## **Return of Private Foundation**

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

OMB No 1545-0052

DLN: 93491276000179

2018

Form 990-PI	
Department of the Treasur	

Internal Revenue Service

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 09-01-2	2018 , a	nd ending 08-31-	2019			
		indation L SCHWAB MEMORIAL FOUNDATION		A Employer id	entification numbe	r		
DA	COTAH	BANK	ss) Room/suite	91-1770168				
	ber and DBOX 1	I street (or P O box number if mail is not delivered to street addres .210	<b>B</b> Telephone nu (605) 225-5611	<b>B</b> Telephone number (see instructions)				
		, state or province, country, and ZIP or foreign postal code SD 574021210		<b>C</b> If exemption	application is pending	g, check here		
<b>G</b> Ch	eck al	I that apply	a former public charity n	<b>2</b> Foreign or test, chec	ganizations, check he ganizations meeting k here and attach coi	the 85% Disputation		
<b>H</b> Ch	eck ty	pe of organization $lacksquare$ Section 501(c)(3) exempt privat	e foundation		undation status was t n 507(b)(1)(A), chec			
	Section	4947(a)(1) nonexempt charitable trust	ble private foundation					
of y	/ear (f	xet value of all assets at end from Part II, col (c),  ►\$ 5,733,835   J Accounting method  □ Other (specify)  (Part I, column (d) mu	✓ Cash ☐ Accru		ation is in a 60-month n 507(b)(1)(B), chec			
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes		
	1	Contributions, gifts, grants, etc , received (attach	1,900			(cash basis only)		
	2	schedule)  Check   If the foundation is <b>not</b> required to attach	1,900	,				
	3	Sch B	7,695	7,695				
	4	Dividends and interest from securities	10,459	·				
	<del>т</del> 5а	Gross rents	301,497					
	b	Net rental income or (loss) 259,3						
ь	6a	Net gain or (loss) from sale of assets not on line 10	348,344	1				
Reverkie	b	Gross sales price for all assets on line 6a	98					
Re	7 8	Capital gain net income (from Part IV, line 2)		348,344				
	9	Income modifications			1,900			
	10a b	Gross sales less returns and allowances  Less Cost of goods sold						
	c	Gross profit or (loss) (attach schedule)						
	11	Other income (attach schedule)						
	12	Total. Add lines 1 through 11	669,895	667,995	1,900			
	13	Compensation of officers, directors, trustees, etc	32,765		1,500	16,383		
	14	Other employee salaries and wages	32,703	10,302		10,303		
۸.	15	Pension plans, employee benefits						
se	16a	Legal fees (attach schedule)	10	10		0		
)en	ь	Accounting fees (attach schedule)	724			0		
Expenses	С	Other professional fees (attach schedule)	/29	724				
Operating and Administrative	17	Interest						
tra	18	Taxes (attach schedule) (see instructions)	43,317	43,317		0		
SIU S	19	Depreciation (attach schedule) and depletion						
<u>=</u>	20	Occupancy						
ΑC	21	Travel, conferences, and meetings						
ınd	22	Printing and publications						
3 6	23	Other expenses (attach schedule)	5,560	4,610		950		
atır	24	Total operating and administrative expenses.						
Ser.		Add lines 13 through 23	82,376	65,043		17,333		
o	25	Contributions, gifts, grants paid	207,480	· ·		207,480		
	26	Total expenses and disbursements. Add lines 24 and 25	· ·			224,813		
	27	Subtract line 26 from line 12	209,030	05,043		224,013		
	a	Excess of revenue over expenses and disbursements	380,039					
	b	Net investment income (If negative, enter -0-)	200,000	602,952				
	c	Adjusted net income (if negative, enter -0-)		002,532	1 000			
Earl		work Reduction Act Notice see instructions		Cat No. 11380	1,900	m 000-DE (2018)		

Accounts payable and accrued expenses . . . . . . . . . . . .

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule). . . . . .

Foundations that follow SFAS 117, check here

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds

Capital stock, trust principal, or current funds . . . . . . . . .

Total net assets or fund balances (see instructions) . . . . .

Total liabilities and net assets/fund balances (see instructions) .

Analysis of Changes in Net Assets or Fund Balances

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

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

Investments—land, buildings, and equipment basis ▶ \_\_\_ Less accumulated depreciation (attach schedule)

Less accumulated depreciation (attach schedule) ▶

Total assets (to be completed by all filers—see the

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > \_

Other liabilities (describe -\_

Grants payable

Unrestricted

Temporarily restricted

Permanently restricted . .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) -

113,269

191,897

146,523

955,852

1,414,625

1,414,625

1,414,625

1.414.625

171,303

388,772

955,852

249,786

1,794,664

1,794,664

1,794,664 1,794,664

2

3

4

5

1,414,625 380,039

1,794,664

1,794,664 Form **990-PF** (2018)

