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Form .990

Return of Organization Exempt From Income Tax

OMB No 1545-0047 a

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public

Open to Public

		ue Service	► Go to www.irs.gov/Fo	rm990 for instructions	and the latest	inform	pat(on.	Y	Inspection
Ā	Forthe	e 2017 cal	endar year, or tax year beginning	7/1/2017		nding)/2018	
В	Check if	applicáble	C Name of organization SOUTH DAK	OTA ASSOCIATION OF	CONSERVATION	ON DIS	D Employer		on number
\square	Address	change	Doing business as				1		
\equiv		,	Number and street (or P O box if mail is no	ot delivered to street address) Room/suite		46-6017029)	
Ш	Name ch	ange	116 N EUCLID PO BOX 275		İ		E Telephone		
\Box	Initial reti	urn	City or town	State	ZIP code		(005) 005 4		
\equiv			PIERRE	SD	57501-027	5	(605) 895-4	099	
Ш	Final return	n/terminated		province/state/county	Foreign postal	code	1		
\square	Amended	d return					G Gross rece	eipts \$	1,051,208
\equiv			E Name and address of account officer						
\Box	Application	on pending	F Name and address of principal officer			P 3	ns a group return fo		
		.,	ANGELA EHLERS 116 N EUCLID	AVE, PIERRE, SD 57	501-2725	力(b) Ar	e all subordinate	s included	Yes No
1 7	Tax-exem	npt status	X 501(c)(3) 501(c) ()	【 (insert no) 4947(a)	(1) or 527)f'	'No," attach a lis	t (see insti	ructions)
.1 \	Nehsite	· • www	v sdconservation org			H(c) Gr	oup exemption r	number 🕨	
		rganization	X Corporation Trust Associ	ation Other	L Yea	er of form	ation 1968	M State	of legal domicile SD
F	Part I	Sur	nmary						
	1	Briefly d	escribe the organization's mission o	r most significant activ	ities Lead	l, repre	sent & assist	t conserv	ation
9		districts	in promoting a healthy environment	Areas of concern incl	ude soil erosi	on, soil			
Ē			vater quality & quantity, air quality, for						
Į.	2		nis box I if the organization dis				ro than 25%	of ite no	t accate
ó	3					u oi iiic	l lian	_	
- ಇರ			of voting members of the governing				}	3	9
es.	4		of independent voting members of t				}	4	9
3	5		mber of individuals employed in cale		v, line 2a)		}	5	20
Activities & Governance	6		mber of volunteers (estimate if nece		_		-	6	1,080
⋖	7a		related business revenue from Part		2			7a	0
	<u>b</u>	Net unre	lated business taxable income from	Form 990-T, line 34				7b	0
	ļ					ļ	Prior Year		Current Year
ā	8		tions and grants (Part VIII, line 1h)				1,022		998,669
Ē	9	Program	service revenue (Part VIII, line 2g)				24	,844	38,573
Revenue	10	Investme	ent income (Part VIII, column (A), lin	es 3, 4, and 7d)			13	,039	13,966
œ	11	Other re	revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)						0
	12	Total reve	enue—add lines 8 through 11 (must equ	ial Part VIII, column (A),	line 12)		1,060	,497	1,051,208
	13		ind similar amounts paid (Part IX, co				220	,283	314,782
	14		paid to or for members (Part IX, col					0	0
S	15		other compensation, employee benefits		es 5–10)		698	,191	490,172
Expenses	16a		onal fundraising fees (Part IX, colum	• • • • • • • • • • • • • • • • • • • •	,			0	0
ber	b		idraising expenses (Part IX, column		0			1	,
X	17		penses (Part IX, column (A), lines 1				283	126	237,599
	18		penses Add lines 13~17 (must equa				1,201		1,042,553
	19		e less expenses Subtract line 18 fro					103	
		Revenue	eless expenses Subtract line 16 inc	MINDE 12		Banina	ing of Current		8,655 End of Year
Net Assets or Fund Balances	1	Takal ass	nata (Dart V. Ivan 46)	S MAY 1 0 2	2019	Degiiii		195	
SSE	20		sets (Part X, line 16)	-	≧		442		478,135
2 E	21	Total liat	pilities (Part X, line 26)	OGDEN	IIT T			0	27,285
2 1	22	Net asse	ets or fund balances Subtract line 2	Trom line year Liv,	<u> </u>		442	195	450,850
_	art II	Sig	nature Block				 		
			r, I declare that I have examined this return, in						9
and	beller, it i	is true, corre	ct, and complete Declaration of preparer (other	er than officer) is based on a	ii iniormation of w	nich prep	arer nas any kni		7/0040
Sig	n	-		<i>\(\frac{1}{1}\)</i>	. ——.			5/	7/2019
He			Signature of officer ()	hlers			Date		
	-		Angela Ehlers (\		exec	<u>utive di</u>	rector		
			Type or print name and title						
<u>.</u>		Print	Type preparer's name	Preparer's signature		Date		nock [PTIN
Pai				SELE DOEDADED DI	ETLIDA		1	neck elf-employe	ıf H
Pre	eparer	·		SELF-PREPARED RI	LIUKN				-
Us	e Only	/ Firm'	s name 🕨				Firm's EIN		
-			s address >				Phone no		
- Ma	v the IF	RS discus	s this return with the preparer show	above? (see instruct	ions)				X Yes No
-			ction Act Notice, see the separate ins					$\overline{}$	Form 990 (2017)
ı Ul	rayerv	ward RHOU	commence with the second of th	COLUMN TO THE STREET			~ /		1 4 111 4 4 4 14 14 14

Form 99	0 (2017) SOUTH DAKOTA ASSOCIATION OF CONSERVATION DISTRICTS, INC	46-6017029	Page 2
Par	Statement of Program Service Accomplishments Check if Schedule O contains a response, or note to any line in this Part III		
·1 I	Briefly describe the organization's mission		_
<u> </u>	Lead, represent & assist conservation districts in promoting a healthy environment. Areas		
9	of concern include soil erosion, soil health, water quality & quantity, air quality,		
]	forestry, rangeland, wildlife, & recreation	,	
2	Did the organization undertake any significant program services during the year which were not listi	ed on	
t	the prior Form 990 or 990-EZ?	X Yes	☐ No
	f "Yes," describe these new services on Schedule O		
	Did the organization cease conducting, or make significant changes in how it conducts, any program		П.,
	services? f "Yes," describe these changes on Schedule O	X Yes	∐ No
	Describe the organization's program service accomplishments for each of its three largest program	services, as measured h	ıv
	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grant		
	the total expenses, and revenue, if any, for each program service reported		
4a (Code) (Expenses \$ 836,717 including grants of \$ 299,658) (R	evenue \$ 867,7	709.)
	Assist landowners and operations to plan & implement natural resources conservation measures. S	uch	
	concentration are soil, air and water quality, animal and plant nutrient management, grazing lands management, wetlands conservation, land wildlife habitat. Staff assisted producers in developing		
	esource management plans and monitoring these plans. Wetlands were created, restored, or expa		
	with accompanying acres receiving grazing managment planning. Grazing managment technical		
3	assistance was provided to producers. Soil health demonstrations and educational programs were		
<u>c</u>	developed and presented to a wide range of individuals and groups. Residents of targeted		
	watersheds received information, technical advice and cost-share in order to address water quality mpairments, soil health and conservation stewardship intitiatives		
-			
•	Code) (Expenses \$ 52,149 including grants of \$ 10,124) (Re		
<u> </u>	Educate the public and Association members on natural resources conservation issues & available		
4	programs. The Association sponsored or co-sponsored several education events. Multiple leadersh development sessions for conservation district officials and staff were conducted. The Association	δ	
	assisted SD Envirothon to incorporate environmental education activities in education. The		
	Association cooperated with the South Dakota State University Ag-Bio Prexy Council to raise		
į	wareness of agriculture and natural resources stewardship through their Ag Day activities on		
	campus In cooperation with governmental and non-governmental partners, education efforts		
2	continued to increase on the importance of healthy soils for production and sustainability. The		
	Association cooperated with the Sand County Foundation and state sponsors of the Leopold Conservation Award to provide Leopold Award winners opportunities their stewardship story. The		
<u>, </u>	Association continued its involvement in raising awareness of renewable energy issues,		
	pportunities and challenges		
•	Code (Expenses 13,615 including grants of \$ 0) (Re		
	ncrease non-operating landowners' awareness of natural resources conservation measures, benef		
	and opportunities. In order to create a baseline, the Association conducted an internet and mail survey of random landowners who own land in South Dakota but do not operate the land themselve		
	The next step will be to contact over 20,000 identified non-operating landowners (NOLOs) through a		
	and of solver. The modern will should be the NOLOs to the closely of the Lind and	 	
	ederal partner USDA-Natural Resources Conservation Service Further contacts will provide		
	nformation on a variety of topics and opportunities to participate in programs and projects		
-			
-			
-			
	Other program services (Describe in Schedule O) Expenses \$ 0 including grants of \$ 0) (Revenue \$	0)	
	Expenses \$ 0 including grants of \$ 0) (Revenue \$ otal program service expenses ► 902,481		

