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

## **Short Form Return of Organization Exempt From Income Tax**

OMB No 1545-1150

2018

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

Open to Public Inspection

	Inter	nal Reve	nue Service	► Go to www.irs.gov/F	orm990EZ for instructions a	nd the latest inform	ation.			
	Ā	or the	2018 calenda	ar year, or tax year beginning	January 1	, 2018, and ending	Dec	ember 31	, 20	18
	B Check if applicable			C Name of organization		<del></del>	D Emple	oyer identificati	on number	
		Address (	change	Minnehaha Archers Inc				23-72435	33	
		Name cha	ange	Number and street (or P O. box, if mail is	not delivered to street address)	Room/suite	E Telep	hone number	- <u></u>	
	7	Initial retu		P.O. Box 617				605-336-1	979	
	77		rn/terminated	City or town, state or province, country,	and ZIP or foreign postal code	<b></b>	F Grou	p Exemption		
	Amended return  Application pending  Sioux Falls, South Dakota 57101						ber ▶			
	Slouk Fails, South Bakota 37 lot							If the org	anization i	s not
								to attach Sch		
				eck only one) - 501(c)(3) 501	(c) ( 7 ) ◀ (insert no.) ☐ 494	7(a)(1) or 527	•	90, 990-EZ, or		
				✓ Corporation ☐ Trust		Other	<u>`</u>			
				7b to line 9 to determine gross recei			tal assets		_	
				5500,000 or more, file Form 990 inste	-			<b>▶</b> s		
		art I		e, Expenses, and Changes				tions for Pa	rt I)	
	_			the organization used Schedul						
		1		ons, gifts, grants, and similar amo				1		2,700
		2		ervice revenue including government			7	2	-	2,363
		3		ip dues and assessments			}	3		9,645
		4	Investment	•			· · ·	4		0,828
		5a		unt from sale of assets other tha		5a		<del>-</del> -		0,020
		Ь		or other basis and sales expense	•	5b				
		c		ss) from sale of assets other than			i	5c		^
5-	Revenue	6	-	d fundraising events:	mivement (oublider mie ei	3 11 O 11 1 1 1 1 0 0 0 0 1 .	}			
		а	_	ome from gaming (attach Sch	nedule G if greater than	<b>\</b>	1			
_		_			_	6a	0			
61/1/2/50		ь		me from fundraising events (not		o of contribution	ne			
6				aising events reported on line 1			,,,,			
7				h gross income and contribution		6b				
દું		c		t expenses from gaming and fun	•	6c				
		ď		e or (loss) from gaming and fun			ubtract			
			line 6c) .	· · · · · · · · · · · · · · · · · · ·	<del>-</del>		ubiraci .	6d		
		7a	•	s of inventory, less returns and a		7a		- Gu		0
,		b				7b	3,577			
$\sim$				t or (loss) from sales of inventory	_		3,190	7c		200
$\approx$		8 8		nue (describe in Schedule O).	* ** / I U K			8		388
2		9		•	4 10 1 1 1		· · ː	9		3,806
0		10		nue. Add lines 1, 2, 3, 4, 5c, 6d,		<u> </u>	· · -	10	63	3,307
		11		sımılar amounts paid (list in Sch ud to or for members			}	11		0
-	(A	12	•				<b> </b>	12		3,552
(J)	Se	13		her compensation, and employe				13		0
Ŏ	ē			al fees and other payments to inc				14		3,849
_	Expenses	14 15		r, rent, utilities, and maintenance				15	16	5,896
	ш '			iblications, postage, and shippin	_		_			451
		16		nses (describe in Schedule O)				16		7,658
	—	17	France	nses. Add lines 10 through 16 .	17 from Inc 0\	<u> </u>	· · •	17		7,406
	St.	18 19		deficit) for the year (Subtract line				18	25	5,900
	Net Assets	שו		or fund balances at beginning r figure reported on prior year's r			F			
	ţ.	00			•		<u>, , , , , , , , , , , , , , , , , , , </u>	19		3,536
	Š	20		ges in net assets or fund balance			<b>—</b>	20		3,242
		21	Netrassets	or fund balances at end of year.	Compine lines 18 through	<b>2U</b>	▶ !	21	466	5.194

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 10642I

Form 990-EZ (2018)