198,974

402,197

4,852,942

250,771

5,733,835

b
С
11
12
13
14
14
15
16

17 18

19

20 21

22

23

24

25

26

28

29 Net 30

31

Part III

2 3

Liabilities

Balances

Fund

ō

Assets 27

(a) List and describ 2-story brick wa	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )			
1 a DACOTAH BANK - LT SE	CURITIES		D—Donation P	2017-07-10	2019-05-09
b US FISH & WILDLIFE PE			P	1996-09-12	2019-01-28
c US FISH & WILDLIFE PE			P	1996-09-12	2019-01-28
d CAPITAL GAINS DIVIDER			P		
e					
	(f)		(g)	(1	h)
(e) Gross sales price	Depreciation allowed	Cost or	other basis	•	r (loss)
Gross sales price	(or allowable)	plus exp	ense of sale		) mınus (g)
a <sup>2</sup>	5,418		45,054	1	364
<b>b</b> 29	3,275				293,275
с 5	52,850				52,850
d	1,855				1,855
e					
Complete only for assets	s showing gain in column (h) and ow	ned by the foundation	on 12/31/69	(	I)
(i)	(j)		(k)	Gains (Col (Ì	h) gain minus
(i) F M V as of 12/31/69	Adjusted basis		of col (ı)		less than -0-) <b>or</b>
	as of 12/31/69	over co	l (j), if any	Losses (fro	om col (h))
a					364
b					293,275
С					52,850
d					1,855
е		If gain, also enter in F		<u> </u>	
•	gain or (loss) as defined in sections in the section in the s		· .	3	348,344
Part V Qualification	Jnder Section 4940(e) for Re	educed Tax on Net	: Investment In	come	
(For optional use by domestic p	rivate foundations subject to the sec	ction 4940(a) tax on ne	et investment incor	ne )	
if section 4940(d)(2) applies, l	eave this part blank				
	e section 4942 tax on the distributal ot qualify under section 4940(e) Do		· ·	7  \ \ \ \ \ \ \ \	es 🔽 No
1 Enter the appropriate ar	nount in each column for each year,	see instructions before	e making any entrie	:S	
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitab	ole-use assets	<b>(d)</b> Distribution rati (col (b) divided by c	
2017	176,972		5,205,863		0 033995
2016	178,701		4,958,469		0 036040
2015	182,807		4,868,455		0 037549
2014	101,871		4,348,741		0 023425
2013	185,441		3,762,111		0 049292
2 Total of line 1, column (	d)		2		0 180301
3 Average distribution ratio	o for the 5-year base period—divide t	the total on line 2 by 5	0, or by the		
	ndation has been in existence if less		3	+	0 036060
	ncharitable-use assets for 2018 from	•	<b>—</b>		5,563,299
5 Multiply line 4 by line 3					200,613
	ent income (1% of Part I, line 27b)				6,030
				<del></del>	206,643
	ions from Part XII, line 4 ,			100	224,813
If line 8 is equal to or gro instructions	eater than line 7, check the box in Pa	art VI, line 1b, and com	nplete that part usi	ng a 1% tax rate Se	e the Part VI

Page **6** 

Pa	Statements Regard	ling Activities for Which	n Form 4720 May Be	Required (continued)			
Ба	During the year did the foundation p	pay or incur any amount to				Yes	No
	(1) Carry on propaganda, or otherw	rise attempt to influence legis	lation (section 4945(e))?	☐ Yes ✓	No		
	(2) Influence the outcome of any sp	pecific public election (see sec	tion 4955), or to carry	□ fes ⊡	NO		
	on, directly or indirectly, any vo	ter registration drive?		· · · 🗌 Yes 🗸	No		
	(3) Provide a grant to an individual	for travel, study, or other sim	nılar purposes?	Yes V	No		
	(4) Provide a grant to an organizati		· -	d			
	in section 4945(d)(4)(A)? See in			· · · · Yes 🗹	No		
	(5) Provide for any purpose other th	- ·	• • • • • • • • • • • • • • • • • • • •				
<b>L</b>	educational purposes, or for the			∟ Yes 🖭	No		
D	If any answer is "Yes" to 5a(1)–(5), Regulations section 53 4945 or in a	=			5b		
	Organizations relying on a current n				30		
С	If the answer is "Yes" to question 5a						
٠	tax because it maintained expenditu		•				
	If "Yes," attach the statement require			· · □ Yes □	No		
= -		· -		ume an			
5a	Did the foundation, during the year,			uilis oii			
h	a personal benefit contract? Did the foundation, during the year,			Yes V	No 6b		No
ь	If "Yes" to 6b, file Form 8870	pay premiums, directly or mo	ulrectly, on a personal be	enent contract?	80		NO
7a	At any time during the tax year, was	the foundation a party to a	prohibited tay chalter tra	neaction? $\square$			
	If yes, did the foundation receive an			∟ tes 🖭	No 7b		
	Is the foundation subject to the sect				/6		
,	excess parachute payment during th						
	<u> </u>			Yes 🗸	No L		<u> </u>
Pa	and Contractors	Officers, Directors, Trus	tees, Foundation Ma	anagers, Hignly Paid En	npioyees	,	
1	List all officers, directors, trustee				1		
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans and	(e) Expe		
	. ,	devoted to position	-0-)	deferred compensation	other a	llowand	ces
ee .	Additional Data Table						
2	Compensation of five highest-pa	id employees (other than t	hose included on line	1—see instructions). If nor	ne, enter "	NONE	."
_ \	Name - and address of angle amounts.	(b) Title, and average		(d) Contributions to	(a) Funan		
a)	Name and address of each employee more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expen other al		
		devoted to position		compensation			
ON	E						
ota	I number of other employees paid over	er \$50,000					(
				L	Form 00	O-DE	(2019