46-6017029

Part IV

			Yes	No
٠1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	х	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	х	
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		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
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		х
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	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable	30		1
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	<u>11a</u>	х	
	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		Х
	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		Х
	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		х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
	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		Х
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		X
	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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13	\vdash	X
	Did the organization maintain an onice, employees, or agents outside of the onited States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	14a		^
-	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
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		Х
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		х
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		х
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		х
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		Х

Form 990 (2017) SOUTH DAKOTA ASSOCIATION OF CONSERVATION DISTRICTS, INC. 46-6017029 Page 4 Part,IV Checklist of Required Schedules (continued) Yes No 20a 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H Х 20b b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 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? If "Yes," complete Schedule I, Parts I and II 21 Х Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Х Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 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 Х employees? If "Yes," complete Schedule J 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a 24a Х b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c to defease any tax-exempt bonds? 24d d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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? If "Yes," complete Schedule L, Part I 25a Х b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I 25b Х 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 26 Х disqualified persons? If "Yes," complete Schedule L, Part II 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled 27 Х entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a **b** A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Х 28b Schedule L. Part IV 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? If "Yes," complete Schedule L, Part IV 28c Х Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified Х 30 conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 Х Part I 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? Х If "Yes," complete Schedule N, Part II 32 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Х sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 33 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, 34 Х III, or IV, and Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled 35b entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 Х organization? If "Yes," complete Schedule R, Part V, line 2

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

37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part

Form 990 (2017)

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Pai	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			\Box
	Check if Schedule O contains a response of note to any line in this rait v		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		163	 10
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	4		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1	1	
·	gaming (gambling) winnings to prize winners?	1c	X	
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 2a 20	<u> </u>		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			.
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	_3a		X
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	<u> </u>	↓
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			١.,
	account)?	4a	 	X
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		X
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	<u> </u>	x
b 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	1		
O.	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			1
-	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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	Щ	L X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u> </u>	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	_	1	
	required to file Form 8282?	7c	├ ─	X
đ	If "Yes," indicate the number of Forms 8282 filed during the year	 -		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	 	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	 	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		\vdash
h 8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	111		
0	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.		<u> </u>	T
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		1
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities]		ľ
11	Section 501(c)(12) organizations. Enter			İ
а	Gross income from members or shareholders	4		
þ	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)	 -		.
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	1	İ	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a	\vdash	+
а	Is the organization licensed to issue qualified health plans in more than one state?	138	\vdash	\vdash
L	Note. See the instructions for additional information the organization must report on Schedule O			
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			
С	Enter the amount of reserves on hand	1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
h		14b	X	

Form 9	90 (2017) SOUTH DAKOTA ASSOCIATION OF CONSERVATION DISTRICTS, INC	46-60170		P	age 6
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below	w, and for a "	'No"		
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Sch	edule O See	ınstı	ructio	ons.
	Check if Schedule O contains a response or note to any line in this Part VI			[X
Sect	ion A. Governing Body and Management				- -
<u> </u>	ion A. Coverning Body and management		T	Yes	No
10	Enter the number of voting members of the governing body at the end of the tax year1a	9	一		
14	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		- }		i
	committee, explain in Schedule O				
h	Enter the number of voting members included in line 1a, above, who are independent 1b	9			
р 2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			ŀ	
2	any other officer, director, trustee, or key employee?	ī	2		X
•	Did the organization delegate control over management duties customarily performed by or under the dire		-+	\longrightarrow	
3	supervision of officers, directors, or trustees, or key employees to a management company or other perso		3	İ	<u> </u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		X
4	Did the organization make any significant changes to its governing documents since the prior 1 of 1990 was med.		5		$\frac{\lambda}{X}$
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	_	6	х	
6	Did the organization have members or stockholders?	—	•	$\stackrel{\wedge}{\longrightarrow}$	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	I .	'a	x	
	one or more members of the governing body?	- '	a	^	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,		,	v l	
_	stockholders, or persons other than the governing body?	<u> </u>	'b	X	 i
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	'			}
	the year by the following			ا~تي ا	
a	The governing body?	⊢	a	X	
	Each committee with authority to act on behalf of the governing body?	<u> </u>	b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached		_		v
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		<u>X</u>
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal R	<u>evenue Coa</u>		Yes	- Na
4.0	D. I.I.	Ta.	0a	res	X
	Did the organization have local chapters, branches, or affiliates?	_	Ua	\dashv	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapter		^		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes'		0b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the fo	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1a	-	<u> </u>
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	ا	<u>.</u>	V	فسا
_	Did the organization have a written conflict of interest policy? If "No," go to line 13		2a 2b	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to co	Tillicts:	20	^	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	4	20	v l	
	describe in Schedule O how this was done		2c	X	
13	Did the organization have a written whistleblower policy?		4	$\hat{\mathbf{x}}$	
14	Did the organization have a written document retention and destruction policy?	├ -	4	^	 i
15	Did the process for determining compensation of the following persons include a review and approval by			- 1	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decrease and the standard of the deliberation and decrease and the standard of the deliberation and decrease and the standard of the deliberation and decrease and the standard of the deliberation and decrease and the standard of the deliberation and decrease and the standard of the deliberation and decrease and the standard of the deliberation and decrease and the standard of the deliberation and decrease and the standard of the deliberation and decrease and the standard of the deliberation and decrease and the standard of the deliberation and decrease and the standard of the deliberation and decrease and the standard of the deliberation and decrease and the standard of the deliberation and decrease and the standard of the deliberation and decrease and the standard of the deliberation and decrease and the standard of the standard of the standard of the deliberation and the standard of the stan	JISIOIT	- 5a -	·	_ 1
a	The organization's CEO, Executive Director, or top management official		5a 5b	XX	
b	Other officers or key employees of the organization	 	ומכ	-^-	
	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?	 '	6a		 -
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	-	 6b	-	- ·
	the organization's exempt status with respect to such arrangements?		ומס	1	
	ion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed	otion E01/o\/2		 nlv/\	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Se	Luon 50 I(C)(3	ان در	illy)	
	available for public inspection. Indicate how you made these available. Check all that apply	ahadida Ol			
4-5	X Own website Another's website X Upon request Other (explain in S		ICV -	and	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict	or interest por	icy, i	anu	
	financial statements available to the public during the tax year	nd records			
20	State the name, address, and telephone number of the person who possesses the organization's books a				
) 895-4099			
	PO Box 275, Pierre, SD 57501-0275				

