Form 990-PF

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 www irs qov/Form990PF for instructions and the latest information

2019
Open to Public Inspection

Department of the Treasury Internal Revenue Service

For calendar year 2019 or tax year beginning and ending A Employer identification number Name of foundation FRED & MARY MAAS FOUNDATION 46-0458582 Number and street (or P O box number if mail is not delivered to street address) Boom/suite B Telephone number 605-765-2494 PO BOX 205 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 57442-0205 GETTYSBURG, SD Initial return G Check all that apply: Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation. Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation X Cash Fair market value of all assets at end of year | J | Accounting method. Accrual F. If the foundation is in a 60-month termination Other (specify) (from Part II, col (c), line 16) under section 507(b)(1)(B), check here 4,574,659. (Part I, column (d), must be on cash basis) ▶\$ Part I Analysis of Revenue and Expenses
(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (e)) (d) Disbursements for charitable purpose (cash basis only) (b) Net investment (c) Adjusted net (a) Revenue and expenses per books income income N/A Contributions, gifts, grants, etc., received 2 Check X if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 5. STATEMENT 59,054. 59,054. STATEMENT 4 Dividends and interest from securities 122,252 122,252. STATEMENT 5a Gross rents 122,252. h Net rental income or (loss) 4,728 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a RECEIVED 250,686. 4.728 7 Capital gain net income (from Pert IV, line 2) 8 Net short-term capital gain .IUN **2 2** 2020 Income modifications Orosa sales less returns and allowances OGDEN D Less Cost of goods sold a c Gross profit or (loss) 11 Other income 186,039. 186,039. 12 Total. Add lines 1 through 11 5,300. 5,300. Ō. 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 4,752. 4,752. 0. STMT 16a Legal fees 4,257. 4,257. 0. STMT 5 **b** Accounting fees 12,507. 12,507. 6 0. STMT c Other professional fees 17 Interest 0. 7,601 7,601. STMT 7 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 10,192. 10,192. 0. STMT 8 23 Other expenses 24 Total operating and administrative 44,609. 44,609. 0. expenses. Add lines 13 through 23 357,800. 357,800. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 44,609. 357,800. 402,409. Add lines 24 and 25 27 Subtract line 26 from line 12: -216,370.2 Excess of revenue over expenses and disbursements 141,430. b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

923501 12-17-19 LHA For Paperwork Reduction Act Notice, see instructions.

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ח	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	f year
P:	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	42,189.	58,689.	58,689.
	2	Savings and temporary cash investments .	272,989.	169,341.	169,341.
	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			
	7	Other notes and loans receivable			
		Less; allowance for doubtful accounts			
ste	_	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
٩		Investments - U.S. and state government obligations	1,639,333.	1,510,112.	1,794,129.
		Investments - corporate stock STMT 9	1,039,333.	1,510,112.	1,/34,123.
		Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis	620,458.	620,458.	2,552,500.
	40	Less accumulated depreciation	020,430.	020,430.	2,332,3001
	12 13	Investments - mortgage loans Investments - other			
	14	Land, buildings, and equipment: basis			
	''	Less accumulated depreciation			
	15	Other assets (describe			
		Total assets (to be completed by all filers - see the			
		instructions Also, see page 1, item 1)	2,574,969.	2,358,600.	4,574,659.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
s	19	Deferred revenue			
iabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable			
۳	22	Other liabilities (describe ► PAYROLL TAX LIABIL)	458.	459.	
_	23	Total liabilities (add lines 17 through 22)	458.	459.	
		Foundations that follow FASB ASC 958, check here			
è	١	and complete lines 24, 25, 29, and 30.			
auc	24	Net assets without donor restrictions			<u> </u>
Bal	25	Net assets with donor restrictions			<u> </u>
þ		Foundations that do not follow FASB ASC 958, check here			i
Ē	00	and complete lines 26 through 30.	3,176,813.	3,176,813.	
Net Assets or Fund Balances	26 27	Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
set	28	Retained earnings, accumulated income, endowment, or other funds	-602,302.	-818,672.	
t As	29	Total net assets or fund balances	2,574,511.	2,358,141.	
ž	25	Total first about of faile balances		.,,	
	30	Total liabilities and net assets/fund balances	2,574,969.	2,358,600.	
P	art		lances		
		····			
		net assets or fund balances at beginning of year - Part II, column (a), line a	29		 2 E74 E11
	•	st agree with end-of-year figure reported on prior year's return)		1	2,574,511.
		r amount from Part I, line 27a		2	0.
		r increases not included in line 2 (itemize)	- •	3	2,358,141.
		lines 1, 2, and 3 eases not included in line 2 (itemize)		4 5	2,338,141.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (h) line 20	6	2,358,141.
<u>. </u>	ivia	not assets of fund paramous at one or year time 4 minus mic of 4 artiff, co	1011 (0); mo 23		Form 990-PF (2019)