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Part VIII Information About Officers, Directors, Trustees, Foundary and Contractors (continued)	oundation Managers, Highly Pai	d Employees,
3 Five highest-paid independent contractors for professional services	(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		
List the foundation's four largest direct charitable activities during the tax year Include releva organizations and other beneficiaries served, conferences convened, research papers produced		Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see ins	structions)	
Describe the two largest program-related investments made by the foundation during the	tax year on lines 1 and 2	Amount
11		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		<b>P</b> 0
		Form <b>990-PF</b> (2018)

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

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

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

3

4

5

2

3a 3h

4

5

224.813

6.030

218.783

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274,035

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Form 990-PF (2018)							
Part XIII	Undistributed Income (see instruc	tions)					

Form 990-PF (2	018)
Part XIII	Und

1 Distributable amount for 2018 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2018

a Enter amount for 2017 only. . . . . . **b** Total for prior years Excess distributions carryover, if any, to 2018

a From 2013. . . . .

**b** From 2014. . . . c From 2015. . . d From 2016. . . . .

e From 2017. . . . . f Total of lines 3a through e. . . . . . . . 4 Qualifying distributions for 2018 from Part

XII, line 4 🕨 \$ a Applied to 2017, but not more than line 2a

instructions . . . . . . . . . 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

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. . .

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a . . . . . .

5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a) ) 6 Enter the net total of each column as indicated below:

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

c Treated as distributions out of corpus (Election required—see instructions). . . . . . . . . . **d** Applied to 2018 distributable amount. . . . . e Remaining amount distributed out of corpus

(Election required—see instructions). . . . .

**b** Applied to undistributed income of prior years

0

0

(a)

Corpus

(b)

Years prior to 2017

(c)

2017

251,159

224,813

HENRY, WILLOW LAKE, CLARK, FLORANCE & HAMLIN COUNTY SCHOOL DISTRICTS

Form **990-PF** (2018)



Enter gross amounts unless otherwise indicated		Unrelated bu	isiness income	Excluded by section	(e) Related or exempt	
	n service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	function income (See instructions )
		<u> </u>				
е						
	and contracts from government agencies					
	ership dues and assessments					
	nds and interest from securities			14	7,695 10,459	
	ntal income or (loss) from real estate			14	10,439	
	-financed property.					
	debt-financed property.			16	259,345	
	ntal income or (loss) from personal property					
	investment income					
8 Gain o	r (loss) from sales of assets other than ory					
	come or (loss) from special events			18	348,344	
	profit or (loss) from sales of inventory					
<b>11</b> Other	revenue a					
	al Add columns (b), (d), and (e).		0		625,843	
13 lotal. (See w	Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	ılatıons )		13	<b>.</b>	625,843
	I-B Relationship of Activities to the		ment of Exem	pt Purposes		
Line No. ▼	Explain below how each activity for which the accomplishment of the foundation's expression instructions (					