Page 7

- **1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - · List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee Position (F) (D) (E) (B) (do not check more than one (A) Reportable Estimated Reportable Name and Title Average box, unless person is both an compensation compensation amount of officer and a director/trustee) hours per week (list any other Officer Highest compensated employee Individual trustee Institutional trustee Key employee compensation hours for organizations organization (W-2/1099-MISC) from the related (W-2/1099-MISC) organizations organization below dotted and related line) organizations (1) John Knebel 2 00 0 Coteau area director 0 00 0 (2) Trevor Williams 2 00 0.00 Х 0 0 Prairie area director 2 00 (3) John D Majeres 0 00 305 0 0 Vermillion-Big Sioux area director (4) Mark Snedeker 2 00 South James-Missouri area director 0 00 75 0 2 00 (5) Dale Lundgren 0 0 0.00 0 Hills area director (6) Dean Odden 2 00 0 0 00 0 O North Missouri area director 2 00 (7) Lyle Stewart 0 0 00 Х 115 vice president (8) Duane Schneider 3 00 Х Х 0 0 vice president 0 00 645 2 00 (9) Frances Fritz 0 0 0 00 1,130 NACD board of director 4 00 (10) Karl Jensen Х 680 0 0 0 00 president (11) Carolyn Rudebusch 4 00 Х 0 0 0 00 past president 40 00 (12) Angela Ehlers executive director Х <u>62,2</u>79 0.00 (13)

P	art VII	Section A. Of	ficers, Directors, Tr	ustees, Key Er	mplo	yee	s, a	nd	High	est	Compensated	Employees (co	ntınu	ed)	
•				,		,	Pos	C) lition				5			
	(A) Name and title			(B) Average							(D) Reportable	(E) Reportable		(F) stimated	
				hours per week (list any hours for related		1	a Officer	Key employee			compensation from the organization	compensation from related organizations (W-2/1099-MISC)	com	nount o other ipensati om the	
				organizations below dotted line)	Individual trustee or director	Institutional trustee		nployee	Highest compensated employee		(W-2/1099-MISC)		an	anizatio d relate anizatio	d
(15)															
(16)															
(17)															
(18)															
(19)															
(20)															
(21)															
(22)															
(23)															
(24)															
(25)															
1b c	Sub-total Total from		sheets to Part VII, S	Section A						•	65,229 0	0			0
d_		d lines 1b and 1								▶	65,229	0			0
2			s (including but not li from the organization		ısted		ove) 0	wh	o rec	eive	ed more than \$1	00,000 of	•		
3			ny former officer, dir					yee,	, or h	ighe	est compensated	d		Yes	
	• •		es," complete Sche										3		Х
4			n line 1a, is the sumed organizations gre												i
	individual	zation and relate	ed organizations gre	ater than \$150,0	,	"	163	,	יוקוווכ	,,,,,	ochedale 5 for 3	uch.	4		X
5			ne 1a receive or accile organization? If ")	•							-	dıvıdual	5	-	X
Sec		ependent Cont		co, complete c	307700	34,0	<u> </u>	<i>y,</i> 5,	uon p	0,0	011				
1			ur five highest compo ganization Report co										's tax		
			(A) Name and business add	ress			-				(B) Description of ser	vices C	(C) Compen		
No	ne Applica	ble													0
									\dashv						0
															0
															0
2		•	ent contractors (inclumpensation from the	-	ited t	to th	ose	list	ed at	oov	e) who received				

1 01111 000 (2011)	SCOTT DAKOTA AGGOCIATION OF GONGERVATION DIGITALOTO,	11.4
Part VIII	Statement of Revenue	

	•	Check if Schedule O contains	s a response	or	note to any line i	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
1-	10			1a			TEVELIDE		312-314
र्घ रा	1a	Federated campaigns			52.520				
is a	b	Membership dues		<u>1b</u> 1c	53,588				
S, C	С	d Related organizations			<u> </u>				
Contributions, Gifts, Grants and Other Similar Amounts	i				0			•	
ıs,		Government grants (contribution		<u>1e</u>	602,741	į			
er S	f	All other contributions, gifts, grain	nts, and						
들 원		similar amounts not included abo	ove	1f	342,340				
ont nd (g	Noncash contributions included in li	nes 1a-1f	\$	o				
O B	h	Total. Add lines 1a-1f			▶	998,669			
<u> </u>					Business Code				
Program Service Revenue	2a	conference receipts			611710	38,573	38,573		38,573
Š	b					0			
<u>:</u>	С					0			İ
5	d					0			
S	e					0			
grai	f	All other program service revenu				0			
P.	q	Total. Add lines 2a–2f				38,573			
	3	Investment income (including div	udends inte	rest		30,070			'
	J	other similar amounts)	riderids, inte		, and	13,966			13,966
		Income from investment of tax-e	vomat hand	nro	coods	13,900	-		10,000
	4		pio	ceeds	0				
	5	Royalties	(ı) Real		(II) Personal	- 0			
	_	0	(1) 11001		(11) 1 01001141				1
	6a	Gross rents							1
	b	Less rental expenses							1
	C	Rental income or (loss)		0	<u> </u>				
	d	Net rental income or (loss)			▶	0			
	7a	Gross amount from sales of	(i) Securitie		(II) Other	İ			1
		assets other than inventory		0	0				l
	b	Less cost or other basis				İ			
		and sales expenses		0	0			•	l l
	С	Gain or (loss)		0	0			<u>.</u>	
	d	Net gain or (loss)			•	.0			
Other Revenue	8a	Gross income from fundraising events (not including \$ of contributions reported on line See Part IV, line 18	0 1c)	а	0				
ţ	b	Less direct expenses		þ	0				
0	С	Net income or (loss) from fundra	ising events	;		0			
	9a	Gross income from gaming activ	rities						ļ
		See Part IV, line 19		а	0				
	b	Less direct expenses		b	0				
	С	Net income or (loss) from gamin	g activities		•	0			
		Gross sales of inventory, less	_						
		returns and allowances		а	l ol				
	b	Less cost of goods sold		b	0				!
		Net income or (loss) from sales	of inventory	-	•	0			
	_ <u>~</u>	Miscellaneous Revenue	-: .		Business Code				
	11a					0			
						0			
	b				-	0			
	C	All abb acres			-				
	d	All other revenue				0 0	.		
		Total. Add lines 11a–11d					20 572		52 520
	12	Total revenue. See instructions			<u> </u>	1,051,208	38,573	0	52,539 Form 990 (2017)
									Form 330 (2017)

Form 990 (2017)

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) Х Check if Schedule O contains a response or note to any line in this Part IX (B) (D) Do not include amounts reported on lines 6b, 7b, Program service Management and Total expenses Fundraising 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations domestic governments. See Part IV, line 21 314.782 314.782 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members ol Compensation of current officers, directors, 62,720 19,493 trustees, and key employees 43,227 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 344,763 336,056 8,707 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 12,863 11,357 1,506 3,924 9 Other employee benefits 44,678 40,754 22,086 10 Payroll taxes 25,148 3,062 11 Fees for services (non-employees) a Management 295 295 b Legal c Accounting 0 Lobbying 0 d 0 Professional fundraising services. See Part IV, line 17 f Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 114,678 114,678 12 Advertising and promotion 0 15,589 3,463 12,126 13 Office expenses 3,769 4,010 14 Information technology 7,779 0 15 Royalties 4,800 16 Occupancy 4.800 17 42,786 26,140 16,646 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 27,659 750 26,909 Conferences, conventions, and meetings 20 121 121 Interest 21 Payments to affiliates 0 22 Depreciation, depletion, and amortization 0 0 23 insurance 16.998 8.617 8.381 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 Equipment rent & maintenance 1,451 241 1.210 3,748 3,748 b 1,695 1,695 C Dues/memberships 0 0 e All other expenses 1,042,553 902.481 140.072 0 Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here following SOP 98-2 (ASC 958-720)