Form 990-PF (2019) FRED & MARY MAAS FOUNDATION

Part IV | Capital Gains and Losses for Tax on Investment Income

(a) List and describe	the kind(s	e) of property sold (for exar for common stock, 200 shs	mple, real esta		P	- Purc	Hase	(c) Date a	acquired	(d) Date sold (mo , day, yr.)
18 PUBLICLY TRADE			. WICO 00.)		1 0	D - Dollation				12/31/19
b CAPITAL GAINS					 	F 01/01/19 12/31/				12/31/19
C CALLIAD GAIND	<u> </u>	/BNDD			 					
									_	
<u> </u>										
(e) Gross sales price	(f) I	Depreciation allowed (or allowable)		st or other basis expense of sale		٠	•		ain or (loss (f) minus	
a 245,252.				245,25	2.					-706.
b 5,434.								-		5,434.
C										
d										
e										
Complete only for assets showing	ig gain in	column (h) and owned by t	he foundation	on 12/31/69					ol. (h) gaın	
(i) FMV as of 12/31/69	((j) Adjusted basis as of 12/31/69		cess of col. (1) col. (3), if any			col.		ot less tha (from col. (
a					Ì					-706.
b		-								5,434.
С										
d										
е										
2 Capital gain net income or (net ca	ıpıtal loss)	If gain, also enter If (loss), enter -0			}[2				4,728.
3 Net short-term capital gain or (los	ss) as defi	•								
If gain, also enter in Part I, line 8,			- (0).] [
If (loss), enter -0- in Part I, line 8	•	•			ال	3			N/A	
Part V Qualification U	nder S	ection 4940(e) for	Reduced	Tax on Net	Inve	stm	ent Inco	me		
(For optional use by domestic private if section 4940(d)(2) applies, leave the Was the foundation liable for the sec	nis part bla	ank tax on tho distributable am	ount of any ye	ar in the base per		,				Yes X No
If "Yes," the foundation doesn't qualif										
1 Enter the appropriate amount in (each colur	· · ·	istructions ber	ore making any er						/d\
Base period years		(b) Adjusted qualifying dist	tributions	Net value of no	(C) nchar		oteook eou		Distril	(d)
Calendar year (or tax year beginni	ng in)			Net value of no			9,946		(coi. (b) aiv	ided by col (c)) .049541
2018			7,794. 1,657.				9,940 1,477			.023303
2017			2,571.				3,598			.051226
2015			$\frac{2}{1},\frac{3}{1}$				8,550			.049382
2014			7,100.				$\frac{0,330}{4,405}$.046695
2014	ı		7,100.			, 50	1,100	1		.040033
2 Total of line 1, column (d)								2		.220147
3 Average distribution ratio for the	5-vear has	e nerind - divide the total c	n line 2 hv 5 (or by the number	er of v	ears				<u> </u>
the foundation has been in exister			/// //// L by o	o, or by the number	o. o. y	ours		3		.044029
the regretation has been in existen	100 11 1033	than o yours								******
4 Enter the net value of noncharitati	le-use ass	sets for 2019 from Part X, I	ine 5					4		4,511,684.
5 Multiply line 4 by line 3								5		198,645.
6 Enter 1% of net investment incom	ne (1% of	Part I, line 27b)						6		1,414.
7 Add lines 5 and 6								7		200,059.
8 Enter qualifying distributions from	n Part XII,	line 4						8		357,800.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, ch	eck the box in Part VI, line	1b, and comp	lete that part usin	g a 19	% tax r	ate.			