. ,	,
II	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1. Did the organization directly or indirectly agrigate in any of the following within a other organization described in section 501 (c) (after that section 501 (c)) agrigantations or in section 527, relating to political agrigan anions?  4. Transfer from the reporting foundation to a nonchantable exempt organization of (1) (Cash.  4. (1) (Cash.  4. (2) Other assets.  5. (3) Restal of facilities, equipment, or other assets.  5. (3) Restal of facilities, equipment, or other assets.  5. (4) Rembursterned arrangements.  5. (5) Loans or loan guarantees.  6. (6) Performance of services or membership or fundrisaring solicitations.  6. (6) Performance of services or membership or fundrisaring solicitations.  6. (7) Performance of services or membership or fundrisaring solicitations.  7. (8) If the assets to any of the above is "reg," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value of the goods, other assets, or services given by the reporting foundation if the foundation received received exercised to the probability of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on a linformation of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on a linformation of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on a linformation of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on a linformation of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on a linformation of my kn	Part	VATI	Exempt Organi	zations										
(3) Cash. (2) Other assets. (3) Sales of assets to a nonchantable exempt organization. (3) Sales of assets to a nonchantable exempt organization. (3) Rental of facilities, equipment, or other assets. (3) Sales of assets to a nonchantable exempt organization. (3) Rental of facilities, equipment, or other assets. (3) Cosm or loan guarantees. (3) Loans or loan guarantees. (3) Loans or loan guarantees. (3) Cosm or loan guarantees. (3) Endowment of services or membership or fundrasing solicitations. (3) Rental of facilities, equipment, making lists, other assets, or paid employees. (3) Endowment of services or "kee", complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services giver by the reporting foundation if the fromdation received less than fair market value of the goods, other assets, or services giver by the reporting foundation if the fromdation received less than fair market value of the goods, other assets, or services giver by which great the following schedule Column (b) should always show the fair market value of the goods, other assets, or services giver by the reporting foundation if the fromdation received less than fair market value of the goods, other assets, or services giver by the reporting foundation if the fromdation received less than fair market value of the goods, other assets, or services giver by the reporting foundation if the fromdation received less than fair market value of the goods, other assets, or services giver by the reporting foundation if the fromdation received less than fair market value of the goods, other assets, or services giver by the foundation for the fromdation received less than fair market value of the goods, other assets, or services giver by the foundation for the foundation											on 501		Yes	No
(2) Other assets.    1a(2)   No   No Other transactions   1a(2)   No   Other transactions   1a(2)   No   Other transactions   1b(2)   No   Other assets of assets from a noncharitable exempt organization.   1b(2)   No   (3) Rental of facilities, equipment, or other assets.   1b(3)   No   (4) Reimbursement arrangements.   1b(3)   No   (5) Performance of services or membership or fundrassing solicitations.   1b(3)   No   (6) Performance of services or membership or fundrassing solicitations.   1b(3)   No   0 if the answer to any of the above is "Ves," complete the following schedule Column (b) should always show the far market value in any transaction or sharing arrangements, show in column (d) the value of the goods, other assets, or services received   (a) line No   (b) Amount involves:   (c) Name of concharitable exempt organization   (d) Description of transfers, transactions, and sharing arrangements	<b>a</b> Tra	nsfers f	rom the reporting foun	dation to a n	oncharit	able exe	empt organizatio	n of						
b Other transactions (1) Sales of assets to a nonchantable exempt organization. (2) Purchases of assets from a nonchantable exempt organization. (3) Rental of facilities, equipment, or other assets. (3) Rental of facilities, equipment, or other assets. (3) Sales of Loans or loan guarantees. (3) Loans or loan guarantees. (4) Permanene diservices or membership or fundraising solicitations. (5) Loans or loan guarantees. (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or services in the following a contractive (Column (b) should always show the fair market value of the goods, other assets, or services sections or sharing arrangement, show to column (b) the value of the goods, other assets, or services sections or sharing arrangement, show to column (b) the value of the goods, other assets, or services sections or sharing arrangement, show to column (b) the value of the goods, other assets, or services sections or sharing arrangements or sharing arrangements or sharing arrangement	(1)	Cash.									. <u>1</u> a	(1)		No
(1) Sales of assets to a nonchantable exempt organization.  (2) Purchases of assets from a nonchantable exempt organization.  (3) Rental of facilities, equipment, or other assets.  (4) Rembursement arrangements.  (5) Loans or loan quarantees.  (6) Performance of services or membership or fundrasing solicitations.  (6) Performance of services or membership or fundrasing solicitations.  (6) Performance of services or membership or fundrasing solicitations.  (7) Interest or loan quarantees.  (8) Loans or loan quarantees.  (9) Interest or loan quarantees.  (10) Interest organization.  (10) Interest organization.  (10) Performance of services or membership or fundrasing solicitations.  (10) Interest organization.  (10) Interest organization.  (10) Interest organization.  (10) Interest organization.  (11) Interest organization.  (12) Interest organization.  (13) Line No.  (14) Remains organization.  (15) Interest organization.  (16) Interest organization.  (17) Interest organization.  (18) Interest organization.  (18) Interest organization.  (18) Interest organization.  (19) Interest orga											. 1a	(2)		No
(2) Purchases of assets from a nonchantable exempt organization.  (3) Rental of facilities, equipment, or other assets.  (4) Reimbursement arrangements.  (5) Loins or loan guarantees.  (6) Performance of services or memberation or fundraising solicitations.  (8) Exhange of facilities, equipment, making lists, other assets, or paid employees.  (9) Performance of services or memberation or fundraising solicitations.  (10(5) No  C Shaning of facilities, equipment, making lists, other assets, or paid employees.  (10(5) No  G Shange of large organization and interest value of the goods, other assets, or services egiven by the reporting foundation if the foundation received less than fair market value in any transaction or shaning arrangement, short in column (9) the value of the goods, other assets, or services egiven by the reporting foundation if the foundation received less than fair market value in any transaction or shaning arrangement, short in column (9) the value of the goods, other assets, or services egiven by the reporting foundation if the foundation received less than fair market value in any transaction or shaning arrangement, short in column (9) the value of the goods, other assets, or services received in a section 501(c) (6) Namount involved (e) Namount inv														
(3) Rental of facilities, aguipment, or other assets.  (4) Reimbursement arrangements.  (5) Loans or loan guarantees.  (6) Performance of services or membership or fundraising solicitations.  (6) Performance of services or membership or fundraising solicitations.  (7) A loans or loan guarantees.  (8) Loans or loan guarantees.  (9) Performance of services or membership or fundraising solicitations.  (9) Performance of services or membership or fundraising solicitations.  (10) Mile of the seeks, or services or one your term and the services of the goods, other assets, or services are serviced in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line loan (b) Amount model (c) Hame of noncrantable exempt organization (d) Description of transfers, transactions, and sharing arrangements of the goods of the services or membership organization of transfers, transactions, and sharing arrangements of the goods of the services or membership organization of transfers, transactions, and sharing arrangements of the goods of the services or membership organization of transfers, transactions, and sharing arrangements of the goods of the services of the goods of the go				•	-							<del>` '</del>		