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 1 Cash-non-interest-bearing -19,632 17.863 2 Savings and temporary cash investments 7.884 15,742 3 Pledges and grants receivable, net 12,118 3 25,358 Accounts receivable, net 40 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 0 5 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. 0 6 Notes and loans receivable, net 0 7 0 0 8 Inventories for sale or use Prepaid expenses and deferred charges 0 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 65,903 0 10c b Less accumulated depreciation 10b 102,009 -36,106 455,278 11 Investments—publicly traded securities 441.785 11 12 Investments—other securities See Part IV, line 11 ol 12 0 13 Investments-program-related See Part IV, line 11 ol 13 0 14 Intangible assets 0 14 0 15 Other assets See Part IV, line 11 ol 15 0 16 Total assets. Add lines 1 through 15 (must equal line 34) 442,195 16 478,135 17 17 Accounts payable and accrued expenses O 27,285 ol 18 Grants payable 18 0 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 0 21 Escrow or custodial account liability Complete Part IV of Schedule D ol 21 22 Loans and other payables to current and former officers, directors, iabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L ol 22 23 0 23 Secured mortgages and notes payable to unrelated third parties 이 ol Unsecured notes and loans payable to unrelated third parties 24 0 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 0 25 0 ol 26 Total liabilities. Add lines 17 through 25 26 27,285 Organizations that follow SFAS 117 (ASC 958), check here ▶ X and or Fund Balances complete lines 27 through 29, and lines 33 and 34. 237,018 27 115,560 27 Unrestricted net assets <u>-119,9</u>88 28 Temporarily restricted net assets -236,608 28 29 Permanently restricted net assets 441,785 29 455,278 Organizations that do not follow SFAS 117 (ASC958), check here and complete lines 30 through 34. Net Assets 30 30 Capital stock or trust principal, or current funds 0 31 oi 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 33 442,195 33 450,850 Total net assets or fund balances 442,195 34 478,135 Total liabilities and net assets/fund balances

Form 9	190 (2017) SOUTH DAKOTA ASSOCIATION OF CONSERVATION DISTRICTS, INC	40	<u> </u>	Pa	ge IZ
Part	XI Reconciliation of Net Assets		-		
	Check if Schedule O contains a response or note to any line in this Part XI				
ነ ້	Total revenue (must equal Part VIII, column (A), line 12)	1		1,051	,208
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,042	2,553
3	Revenue less expenses Subtract line 2 from line 1	3		8	3,655
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		442	2 195
5	Net unrealized gains (losses) on investments	5			
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			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10		450	<u>,850</u>
Part	• • •				_
	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 Cash Accrual Other		_ , .		-
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		ا ـ نه ۱	~	. "
	Schedule O			<u> </u>	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			1	· .
	reviewed on a separate basis, consolidated basis, or both			, • . rî	
	X Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				1
	separate basis, consolidated basis, or both		7.3	15	Marin Marin
	X Separate basis Consolidated basis Both consolidated and separate basis		[· · ·	وبه استعداج	:
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	of		* *	1.7
Ū	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in	1			1
	Schedule O		[^{**}] \		
3a					
	the Single Audit Act and OMB Circular A-133?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
_	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2017)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

Employer identification number Name of the organization SOUTH DAKOTA ASSOCIATION OF CONSERVATION DISTRICTS, INC 46-6017029 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 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 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 X 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 agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 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) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g 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. 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. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, c its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d 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. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization 0 Enter the number of supported organizations Provide the following information about the supported organization(s) (III) Type of organization (i) Name of supported organization (iv) is the organization (v) Amount of monetary (vi) Amount of (ii) EIN (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes (A) (B) (C) (D) (E) Total 0

Page 2

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)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1,850,005	1,508,818	1,384,108	1,022,614	998,669	6,764,214
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
3	The value of services or facilities furnished by a governmental unit to the					_	
	organization without charge	0	0	0	0	0	0 721 211
4	Total. Add lines 1 through 3	1,850,005	1,508,818	1,384,108	1,022,614	998,669	6,764,214
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)						_0
6	Public support. Subtract line 5 from line 4						6,764,214
	ction B. Total Support	 					(D. T.).
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4	1,850,005	1,508,818	1,384,108	1,022,614	998,669	6,764,214
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from						
	sımılar sources	17,703	14,263	13,709	13,039	13,966	72,680
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	. 0	0	0
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	0	0	0	0	0	0
11	Total support. Add lines 7 through 10		•		<u></u>		6,836,894
12	Gross receipts from related activities, etc (se	ee instructions)		.•		12	144,847
13	First five years. If the Form 990 is for the or organization, check this box and stop here	ganızatıon's first, s		n, or fifth tax year a	s a section 501(c)	(3)	▶□
	ction C. Computation of Public Sur						
	Public support percentage for 2017 (line 6, c	* * *	-	f))		14	98 94%
	Public support percentage from 2016 Sched					15	98 98%
	33 1/3% support test—2017. If the organization qualifies as 33 1/3% support test—2016. If the organization	a publicly support	ed organization				► X
	box and stop here The organization qualifie	es as a publicly sup	ported organizatio	n			▶□
17a	10%-facts-and-circumstances test—2017. is 10% or more, and if the organization meet Part VI how the organization meets the "facts organization"	s the "facts-and-cir	cumstances" test,	check this box and	i stop here. Expla	מו חומ	▶□
b	10%-facts-and-circumstances test—2016. 15 is 10% or more, and if the organization replain in Part VI how the organization meet supported organization	meets the "facts-ar	nd-circumstances	test, check this b	ox and stop here .		▶ □
18	Private foundation. If the organization did nustructions	not check a box on	line 13, 16a, 16b,	17a, or 17b, check	this box and see		▶□