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	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 -	see ins	struct	ions	<u>) </u>
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.					ļ
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1		1	,41	.4.
	of Part I, line 27b					1
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2				0.
3	Add lines 1 and 2	3		1	,41	4.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		1	,41	4.
6	Credits/Payments:					
_	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 1,360.					1
	Exempt foreign organizations - tax withheld at source 6b 0.	¬				
	Tax paid with application for extension of time to file (Form 8868) 6c 0.	1				1
	Backup withholding erroneously withheld 6d 0.	⊸ f				- 1
	Total credits and payments Add lines 6a through 6d	7	1	1	, 36	0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	1		-	3.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	†			7.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	 			
11		11	 			
	rt VII-A Statements Regarding Activities	, ,,				
$\overline{}$	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interveni	e in			Yes	No
••	any political campaign?	,	ŀ	1a		X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the defining the year (either directly) for political purposes?	ution	İ	1b		X
U	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or		ŀ			 -1
	distributed by the foundation in connection with the activities.					- 1
	Did the foundation file Form 1120-POL for this year?		1	1c -		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		<u> </u>			 -
u	(1) On the foundation. \blacktriangleright \$ (2) On foundation managers. \blacktriangleright \$ 0 .				ľ	1
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	-				1
٠	managers > \$ 0.					- 1
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		ľ	2		<u></u>
_	If "Yes," attach a detailed description of the activities.		-		\neg	<u> </u>
•	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	nr.				
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	,	ľ	3		x
40	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		-	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	1/A	4b	\dashv	
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	_	``` 	5		X
9	If "Yes," attach the statement required by General Instruction T		-	- 	\dashv	
e	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		ļ			
0	By language in the governing instrument, or			}		
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the stat 	e law				
	remain in the governing instrument?	J IGVV	}	6	$\overline{\mathbf{x}}$	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		-		X	
7	שום הום וסטווסמוטוז המים מג ופמטג פט,טטט ווו מסטפוט מג מווץ ווווופ טטוווון נוופ פפטו י זו דיפט, בטוווףופנפ רמוג וו, כטו. (כ), מווט רמוג אי				 +	<u> </u>
	Enter the states to which the foundation reports or with which it is registered. See instructions.					
oa	SD				- 1	ŀ
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	_	——			
0			ŀ	8b -	${\mathbf{x}}$	—
^	of each state as required by General Instruction G? If "No," attach explanation	nder		-00	 +	 -
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call year 2019 or the tax year beginning in 2019? See the instructions for Part XIV If "Yes," complete Part XIV	iiudi	ŀ	9	-	\overline{x} 2
40	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		-	10	$\overline{}$	$\frac{x}{x}$
10	DID any persons decome substantial continuous during the tax year in Yes, attach a schedule listing their names and addresses	_	Forr	n 990-	PF /	

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Pa	tVII-A Statements Regarding Activities (continued)			
			Yes	No
11	it any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	ection 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	old the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?		1	
	''Yes," attach statement. See instructions	12		X
13	old the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Vebsite address ► N/A			
14	he books are in care of ▶ NEUMAYR & SMITH Telephone no. ▶ 605-7			
	ocated at ▶105 N. EXENE, GETTYSBURG, SD ZIP+4 ▶5	<u> 7442</u>	<u>-02</u>	<u>05</u>
15	ection 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			· 🗀
	nd enter the amount of tax-exempt interest received or accrued during the year	<u>N</u>	/A	
16	at any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	-
	ecurities, or other financial account in a foreign country?	16		X
	see the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			l 1
	preign country >			
Pa	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	ile Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	Ouring the year, did the foundation (either directly or indirectly):	İ		1 1
	1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?		1	
	3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	ļ.		
	4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	5) Transfer any income or assets to a disqualified person (or make any of either available		i	
	for the benefit or use of a disqualified person)?	-		
	6) Agree to pay money or property to a government official? (Exception, Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after	ŀ		
	termination of government service, if terminating within 90 days)			
b	f any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	41		
	ection 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b	$\vdash \vdash$	<u> </u>
	organizations relying on a current notice regarding disaster assistance, check here			
C	old the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			┰
	efore the first day of the tax year beginning in 2019?	1c	\vdash	<u> </u>
2	axes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
_	lefined in section 4942(j)(3) or 4942(j)(5)): It the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
a	id and 6e) for tax year(s) beginning before 2019? Yes X No			
	f "Yes," list the years \(\bigcup_{ } \), \(\bigcup_{ } \), \(\bigcup_{ } \)			
h	tre there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
٠	aluation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	tatement - see instructions) N/A	2b		
c	f the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
·	>		j	
3a	old the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	uring the year?			1
b	f "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after			
•	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	if holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,		_	<u> </u>
	ichedule C, to determine if the foundation had excess business holdings in 2019) . N/A	3b		
4a	old the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	old the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	ad not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		X