(4) Rembursement arrangements.						-						<del>` ' </del>		
(5) Loans or loan guarantees. 1b(5) No (6) Performance of services or membership or fundrasing solicitations. 1b(5) No (6) Performance of services or membership or fundrasing solicitations. 1b(5) No (7) Starting of facilities, equipment, malling lists, other assets, or paid employees. 1c No (8) If the growte to any of the above is "Tree," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line No (b) Amount involved (c) Name of nondisintable exempt organization (d) Description of transfers, transactions, and sharing arrangements  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (d) their than section 501(c) (3)) or in section 527? No b if "Yes," complete the following schedule  (a) Name of organization (b) Type of organizations (c) Description of relationship  Under penalties of perjury, 1 declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge    Vinder penalties of perjury, 1 declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparers shown belief.   Signature of officer or trustee   Date   Title   Print/Type preparer's home-bisery   Print/Type preparer's name   Preparer's Signature   Date   Print/Type preparer's home-bisery   Print/Type preparer's name   Preparer's Signature   Print/Type preparer's name   Preparer's S												• •		
(c) Performance of services or membership or fundrasing solicitations														
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.  d if the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation if the foundation in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received  (a) Line No  (b) Amount movived  (c) Name of nonchantable exempt organization  (d) Description of transfers, transactions, and sharing arrangements  2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations  described in section Solic() (other than section Solic(s)(3)) or in section S27?  (a) Nome of organization  (b) Type of organization  (c) Description of relationship  Under penalties of perjury, i declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, its true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of my knowledge and belief, its true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of my knowledge and belief, its true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of my knowledge and belief, its true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of my knowledge and belief, its true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of my knowledge and belief, its true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of my knowledge and belief, its true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of my knowledge and belief, its true, correct, and complete Declaration of preparer (other than taxpayer) is ba			-									<del>` '  </del>		
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation reserved less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received  (a) Line No. (b) Amount involved (c) Name of nonchantable evering organization (d) Description of transfers, transactions, and sharing arrangements  2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?	٠,					_					_	<del>` '  </del>		
2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?	of t	he good	ls, other assets, or ser	vices given b	y the re	porting f	foundation If th	e fou	undation receive	d less than fair marl	ket value	e	•	
described in section 501(c) (other than section 501(c)(3)) or in section 527?	(a) Line	No	(b) Amount involved	(c) Name of	noncharit	table exer	mpt organization		(d) Description of	transfers, transactions,	and sharing	arrang	jement	ts
described in section 501(c) (other than section 501(c)(3)) or in section 527?														
described in section 501(c) (other than section 501(c)(3)) or in section 527?														
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described in section 501(c) (other than section 501(c)(3)) or in section 527?														
described in section 501(c) (other than section 501(c)(3)) or in section 527?														
described in section 501(c) (other than section 501(c)(3)) or in section 527?	-													
described in section 501(c) (other than section 501(c)(3)) or in section 527?														
described in section 501(c) (other than section 501(c)(3)) or in section 527?														
described in section 501(c) (other than section 501(c)(3)) or in section 527?			1. 1 1											
b If "Yes," complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge    Value			•	•			•			_				
(a) Name of organization  (b) Type of organization  (c) Description of relationship  (d) Type of organization  (e) Description of relationship  (c) Description of relationship  (d) Name of organization  (e) Description of relationship  (e) Description of relationship  (f) Type of organization  (g) Description of relationship  (h) Type of organization  (h) Type of organization  (c) Description of relationship  (d) Description of relationship  (e) Description of relationship  (f) Description of relationship  (h) Type of organization  (c) Description of relationship  (e) Description of relationship  (f) Description of relationship  (h) Type of organization  (c) Description of relationship  (a) Perparety of the property of the property of the perparety of my knowledge and statements, and to the best of my knowledge and statements, and to			, , ,		1 501(c)	(3)) or II	n section 52/?	•		⊔ Ye	es 🖭 N	5		
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge    ******   2019-09-24	<b>D</b> 11	res, co	•		ı	(b	) Type of organiza	ation	1	(c) Description	of relationsh	מו		
of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge			(a) Hame or organization	211			Type of organize	1011		(C) Description	or relations	<u>'P</u>		
Sign Here  Sign Which preparer has any knowledge  2019-09-24  Signature of officer or trustee  Print/Type preparer's name  Preparer  OAKLEY THOENY  Firm's name ▶ BRADY MARTZ & ASSOCIATES  Firm's address ▶ 2257 3RD AVENUE WEST  Phone no. (701) 483-6000														
Sign Here  Sign Which preparer has any knowledge  2019-09-24  Signature of officer or trustee  Print/Type preparer's name  Preparer  OAKLEY THOENY  Firm's name ▶ BRADY MARTZ & ASSOCIATES  Firm's address ▶ 2257 3RD AVENUE WEST  Phone no. (701) 483-6000														
Sign Here  Sign Which preparer has any knowledge  2019-09-24  Signature of officer or trustee  Print/Type preparer's name  Preparer  OAKLEY THOENY  Firm's name ▶ BRADY MARTZ & ASSOCIATES  Firm's address ▶ 2257 3RD AVENUE WEST  Phone no. (701) 483-6000														
of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge		T												
Print/Type preparer's name  Preparer's Signature  OAKLEY THOENY  Prim's name ▶ BRADY MARTZ & ASSOCIATES  Firm's address ▶ 2257 3RD AVENUE WEST  Pate	<b>.</b>	of my	knowledge and belief	, it is true, co							ased on all	ınform	nation	of
Print/Type preparer's name Preparer's Signature  OAKLEY THOENY  Prim's name ▶ BRADY MARTZ & ASSOCIATES  Firm's address ▶ 2257 3RD AVENUE WEST  Poate  Title  Date  Check if self- employed ▶ □  Point/Type preparer's name  Preparer's Signature  Date  Check if self- employed ▶ □  Prim's EIN ▶ 45-0310328		*	****				2019-09-24		ret		return			
Paid Preparer Use Only    Check if self-employed ▶ □   P01707107		s	ignature of officer or t	rustee		Date		Title		below	_			
Paid Preparer Use Only  OAKLEY THOENY  2019-09-24  Firm's name ▶ BRADY MARTZ & ASSOCIATES  Firm's address ▶ 2257 3RD AVENUE WEST  Phone no. (701) 483-6000			Print/Type preparer's	s name	Prepare		nature		Date	Check if self-		17071	07	
Use Only   Firm's address ► 2257 3RD AVENUE WEST	Paid		OAKLEY THOENY	LEY THOENY			2019				70	./0/1	J/	
Firm's address ► 2257 3RD AVENUE WEST  Phone po. (701) 483-6000	-		Firm's name ► BRA	DY MARTZ &	ASSOCI	ATES				F	Firm's EIN I	►45-0	3103	28
Phone no. (701) 483-6000	use (	Jilly	Firm's address ▶ 22	257 3RD AVF	NUE WE	ST								
								Phone no (	701)	483-6	5000			