	rt III Support Schedule for Organ			ISERVATION DI	STRICTS, INC	46-60/1702	9 Page 3
· u	· (Complete only if you shecked				zation failed to	gualify under Pa	t II
	If the organization fails to qua						
Sec	ction A. Public Support					/	
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees						
•	received (Do not include any "unusual grants ")						0
2	Gross receipts from admissions, merchandise sold or services performed, or facilities				 	ľ	
	furnished in any activity that is related to the	\			/		
	organization's tax-exempt purpose	\					<u>0</u>
3	Gross receipts from activities that are not an	\			/		•
	unrelated trade or business under section 513						0
4	Tax revenues levied for the organization's	\					
	benefit and either paid to or expended on	\					0
5	its behalf The value of services or facilities				/	 	0
5	furnished by a governmental unit to the	\		/			
	organization without charge	\		/			0
6	Total. Add lines 1 through 5	10	0	/ 0	0		0
	Amounts included on lines 1, 2, and 3	1					
	received from disqualified persons	'	\	/]	0
b	Amounts included on lines 2 and 3		1				
	received from other than disqualified		\				
	persons that exceed the greater of \$5,000		\				
	or 1% of the amount on line 13 for the year						0
C	Add lines 7a and 7b	0	/ /0		0	0	0
8	Public support (Subtract line 7c from		l \/				
	line 6)			L	L		0
	ction B. Total Support	(-) 2040	(b) 2014	/=\ 2045	(4) 2046	(2) 2047	(D. Total
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 10a	Amounts from line 6		/ 4			 	0
iva	Gross income from interest, dividends,			\			
	payments received on securities loans, rents, royalties, and income from similar sources			\			0
b	Unrelated business taxable income (less						<u></u>
-	section 511 taxes) from businesses			\			
	acquired after June 30, 1975			\	1		0
С	Add lines 10a and 10b		0	\ 0	0	0	0
11	Net income from unrelated business						
	activities not included in line 10b, whether			\ \			
	or not the business is regularly carried on	/	_				0
12	Other income Do not include gain or			\	(1	
	loss from the sale of capital assets	•			\		
	(Explain in Part VI)						0
13	Total support. (Add lines 9, 10c, 11,	_	_		\		•
	and 12)	0	0	<u> </u>			0
14	First five years. If the Form 990 is for the org organization, check this box and stop here	anization's first, s	secona, inira, iouri	n, or iiπn tax year a	as a section 501(c)	(3)	▶□
500	tion C. Computation of Public Sup	nort Porconta	100	-	$\overline{}$		
	Public support percentage for 2017 (line 8, co			······································		15	0 00%
	Public support percentage from 2016 Schedu			(1))	\	16	0 00%
	tion D. Computation of Investment				<u></u>	/	
17	Investment income percentage for 2017 (line			olumn (f))		ोर्	0 00%
18	Investment income percentage from 2016 Sci			`''		18	0 00%
	33 1/3% support tests—2017. If the organiza			4, and line 15 is m	ore than 33 1/3%,	and line 7 is	
	not more than 33 1/3%, check this box and st	op here. The org	janization qualifies	as a publicly supp	orted organization	\	▶ [_]
b	33 1/3% support tests—2016. If the organization						. \Box
	line 18 is not more than 33 1/3%, check this b	ox and stop here	e. The organization	n qualifies as a pub	olicly supported org	anization	▶ٰ

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Page 4

Part IV **Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Sect	ion 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				ļ
	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				j
	(b) and (c) below	3a			_
b	5				
	organization made the determination	3b		L	
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)				ĺ
	(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с			
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If				١
	"Yes," and if you checked 12a or 12b 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				۱
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion				l
	despite being controlled or supervised by or in connection with its supported organizations	4b			
С	Did the organization support any foreign supported organization that does not have an IRS determination				ĺ
	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,"				Ì
	answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN	· ·	1		l
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,				l
	(iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action		l		١
	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				İ
	designated in the organization's organizing document?	5b			•
С	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				ĺ
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited			ĺ	
	by one or more of its supported organizations, or (iii) 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				ĺ
	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with	l	l		Ì
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7			
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?				Ì
	if "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8			_
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more				١
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described				Ì
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a			
b					j
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b			
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit				١
-	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9с			•
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section				İ
u	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated		1.		I
	supporting organizations)? If "Yes," answer 10b below	10a	<u> </u>		•
h	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to				İ
U	determine whether the organization had excess business holdings in the tax year. (656 denedure 6, 7 6 77 25, to	10b			•

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

3b

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 (explain in Part VI) See

instructions. All other Type III non-functionally integrated supporting organizations.	_		ons 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	0	0	
5 Depreciation and depletion	5			
6 Portion of operating expenses paid or incurred for production or	III			
collection of gross income or for management, conservation, or	1 1			
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	0	0	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)	
Aggregate fair market value of all non-exempt-use assets (see				
instructions for short tax year or assets held for part of year)				
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	0	0	
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	0	0	
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			 :	
see instructions)	4	o[0	
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	0	
6 Multiply line 5 by 035	6	0	0	
7 Recoveries of prior-year distributions	7	0	0	
8 Minimum Asset Amount (add line 7 to line 6)	8	0	0	
Section C - Distributable Amount			Current Year	
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		0	
2 Enter 85% of line 1	2		0	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		0	
4 Enter greater of line 2 or line 3	4		0	
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		0_	
7 Check here if the current year is the erganization's first as a pan functions	ص بداله	tograted Type III supporting	a organization (see	

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions)

Part	Type III Non-Functionally Integrated 509(a)(3)	Supporting Organiza	tions (continued)				
Section	on D - Distributions			Current Year			
<u> </u>	Amounts paid to supported organizations to accomplish ex						
2	Amounts paid to perform activity that directly furthers exer						
	organizations, in excess of income from activity						
3_	3 Administrative expenses paid to accomplish exempt purposes of supported organizations						
	Amounts paid to acquire exempt-use assets						
	Qualified set-aside amounts (prior IRS approval required)						
	Other distributions (describe in Part VI) See instructions						
	Total annual distributions. Add lines 1 through 6			0			
8	Distributions to attentive supported organizations to which	the organization is resp	onsive				
	(provide details in Part VI) See instructions			·			
	Distributable amount for 2017 from Section C, line 6			0			
10_	Line 8 amount divided by line 9 amount			0 000			
		(i)	(ii)	(iii)			
Se	ction E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable			
		Execute Blott Buttone	Pre-2017	Amount for 2017			
1	Distributable amount for 2017 from Section C, line 6						
	Underdistributions, if any, for years prior to 2017						
2	(reasonable cause required—explain in Part VI) See	1					
	instructions			·· ·			
3	Excess distributions carryover, if any, to 2017	<u> </u>					
a	<u> </u>						
b	From 2013						
с	From 2014						
d	From 2015						
е	From 2016						
f	Total of lines 3a through e	0					
g	Applied to underdistributions of prior years		0				
_ <u>h</u>	Applied to 2017 distributable amount			0			
i_	Carryover from 2012 not applied (see instructions)		· · · · · · · · · · · · · · · · · · ·				
<u>j</u>	Remainder Subtract lines 3g, 3h, and 3i from 3f	0					
4	Distributions for 2017 from						
	Section D, line 7 \$ 0	1		1 47 1			
a	Applied to underdistributions of prior years		0				
b	Applied to 2017 distributable amount			0			
С	Remainder Subtract lines 4a and 4b from 4	0					
5	Remaining underdistributions for years prior to 2017, if						
	any Subtract lines 3g and 4a from line 2 For result	j j					
	greater than zero, explain in Part VI See instructions		0				
6	Remaining underdistributions for 2017 Subtract lines 3h						
	and 4b from line 1 For result greater than zero, explain in	ì					
	Part VI See instructions			0			
7	Excess distributions carryover to 2018. Add lines 3j						
	and 4c	0					
8	Breakdown of line 7						
a	Excess from 2013 0						
b	Excess from 2014 0						
С	Excess from 2015 0						
d	Excess from 2016 0						
е	Excess from 2017 0	1					

Schedule A (F	orm 990 or 990-EZ) 2017	SOUTH DAKOTA ASSOCIATION OF CONSERVATION DISTRICTS, INC. 46-6017029	Page 8
Part VI	Supplemental Info	Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b,	
		line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E,	
		so complete this part for any additional information (See instructions)	
-			
			
-			
			
			- -

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2017

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.

