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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491318003069

OMB No 1545-0052

2018

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public. ▶ Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

| For | caler | ndar year 2018, or tax year beginning 01-01-20 |)18 , a | nd ending 12-31- | ·2018 | |
|--------------------|----------|--|-----------------------|---|---|---|
| | | indation UEEN CHARITABLE FOUNDATION | | A Employer Id 82-2581817 | entification numbe | er |
| Num | hor and | street (or P.O. box number if mail is not delivered to street address) | Room/suite | | | |
| | D BOX 3 | | Roomy suite | B Telephone nu (605) 432-4563 | ımber (see ınstructio | ns) |
| | | , state or province, country, and ZIP or foreign postal code D 57252 | L | | application is pendin | g, check here |
| | | | | | | · - |
| G C | neck all | | former public charity | | ganızatıons, check he | ▶ ⊔ |
| | | ☐ Final return ☐ Amended return | | | rganizations meeting :k here and attach co | |
| | | ☐ Address change ☐ Name change | | E If private fo | undation status was t | terminated |
| _ | | pe of organization $oldsymbol{arPrime}$ Section 501(c)(3) exempt private a 4947(a)(1) nonexempt charitable trust $oxdot$ Other taxable | | under section | on 507(b)(1)(A), chec | ck here ▶ Ш |
| | | | Cash 🗹 Accru | E If the found | ation is in a 60-mont | h taumanatian — |
| of ' | year (f | room Part II, col (c), ▶\$ 1,039,156 CPart I, column (d) must | | | in 507(b)(1)(B), chec | |
| Pa | rt I | Analysis of Revenue and Expenses (The total | (a) Revenue and | | | (d) Disbursements |
| | | of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) | expenses per books | (b) Net investment income | (c) Adjusted net income | for charitable purposes (cash basis only) |
| | 1 | Contributions, gifts, grants, etc , received (attach schedule) | 294,460 | | | |
| Revenue | 2 | Check ▶ ☐ If the foundation is not required to attach Sch B | | | | |
| | 3 | Interest on savings and temporary cash investments | | | | |
| | 4 | Dividends and interest from securities | 2,990 | 2,990 | | |
| | 5a | Gross rents | 12,000 | 12,000 | | |
| | ь | Net rental income or (loss)12,000 | | | | |
| | 6a | Net gain or (loss) from sale of assets not on line 10 | 1,182 | | | |
| | ь 7 | Gross sales price for all assets on line 6a 202,186 Capital gain net income (from Part IV, line 2) | | 1,182 | | |
| ш. | 8 | Net short-term capital gain | | , | | |
| | 9 | Income modifications | | | | |
| | 10a | Gross sales less returns and allowances | | | | |
| | ь | Less Cost of goods sold | | | | |
| | С | Gross profit or (loss) (attach schedule) | | | | |
| | 11 | Other income (attach schedule) | | | | |
| | 12 | Total. Add lines 1 through 11 | 310,632 | 16,172 | | |
| | 13 | Compensation of officers, directors, trustees, etc | 0 | 0 | | C |
| | 14 | Other employee salaries and wages | | | | |
| es | 15 | Pension plans, employee benefits | | | | |
| Sui | 16a | Legal fees (attach schedule) | 90 | 0 | | 90 |
| Expenses | ь | Accounting fees (attach schedule) | | | | |
| | С | Other professional fees (attach schedule) | | | | |
| and Administrative | 17 | Interest | | | | |
| stra | 18 | Taxes (attach schedule) (see instructions) | 81 | 81 | | C |
| Ξ | 19 | Depreciation (attach schedule) and depletion | | | | |
| Ē | 20 | Occupancy | | | | |
| ₹ D | 21 | Travel, conferences, and meetings | | | | |
| a | 22 | Printing and publications | | | | |
| Operating | 23 | Other expenses (attach schedule) | 8,704 | 0 | | 1,456 |
| rat | 24 | Total operating and administrative expenses. | | | | |
| <u>8</u> | | Add lines 13 through 23 | 8,875 | | | 1,546 |
| ں | 25 | Contributions, gifts, grants paid | 244,720 | | | 367,159 |
| | 26 | Total expenses and disbursements. Add lines 24 and 25 | 253,595 | 81 | | 368,705 |
| | 27 | Subtract line 26 from line 12 | | | | |
| | a | Excess of revenue over expenses and disbursements | 57,037 | | | |
| | ь | Net investment income (if negative, enter -0-) | 21,7557 | 16,091 | | |
| | c | Adjusted net income (if negative, enter -0-) | | , | | |
| Ear | D | work Deduction Act Notice are instructions | 1 | | | |

| | should be for end-of-year amounts only (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
|-----|--|----------------|----------------|-----------------------|
| 1 | Cash—non-interest-bearing | 702,030 | 448,178 | 448,178 |
| 2 | Savings and temporary cash investments | | | |
| 3 | Accounts receivable ▶ | | | |
| | Less allowance for doubtful accounts ▶ | | | |
| 4 | Pledges receivable ► | | | |
| | Less allowance for doubtful accounts ▶ | | | |
| 5 | Grants receivable | | | |
| 6 | Receivables due from officers, directors, trustees, and other | | | |
| | disqualified persons (attach schedule) (see instructions) | | | |
| 7 | Other notes and loans receivable (attach schedule) | | | |
| | Less allowance for doubtful accounts ▶ | | | |
| 8 | Inventories for sale or use | | | |
| 9 | Prepaid expenses and deferred charges | | | |
| 10a | Investments—U S and state government obligations (attach schedule) | | | |
| ь | Investments—corporate stock (attach schedule) | | | |
| С | Investments—corporate bonds (attach schedule) | | | |
| 11 | Investments—land, buildings, and equipment basis ► 355,254 | | | |
| | Less accumulated depreciation (attach schedule) | 355,254 | 355,254 | 355,254 |
| 12 | Investments—mortgage loans | | | |
| 13 | Investments—other (attach schedule) | 53,821 | 243,933 | 235,724 |
| 14 | Land, buildings, and equipment basis ► | · | | · |
| | Less accumulated depreciation (attach schedule) ▶ | | | |
| 15 | Other assets (describe • | | | |
| | -, | | | |

16 Total assets (to be completed by all filers—see the 1,111,105 1,047,365 1,039,156 instructions Also, see page 1, item I) 17 Accounts payable and accrued expenses . 1,998 215,000 92,561 18 Grants payable 19 20 Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule). 21

Liabilities 22 Other liabilities (describe ▶_ 23 215,000 94,559 Foundations that follow SFAS 117, check here ▶ □ and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted

| 25 | Temporarily restricted | | |
|----------------------|--|-----------|-----------|
| 26 | Permanently restricted | | |
| 5 | Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. | | |
| 27 28 29 30 | Capital stock, trust principal, or current funds | 0 | 0 |
| 28 | Paid-in or capital surplus, or land, bldg , and equipment fund | 0 | 0 |
| 29 | Retained earnings, accumulated income, endowment, or other funds | 896,105 | 952,806 |
| 30 | Total net assets or fund balances (see instructions) | 896,105 | 952,806 |
| 31 | Total liabilities and net assets/fund balances (see instructions) . | 1,111,105 | 1,047,365 |

Total net assets or fund balances at beginning of year-Part II, of-year figure reported on prior year's return) 896,105 2 57,037 2 Enter amount from Part I, line 27a 3 3 Other increases not included in line 2 (itemize) 4 4 Add lines 1, 2, and 3 953,147

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Decreases not included in line 2 (itemize) ▶ .