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, not paid, enter hours per week Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation KEVIN WEGEHAUPT **PRESIDENT** O 0 0 50 PO BOX 1210

				1
PO BOX 1210 ABERDEEN, SD 574021210	0 50			
MARISE CASTER	VICE PRESIDENT	0	0	0
ABERDEEN, SD 574021210				

ABERDEEN, SD 574021210				
TOM LABRIE	SECRETARY/TREASURER	0	0	0
PO BOX 1210 ABERDEEN, SD 574021210	0 50			
GARY NEUBERGER	DIRECTOR	0	0	0

PO BOX 1210 ABERDEEN, SD 574021210	0 50			
GARY NEUBERGER	DIRECTOR	0	0	0
PO BOX 1210 ABERDEEN, SD 574021210	0 50			
DAVID MORITZ	DIRECTOR	0	0	0

GARY NEUBERGER	DIRECTOR	0	0	0
PO BOX 1210 ABERDEEN, SD 574021210	0 50			
DAVID MORITZ	DIRECTOR	0	0	0
DO BOY 1310	0 50			

ABERDEEN, SD 574021210				
DAVID MORITZ	DIRECTOR	0	0	0
PO BOX 1210 ABERDEEN, SD 574021210	0 50			

PO BOX 1210 ABERDEEN, SD 574021210	DIRECTOR 0 50	0	0	
DACOTAH BANK	MANAGER	32,765	0	

1 00

PO BOX 1210

ABERDEEN, SD 574021210

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

or substantial contributor

Name and address (home or business)

820 N WASHINGTON AVE MADISON, SD 57042

Total .

	or substantial contributor			
a Paid during the year				
BLACK HILLS STATE UNIVERSITY 1200 UNIVERSITY ST SPEARFISH, SD 57799		UNIVERSITY	SCHOLARSHIPS	3,590
BOISE STATE UNIVERSITY 1910 W UNIVERSITY DR		UNIVERSITY	SCHOLARSHIPS	950

recipient

SPEARFISH, SD 57799			
BOISE STATE UNIVERSITY 1910 W UNIVERSITY DR BOISE, ID 83725	UNIVERSITY	SCHOLARSHIPS	950
DAKOTA STATE UNIVERSITY	UNIVERSITY	SCHOLARSHIPS	4,330

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

recipient

any foundation manager

or substantial contributor

Name and address (home or business)

a Paid during the year			
DAKOTA WESLEYAN UNIVERSITY 1200 W UNIVERSITY AVE MITCHELL, SD 57301	UNIVERSITY	SCHOLARSHIPS	2,640
EVANGEL UNIVERSITY	UNIVERSITY	SCHOLARSHIPS	4,330

1200 W UNIVERSITY AVE MITCHELL, SD 57301			
EVANGEL UNIVERSITY 1111 N GLENSTONE AVE SPRINGFIELD, MO 65802	UNIVERSITY	SCHOLARSHIPS	4,

1111 N GLENSTONE AVE SPRINGFIELD, MO 65802			,,
IOWA STATE UNIVERSITY 2433 UNION DR AMES, IA 50011	UNIVERSITY	SCHOLARSHIPS	950

· ·			
IOWA STATE UNIVERSITY	UNIVERSITY	SCHOLARSHIPS	
2433 UNION DR			
AMES, IA 50011			

Total		207.490
AMES, IA SUUII		

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			
LAKE AREA TECHNICAL INSTITUTE 1201 ARROW AVE NE WATERTOWN, SD 57201	UNIVERSITY	SCHOLARSHIPS	30,730

WATERTOWN, SD 57201			
MAYVILLE STATE UNIVERSITY 330 3RD STREET NE MAYVILLE, ND 58257	UNIVERSITY	SCHOLARSHIPS	950
MINNESOTA STATE LINIVERSITY -	LINIVERSITY	SCHOLARSHIPS	2 640

330 3RD STREET NE MAYVILLE, ND 58257			
MINNESOTA STATE UNIVERSITY - MOORHEAD 1104 7TH AVE SOUTH MOORHEAD, MN 56563	UNIVERSITY	SCHOLARSHIPS	2,640

MINNESOTA STATE UNIVERSITY - MOORHEAD 1104 7TH AVE SOUTH MOORHEAD, MN 56563	UNIVERSITY	SCHOLARSHIPS	2,640
Total	 	▶ 3a	207,480