Pa	rt II Balance Sheets (see the instructions	•		·		
	Check if the organization used Schedule	O to respond to a	ny question in this		<u>-:</u>	
			-	(A) Beginning of year		(B) End of year
22	Cash, savings, and investments			138,536		141,194
23	Land and buildings		_	325,000		325,000
24	Other assets (describe in Schedule O)		}		24	
25 26	Total assets			463,536	26	466,194
27	•		<del>}-</del>			400.404
	Net assets or fund balances (line 27 of column  Statement of Program Service Accom			463,536	21	466,194
	Check if the organization used Schedule	•		· ·		Expenses
Wha	t is the organization's primary exempt purpose?				٠,	quired for section
	, , , , , ,					(c)(3) and 501(c)(4) anizations, optional for
as n	cribe the organization's program service accompli- neasured by expenses. In a clear and concise m	nanner, describe the			othe	
	ons benefited, and other relevant information for ea	<del></del>				T
28	Junior Olympic Archery Development program for you instructional program of our club	outh. Approx. 100+ k				
	(Caraba & ) (6 bb a account		nto shook boro		000	
29		includes foreign gra			28a	3,202
29	Indoor and outdoor tournaments for the public at large	<u>ge</u>				
						1
	(Grants \$ ) If this amount	includes foreign ara	ints check here	▶ [7]	29a	227
30	Indoor and outdoor leagues for members of this club					221
	midder and databor leagues for members or this class	<i></i>	·			
						İ
	(Grants \$ ) If this amount	includes foreign gra	ints, check here .	▶ 🗆	30a	1,350
31	Other program services (describe in Schedule O)					
	(Grants \$ ) If this amount	includes foreign gra	nts, check here .	<u>. ▶</u> 🔲 ;	31a	200
	Total program service expenses (add lines 28a t				32	4,978
Par						
	Check if the organization used Schedule	O to respond to a			<u> </u>	<u> </u>
	(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employed benefit plans, and deferred compensation	0	Estimated amount of other compensation
Doug	Ellis, President					
4780	5 Cody Road, Sioux Falls, SD 57108	10	0		0	0
Matt	Schrader, Vice President					
2708	S Sandstone Cr, Sioux Falls, SD 57103	10	0		0	0
Tom	Fullerton, Treasurer				-	
	S Roosevelt Cr, Sioux Falls, SD 57106	15	0		0	0
	a Aramayo, Secretary					
	W Batcheller Lane, Sioux Falls, SD 57105	5	0		0	0
	Winseman, Past President					
	S Mogen Ave, Sioux Falls, SD 57108	1	0		0	0
	DiSanto, Board Member		_		_	_
300 E	Plum Creek Road, Sioux Falls, SD 57105	1	0		0	0
<b></b>		-				
	<del>-</del>				+	
					+	<del></del>
					+	
		<del></del>		<del>-</del>	+	
					1	



Part				
	instructions for Part V.) Check if the organization used Schedule O to respond to any question in this	s Part	_	
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a		Yes	No
33	detailed description of each activity in Schedule O	33		✓
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions	34		1
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		1
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		7
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		1
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0			Ski)
ь 38а	Did the organization file <b>Form 1120-POL</b> for this year?	37b 38a		✓ ✓
þ	If "Yes," complete Schedule L, Part II and enter the total amount involved	1882.		
39	Section 501(c)(7) organizations. Enter:			
a b	Initiation fees and capital contributions included on line 9			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► ; section 4912 ► ; section 4955 ►			
ь	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958			
-	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		<b>√</b>
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed			
	on organization managers or disqualified persons during the year under sections 4912,			
	4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
. е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		<u> </u>
41	List the states with which a copy of this return is filed ▶ None			
42a		05-75	9-079	5
	Located at ► 2501 S Roosevelt Cr, Sioux Falls, SD 57106 ZIP + 4 ►	571		
D	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	Yes	No
	If "Yes," enter the name of the foreign country ▶	420	N. Page	v Webbil
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
С	At any time during the calendar year, did the organization maintain an office outside the United States? . If "Yes," enter the name of the foreign country ▶	42c		✓_
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year		. )	• <u> </u>
44a	completed instead of Form 990-EZ	<u>44</u> a	Yes	No ✓
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		<b>√</b>
С	Did the organization receive any payments for indoor tanning services during the year?	44c		<b>√</b>
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an			
AF-	explanation in Schedule O	44d		<del>-</del>
45a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		<u> </u>
J		45h		