5

6

341

952,806

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Page **3**

| | e the kınd(s) of property sold (e g , rehouse, or common stock, 200 shs | | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) |
|--|--|----------------------------------|--|---|---|
| 1aSee Addıtıonal Data Table | e | | | | |
| b | | | | | |
| С | | | | | |
| d | | | | | |
| <u>-</u> | | | | | |
| | (f) | | (g) | (| h) |
| (e) Gross sales price | Depreciation allowed (or allowable) | Cost or d | other basis ense of sale | Gain o | r (loss)) mınus (g) |
| a See Addıtıonal Data Table | e | | | | |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| Complete only for assets | showing gain in column (h) and ow | ned by the foundation (| on 12/31/69 | , | IV. |
| complete only for assets | (i) | <u> </u> | (k) | | l) h) gain minus |
| (i) FMV as of 12/31/69 | Adjusted basis as of 12/31/69 | Excess | of col(ı) (j), ıf any | col (k), but not | less than -0-) or om col (h)) |
| a See Additional Data Table | e | | | | |
| b | | | | | |
| С | | | | | |
| d | | | | | |
| <u>-</u> | | | | | |
| | gain or (loss) as defined in sections 1 rt I, line 8, column (c) (see instruction | ons) If (loss), enter -0 | · } | 3 | 1,182 |
| Part V Qualification L | Inder Section 4940(e) for Re | duced Tax on Net | Investment In | come | |
| For optional use by domestic p | rivate foundations subject to the sec | tion 4940(a) tax on ne | t investment incom | ne) | |
| f section 4940(d)(2) applies, le | ave this part blank | | | | |
| | e section 4942 tax on the distributat t qualify under section 4940(e) Do | | ın the base period | 7 \ \ \ \ \ \ \ \ \ \ \ | es 🗹 No |
| 1 Enter the appropriate am | nount in each column for each year, | see instructions before | making any entrie | S | |
| (a) Base period years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitabl | le-use assets | (d) Distribution rati (col (b) divided by c | |
| 2017 | 0 | | 218,885 | ((-) 4 | 0 000000 |
| 2016 | - | | , | | |
| 2015 | | | | | |
| 2014 | | | | | |
| 2013 | | | | | |
| 2 Total of line 1, column (c | d) | | 2 | | 0 000000 |
| , | for the 5-year base period—divide t | | —— | | |
| number of years the foun | dation has been in existence if less t | than 5 years . ´. | ′ ′ | | 0 000000 |
| 4 Enter the net value of no | ncharitable-use assets for 2018 from | n Part X, line 5 | 4 | | 1,037,485 |
| 5 Multiply line 4 by line 3 | | | 5 | | 0 |
| 6 Enter 1% of net investme | ent income (1% of Part I, line 27b) | | 6 | | 161 |
| 7 Add lines 5 and 6 | | | 7 | | 161 |
| | ons from Part XII, line 4 , | | 8 | | 368,705 |
| | eater than line 7, check the box in Pa | | | ng a 1% tax rate Se | |
| instructions | | · | · | | |

Page **6**

| 101111 | 1 330 11 (2010) | | | | | | | | | | age u |
|------------|--|---------|--|--------------------------------------|-----------------|-----------------|----------------|-------|---------|---------|--------------|
| Pa | rt VIII-B Statements Regard | ding | Activities for Which | Form 4720 May Be | Required (| <i>continue</i> | d) | | | | |
| 5a | During the year did the foundation p | pay o | r incur any amount to | | | | | | | Yes | No |
| | (1) Carry on propaganda, or otherw | vise a | ttempt to influence legisl | ation (section 4945(e))? | | Yes | | No | | | |
| | (2) Influence the outcome of any sp | pecific | public election (see sect | tion 4955), or to carry | | 1es | | 140 | | | |
| | on, directly or indirectly, any vo | ter re | gistration drive? | | | □ v | ~ | | | | |
| | (3) Provide a grant to an individual | for tr | avel, study, or other sim | ılar purposes? | | Yes | ᆿ | No | | | |
| | (4) Provide a grant to an organizati | | • | | 4 | ∐ Yes | ✓ | No | | | |
| | in section 4945(d)(4)(A)? See in | | | · - | | | | | | | |
| | (5) Provide for any purpose other t | | | | • • | ✓ Yes | Ш | No | | | |
| | , , , | | | * ** | | _ | _ | | | | |
| | educational purposes, or for the | • | · · | | • | Ų Yes | ✓ | No | | | |
| Ь | If any answer is "Yes" to 5a(1)-(5), | | = | | | ribed in | | | | | |
| | Regulations section 53 4945 or in a | curre | nt notice regarding disas | ster assistance? See instr | uctions | | | | 5b | Yes | |
| | Organizations relying on a current n | otice | regarding disaster assist | ance check here | | 🕨 | | | | | |
| C | If the answer is "Yes" to question 5a | a(4), | does the foundation clain | n exemption from the | | | | | | | |
| | tax because it maintained expenditu | ıre re | sponsibility for the grant | [?] | | ✓ Yes | | No | | | |
| | If "Yes," attach the statement require | red b | y Regulations section 53 | 4945-5(d) 🔧 | | L Tes | ш | MO | | | |
| 6a | Did the foundation, during the year, | | = | | ıms on | | | | | | |
| O u | | | | | | | | | | | |
| | a personal benefit contract? | | | | | .└ Yes | ✓ | No | 6. | | NI - |
| Ь | Did the foundation, during the year, | , pay | premiums, directly or inc | ilrectly, on a personal be | enerit contract | · · · | • | | 6b | | No |
| | If "Yes" to 6b, file Form 8870 | | | | | | | | | | |
| 7a | At any time during the tax year, wa | s the | foundation a party to a p | prohibited tax shelter tra | nsaction? | Yes | ✓ | No | | | |
| b | If yes, did the foundation receive ar | ny pro | ceeds or have any net in | come attributable to the | transaction? | | | | 7b | | |
| 8 | Is the foundation subject to the sect | tion 4 | 960 tax on payment(s) o | of more than \$1,000,000 | ın remuneratı | on or | | | | | |
| | excess parachute payment during th | he ye | ar [?] | | | Yes | J | No | | | |
| | Information About (| Offic | ers Directors Trust | tees Foundation Ma | anagers Hi | | | | VAAC | | |
| Pa | and Contractors | JIIIC | ers, Directors, Trust | tees, roundation me | anayers, m | gilly Pal | u Ei | пріо | уссэ, | | |
| | | | | | | | | | | | |
| _1_ | List all officers, directors, trustee | | | • | | | | 1 | | | |
| | (a) Name and address | (| b) Title, and average hours per week | (c) Compensation (If not paid, enter | employee be | ributions t | | (e) | Exper | se acc | ount, |
| | (a) Name and address | | devoted to position | -0-) | deferred co | | | 0 | ther a | lowand | es |
| See | Additional Data Table | | | , | | | | 1 | | | |
| | reducional para rapic | - | | | | | | | | | |
| | | | | | | | | + | | | |
| | | | | | | | | | | | |
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| | | | | | | | | | | | |
| | | | | | | | | | | | |
| 2 | Compensation of five highest-pa | id en | nplovees (other than t | hose included on line | 1—see instru | ctions). I | f no | ne, e | nter " | NONE. | 71 |
| | | | | | | ributions t | | | | | |
| (a) | Name and address of each employee | paid | (b) Title, and average | (a) Cammanashan | | ee benefit | | (e) | Expen: | se acco | unt, |
| | more than \$50,000 | | hours per week devoted to position | (c) Compensation | | d deferred | 1 | ot | her all | owance | es |
| | | | devoted to position | | comp | ensation | | | | | |
| NON | E | | | | | | | | | | |
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| | | | | | | | | | | | |
| Tota | I number of other employees paid ov | er \$5 | 0,000 | | | . • | $\neg \dagger$ | | | | 0 |
| | | +- | , · · · | | <u> </u> | • | | For | m QQ | D-PF | |
| | | | | | | | | FUL | | (| ZUIO. |

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|--|---------------------------------------|---------------------------|
| Part VIII Information About Officers, Directors, Trustees, F and Contractors (continued) | Foundation Managers, Highly Pa | nid Employees, |
| 3 Five highest-paid independent contractors for professional service | es (see instructions). If none, enter | "NONE". |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| Total number of others receiving over \$50,000 for professional services | | - 0 |
| Part IX-A Summary of Direct Charitable Activities | | 0 |
| List the foundation's four largest direct charitable activities during the tax year. Include releving anity and other beneficiaries served, conferences convened, research papers produc | | of Expenses |
| 1 | | |
| | | |
| 2 | | |
| 3 | | |
| | | |
| 4 | | |
| | | |
| Part IX-B Summary of Program-Related Investments (see in | nstructions) | |
| Describe the two largest program-related investments made by the foundation during the | e tax year on lines 1 and 2 | Amount |
| 1 | | |
| | | |
| | | |
| All other program-related investments See instructions | | |
| 3 | | |
| Total. Add lines 1 through 3 | | • 0 |
| | | Form 990-PF (2018) |

2

3a 3h

4

5

368.705

368.544

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161

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

2

3

4

5

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51,713

51,713

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0

| 0-PF | (2 | 01 | 8 |) | |
|------|----|----|---|---|--|
| VIII | | | 1 | | |

b Total for prior years

a From 2013. **b** From 2014. . . . c From 2015. . . d From 2016. e From 2017.

| 0-PF | (2 | 01 | 8 |) | |
|------|----|----|---|---|---|
| V | Į | | | | _ |

Form 99 Part XIII

Undistributed Income (see instructions) 1 Distributable amount for 2018 from Part XI, line 7

4 Qualifying distributions for 2018 from Part XII, line 4 🕨 \$ a Applied to 2017, but not more than line 2a

b Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election required—see instructions).

5 Excess distributions carryover applied to 2018

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

(If an amount appears in column (d), the

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2019.

10 Analysis of line 9

a Excess from 2014. . . **b** Excess from 2015. . c Excess from 2016. . . . d Excess from 2017. . . e Excess from 2018. . .

Subtract lines 7 and 8 from line 6a

indicated below:

d Applied to 2018 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a))

2 Undistributed income, if any, as of the end of 2018 a Enter amount for 2017 only.

Excess distributions carryover, if any, to 2018

f Total of lines 3a through e.