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

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B
- · Section 527 organizations Complete Part I-A only

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

• S	Section 501(c)(4), (5), or (6) o	rganizations Complete Part III								
Nam	e of organization			E	Employe	r identification n	umber			
SOL		ION OF CONSERVATION DISTRIC				46-6017029				
Pa		he organization is exempt und								
1		the organization's direct and indirect	political campaigr	n activities in Part I'	V (see i	nstructions for				
	definition of "political can	•								
2		y expenditures (see instructions)			▶ \$		6,040			
		cal campaign activities (see instructi					87			
		he organization is exempt und	-							
1		excise tax incurred by the organizati			> 3		0			
2	=	excise tax incurred by organization r	_		> \$		0			
3	•	ed a section 4955 tax, did it file Form	1 4720 for this year	rv		Yes	☐ No			
	Was a correction made?					Yes	∐ No			
	If "Yes," describe in Part				5044	- 1/01				
Pa		he organization is exempt und			on 501(c)(3).				
1	-	expended by the filing organization	for section 527 e	xempt function						
_	activities				▶ \$					
2		filing organization's funds contributed	to other organiza	ations for section	. .					
_	527 exempt function activ		h	- 4420 DOL	> \$					
3	line 17b	penditures Add lines 1 and 2 Enter	nere and on Forn	1 1120-POL,	▶ €		0			
		Sin Farm 4420 DOL for this year?			P 4	☐ Yes ☐ No				
4		n file Form 1120-POL for this year?	has (CINI) of all an	otion EO7 nolitical (raaniza					
5		ses and employer identification num ents For each organization listed, e								
	the amount of political co	ontributions received that were promp	otly and directly de	elivered to a separa	ate politi	cal organization	, such			
		d fund or a political action committee								
	(a) Name	(b) Address	(c) EIN	(d) Amount paid f	rom	(e) Amount of	nolitical			
	(a) Name	(b) / ddiess	(0) = (1)	filing organizatio	n's	contributions re	ceived and			
				funds If none, ente	er -0-	promptly and delivered to a	•			
						political organ	•			
						none, ente	er -0-			
/4\										
(1)										
(2)										
ι-,										
(3)										
(4)		 								
(5)										
(6)										
(0)				I						

Dago	2
race	-

561	edule 0 (1 01111 530 01 530-LZ) 20 17					Page 2
P	art II-A Complete if the organiza under section 501(h)).	tion is exempt	under section 5	601(c)(3) and file	d Form 5768 (elect	
_	Check ► if the filing organization	holongs to an	offiliated group (a	and list in Bort IV	and affiliated group	
A	name, address, EIN, e					members
В	Check ► if the filing organization					
<u> </u>				ittor provisions a		
	Limits on Le (The term "expenditures"	obbying Expend		1 \	(a) Filing organization's totals	(b) Affiliated group totals
 1a	Total lobbying expenditures to influence				0.8-1112-110112-110112	0
b	Total lobbying expenditures to influence			9)		0
C	Total lobbying expenditures (add lines 1		y (direct lobbying)		0	0
d	Other exempt purpose expenditures	ia and 15)				0
e	Total exempt purpose expenditures (ad	d lines 1c and 1d	١		0	0
f	Lobbying nontaxable amount Enter the			ooth		
•	columns		Tollowing table in a		اه	0
	If the amount on line 1e, column (a) or (b)	is: The lobby	ng nontaxable amoi	unt is:		1
	Not over \$500,000		amount on line 1e			
ĺ	Over \$500,000 but not over \$1,000,000	\$100,000 pl	us 15% of the exces	s over \$500,000		
- 1	Over \$1,000,000 but not over \$1,500,000		us 10% of the exces	,		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 pl	us 5% of the excess	1	ł	
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 2	0	0			
h	Subtract line 1g from line 1a If zero or I	0	0			
i	Subtract line 1f from line 1c If zero or le	0	0			
j	If there is an amount other than zero on	either line 1h or l	ine 1i, did the orga	inization file Form 4	720 reporting	7. , \square
	section 4911 tax for this year?					Yes No
			g Period Under se			_
	(Some organizations that made a				of the five columns	below.
	See	the separate ins	tructions for line	s 2a through 2f.)		
	Lobb	ying Expenditur	es During 4-Year	Averaging Period		
	Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2a	Lobbying nontaxable amount				0	0
b	Lobbying ceiling amount (150% of line 2a, column(e))					0
c	Total lobbying expenditures				0	0
d	Grassroots nontaxable amount				0	0
е —	Grassroots ceiling amount (150% of line 2d, column (e))					0
f	Grassroots lobbying expenditures		1			0

Schedule C (Form 990 or 990-EZ) 2017

Page 3

Pa	t II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Forn	า 5768		•
For.	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(6	1)		(b)	
	cription of the lobbying activity	Yes	No	A	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local					
	legislation, including any attempt to influence public opinion on a legislative matter or	į				
	referendum, through the use of					i
а	Volunteers?	X				i
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X	 _			
c	Media advertisements?		_X_			0
ď	Mailings to members, legislators, or the public?	Χ				0
e	Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes?		X			0 0
f	Direct contact with legislators, their staffs, government officials, or a legislative body?	X	- ^-			6,040
g h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	^	х			<u>0,040</u> 0
i	Other activities?		X		_	0
i	Total Add lines 1c through 1i					6,040
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					!
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6).)(5),	or se	ction		,
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	^		2		ļ
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)			3		<u> </u>
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes."				line :	3, is
1	Dues, assessments and similar amounts from members		_1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of	ļ	-			
_	political expenses for which the section 527(f) tax was paid). Current year		2a			
a b	Carryover from last year	ļ	2b			
C	Total		2c			0
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the					
	excess does the organization agree to carryover to the reasonable estimate of nondeductible					
	lobbying and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)		_5_			0
	IV Supplemental Information					
	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou	p list), Part	II-A, lu	nes 1	and
•	e instructions), and Part II-B, line 1 Also, complete this part for any additional information					
Part	-A Line 1 The State of South Dakota requires anyone representing an organization to register					-
as a	obbyist in order to speak on behalf of the organization before a legislative committee. The					
Aşşo	ciation registered the executive director and the president of the board of directors as			- 		
loppy	ists so that they might appear before legislative committees on behalf of the Association and				 -	
ıts m	embers During the legislative session, the primary activity of the Association was to monitor				. 	.
legisi	ative activities and report on a weekly basis to the Association's membership. This report					
took	the form of an e-mail sent to each conservation district office and the Association's board of					

P	ac	ıe	4

SCHEDULE D (Form 990)

Department of the Treasury

Name of the organization

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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