									Yes	No
46		he organization engage, directly or in indidates for public office? If "Yes," o						46		<b>—</b>
Part \	۷I	Section 501(c)(3) Organization	s Only	···						
		All section 501(c)(3) organization 50 and 51.	s must answer que	stions 47–49b ar	nd 52, and	I complete th	e table	es fo	or line	es
		Check if the organization used Sc	hedule O to respond	to any question is	n this Part	VI	<u> </u>	<u></u>	٠.	
				·			_	]	Yes	No
47		he organization engage in lobbying If "Yes," complete Schedule C, Par		section 501(h) elec				47		
48	Is the	e organization a school as described in	n section 170(b)(1)(A)(i	i)? If "Yes," comple	te Schedul	eE		48		
		he organization make any transfers t					. 4	49a		
		es," was the related organization a se						49b		
50		plete this table for the organization's oyees) who each received more thar								
	empi	oyees) who each received more than	<del></del>	<del></del>		ealth benefits,	e, ente		one.	
	(a)	Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MIS	contribut	tions to employee lans, and deferred mpensation	(e) Esti other		d amou pensati	
							-			
					-					
				_						
	<b>-</b>									
-										
51	Com	number of other employees paid over plete this table for the organization' ,000 of compensation from the orga	s five highest compe	ensated independe	nt contrac	_ tors who each	receiv	ved ı	more	thar
	(a)	Name and business address of each independ	lent contractor	(b) Type of s	ervice	(c)	Comper	nsatio	n	
				-						
				<del></del>		_				
					<del>-</del> .					
`										
		number of other independent contra	_		.▶					
		the organization complete Schedu pleted Schedule A	lle A? Note: All se		_		ı a . <b>⊳</b> ∐ <b>'</b>	Vac	[Z] N	ما
	<u>.</u>	of perjury, I declare that I have examined this								
true, corr	ect, an	d complete Declaration of preparer (other than	officer) is based on all info	mation of which prepare	er has any kno	owledge			/	
Sign		Signature of officer	feel st	2		Date	15	7	19	
Here	Tom Fullerton, Treasurer									
	Щ,	Type or print name and title			<b></b>		T 5=			
Paid		Print/Type preparer's name	Preparer's signature		Date	Check 🗀		IN		
Prepa		Final company	1		···	self-employ	yea			
Use C	nly	Firm's name ► Firm's address ►				Firm's EIN ▶ Phone no				
May the	106	discuss this return with the preparer	chown above? See "	etructione		i none no				

## SCHEDULE O (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

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

20**18** 

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

Employer identification number

Minnehaha Archers Inc	23-7243533					
Item 1: Donations: 1,675.18; JOAD donations: 1,025; Grants: 0. Total: 2700.18						
Item 2: Tournament registration: 3,270.25; Indoor range public fees: 65; Outdoor paypost: 1207; Bowhunter league fees: 855.73; Summer Field						
league: 238.50; Spot league fees 1979.09; JOAD league session fees: 4,747.31. Total: 12,362.88						
ltem 3: Memberships and renewals: 29,644.61						
Item 4: Investment income: Voyage credit union interest checking: 9.70, Vanguard Wellesley: 4,731.83; Vanguard Dividend Growth: 1,612.80						
Vanguard Equity income: 1954.79; Vanguard Windsor II: 1900.04; Vanguard US Growth: 546.74, Vanguard	ard High Dividend Yield: 72.06					
Total interest, dividends and long and short term cap gains. 10,827.96						
Item 7a: Pop: 936.40, Candy: 17.00; Paper targets: 1,067.00; Key cards: 1,450.00; JOAD Pins, awards, la	nyards. 7.00; JOAD shirts <sup>.</sup> 100					
Total: 3,577,40						
Item 7b. Pop: 346.16; Paper targets: 447.25; Key cards: 2,396.25 Total: 3,189.66						
Item 8. Tournament concessions. 134.94, JOAD Instructor classes. 650, bow locker rental. 713.38; Awa	rds Banquet registration: 1,038.27					
Introduction to archery course: 1,269.25 Total: 3,805.84						
Item 11: Trophies, payouts, awards: 502.09; Key card reimbursement: 40; league paybacks: 848; Memorials & sympathies: 167.19						
Banquet & Awards. 1,994.92 Total: 3,552.20						
Item 13: Cleaning: 1,255.22; Snow removal: 1,496.33; Mowing: 4,483.06; septic tank service: 1,614.53 Total: 8,849.14						
Item 14: Mics indoor range maintenance expenses: 7,096.36; Outdoor range maintenance expenses: 1,0	011.68; website hosting fees: 261.76					
Sioux Falls Utilities (water): 586.22; Eastern Farmers Coop (Propane): 2,537.39; Garbage services: 576.	16; Sioux Valley Energy (indoor					
electric): 2,689.00; Xcel Energy (outdoor electric): 209.95; Telephone and internet service: 1,167.10; Outdoor range construction: 112.36						
Outdoor range toilet service: 647.52 Total: 16,895.50						
Item 15: Postage: 82; Printing: 369.09 Total: 451.09						
Item 16: Insurance (Liability and Property): 4,140.36; 3D targets, vitals inserts, foam arrow stops: 959.89	; Tournament expenses (all): 226.69					
Office supplies and safe deposit box fee: 70.71; Work party expenses: 193.55; SD Sales and Use tax (20	17 taxes paid in 2018): 2,067.01					
Total: 7,658.21						
<u></u>						

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