(a)

Corpus

306.054

306,054

306,054

306.054

0

(b)

Years prior to 2017

(c)

2017

10.938

| | 11 330 11 (2010) | | | | | rage 10 |
|--------|---|---------------------------------------|--|--|--|--------------------------------|
| F | Part XIV Private Operating Found | ations (see ınstr | uctions and Part V | II-A, question 9) | | |
| | If the foundation has received a ruling or det foundation, and the ruling is effective for 20 | 18, enter the date o | of the ruling. | ▶∟_ | | |
| b | Check box to indicate whether the organization | on is a private oper | atıng foundatıon des | cribed in section $\ lue$ | 4942(j)(3) or L | 4942(J)(5) |
| 2a | Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | (e) Total |
| | income from Part I or the minimum investment return from Part X for each | (a) 2018 | (b) 2017 | (c) 2016 | (d) 2015 | (e) Iotai |
| | year listed | | | | | |
| b | 85% of line 2a | | | | | |
| С | Qualifying distributions from Part XII, line 4 for each year listed | | | | | |
| d | Amounts included in line 2c not used directly for active conduct of exempt activities | | | | | |
| e | Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c | | | | | |
| 3 | Complete 3a, b, or c for the alternative test relied upon | | | | | |
| а | "Assets" alternative test—enter | | | | | |
| | (1) Value of all assets | | | | | |
| | (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b | "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed | | | | | |
| С | "Support" alternative test—enter | | | | | |
| | (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section | | | | | |
| | 512(a)(5)), or royalties) (2) Support from general public | | | | | |
| | and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) | | | | | |
| | (3) Largest amount of support from an exempt organization | | | | | |
| | (4) Gross investment income | | | | | |
| | Supplementary Information | (Complete this | part only if the f | foundation had s | 5,000 or more | in |
| Ľ | assets at any time during the | | | | • | |
| 1 a | Information Regarding Foundation Mana List any managers of the foundation who hav before the close of any tax year (but only if | e contributed more | | | | n |
| ь | List any managers of the foundation who own | | | | | |
| | ownership of a partnership or other entity) o | of which the foundat | ion has a 10% or gr | eater interest | | |
| 2 | Information Regarding Contribution, Gra | ant, Gift, Loan, Sc | holarship, etc., Pro | grams: | | |
| | Check here ▶ ☐ If the foundation only make unsolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, are | tion makes gifts, gra | ants, etc to individua | | | |
| a | The name, address, and telephone number of VALLEY QUEEN CHEESE FOUNDATION ATTN PO BOX 351 MILBANK, SD 57252 (605) 432-4563 | or e-mail address of | the person to whom | applications should | be addressed | |
| b | The form in which applications should be sub APPLICATION CAN BE REQUESTED BY CALLI | | tion and materials th | ney should include | | |
| С | Any submission deadlines NONE - ACCEPTING APPLICATIONS YEAR RO | DUND | | | | |
| d | Any restrictions or limitations on awards, suc | | al areas, charitable f | ields, kınds of ınstitu | itions, or other | |
| | factors ORGANIZATIONS THAT QUALIFY AS EXEMPT FOUNDATIONS ARE ELIGIBLE FOR AWARDS SECONDARY COLLEGE AND TECHNICAL SCH RIGHT TO DETERMINE WHICH ORGANIZATION | ALL GRANTS, WITH OOL TUITION, WILL | H THE POSSIBLE EXC BE MADE TO 501(C | CEPTION OF INDIVID (3) ORGANIZATION | OUAL SCHOLARSHIPS NS THE FOUNDATION | S FOR POST- IN RESERVES THE |

THE GRANT RECIPIENTS CONFIRMING THE FUNDS WERE UTILIZED AS GRANTED



| nter gros | s amounts unless otherwise indicated | Unrelated bu | ısıness ıncome | Excluded by section | 512, 513, or 514 | (e) Related or exempt |
|---|---|--|----------------------|---------------------------------------|--------------------|--|
| _ | m service revenue | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | function income (See instructions) |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | and contracts from government agencies | | | | | |
| 2 Memb | ership dues and assessments | | | | | |
| 3 Intere invest | st on savings and temporary cash ments | | | | | |
| | nds and interest from securities | | | 14 | 2,990 | |
| | ntal income or (loss) from real estate | | | | | |
| | -financed property | | | _ | | |
| | debt-financed property | | | 16 | 12,000 | |
| | ntal income or (loss) from personal property investment income. | | | | | |
| | r (loss) from sales of assets other than | | | | | |
| invent | • , | | | 18 | 1,182 | |
| 9 Net in | come or (loss) from special events | | | | 1,102 | |
| | profit or (loss) from sales of inventory | | | | | |
| | revenue a | | | | | |
| | | | | | | |
| _ | | | | | | |
| | | | | | | |
| d | | | | | | |
| d e | | | | | | |
| d e . 2 Subto | tal Add columns (b), (d), and (e). | | 0 | | 16,172 | |
| d e 2 Subto 3 Total | tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) | | 0 | | 16,172 | |
| d e 2 Subto 3 Total (See v | tal Add columns (b), (d), and (e). | lations) | | 13 | <u>'</u> | |
| d e 2 Subto 3 Total (See w | tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu 1-B Relationship of Activities to the | lations) ne Accomplish income is report | | 13 pt Purposes F Part XVI-A contribut | ted importantly to | 16,172 |
| d e 2 Subto 3 Total (See w Part XV Line No. | tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations) ne Accomplish income is report | | 13 pt Purposes F Part XVI-A contribut | ted importantly to | 16,172 |
| d e 2 Subto 3 Total (See w Part XV Line No. | tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations) ne Accomplish income is report | | 13 pt Purposes F Part XVI-A contribut | ted importantly to | 16,172 |
| d e 2 Subto 3 Total (See w Part XV Line No. | tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations) ne Accomplish income is report | | 13 pt Purposes F Part XVI-A contribut | ted importantly to | 16,172 |
| d e 2 Subto 3 Total (See w Part XV Line No. | tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations) ne Accomplish income is report | | 13 pt Purposes F Part XVI-A contribut | ted importantly to | 16,172 |
| d e 2 Subto 3 Total (See w Part XV Line No. | tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations) ne Accomplish income is report | | 13 pt Purposes F Part XVI-A contribut | ted importantly to | 16,172 |
| d e 2 Subto 3 Total (See w Part XV Line No. | tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations) ne Accomplish income is report | | 13 pt Purposes F Part XVI-A contribut | ted importantly to | 16,172 |
| d e 2 Subto 3 Total (See w Part XV Line No. | tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations) ne Accomplish income is report | | 13 pt Purposes F Part XVI-A contribut | ted importantly to | 16,172 |
| d e 2 Subto 3 Total (See w Part XV Line No. | tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations) ne Accomplish income is report | | 13 pt Purposes F Part XVI-A contribut | ted importantly to | 16,172 |
| d e 2 Subto 3 Total (See w Part XV | tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations) ne Accomplish income is report | | 13 pt Purposes F Part XVI-A contribut | ted importantly to | 16,172 |
| d e 2 Subto 3 Total (See w Part XV Line No. | tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations) ne Accomplish income is report | | 13 pt Purposes F Part XVI-A contribut | ted importantly to | 16,172 |
| d e 2 Subto 3 Total (See w Part XV Line No. | tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations) ne Accomplish income is report | | 13 pt Purposes F Part XVI-A contribut | ted importantly to | 16,172 |
| d e 2 Subto 3 Total (See w Part XV Line No. | tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations) ne Accomplish income is report | | 13 pt Purposes F Part XVI-A contribut | ted importantly to | 16,172 |
| d e 2 Subto 3 Total (See w Part XV Line No. | tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations) ne Accomplish income is report | | 13 pt Purposes F Part XVI-A contribut | ted importantly to | 16,172 |
| d e 2 Subto 3 Total (See w Part XV Line No. | tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations) ne Accomplish income is report | | 13 pt Purposes F Part XVI-A contribut | ted importantly to | 16,172 |
| d e 2 Subto 3 Total (See w Part XV Line No. | tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations) ne Accomplish income is report | | 13 pt Purposes F Part XVI-A contribut | ted importantly to | 16,172 |
| d e 2 Subto 3 Total (See w Part XV Line No. | tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations) ne Accomplish income is report | | 13 pt Purposes F Part XVI-A contribut | ted importantly to | 16,172 |
| d e 2 Subto 3 Total (See w Part XV | tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations) ne Accomplish income is report | | 13 pt Purposes F Part XVI-A contribut | ted importantly to | 16,172 |
| d e 2 Subto 3 Total (See w Part XV | tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations) ne Accomplish income is report | | 13 pt Purposes F Part XVI-A contribut | ted importantly to | 16,172 |
| d e 2 Subto 3 Total (See w Part XV | tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations) ne Accomplish income is report | | 13 pt Purposes F Part XVI-A contribut | ted importantly to | 16,172 |
| d e 2 Subto 3 Total (See w Part XV Line No. | tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations) ne Accomplish income is report | | 13 pt Purposes F Part XVI-A contribut | ted importantly to | 16,172 |
| d e 2 Subto 3 Total (See w Part XV Line No. | tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations) ne Accomplish income is report | | 13 pt Purposes F Part XVI-A contribut | ted importantly to | 16,172 |
| d e 2 Subto 3 Total (See w Part XV Line No. | tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations) ne Accomplish income is report | | 13 pt Purposes F Part XVI-A contribut | ted importantly to | 16,172 |