SOUTH DAKOTA ASSOCIATION OF CONSERVATION DISTRICTS, INC 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 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) 4 Aggregate value at end of year 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? Yes 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? Yes No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a а Total number of conservation easements 2b b Total acreage restricted by conservation easements C Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the tax year 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 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 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 and section 170(h)(4)(B)(ii)? Yes 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 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 Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Par	Corganizations Maintaining Control	collections of Ar	t, His <u>tor</u>	<u>rical Trea</u>	as <u>ures, or</u> (<u>Other</u>	Similar Asset	s (conti	าued)	
3	Using the organization's acquisition, a collection items (check all that apply)	ccession, and othe	r records	, check ar	ny of the follo	wing th	nat are a signific	ant use	of its	
а	Public exhibition		d [Loan	or exchange	progra	ms			
b	Scholarly research		е 🗌	Other		. . .				
С	Preservation for future generati	ons								
4	Provide a description of the organizat XIII		d explain	how they	further the o	rganıza	ation's exempt p	urpose ır	Part	
5	During the year, did the organization s	solicit or receive do	nations o	f art, histo	rical treasure	es, or o	ther similar			_
	assets to be sold to raise funds rather	than to be maintai	ned as pa	art of the c	organization's	collec	tion?	Y	es	No
Par	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, included on Form 990, Part X?			-		other a	assets not	Y	es 🗀] No
b	If "Yes," explain the arrangement in P	art XIII and comple	te the foll	owing tab	le					
	Barrage balance							Amount		
C	Beginning balance Additions during the year					10				
d e	Distributions during the year					16				
f	Ending balance					11				0
2a	Did the organization include an amoun	nt on Form 990 Pa	rt X. line :	21. for esc	crow or custo			Y	es X	No
b	If "Yes," explain the arrangement in P									
Part					<u> </u>					<u>'</u>
	Complete if the organization a	nswered "Yes" or	n Form 9	90, Part	IV, line 10					
		(a) Current year		or year	(c) Two years	back	(d) Three years bac	k (e) Fo	our years	back
1a	Beginning of year balance	441,785		432,775	41	7,371	415,3	72	41	5,743
b	Contributions	19,933		12,215		9,685	9,6	<u>80</u>	1	0,545
С	Net investment earnings, gains,									
	and losses	-6,440		-3,205		<u>5,719</u>	-7,6	81	1	0,916
d e	Grants or scholarships Other expenditures for facilities		-			1		+		
C	and programs	i								
f	Administrative expenses									
g	End of year balance	455,278		441,785	43	2,775	417,3	71	41	5,372
2	Provide the estimated percentage of t	he current year end	d balance	(line 1g, d	column (a)) h	eld as				
а	Board designated or quasi-endowmer		<u>"</u>							
b	Permanent endowment	100%								
С	Temporarily restricted endowment	% % % % % % % % % % % % % % % % % % %	00/							
3a	The percentages on lines 2a, 2b, and Are there endowment funds not in the	·		ion that ai	e held and a	dminis	tered for the			
	organization by	posocoolon or the	organizat	ion indicat	0 1101 0 011 0 0		10104 101 1110		Yes	No
	(i) unrelated organizations							3a(i)		Х
	(ii) related organizations							3a(ii)		Х
b	If "Yes" on line 3a(ii), are the related of							_3b		
4	Describe in Part XIII the intended uses		n's endov	vment fun	ds					
<u>P</u> art							- 000 D		40	
	Complete if the organization a									
	Description of property	(a) Cost or oth			st or other s (other)		Accumulated lepreciation	(d) B	ook valu	е
1a	Land	(,	0		0		 +			0
b	Buildings		0		0		0			0
C	Leasehold improvements		0		0		0			0
d	Equipment		0		65,903		65,903		-3	<u>6,106</u>
<u>е</u>	Other		0		o		0			0
Total	I. Add lines 1a through 1e. (Column (d)	must equal Form 9	190 Part	X column	(B) line 10d	:)	▶		-3	6.106

SOUTH DAKOTA ASSOCIATION OF CONSERVATION DISTRICTS, INC

Schedule D (Form 990) 2017

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Complete if the organization answered "Yes" on Form 990, Part IX, line 11b See Form 990, Part X, line 12 (p) Membra display (p) Block value (p) Response of security (p) Block value (p) Response (p) Re	Part VII	Investments—Other Securities.			
(1) Financial derivatives (2) Closely-held equity interests (3) Other (4) (1) Financial derivatives (5) Other (6) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1		Complete if the organization answer	red "Yes" on Form 990		
(2) Closely-held equity interests 0 0 0 0 0 0 0 0 0			(b) Book value		
(3) Other					
(A) (B) (C)			0		
(§) (P)	(3) Other				
(C) (C)			<u> </u>		
(5) (6) (7) (7) (8) (9) (9) (10)					
	{Ĉ}				
Final	(E)				
(5) (10) (10) (10) (10) (10) (10) (10) (10					
(a) Description of 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 (l) Method of valuation Cost or end-of-year value (l) Method of valuation Cost or end-of-year value (l) Method of valuation Cost or end-of-year value (l) Method of valuation Cost or end-of-year value (l) Method of valuation Cost or end-of-year value (l) Method of valuation Cost or end-of-year value (l) Method of valuation Cost or end-of-year value (l) Method of valuation Cost or end-of-year value (l) Method of valuation Cost or end-of-year value (l) Method of valuation Cost or end-of-year value (l) Method of valuation Cost or end-of-year value (l) Method of valuation Cost or end-of-year value (l) Method of valuation Cost or end-of-year value (l) Method of valuation (
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(8) (9) 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 hobility (b) Book value (1) Federal income taxes 0 (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) line 25) Outer Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the					
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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 (1) Federal income taxes 0 (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) line 25) Other Liability for uncertain tax positions in Part XIII, provide the text of the footnote to the organization's financial statements that reports the					
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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 highliny (b) Book value (1) Federal income taxes 0 (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the			. 10)	_	<u> </u>
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2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(9)				
2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	Total. (Column	(b) must equal Form 990, Part X, col (B) line 25)▶	lo		
	2. Liability for	uncertain tax positions. In Part XIII, provide th	e text of the footnote to the o	organization's financial statements	that reports the

Sche	Table D (Form 990) 2017 SOUTH DAKOTA ASSOCIATION OF CONSERVATION	IN DISTRICTS, INC.	46-6017029	Page 4
Pa	Reconciliation of Revenue per Audited Financial Staten		ue 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	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 - 1	1 1	
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b	 	
C	Recoveries of prior year grants Other (Describe in Part XIII.)	2c		
d e	Other (Describe in Part XIII) Add lines 2a through 2d			0
3	Subtract line 2e from line 1		2e 3	0
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b	L-1	4c	_ 0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line	12)	5	0
Pai	t XII Reconciliation of Expenses per Audited Financial State		nses per Return.	
	Complete if the organization answered "Yes" on Form 990,	•		
1	Total expenses and losses per audited financial statements		1 1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		,	
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c	, ,	
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		3	0
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1 1	- 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
C	Add lines 4a and 4b		4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, Iir	ne 18)	5	0
Par	t XIII Supplemental Information.			
	ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a ar art XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part			Part X, line
Part	V Line 4 The Endowment Fund provides a foundation of support for natural	resources		
cons	ervation in South Dakota. Contributions to the Fund are held in trust and inv	ested in		
gove	rnment-backed securities. Investment interest is utilized by the Association	to		
furth	er the goals of South Dakota's conservation districts - voluntary, self-govern	ed		
cons	ervation management and development of natural resources for our posteri	ty Projects		
supp	orted include development & maintenance of a website to provide information	on and		
	ation resources concerning natural resources conservation, assisting suppo			
	us youth education programs such as Envirothon, FFA, and SDSU Ag-Bio			
of the	e Leopold Conservation Awards, and one-on-one capacity building assistan	ce with		
īūdīv	dual conservation districts			
				

Schedule D (Form 990) 2017	SOUTH DAKOTA ASSOCIATION OF CONSERVATION DISTRICTS, INC	46-6017029	Page 5
Part XIII Supplen	SOUTH DAKOTA ASSOCIATION OF CONSERVATION DISTRICTS, INC nental Information (continued)		
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SCHEDULE E (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

SOUTH DAKOTA ASSOCIATION OF CONSERVATION DISTRICTS, INC

Schools

 Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.
 Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

46-6017029

			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1		
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions,			
	programs, and scholarships?	2		<u> </u>
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program,			
	in a way that makes the policy known to all parts of the general community it serves? If "Yes," please			
	describe If "No," please explain If you need more space, use Part II	3		
				1
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	•••••			
4	Does the organization maintain the following?			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a		
þ	Records documenting that scholarships and other financial assistance are awarded on a racially			
	nondiscriminatory basis?	4b		
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	4c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d		
	If you answered "No" to any of the above, please explain. If you need more space, use Part II			
	•••••••••••••••••••••••••••••••••••••••			
5	Does the organization discriminate by race in any way with respect to		1	ļ
а	Students' rights or privileges?	5a		
b	Admissions policies?	5b		
		_		
С	Employment of faculty or administrative staff?	5c		
ď	Scholarships or other financial assistance?	5d		
_	Constitution po of other innumoral application			
е	Educational policies?	5e		
			I	_
f	Use of facilities?	5f		
_	Athletic programs?	F-		
g	Athletic programs?	5g	+	
h	Other extracurricular activities?	5h	İ	
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II			
				}
				- 1
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" on either line 6a or line 6b, explain on Part II	6b		i
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through			
•	4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II	7		

	Form 990 or 990-EZ) 2017				N DISTRICTS, INC		Page 2
Part II	Supplemental Infor applicable Also prov	mation. Provide the vide any other addition	explanations re nal information	equired by Part I, See instruction	lines 3, 4d, 5h, 6b, s	and 7, as	
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SCHEDULE ! (Form 990) Department of the Treasury Name of the organization Internal Revenue Service

Grants and Other Assistance to Organizations,

Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

OMB No 1545-0047	2017	Open to Public	Inspection

► Go to www.irs.gov/Form990 for the latest information.

