ST ST JACKSON, MN 56159 41-1555592	APARTMENT BLDG	MN	0		SOUTHWEST INITIATIVE FOUNDATION
(2) SWIF REAL ESTATE HOLDINGS LLC 15 3RD AVE NW HUTCHINSON, MN 55350 47-5210879	OFFICE BUILDING	MN	0		SOUTHWEST INITIATIVE FOUNDATION

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	
b Gift, grant, or capital contribution to related organization(s)	1b	
c Gift, grant, or capital contribution from related organization(s)	1c	
d Loans or loan guarantees to or for related organization(s)	1d	
e Loans or loan guarantees by related organization(s)	1e	
f Dividends from related organization(s)	1f	
g Sale of assets to related organization(s)	1g	
h Purchase of assets from related organization(s)	1h	
i Exchange of assets with related organization(s)	1i	
j Lease of facilities, equipment, or other assets to related organization(s)	1j	
k Lease of facilities, equipment, or other assets from related organization(s)	1k	
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	
o Sharing of paid employees with related organization(s)	1o	
p Reimbursement paid to related organization(s) for expenses	1p	
q Reimbursement paid by related organization(s) for expenses	1q	
r Other transfer of cash or property to related organization(s)	1r	
s Other transfer of cash or property from related organization(s)	1s	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation
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