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|-------|--|--|
| | Information Regarding Transfers To and Transactions and Relationships With Noncharitable | |
| | Exempt Organizations | |

| Lair VATI | Exempt Organi | zations | | | | | | |
|----------------------|---|-----------------------|---|---------------------|-----------------------------------|---------------------------------|-------------|-----------------|
| | | | any of the following with a in section 527, relating to p | | | | Yes | No |
| a Transfers | from the reporting foun | dation to a noncha | arıtable exempt organızatıo | n of | | | | |
| (1) Cash | | | | | | 1a(1) | | No |
| (2) Othe | rassets | | 1a(2) | | No | | | |
| b Other tran | nsactions | | | | | | | |
| (1) Sale: | s of assets to a nonchar | ıtable exempt orga | anization | | | 1b(1) | | No |
| (2) Purc | hases of assets from a r | oncharitable exem | npt organization | | | 1b(2) | | No |
| (3) Rent | al of facilities, equipmer | nt, or other assets. | | | | 1b(3) | | No |
| (4) Reim | bursement arrangemen | ts | | | | 1b(4) | | No |
| | | | | | | 1b(5) | | No |
| (6) Perfo | rmance of services or m | embership or fund | raising solicitations | | | 1b(6) | | No |
| c Sharing o | f facilities, equipment, n | nailing lists, other | assets, or paid employees. | | | 1c | | No |
| of the god | ds, other assets, or ser | vices given by the | e the following schedule Correporting foundation If the column (d) the value of the | e foundation receiv | ed less than fair market va | | | |
| (a) Line No | (b) Amount involved | (c) Name of nonch | arıtable exempt organization | (d) Description o | f transfers, transactions, and sl | narıng arran | igemen | ts |
| | | | | | | | | |
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| | | | | | | | | |
| 2a Is the fou | ndation directly or indire | ectly affiliated with | , or related to, one or more | tax-exempt orgai | nizations | | | |
| | | | (c)(3)) or in section 527? . | | _ | ✓ No | | |
| | complete the following s | | (-)(-), | | | | | |
| D 11 103, 0 | (a) Name of organization | | (b) Type of organization | ion | (c) Description of rela | tionship | | |
| | . , , , , , , , , , , , , , , , , , , , | | | | , , , , | | | |
| | | | | | | | | |
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| | | | | | | | | |
| of n whi | | , it is true, correct | ve examined this return, in , and complete Declaration | | | | | |
| Sign Here | ***** | | 2019-11-13 | ***** | retu | the IRS dis rn the prepar | | |
| | Signature of officer or t | rustee | Date | Title | belo (see | w Instr)? | / Yes [| □ _{No} |
| | Print/Type preparer's | name Prep | arer's Signature | Date | Check if self- | P00851 | 040 | |
| Paid | LAURIE HANSON | | | 2019-11-13 | employed ▶ ☐ | 100031 | - -0 | |
| Preparer Use Only | | BAILLY LLP | | | Firm's | EIN ▶45- | 02509 | 58 |
| Jac Only | | 0 EAST 10TH ST F | PO BOX 5125 | | | | | |
| | | OUX FALLS, SD 5 | | | Phone | no (605) | 339-1 | 1999 |
| | • | | | | 1 | | | |

| Form 990PF Part IV - Capital | Gains and Losses for Tax on | Investment I | ncome - Colum | ns a - d | |
|---|---|------------------------------|--|---|---|
| List and describe the (a) 2-story brick wareho | List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) | | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) |
| 1 AMERICAN BOND FUND | | | Р | | |
| 1 AMERICAN INVEST CO | 1 AMERICAN INVEST CO | | Р | | |
| ISHARES S&P 500 VALUE | | | Р | | |
| ISHARES RUSS 2000 | | | Р | | |
| VANGUARD FTSE | | | Р | | |
| JP MORGAN | | | Р | | |
| UNION PACIFIC | | | Р | | |
| KOHLS | | | Р | | |
| UNION PACIFIC | | | Р | | |
| CAPITAL GAINS DIVIDENDS | | | Р | | |
| Form 990PF Part IV - Capital | Gains and Losses for Tax on | Investment I | ncome - Colum | ns e - h | |
| (e) Gross sales price | Depreciation allowed (f) (or allowable) | | Cost or other basis (g) plus expense of sale | | or (loss) (f) minus (g) |
| 3,696 | | | 3,795 | -99 | |
| 1,669 | | | 1,617 | 52 | |
| 2,605 | | | 2,620 | -15 | |
| 1,170 | | | 1,073 | | 97 |
| 540 | | | 538 | 2 | |
| 91,033 | | | 91,014 | 19 | |
| 5,231 | | | 5,231 | | |
| 45,346 | | | 45,346 | , | |
| 49,770 | | | 49,770 | (| |
| 1,126 | | | | | 1,126 |
| Form 990PF Part IV - Capital | Gains and Losses for Tax on | Investment I | ncome - Colum | ns i - I | |
| Complete only for assets show | ring gain in column (h) and owned b | y the foundation | on 12/31/69 | | (h) gain minus |
| (i) F M V as of 12/31/69 | Adjusted basis (j) as of 12/31/69 | Exces (k) over c | ss of col(ı) ol(ʒ), ıf any | | t less than -0-) or from col (h)) |
| | | | | | -99 |
| | | | | | 52 |
| | | | | | -15 |
| | | | | | 97 |
| | | | | | 2 |
| | | | | | 19 |
| | | | | | 0 |
| | | | | | 0 |
| | | | | | 0 |
| | | | | | 1,126 |

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, Contributions to (e) other allowances hours per week not paid, enter (b) devoted to position -0-) employee benefit plans and deferred compensation DOUG WILKE PRESIDENT 1 00 200 E RAILWAY AVE MILBANK, SD 57252

| · | | | | |
|--|---------------------|---|---|---|
| KENNETH KARELS | VICE PRESIDENT | 0 | 0 | 0 |
| 200 E RAILWAY AVE MILBANK, SD 57252 | 1 00 | | | |
| RAY TRANKLE | SECRETARY/TREASURER | 0 | 0 | 0 |

| RAY TRANKLE | SECRETARY/TREASURER | 0 | 0 | 0 |
|--|---------------------|---|---|---|
| 200 E RAILWAY AVE MILBANK, SD 57252 | 1 00 | | | |
| TRUDI ROBEL | DIRECTOR | 0 | 0 | 0 |
| 200 E RAILWAY AVE | 1 00 | | | |

| MILBANK, SD 57252 | | | | |
|--|----------|---|---|---|
| TRUDI ROBEL | DIRECTOR | 0 | 0 | 0 |
| 200 E RAILWAY AVE MILBANK, SD 57252 | 1 00 | | | |

| TRODI ROBEL | DIRECTOR | | U | |
|--|----------|--|---|---------------------------------------|
| 200 E RAILWAY AVE MILBANK, SD 57252 | 1 00 | | | |
| | | | | · · · · · · · · · · · · · · · · · · · |

| MILBANK, SD 57252 | | | | |
|-------------------|----------|---|---|--|
| KRISTIN TANNER | DIRECTOR | 0 | 0 | |

| KRISTIN TANNER | DIRECTOR | 0 | 0 | |
|-------------------|----------|---|---|--|
| 300 E BATUMAN AND | 1 00 | | | |

200 E RAILWAY AVE MILBANK, SD 57252

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year | | | | |
|--|------|----|----------|-------|
| AMERICAN LUTHERAN PRESCHOOL 401 S FLYNN DR MILBANK, SD 57252 | NONE | PC | DONATION | 1,500 |

| MILBANK, SD 57252 | | | | |
|--|------|----|----------|-----|
| AVERA AT HOME3901 W 59TH STREET SIOUX FALLS, SD 57108 | NONE | PC | DONATION | 1,6 |
| | | | | |

| AVERA AT HOME3901 W 59TH STREET SIOUX FALLS, SD 57108 | NONE | PC | DONATION | 1,600 |
|--|------|-----|----------|-------|
| BIG STONE COUNTY 4-H 11 SE SECOND STREET | NONE | GOV | DONATION | 500 |

| SIOUX FALLS, SD 57108 | | | | |
|--|------|-----|----------|-----|
| BIG STONE COUNTY 4-H 11 SE SECOND STREET ORTONVILLE.MN 56278 | NONE | GOV | DONATION | 500 |

| BIG STONE COUNTY 4-H | NONE | GOV | DONATION | 500 |
|----------------------|------|-----|----------|-----|
| 11 SE SECOND STREET | | | | |
| ORTONVILLE, MN 56278 | | | | |
| | | | | |