Employer identification number 46-6017029 å

X Yes

SOUTH DAKOTA ASSOCIATION OF CONSERVATION DISTRICTS, INC

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and General Information on Grants and Assistance the selection criteria used to award the grants or assistance? Part I

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

330, Falt IV, IIIG 2.1	י וסי מווץ ומכון.	ובווו ווושו וברבואבת ו	ססט, רמונוזי, ווופ בון וטן מוץ וכטווטומו וכטכועכם וווטופ גוומון שטיסטט רמונון כמון טל משטונים ומסטונים ומרכנים	מור זו כמון מב מחלווכי	ונבת זו מתחווים ומו אלי	זכם וא וופפתפת	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Deuel Co Conservation District						not applicable	conservation
PO Box 348 Clear Lake, SD 57226-03		conservation distric	000'6	0			practices application
(2) Brookings Co Conservation District						not applicable	conservation
205 Sixth St Brookings, SD 57006-14d	46-6000067	conservation district	12,405	0			practices follow-up
(3) Brown-Marshall Conservation Distr						not applicable	conservation
PO Box 75 Hecla, SD 57446-0073	46-6000184	conservation distric	12,720	0			practices follow-up
(4) Butte Conservation District						not applicable	conservation
1837 Fifth Avenue Belle Fourche, SD	46-0307933	46-0307933 conservation distric	31,000	0			education
(5) Clark Co Conservation District						not applicable	conservation
101 Warren Road Clark, SD 57225-59	46-6016611	conservation district	24,515	0			practices follow-up
(6) Day Co Conservation District						not applicable	conservation
600 E Hwy 12, Ste 1 Webster, SD 572	46-6000534	conservation distric	12,050	0			practices follow-up
(7) Edmunds Co Conservation District						not applicable	conservation
PO Box 25 Ipswich, SD 57451-0025	46-6003854	conservation distric	7,550	0			practices follow-up
(8) Marshall Co Conservation District						not applicable	conservation
PO Box 8 Britton, SD 57430-0008	46-0259753	46-0259753 conservation district	8,563	0		i	practices follow-up
(9) Miner Co Conservation District						not applicable	conservation
601 W Farmer Ave Ste 1 Howard, SD	46-6000209	46-6000209 conservation distric	7,695	0			practices follow-up
(10) Moody Conservation District						not applicable	conservation
202 E Third Ave Flandreau, SD 57028	46-6000127	conservation distric	18,248	0			practices follow-up
(11) Perkins Co Conservation District						not applicable	conservation
PO Box 189 Bison, SD 57620-0189	46-0277027	46-0277027 conservation district	34,425	0			practices follow-up
(12) Potter Co Conservation District						not applicable	conservation
507 E Garfield Gettysburg, SD 57442-		46-0342080 conservation district	16,144	0			practices follow-up
2 Enter total number of section 501(c)(3) and government organic	n 501(c)(3) and	dovernment organiz	anizations listed in the line 1 table	1 table			15

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2017)

46-6017029

Schedule I (Form 990) (2017)

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.

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(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
-					
2					
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7					•
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	the information re	quired in Part I, line	2, Part III, column (b), and any other addition	al information.
Part I Line 2 Grant recipients must provide written documentation of expenditures. Project reports are required and spot checks are	cumentation of expe	enditures. Project repo	orts are reguired and s	pot checks are	
performed					
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SOUTH DAKOTA ASSOCIATION OF CONSERVATION DISTRICT Part II Continuation of Grants and Other Assistance (a) Name and address of organization or government or government application District	i i						
(a) Name and address of organization of Grants and Ott or government (b) Aboberts Conservation District	VALICA	DISTRICTS, INC				46-6017029	dation number
ation	ther Assi	stance to Gove	to Governments and Organizations in the United States	ganizations in th	e United States		
(13) Roberts Conservation District	(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
D 57262-2	46-6003805	conservation distric	22,618	0		not applicable	conservation practices follow-up
		conservation distric	7.048	0		not applicable	conservation practices follow-up
	003765	46-6003765 conservation distric	7	0		not applicable	conservation practices follow-up
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		Continuation	on Sheet for	Continuation Sheet for Schedule I (Form 990)	orm 990)	Page 1 of 1
Name of the organization SOUTH DAKOTA A	organization AKOTA ASSOCIATION OF CONSERVATION	ON DISTRICTS, IN	S	ļ		Employer identification number 46-6017029
Part III	Part III Continuation of Grants and Other Assistance to Individuals in the United States	Assistance to Inc	dividuals in the Ur	ited States		
	(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
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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.

► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

Open to Public Inspection

Name of the organization SOUTH DAKOTA ASSOCIATION OF CONSERVATION DISTRICTS, INC

46-6017029

Employer identification number

Form 990, Part VI, Section A, Line 1a All members have the same voting rights
Form 990, Part VI, Section A, Line Ib. The executive committee is composed of the president,
vice-president, secretary/treasurer and one other board member. The executive committee drafts
recommendations for the board's consideration but does not have authority to act
Form 990, Part VI, Section A, Line 6 South Dakota's conservation districts are the
Association's members
Form 990, Part VI, Section A, Line 7a The Association's members elect the governing body
which is comprised of seven (7) area directors, a vice-president and president. The membership
is organized into seven (7) geographic regions, who each elect an area director. The
vice-president and president are elected by the membership at the annual meeeting
Form 990, Part VI, Section A, Line 7b Changes to the Association's by-laws are acted upon by
the membership at the Association's annual meeting. By-law changes may be proposed by any
member, group of members, or the board of directors
Form 990, Part VI, Section A, Line 9 Although the officers and directors of the Association
are not located at the Association's mailing address, mail addressed to an officer or director
is forwarded to the officer or director. The current board of directors names and addresses.
are President Karl Jensen, 19918 Dane Church Road, Whitewood SD 57793, Vice president Lyle
Stewart, 29945 200th Street, Pierre SD 57501, South James-Missouri area director Mark
Snedeker, 22870 401st Avenue, Woonsocket SD 57385, Prairie area director Trevor Williams, PO
Box 2, Kadoka SD 57543, Vermillion-Big Sioux area director John D Majeres, 47228 243rd Street,
Dell Rapids SD 57022, Hills area director Dale Lundgren, 19587 4 Mile Road, Sturgis SD 57785,
Coteau area director John Knebel, 12355 440th Avenue, Eden SD 57432, North Missouri area
director Dean Odden, 20361 Green Valley Rd, Ree Heights SD 57371, Northwest area director
Form 990, Part VI, Section B, Line 11b The 990 is not reviewed by the governing body prior to
submission Copies are provided to the governing body at their next scheduled meeting

Form 990, Part VI, Section B, Line 12c The governing body and all employees annually review