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

Paid during the year

a raid during the year			
MINNESOTA WEST COMMUNITY AND TECHNICAL COLLEGE 1450 COLLEGE WAY WORTHINGTON, MN 56187	UNIVERSITY	SCHOLARSHIPS	3,590

WORTHINGTON, MN 30187			
MITCHELL TECHNICAL INSTITUTE 1800 EAST SPRUCE STREET MITCHELL, SD 57301	UNIVERSITY	SCHOLARSHIPS	2,640
MOUNT MARTY COLLEGE	UNIVERSITY	SCHOLARSHIPS	10.560

1800 EAST SPRUCE STREET MITCHELL, SD 57301			
MOUNT MARTY COLLEGE 1105 WEST 8TH STREET YANKTON, SD 57078	UNIVERSITY	SCHOLARSHIPS	10,560

MOUNT MARTY COLLEGE 1105 WEST 8TH STREET YANKTON, SD 57078	UNIVERSITY	SCHOLARSHIPS	10,560
Total	 	▶ 3a	207,480

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 Foundation Amount show any relationship to status of contribution any foundation manager

or substantial contributor

Name and address (home or business)

Total .

recipient

a Paid during the year			
NORTH DAKOTA STATE UNIVERSITY 1340 ADMINISTRATION AVE FARGO, ND 58102	UNIVERSITY	SCHOLARSHIPS	3,590
NORTHERN STATE UNIVERSITY	UNIVERSITY	SCHOLARSHIPS	16,030

FARGO, ND 58102			
NORTHERN STATE UNIVERSITY 1200 SOUTH JAY STREET ABERDEEN, SD 57401	UNIVERSITY	SCHOLARSHIPS	16,030
PRESENTATION COLLEGE 1500 NORTH MAIN STREET	UNIVERSITY	SCHOLARSHIPS	2,640

NORTHERN STATE UNIVERSITY 1200 SOUTH JAY STREET ABERDEEN, SD 57401	UNIVERSITY	SCHOLARSHIPS	16,03
PRESENTATION COLLEGE 1500 NORTH MAIN STREET ABERDEEN, SD 57401	UNIVERSITY	SCHOLARSHIPS	2,64

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			
SOUTH DAKOTA SCHOOL OF MINES & TECHNOLOGY 501 E SAINT JOSEPH ST	UNIVERSITY	SCHOLARSHIPS	2,640

RAPID CITY, SD 57701			
SOUTH DAKOTA STATE UNIVERSITY PO BOX 511	UNIVERSITY	SCHOLARSHIPS	79,830

SOUTH DAKOTA STATE UNIVERSITY PO BOX 511 BROOKINGS, SD 57007	UNIVERSITY	SCHOLARSHIPS	79,830
UNIVERSITY OF MARY	UNIVERSITY	SCHOLARSHIPS	2,640

BROOKINGS, SD 57007			
UNIVERSITY OF MARY 7500 UNIVERSITY DR BISMARCK, ND 58504	UNIVERSITY	SCHOLARSHIPS	2,640

UNIVERSITY OF MARY 7500 UNIVERSITY DR BISMARCK, ND 58504	UNIVERSITY	SCHOLARSHIPS	2,640
Total	 	▶ 3a	207,480

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			
UNIVERSITY OF MINNESOTA - TWIN CITIES 100 CHURCH ST SOUTHEAST MINNEAPOLIS, MN 55455	UNIVERSITY	SCHOLARSHIPS	950

MINNEAPOLIS, MN 55455			
UNIVERSITY OF SIOUX FALLS 1101 WEST 22ND STREET SIOUX FALLS, SD 57105	UNIVERSITY	SCHOLARSHIPS	3,590

UNIVERSITY OF SIOUX FALLS 1101 WEST 22ND STREET SIOUX FALLS, SD 57105	UNIVERSITY	SCHOLARSHIPS	3,590
UNIVERSITY OF SOUTH DAKOTA 414 E CLARK STREET	UNIVERSITY	SCHOLARSHIPS	14,890

SIOUX FALLS, SD 57105			
UNIVERSITY OF SOUTH DAKOTA 414 E CLARK STREET VERMILLION, SD 57069	UNIVERSITY	SCHOLARSHIPS	14,890

414 E CLARK STREET	0100/17/220/05 07 200			
	UNIVERSITY OF SOUTH DAKOTA 414 E CLARK STREET VERMILLION, SD 57069	UNIVERSITY	SCHOLARSHIPS	14,890

VERMILLION, SD 57069			
Total	 	 ▶ 3a	207 <i>.</i> 480

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			
VALLEY CITY STATE UNIVERSITY 101 COLLEGE STREET SW VALLEY CITY, ND 58072	UNIVERSITY	SCHOLARSHIPS	950

VALLET CITT, ND 38072			
CONCORDIA COLLEGE901 8TH ST S MOORHEAD, MN 56562	UNIVERSITY	SCHOLARSHIPS	1,690
TRINITY BIBLE COLLEGE	UNIVERSITY	SCHOLARSHIPS	1,690

MOORHEAD, MN 56562			
TRINITY BIBLE COLLEGE 50 SIXTH AVE S ELLENDALE, ND 58436	UNIVERSITY	SCHOLARSHIPS	1,690

TRINITY BIBLE COLLEGE 50 SIXTH AVE S ELLENDALE, ND 58436	UNIVERSITY	SCHOLARSHIPS	1,
Total	 	▶ 3a	207,480

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 husiness)