367,159

| 11 SE SECOND STREET | | |
|----------------------|--|--|
| ORTONVILLE, MN 56278 | | |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| BIG STONE CITY VOLUNTEER FIRE DEPARTMENT PO BOX 293 BIG STONE CITY, SD 57216 | NONE | GOV | DONATION | 1,500 |
|---|------|-----|----------|-------|
| BIG STONE HEALTHCARE FOUNDATION | NONE | PC | DONATION | 150 |

| BIG STONE CITY, SD 5/216 | | | | |
|--|------|----|----------|-----|
| BIG STONE HEALTHCARE FOUNDATION 450 EASTVOLD AVENUE ORTONVILLE, MN 56278 | NONE | PC | DONATION | 150 |
| BOY SCOUTS OF AMERICA 800 N WEST AVE | NONE | PC | DONATION | 175 |

| Total | | | ▶ 3a | 367,159 |
|--|------|----|----------|---------|
| BOY SCOUTS OF AMERICA 800 N WEST AVE SIOUX FALLS, SD 57104 | NONE | PC | DONATION | 175 |
| 450 EASTVOLD AVENUE ORTONVILLE, MN 56278 | | | | |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

| Name and address (home or business) | any foundation manager or substantial contributor | recipient | | |
|-------------------------------------|--|-----------|----------|-------|
| a Paid during the year | | | | |
| CALVARY CHURCH1210 S DAKOTA ST | NONE | PC | DONATION | 1,500 |

| CYSTIC FIBROSIS FOUNDATION NONE PC DONATION 250 4550 MONTGOMERY AVE BETHESDA, MD 20814 | MILBANK, SD 57252 | NONE | PC | DONATION | 1,500 |
|--|---------------------|------|----|----------|-------|
| | 4550 MONTGOMERY AVE | NONE | PC | DONATION | 250 |

| CYSTIC FIBROSIS FOUNDATION 4550 MONTGOMERY AVE BETHESDA, MD 20814 | NONE | PC | DONATION | 250 |
|--|------|----|----------|-------|
| CHRISTIAN SERVICE COUNCIL OF GRANT COUNTY 210 E 5TH AVE MILBANK, SD 57252 | NONE | PC | DONATION | 3,500 |

| 4550 MONTGOMERY AVE BETHESDA, MD 20814 | NONE | PC | DONATION | 250 |
|--|------|----|----------------|---------|
| CHRISTIAN SERVICE COUNCIL OF GRANT COUNTY 210 E 5TH AVE MILBANK, SD 57252 | NONE | PC | DONATION | 3,500 |
| Total | | | > 3a | 367,159 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

| GRANT COUNTY CHILD PROTECTION TEAM 210 E 5TH AVE MILBANK, SD 57252 | NONE | GOV | DONATION | 1,500 |
|---|------|-----|----------|-------|
| a Paid during the year | | | | |

| MILBANK, SD 57252 | | | | |
|--|------|----|----------|-----|
| FRIENDS OF THE GRANT COUNTY LIBRARY 207 EAST PARK AVE MILBANK, SD 57252 | NONE | PC | DONATION | 250 |
| | | | | |

| 207 EAST PARK AVE MILBANK, SD 57252 | | | | |
|---|------|----|----------|-------|
| GRANT COUNTY SOCCER 47440 SD HWY 20 MILBANK, SD 57252 | NONE | PC | DONATION | 1,500 |

▶ 3a

367,159

| MILBANK, SD 57252 | | | | |
|--|------|----|----------|-----|
| GRANT COUNTY SOCCER 47440 SD HWY 20 MI BANK SD 57252 | NONE | PC | DONATION | 1,5 |

| 11257 (1117, 05 37232 | | | | |
|-----------------------|------|----|----------|-----|
| GRANT COUNTY SOCCER | NONE | PC | DONATION | 1,. |
| 47440 SD HWY 20 | | | | |
| MILBANK, SD 57252 | | | | |

Recipient If recipient is an individual, show any relationship to status of status of

recipient

367,159

any foundation manager

Name and address (home or business)

1000 N WEST AVE SUITE 110 SIOUX FALLS, SD 57104

| · | or substantial contributor | | | |
|---|----------------------------|----|----------|--------|
| a Paid during the year | | | | |
| IT ONLY TAKES A SPARKPO BOX 105 MILBANK, SD 57252 | NONE | PC | DONATION | 4,420 |
| LUTHERANS OUTDOORS IN SOUTH DAKOTA INC 2001 S SUMMIT AVE SIOUX FALLS, SD 57197 | NONE | PC | DONATION | 2,000 |
| JUNIOR ACHIEVEMENT INC | NONE | PC | DONATION | 11,500 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| 1 | | | 1 | |
|---|------|----|----------|-------|
| SD JUNIOR HOLSTEIN ASSOCIATION 41161 115TH ST CLAREMONT, SD 57432 | NONE | PC | DONATION | 700 |
| LAKE AREA CHILD PROTECTION INC | NONE | PC | DONATION | 1.000 |

| CLAREMONT, SD 5/432 | | | | |
|---|------|----|----------|--------|
| LAKE AREA CHILD PROTECTION INC PO BOX 822 WATERTOWN, SD 57201 | NONE | PC | DONATION | 1,000 |
| LAKE AREA TECHNICAL INSTITUTE FOUNDATION PO BOX 730 | NONE | PC | DONATION | 23,000 |

| PO BOX 822 WATERTOWN, SD 57201 | NONE | | DONATION | 1,000 |
|--|------|----|----------|---------|
| LAKE AREA TECHNICAL INSTITUTE FOUNDATION PO BOX 730 WATERTOWN, SD 57201 | NONE | PC | DONATION | 23,000 |
| Total | | | ▶ 3a | 367,159 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year | | | | |
|--|------|----|----------|-------|
| PUBLIC SAFETY DISASTER PREPAREDNESS AND RELIEF PO BOX 281 LAVALLE, WI 53941 | NONE | PC | DONATION | 2,000 |
| MAIN STREET INDUSTRIES AND TRAINING CENTER INC | NONE | PC | DONATION | 1,500 |

| LAVALLE, WI 53941 | | | | |
|--|------|----|----------|--------|
| MAIN STREET INDUSTRIES AND TRAINING CENTER INC PO BOX 321 CLINTON, MN 56225 | NONE | PC | DONATION | 1,500 |
| MAKE A WISH FOUNDATION OF SOUTH DAKOTA 1400 WEST 17TH STREET | NONE | PC | DONATION | 10,000 |

| TRAINING CENTER INC PO BOX 321 CLINTON, MN 56225 | | | | ŕ |
|---|------|----|----------|---------|
| MAKE A WISH FOUNDATION OF SOUTH DAKOTA 1400 WEST 17TH STREET SIOUX FALLS, SD 57104 | NONE | PC | DONATION | 10,000 |
| Total | | | ▶ 3a | 367,159 |

| CLINTON, MN 56225 | | | | |
|---|------|----|----------|---------|
| MAKE A WISH FOUNDATION OF SOUTH DAKOTA 1400 WEST 17TH STREET SIOUX FALLS, SD 57104 | NONE | PC | DONATION | 10,000 |
| Total | | | ▶ 3a | 367,159 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Amount Foundation show any relationship to status of contribution

any foundation manager

SIOUX CENTER, IA 51250

Total . .

| Name and address (home or business) | or substantial contributor | recipient | | |
|--|----------------------------|-----------|----------|-------|
| a Paid during the year | | | | |
| MILBANK AREA LIONS SWIM TEAM PO BOX 150 MILBANK, SD 57252 | NONE | PC | DONATION | 750 |
| MILBANK BALL DIAMOND ASSOCIATION PO BOX 70 MILBANK, SD 57252 | NONE | PC | DONATION | 250 |
| MIDWEST HONOR FLIGHT - IA & SD | NONE | PC | DONATION | 1,500 |

recipient

| MILBANK BALL DIAMOND ASSOCIATION PO BOX 70 MILBANK, SD 57252 | NONE | PC | DONATION | • |
|--|------|----|----------|-----|
| MIDWEST HONOR FLIGHT - IA & SD PO BOX 22 | NONE | PC | DONATION | 1,! |

Recipient If recipient is an individual, show any relationship to status of status of

| Name and address (home or business) | any foundation manager or substantial contributor | recipient | | |
|--|--|-----------|----------|--------|
| a Paid during the year | | | | |
| CHRISTIAN SERVICE COUNCIL 210 E 5TH AVE MILBANK, SD 57252 | NONE | PC | DONATION | 4,500 |
| MILBANK COMMUNITY FOUNDATION 904 E 4TH AVE MILBANK, SD 57252 | NONE | PC | DONATION | 38,708 |
| MILBANK COMMUNITY PRIDE 713 VALLEY VIEW CIRCLE MILBANK, SD 57252 | NONE | PC | DONATION | 900 |

Total . .

Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

or substantial contributor

Total .

| | or substantial contributor | | | |
|----------------------------|----------------------------|----|----------|-------|
| a Paid during the year | | | | |
| MILBANK FFA1001 E PARK AVE | NONE | PC | DONATION | 6,966 |

| MILBANK, SD 57252 | | | | |
|-------------------------|------|-----|----------|--|
| MILBANK FIRE DEPARTMENT | NONE | GOV | DONATION | |

| 111125/1111/105 07232 | | | | 1 |
|-------------------------|------|-----|----------|-----|
| MILBANK FIRE DEPARTMENT | NONE | GOV | DONATION | 3,9 |
| PO BOX 625 | | | | |
| MILBANK SD 57252 | | | | 1 |

| MILBANK FIRE DEPARTMENT | NONE | GOV | DONATION | 3,900 |
|-------------------------|------|-----|----------|-------|
| PO BOX 625 | | | | |
| MILBANK, SD 57252 | | | | |
| | | | | |

| MILBANK, SD 57252 | | | | |
|-------------------------------|------|----|----------|------|
| NAMI SOUTH DAKOTAPO BOX 88808 | NONE | PC | DONATION | 2,50 |

| ı | 1-11LDANK, 3D 37232 | | | | 1 |
|---|--|------|----|----------|-------|
| | NAMI SOUTH DAKOTAPO BOX 88808 SIOUX FALLS, SD 57109 | NONE | PC | DONATION | 2,500 |

| NAMI SOUTH DAKOTAPO BOX 88808 | NONE | PC | DONATION | 2 |
|-------------------------------|------|----|----------|---|
| SIOUX FALLS, SD 57109 | | | | |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of

| Name and address (home or business) | or substantial contributor | recipient | | |
|-------------------------------------|----------------------------|-----------|----------|-------|
| a Paid during the year | | | | |
| NATIONAL DAIRY SHRINEPO BOX 725 | NONE | PC | DONATION | 1,000 |

| DENMARK, WI 54208 | | | | |
|--|------|----|----------|---------|
| NORTHEAST SOUTH DAKOTA HEALTH EDUCATION CENTER PO BOX 425 MILBANK, SD 57252 | NONE | PC | DONATION | 104,500 |

| NORTHEAST SOUTH DAKOTA HEALTH EDUCATION CENTER PO BOX 425 MILBANK, SD 57252 | NONE | PC | DONATION | 104,500 |
|--|------|----|----------|---------|
| ORPHAN GRAIN TRAIN 1 LANTERN TOWNHOUSE LN NORFOLK, NE 68702 | NONE | PC | DONATION | 1,500 |

| PO BOX 425 MILBANK, SD 57252 | | | | |
|---|------|----|----------|---------|
| ORPHAN GRAIN TRAIN 1 LANTERN TOWNHOUSE LN NORFOLK, NE 68702 | NONE | PC | DONATION | 1,500 |
| Total | | | ▶ 3a | 367,159 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

| Name and address (home or business) | any foundation manager or substantial contributor | recipient | | |
|--|--|-----------|----------|-----|
| a Paid during the year | | | | |
| READ MINISTRIES INC 1001 1ST AVE E SUITE 169 CAMBRIDGE, MN 55008 | NONE | PC | DONATION | 200 |
| RONALD MCDONALD HOUSE 825 S LAKE AVE | NONE | PC | DONATION | 550 |

GOV

DONATION

500

367,159

| 1001 1ST AVE E SUITE 169 CAMBRIDGE, MN 55008 | | | | |
|--|------|----|----------|--|
| RONALD MCDONALD HOUSE 825 S LAKE AVE SIOUX FALLS, SD 57104 | NONE | PC | DONATION | |
| | | | | |

NONE

SD STATE 4-H OFFICE

Total .

SAG 109 BOX 2207E SDSU BROOKINGS, SD 57007

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year | | | | |
|---|------|----|----------|-----|
| SD FFA FOUNDATION INC 39393 133RD ST BATH, SD 57427 | NONE | PC | DONATION | 150 |

| BATH, SD 57427 | | | | |
|--|------|-----|----------|-------|
| SDSU DAIRY CLUBBOX 2104 BROOKINGS, SD 57007 | NONE | GOV | DONATION | 500 |
| SDSU FOUNDATION | NONE | PC | DONATION | 9,975 |

| BROOKINGS, SD 57007 | | | | |
|--|------|----|----------|-------|
| SDSU FOUNDATION 815 MEDARY AVENUE BOX 525 BROOKINGS SD 57007 | NONE | PC | DONATION | 9,975 |

| SDSU FOUNDATION 815 MEDARY AVENUE BOX 525 BROOKINGS, SD 57007 | NONE | PC | DONATION | 9,975 |
|---|------|----|----------|-------|
| BROOKINGS, SD 37007 | | | | |

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SDSU- MECHANICAL ENGINEERING NONE GOV DONATION 500

| CLUB BOX 2201 BROOKINGS, SD 57007 | | | | |
|---|------|----|----------|-----|
| SHRINERS HOSPITALS FOR CHILDREN | NONE | PC | DONATION | 500 |

| SHRINERS HOSPITALS FOR CHILDREN 2900 N ROCKY POINT DRIVE TAMPA, FL 33607 | NONE | PC | DONATION |
|--|------|----|----------|
| SPECIAL OLYMPICS OF SOUTH DAKOTA | NONE | PC | DONATION |

Total .

| 2900 N ROCKY POINT DRIVE TAMPA, FL 33607 | | | | |
|--|------|----|----------|-----|
| SPECIAL OLYMPICS OF SOUTH DAKOTA 800 E I-90 LANE SIOUX FALLS, SD 57104 | NONE | PC | DONATION | 10, |

| TAMPA, FL 33607 | | | | |
|--|------|----|----------|--------|
| SPECIAL OLYMPICS OF SOUTH DAKOTA 800 E I-90 LANE SIOUX FALLS, SD 57104 | NONE | PC | DONATION | 10,250 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year | | | | |
|--|------|----|----------|-----|
| ST LABRE INDIAN SCHOOL EDUCATIONAL ASSOC PO BOX 216 ASHLAND, MT 59003 | NONE | PC | DONATION | 100 |

| PO BOX 216 ASHLAND, MT 59003 | | | | |
|---|------|-----|----------|-------|
| THE ABBEY OF THE HILLSPO BOX 38 MARVIN, SD 57251 | NONE | PC | DONATION | 1,600 |
| UNITED APPEAL OF THE CITY OF ORTONVILLE | NONE | GOV | DONATION | 100 |

| ' | | | | |
|---|------|-----|----------|-------|
| THE ABBEY OF THE HILLSPO BOX 38 MARVIN, SD 57251 | NONE | PC | DONATION | 1,600 |
| UNITED APPEAL OF THE CITY OF ORTONVILLE 215 LUNDELL AVE ORTONVILLE, MN 56278 | NONE | GOV | DONATION | 100 |

| MARVIN, SD 57251 | NONE | FC | DONATION | 1,000 |
|---|------|-----|----------|---------|
| UNITED APPEAL OF THE CITY OF ORTONVILLE 215 LUNDELL AVE ORTONVILLE, MN 56278 | NONE | GOV | DONATION | 100 |
| Total | | | ▶ 3a | 367,159 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

| Name and address (home or business) | any foundation manager or substantial contributor | recipient | | |
|---|--|-----------|----------|-------|
| a Paid during the year | | | | |
| VEBLEN CLUBPO BOX 303 VEBLEN, SD 57270 | NONE | PC | DONATION | 250 |
| WILMOT COMMUNITY FOUNDATION 706 CHARLES STREET WILMOT, SD 57279 | NONE | PC | DONATION | 1,000 |

| Total | | | ▶ 3a | 367,159 |
|--|--------|------|------------|---------|
| ASSOCIATION 310 HIGHLAND DRIVE MILBANK, SD 57252 | | | | · |
| WHETSTONE VALLEY YOUTH FOOTBALL | I NONE | I PC | I DONATION | l 1,500 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year | | | | |
|---|------|----|----------|-------|
| THE GREATER SOUTH DAKOTA EDUCATION AND RESEARCH | NONE | PC | DONATION | 3,000 |
| FOUNDATION INC | | | | |
| PO BOX 190 | | | | |
| DIEDDE SD 575010100 | | | | 1 |

| PIERRE, SD 575010190 | | | | |
|---|------|----|----------|--------|
| SOUTH DAKOTA AGRICULTURAL AND RURAL LEADERSHIP FOUNDATION PO BOX 2170 ANIMAL SCIENCE CENTER 132 BROOKINGS, SD 57007 | NONE | PC | DONATION | 15,500 |

| | SOUTH DAKOTA AGRICULTURAL AND RURAL LEADERSHIP FOUNDATION | NONE | PC | DONATION | 15,50 |
|---|--|------|----|----------|-------|
| | PO BOX 2170 ANIMAL SCIENCE CENTER | | | | |
| | BROOKINGS, SD 57007 | | | | |
| i | | | | | |

| 132 BROOKINGS, SD 57007 | | | | |
|---|------|-----|----------|--------|
| CITY OF MILBANK 1001 EAST 4TH ST SUITE 301 | NONE | GOV | DONATION | 52,174 |

| BROOKINGS, SD 57007 | | | | |
|----------------------------|------|-----|----------|--------|
| CITY OF MILBANK | NONE | GOV | DONATION | 52,174 |
| 1001 EAST 4TH ST SUITE 301 | | | | 1 |
| MILDANIZ CD EZGEG | | | | 1 |