Name and address (nome or business)	or substantial contributor	·		
a Paid during the year				
UNIVERSITY OF MINNESOTA - MORRIS		UNIVERSITY	SCHOLARSHIPS	1,690

600 EAST 4TH ST MORRIS, MN 56267	ONLY ENDIT	oened wening	1,030
UNIVERSITY OF NORTHWESTERN ST PAUL 3003 SNELLING AVE N	UNIVERSITY	SCHOLARSHIPS	1,690

UNIVERSITY OF NORTHWESTERN ST PAUL 3003 SNELLING AVE N ST PAUL, MN 55113	UNIVERSITY	SCHOLARSHIPS	
LINITY ED CITY OF ODE CON	LINITYEDCITY	CCHOLARCHIDG	i

3003 SNELLING AVE N ST PAUL, MN 55113			
UNIVERSITY OF OREGON 1585 EAST 13TH AVE	UNIVERSITY	SCHOLARSHIPS	1,690

ST PAUL, MN 55113			
UNIVERSITY OF OREGON 1585 EAST 13TH AVE EUGENE, OR 97403	UNIVERSITY	SCHOLARSHIPS	1,690

UNIVERSITY OF OREGON	ONIVERSITY	SCHULARSHIPS	1,69
1585 EAST 13TH AVE			
EUGENE, OR 97403			
-			

1585 EAST 13TH AVE EUGENE, OR 97403			
Total	 	▶ 3a	207,480

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			
UNIVERSITY OF NORTH DAKOTA 3501 UNIVERSITY AVE	UNIVERSITY	SCHOLARSHIPS	1,690
GRAND FORKS, ND 58202			

GRAND FORKS, ND 58202			
NORTH DAKOTA STATE COLLEGE OF SCIENCE 800 SIXTH STREET NORTH	UNIVERSITY	SCHOLARSHIPS	1,690
WALIDETON ND FOOTC			

NORTH DAKOTA STATE COLLEGE OF	UNIVERSITY	SCHOLARSHIPS	1,690
SCIENCE			
800 SIXTH STREET NORTH			
WAHPETON, ND 58076			

Total .

efile GRAPHIC print - DO NOT	PROCESS	As Filed D	ata -	D	LN: 93491276000179		
TY 2018 Accounting Fees Schedule							
	Name:	EDWARD	L SCHWAB MEMO	RIAL FOUNDATION			
DACOTAH BANK							
	EIN:	91-1770	168				
Category	Am	ount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
ACCOUNTING		724	724		0		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491276000179
TY 2018 Investments Corpora	te Bonds Schedule	2	
Name:	EDWARD L SCHWAB M	EMORIAL FOUNDATION	
	DACOTAH BANK		
EIN:	91-1770168		
vestments Corporate Bonds Schedule			,
Name of Bond		End of Year Book	End of Year Fair

CORPORATE BONDS

Value

388,772

Market Value

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491276000179
TY 2018 Investments Corpora	te Stock Sched	iule
Namai	EDWARD I CCHW	AB MEMORIAL FOUNDATION
name:		AB MEMORIAL POUNDATION
	DACOTAH BANK	
EIN:	91-1770168	
Investments Corporation Stock Schedule		

Investments Corporation Stock Schedule					
Name of Stock		End of Year Book Value	End of Year Fair Market Value		
STOCK - COMMON		171,303	198,974		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491276000179
TY 2018 Investments - Other S	Schedule	
Name:	EDWARD L SCHWA	AB MEMORIAL FOUNDATION
	DACOTAH BANK	

Investments	Other	Schedule

CERTIFICATE OF DEPOSIT

MUTUAL FUNDS

Category/ Item		Listed at Cost or	Book Value	
Investments Other Schedule 2				
EIN:	91-1770168	}		

30,000

181,604

30,566

183,336

Investments Other Schedule 2			
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fa Market Value

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
MUTUAL FUNDS	AT COST	38.182	36.869

AT COST

AT COST

efile GRAPHIC print - DO NOT PROCESS	S As Filed Data		DLI	N: 93491276000179		
TY 2018 Legal Fees Schedul	e					
Nam	e: EDWARD L S	SCHWAB MEMORIA	AL FOUNDATION			
	<b>DACOTAH</b> В	DACOTAH BANK				
EI	<b>N:</b> 91-1770168					
Category	Amount Net Investment Adjusted Net Disbursement Income for Charitable Purposes					
LEGAL	10	10		0		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491276000179			
TY 2018 Other Expenses Schedule							
Name: EDWARD L SCHWAB MEMORIAL FOUNDATION							
	DACOTAH BANK						
<b>EIN:</b> 91-1770168							
Other Expenses Schedule							
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
INVESTMENT EXPENSE	509	509		0			
UNCASHED CHECK	950	0		950			
DRILL RENTAL	384	384		0			

2,014

1,703

2,014

1,703

SEEDING

INSURANCE

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	<u>-</u>	DLI	N: 93491276000179
TY 2018 Taxes Schedule				
Name:	EDWARD L SCHWAB MEMORIAL FOUNDATION			
	DACOTAH BANK			
<b>EIN:</b> 91-1770168				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL INCOME TAXES	5,224	5,224		0
FOREIGN TAXES PAID ON DIVIDEND INCOME	42	42		0
REAL ESTATE TAXES	38,051	38,051		0