367,159

| CITY OF MILBANK | NONE | GOV | DONATION | 52 |
|----------------------------|------|-----|----------|----|
| 1001 EAST 4TH ST SUITE 301 | | | | |
| MILBANK, SD 57252 | | | | |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SOCIETY FOR PRESERVATION & NONE PC DONATION 100 ENCOLIDACEMENT OF BADREDCHID

| QUARTET SINGING AMER PO BOX 592 MILBANK, SD 57252 | | | | |
|---|------|----|----------|--------|
| SOUTH DAKOTA AGRICULTURAL | NONE | PC | DONATION | 10,000 |

| SOUTH DAKOTA AGRICULTURAL FOUNDATION | NONE | PC | DONATION | 10,000 |
|--------------------------------------|------|----|----------|--------|
| 112 PORT NA HAVEN ST | | | | |
| FT PIERRE, SD 57532 | | | | 1 |

| SOUTH DAKOTA AGRICULTURAL | INONE | I PC | DONATION | 10,000 |
|---------------------------|-------|------|----------|--------|
| FOUNDATION | | | | |
| 112 PORT NA HAVEN ST | | | | |
| FT PIERRE, SD 57532 | | | | |
| | | | | |

| 112 PORT NA HAVEN ST FT PIERRE, SD 57532 | | | | |
|---|------|-----|----------|-------|
| GRANT COUNTY 4-H210 E 5TH AVE | NONE | GOV | DONATION | 2.641 |

| FT PIERRE, 3D 37332 | | | | |
|-------------------------------|------|-----|----------|------|
| GRANT COUNTY 4-H210 E 5TH AVE | NONE | GOV | DONATION | 2,64 |

▶ 3a

367,159

| GRANT COUNTY 4-H210 E 5TH AVE | l none | l gov | DONATION | |
|-------------------------------|--------|-------|----------|---|
| | | | | · |
| MILBANK, SD 57252 | | | | |

| FRANT COUNTY 4-HZ10 E 5TH AVE | NONE | GOV | DONATION | |
|-------------------------------|------|-----|----------|--|
| MILBANK, SD 57252 | | | | |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| LEADERSHIP SOUTH DAKOTA PO BOX 91533 SIOUX FALLS, SD 57109 | NONE | PC | DONATION | 10,000 |
|--|------|----|----------|--------|
| MILBANK HIGH SCHOOL EDUCATIONAL | NONE | PC | DONATION | 3,800 |

| MILBANK HIGH SCHOOL EDUCATIONAL FOUNDATION 904 E 4TH AVE MILBANK, SD 57252 | NONE | PC | DONATION | 3,8 |
|---|------|----|----------|-----|
| LOGAN REGIONAL HOSPITAL | NONE | PC | DONATION | |

| 904 E 4TH AVE MILBANK, SD 57252 | | | | |
|--|------|----|----------|-----|
| LOGAN REGIONAL HOSPITAL FOUNDATION 500 EAST 1400 NORTH | NONE | PC | DONATION | 500 |

| MILDAINN, 3D 37232 | | | | |
|---|------|----|----------|-----|
| LOGAN REGIONAL HOSPITAL FOUNDATION 500 EAST 1400 NORTH LOGAN, UT 84341 | NONE | PC | DONATION | 500 |
| | | | | |

▶ 3a

367,159

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| SD HISTORICAL SOCIETY 900 GOVERNORS DR PIERRE, SD 57501 | NONE | PC | DONATION | 2,500 |
|---|------|----|----------|-------|
| AMERICAN LEGION AUXILIARY | NONE | PC | DONATION | 250 |

| AMERICAN LEGION AUXILIARY FOUNDATION 47468 146TH STREET MARVIN, SD 57252 | NONE | PC | DONATION | 250 |
|---|------|----|------------------------|-----|
| MILBANK SCHOOL DISTRICT | NONE | PC | DONATION-OUT OF SCHOOL | 750 |

| 47468 146TH STREET MARVIN, SD 57252 | | | | |
|--|------|----|-----------------------------------|-----|
| MILBANK SCHOOL DISTRICT 400 E 10TH AVE MILBANK, SD 57252 | NONE | PC | DONATION-OUT OF SCHOOL PROGRAM | 750 |

367,159

Recipient
Show any relationship to any foundation manager or substantial contributor

Recipient
Show any relationship to any foundation manager or substantial contributor

Recipient
Show any relationship to any foundation manager or substantial contributor

a Paid during the year

Total .

| MILBANK CHAMBER OF COMMERCE 1001 E 4TH AVE STE 101 MILBANK, SD 57252 | NONE | NC | COMMUNITY HOLIDAY MEAL | 1,000 |
|--|------|----|------------------------|-------|
| TEMPLE BUILDING ASSOCIATION OF | NONE | NC | CIRCUS TICKETS TO BE | 250 |

| TEMPLE BUILDING ASSOCIATION OF WATERTOWN PO BOX 941 WATERTOWN, SD 57201 | NONE | CIRCUS TICKETS TO BE DISTRIBUTED TO ELEMENTARY SCHOOLS FOR CHILDREN | 250 |
|--|------|---|-----|
| | | | l |

367.159

TY 2018 Expenditure Responsibility Statement

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Name: VALLEY QUEEN CHARITABLE FOUNDATION

| EIN: 82-2581817 | | | | | | | | | |
|--|---|------------|-----------------|---|-------------------------------|------------------------------|--------------------------------|-------------------------|----------------------------|
| Grantee's Name | Grantee's Address | Grant Date | Grant Amount | Grant Purpose | Amount Expended By Grantee | Any Diversion By Grantee? | Dates of Reports By Grantee | Date of Verification | Results of Verification |
| MILBANK AREA CHAMBER OF COMMERCE | 1001 E 4TH AVE STE 101 MILBANK, SD 57252 | 2018-12-10 | 1,000 | FUNDS USED TO REIMBURSE THE CHAMBER FOR A COMMUNITY HOLIDAY MEAL | 1,000 | NONE | 12/10/18 | 2018-12-10 | |
| TEMPLE BUILDING ASSOCIATION OF WATERTOWN | PO BOX 941 WATERTOWN, SD 57201 | 2018-07-01 | 250 | PURCHASE OF CIRCUS TICKETS TO BE GIVEN TO ELEMENTARY SCHOOL CHILDREN | 250 | NONE | 07/01/18 | 2018-07-01 | |

DLN: 93491318003069

| efile GRAPHIC | print - DO NOT PROCESS | As Filed Data - | DLN: 93491318003069 | |
|---------------|------------------------|-----------------|---------------------|--|
| | | • | | |
| | | | | |

TY 2018 Investments - Other Schedule

Name: VALLEY QUEEN CHARITABLE FOUNDATION

ETNI. 02 2501017

| EIN: 82-2 | 581817 | | |
|--|-----------------------|------------|----------------------------------|
| Investments Other Schedule 2 | | | |
| Category/ Item | Listed at Cost or FMV | Book Value | End of Year Fair Market Value |
| ISHARES S&P 500 | AT COST | 7,902 | 7,252 |
| VANGUARD FTSE ALL WORLD | AT COST | 5,099 | 4,734 |
| VANGUARD FTSE DEV MARKETS | AT COST | 5,597 | 4,749 |
| VANGUARD VALUE EFT | AT COST | 15,037 | 14,301 |
| BRIDGE BUILDER CORE BOND | AT COST | 48,131 | 48,078 |
| BRIDGE BUILDER CORE PLUS BOND | AT COST | 57,744 | 57,695 |
| BRIDGE BUILDER INTL EQUITY | AT COST | 30,829 | 28,936 |
| BRIDGE BUILDER LARGE GROWTH | AT COST | 17,713 | 16,980 |
| BRIDGE BUILDER LARGE VALUE | AT COST | 25,267 | 24,063 |
| BRIDGE BUILDER SMALL/MID GROWTH | AT COST | 7,650 | 7,285 |
| BRIDGE BUILDER SMALL/MID VALUE | AT COST | 13,130 | 12,050 |
| HARTFORD WORLD BOND | AT COST | 4,943 | 4,839 |
| MAINSTAY MACKAY HIGH YIELD | AT COST | 4,891 | 4,762 |
| The state of the s | 1/11 0001 | 1,051 | ١,,, ٥ |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data | - | DLI | N: 93491318003069 | |
|--|---------------|--------------------------|------------------------|---|--|
| TY 2018 Legal Fees Schedul | е | | | | |
| _ | | | | | |
| Name: VALLEY QUEEN CHARITABLE FOUNDATION EIN: 82-2581817 | | | | | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | |
| PROFESSIONAL FEES | 90 | 0 | | 90 | |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | DLN: 934913180 | 03069 | |
|--------------------------------------|-----------------|-------------------------|----------------|-------|--|
| TY 2018 Other Decreases Schedule | | | | | |
| | | | | | |
| Name: | VALLEY QUEE | N CHARITABLE FOUNDATION | | | |
| EIN: | 82-2581817 | | | | |
| Description | | | Amount | | |
| UNREALIZED GAIN (LOSS) | | | | 341 | |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | DLN | : 93491318003069 |
|--------------------------------------|--------------------------------------|--------------------------|------------------------|---|
| TY 2018 Other Expenses Sche | dule | | | |
| | | | | |
| Name: | VALLEY QUEEN | CHARITABLE FOL | JNDATION | |
| EIN: 82-2581817 | | | | |
| Other Expenses Schedule | | | | |
| Description | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
| BANK FEES | 628 | 0 | | 628 |
| SUPPLIES | 2,826 | 0 | | 828 |

5,250

TAXABLE EXPENDITURES

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | DLN: 93491318003 | 069 |
|--------------------------------------|-----------------|-------------------------|------------------|-----|
| TY 2018 Other Increases Sche | edule | | | |
| | | | | |
| Name: | VALLEY QUEE | N CHARITABLE FOUNDATION | | |
| EIN: | 82-2581817 | | | |
| De | escription | | Amount | |
| NON-DIVIDEND DISTRIBUTION | | | | 5 |

| efile GRAPHIC print - DO NOT F | PROCESS As Filed Da | ata - | DL | N: 93491318003069 |
|--------------------------------|----------------------|-----------------------|--------------------------|---|
| TY 2018 Taxes Schedu | ile | _ | _ | |
| | | | | |
| | Name: VALLEY O | UEEN CHARITABLE | FOUNDATION | |
| | EIN: 82-25818 | • | | |
| | | | † | 1 |
| Category | Amount | Net Investment Income | : Adjusted Net Income | Disbursements for Charitable Purposes |
| FOREIGN TAX | | 81 8 | 1 | 0 |

| efile GRAPHIC print - DC | NOT PROCESS As Filed | d Data - | | [| DLN: 93491318003069 | | |
|---|--|---|---|---|--|--|--|
| Schedule B | Se | chedule of Conti | ributors | | OMB No 1545-0047 | | |
| (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service | | Attach to Form 990, 990-E. <u>ww <i>ır</i>s <i>gov/Form</i>990</u> for th | • | | 2018 | | |
| Name of the organizatio VALLEY QUEEN CHARITABL | | | | Employer ide | entification number | | |
| Organization type (chec | cone) | | | 82-2581817 | | | |
| | · | | | | | | |
| Filers of: | Section: | | | | | | |
| Form 990 or 990-EZ | ☐ 501(c)() (enter nu | ımber) organızatıon | | | | | |
| | 4947(a)(1) nonexer | mpt charitable trust not tr | reated as a private founda | tion | | | |
| | ☐ 527 political organiz | zation | | | | | |
| Form 990-PF | ☑ 501(c)(3) exempt p | rivate foundation | | | | | |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundation | | | | | | |
| | 501(c)(3) taxable private foundation | | | | | | |
| | ion filing Form 990, 990-EZ, property) from any one contri | | | | | | |
| Special Rules | | | | | | | |
| under sections 50 received from any | n described in section 501(c 9(a)(1) and 170(b)(1)(A)(vi), one contributor, during the y 1h, or (ii) Form 990-EZ, line | that checked Schedule A year, total contributions o | A (Form 990 or 990-EZ), P If the greater of (1) \$5,000 | art II, line 13, 1 | 16a, or 16b, and that | | |
| during the year, to | n described in section 501(c tal contributions of more than e prevention of cruelty to chi | n \$1,000 exclusively for i | religious, charitable, scien | | | | |
| during the year, co If this box is check purpose Don't co | n described in section 501(contributions exclusively for reced, enter here the total continuities any of the parts unles e, etc., contributions totaling | eligious, charitable, etc., pributions that were receives the General Rule app | ourposes, but no such cor /ed during the year for an lies to this organization be | itributions total exclusively relicance it ecause it receiv | ed more than \$1,000 igious, charitable, etc , red <i>nonexclusively</i> | | |
| 990-EZ, or 990-PF), but it | that isn't covered by the Ger must answer "No" on Part I' m 990PF, Part I, line 2, to ce | V, line 2, of its Form 990 | , or check the box on line | H of its | | | |
| For Paperwork Reduction Actor Form 990, 990-EZ, or 990- | t Notice, see the Instructions PF | Cat No 30 | 613X Schedo | ule B (Form 990, | 990-EZ, or 990-PF) (2018) | | |

Name of organization VALLEY QUEEN CHARITABLE FOUNDATION

Employer identification number

| | | 82-2581 | .817 |
|------------|---|----------------------------|---|
| Part I | Contributors (See Instructions) Use duplicate copies of Part I if additional space is | needed | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | See Additional Data Table | \$ | Person Payroll Noncash (Complete Part II for noncash contribution) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contribution) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contribution) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contribution) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contribution) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contribution) |

| Schedule B (For | rm 990, 990-EZ, or 990-PF) (2018) | | Page 3 |
|------------------------|---|--|----------------------|
| Name of organiz | | Employer identi | ification number |
| VALLEY QUEEN CH | HARITABLE FOUNDATION | 82-25 | 581817 |
| Part II | Noncash Property | | |
| (a) No. from Part I | (See instructions) Use duplicate copies of Part II if additional space is needed (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| 8 | SHARES OF STOCK | \$ 100 347 | 2018-12-05 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| 9 | SHARES OF STOCK | \$ 91 014 | 2018-12-18 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | s | |
| (a) No. from Part I | (b) Description of noncash property given | (C) FMV (or estimate) (See instructions) | (d) Date received |
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Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Additional Data

Software ID:

Software Version:

EIN: 82-2581817

Name: VALLEY QUEEN CHARITABLE FOUNDATION

| Form 990 Schedule | Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed. | | | | | |
|-------------------|---|----------------------------|--------------------------------------|------------|--|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribu | ution | | |
| | VALLEY QUEEN CHEESE FACTORY INC | | Person | V | | |
| <u>1</u> | 200 E RAILWAY AVE | | Payroll | | | |
| | 200 E RAILWAT AVE | \$ 71,566 | Noncash | | | |
| | MILBANK, SD 57252 | | | | | |
| | | | (Complete Part II fo contribution | | | |
| | LEO FLYNN ESTATE | | Person | ✓ | | |
| <u>2</u> | PO BOX 505 | | Payroll | | | |
| | 10 50% 303 | \$ 5,000 | Noncash | | | |
| | MILBANK, SD 57252 | | | _ | | |
| | | | (Complete Part II fo contribution | | | |
| | APEX IRONWORKS | | Person | ✓ | | |
| <u>3</u> | 906 S MADISON ST | | Payroll | | | |
| | 300 3 11/15/13010 3 1 | \$ 5,000 | Noncash | | | |
| | MILBANK, SD 57252 | | | _ | | |
| | | | (Complete Part II fo contribution | | | |
| | GESSWEIN MOTORS | | Person | <u> </u> | | |
| <u>4</u> | | | Payroll | | | |
| | 317 N DAKOTA ST | \$ 5,000 | Noncash | | | |
| | MILBANK, SD 57252 | | | | | |
| | 17225/1111, 35 37232 | | (Complete Part II fo contribution | | | |
| | TWIN VALLEY TIRE | | Person | V | | |
| <u>5</u> | 516 W 4TH AVE | | Payroll | | | |
| | 310 W 41H AVE | \$ 5,000 | Noncash | | | |
| | MILBANK, SD 57252 | | | _ | | |
| | | | (Complete Part II fo contribution | | | |
| | FIRST BANK & TRUST | | Person | ✓ | | |
| <u>6</u> | 215 W 4TH AVE | \dashv | Payroll | | | |
| | 223 11 1111112 | \$ 5,000 | Noncash | | | |
| | MILBANK, SD 57252 | | | | | |
| | | | (Complete Part II fo contribution | | | |
| J | | | Contribution | - <i>,</i> | | |

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) Νo. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **✓** GREAT WESTERN BANK Payroll 302 S MAIN ST \$ 5,000 Noncash MILBANK, SD 57252 (Complete Part II for noncash contributions) Person **✓** MAX GONZENBACH 8 Payroll 1010 S 7TH ST \$ 100,847 Noncash **~** MILBANK, SD 57252 (Complete Part II for noncash contributions) Person RUDOLPH NEF **✓** 9 Payroll PO BOX 269 \$ 91,514 Noncash **~** MILBANK, SD 57252

(Complete Part II for noncash contributions)