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Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be Re	equired (continu	ued)		
 Part VII-B Statements Regarding Activities for Which Formula Statements Regarding Activities for Which Formula Statements Regarding Activities for Which Formula Statements State	4945(e))? to carry on, directly or indire didescribed in section or educational purposes, or fo	ctly, Ye Ye Ye Ye Ye	S X NO S X NO S X NO S X NO	Yes	No
Organizations relying on a current notice regarding disaster assistance, check h c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	om the tax because it maintai N	[/A			
a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a pulif "Yes" to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax sib if "Yes," did the foundation receive any proceeds or have any net income attribution is the foundation subject to the section 4960 tax on payment(s) of more than \$ excess parachute payment(s) during the year? Part VIII Information About Officers, Directors, Truster Paid Employees, and Contractors	helter transaction? table to the transaction? 1,000,000 in remuneration or	Y6	es X No	6b 7b	X
1 List all officers, directors, trustees, and foundation managers and the	eir compensation.				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp account, allowa	ense , other nces
SEE STATEMENT 11		5,300.	. 0.		0.
Compensation of five highest-paid employees (other than those incl	uded on line 1). If none, o	enter "NONE."			
(a) Name and address of each employee paid more than \$50,000 NONE	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp account, allowa	, other
Total number of other employees paid over \$50,000		<u> </u>	Form	990-PF	(2019)

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NO		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
750 000 for a few and a fe		▶ 0
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities	·	
	aformation such as the	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in number of organizations and other beneficiaries served, conferences convened, research papers produced,		Expenses
1 N/A		
1		

2		
3		
4		
Dort IV D I O		
Part IX-B Summary of Program-Related Investments	t and U	Amount
Describe the two largest program related investments made by the foundation during the tax year on lines $1 N/A$	1 4110 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		

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Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	dations, s	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		- · · · · · · · · · · · · · · · · · · ·
•	Average monthly fair market value of securities	1a	1,977,189.
	Average of monthly cash balances	1b	1,977,189. 51,001.
C	Fair market value of all other assets	1c	2,552,200.
d	Total (add lines 1a, b, and c)	1d	4,580,390.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) - 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	4,580,390.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	68,706.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,511,684.
6	Minimum investment return. Enter 5% of line 5	6	225,584.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations, check here ▶ □ and do not complete this part)	d certain	
1	Minimum investment return from Part X, line 6	1	225,584.
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019 (This does not include the tax from Part VI.)		
c	Add lines 2a and 2b	2c	1,414.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	224,170.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	224,170.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	224,170.
	art XII. Qualifying Distributions (see instructions)	,	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	357,800. 0.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	·
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8; and Part XIII, line 4	4	357,800.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	1,414. 356,386.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	356,386.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	ualifies for	the section

Form **990-PF** (2019)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI,	·			224 170
tine 7				224,170.
2 Undistributed income, if any, as of the end of 2019			100 007	
a Enter amount for 2018 only			120,027.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014				
b From 2015				
c From 2016				
d From 2017				1
e From 2018	. 0.			
f Total of lines 3a through e 4 Qualifying distributions for 2019 from				
Part XII, line 4: ► \$357,800.				
			120,027.	
a Applied to 2018, but not more than line 2a	<u>-</u>		120,027	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)	<u> </u>			<u></u>
c Treated as distributions out of corpus	0.			
(Election required - see instructions)				224,170.
d Applied to 2019 distributable amount	13,603.			224,170.
e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2019	13,003.			
(If an amount appears in column (d), the same amount must be shown in column (a))	0.			
6 Enter the net total of each column as				
indicated below:	12 602			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	13,603.			
b Prior years' undistributed income. Subtract		0.		
line 4b from line 2b		0.		
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		0.		
d Subtract line 6c from line 6b Taxable		-		
amount - see instructions		0.		
e Undistributed income for 2018. Subtract line			•	
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2020				· 0.
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) 🐔 📩	0.			
8 Excess distributions carryover from 2014			,	,
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2020.				
Subtract lines 7 and 8 from line 6a	13,603.			
10 Analysis of line 9:				
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				
d Excess from 2018				
e Excess from 2019 13,603.				
923581 12-17-19				Form 990-PF (2019)

Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Purpose of grant or Foundation show any relationship to Amount status of recipient any foundation manager contribution Name and address (home or business) or substantial contributor a Paid during the year AMERICAN LEGION AUXILIARY NONE 501(C)(3) DUILTS OF VALOR 15948 309TH AVE PROGRAM 4,800. GETTYSBURG, SD 57442 AVERA ST. MARY'S FOUNDATION NONE 501(C)(3) HOSPITAL CAPITAL FUND 801 E. SIOUX AVE 300,000. PIERRE, SD 57501 GETTYSBURG SCHOOL NONE GOVERNMENT READING INCENTIVES, NATIONAL FCCLA & 100 E. KING AVE. AFTER SCHOOL PROGRAM GETTYSBURG, SD 57442 11,000. TOLSTOY FIRE DEPT NONE 501(C)(3) NEW EQUIPMENT 201 S EXENE ST GETTYSBURG, SD 57442 25,000. OAHE AREA YOUTH CENTER NONE 501(C)(3) SUMMER REC PROGRAM 110 E. COMMERCIAL AVE GETTYSBURG, SD 57442 5,000. **>** 3a 357,800. CONTINUATION SHEET(S) SEE Total b Approved for future payment NONE ▶ 3b Total

FRED & MARY MAAS FOUNDATION

Part XV/ Supplementary Information			· · · · · · · · · · · · · · · · · · ·	
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	55711.15511511	
PEMBROKE CEMETERY	NONE	501(c)(3)	CEMETERY UPKEEP	
31437 151ST STREET				
HOVEN, SD 57450				1,000
HIGH PLAINS ARTS COUNCIL	none	501(C)(3)	CONCERT SERIES	
PO BOX 14				1 000
SETTYSBURG, SD 57442-0014				1,000
HOVEN ELEMENTARY SCHOOL	NONE	GOVERNMENT	AFTER SCHOOL PROGRAM	
551 MAIN ST. HOVEN, SD 57450				5,000
1011A, DD 31430		•		
JOHN J. PETERS LEGION POST 159	NONE	501(C)(3)	FLOOR MAINTENANCE	
PO BOX 91 HOVEN, SD 57450				5,000
NOVER, 55 37430				
			,	
•				
	ì			
-				
•				
•			.	
Total from continuation sheets				12,000

Part XVI-A	Analy	sis of	Income-	Producing	Activities

	Handai.	huamana :	T =		
Enter gross amounts unless otherwise indicated	(a) Business	business income (b) Amount	(C) Exclusion code	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		code	7,,,,,,	
a	· 				
D		<u> </u>	+ +-		
c	1 1		+		
d	11				 .
e	· -		+		
	· -		+		
g Fees and contracts from government agencies	 - 	-	+ + -		
2 Membership dues and assessments	 		+ + -		-
3 Interest on savings and temporary cash		•	14	5	
investments		-	14	5. 59,054.	
4 Dividends and interest from securities	 		1 4	39,034.	
5 Net rental income or (loss) from real estate:			+ +		
a Debt-financed property			16	122 252	
b Not debt-financed property			10	122,252.	
6 Net rental income or (loss) from personal					
property	<u> </u>		-		
7 Other investment income					
8 Gain or (loss) from sales of assets other				4 720	
than inventory			14	4,728.	
9 Net income or (loss) from special events	 				
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:		•			
a			 		
b			+		
C	-		+ +		
d					
e	· 		 	106 020	
12 Subtotal. Add columns (b), (d), and (e)		0.		186,039.	0. 186,039.
13 Total. Add line 12, columns (b), (d), and (e)				13	100,039.
(See worksheet in line 13 instructions to verify calculations.)	_				
Part XVI-B Relationship of Activities t	to the Accom	plishment of Ex	empt Pu	ırposes	
Explain below how each activity for which income the foundation's exempt purposes (other than			A contributed	d importantly to the accomp	dishment of
				·	
					<u> </u>

						•
Form 990-PF (2019) FRED	& MARY	MAAS	FOUNDATION	46-0458582	Page 13
[Part:XVII]	Information R	egarding	Transfer	s to and Transactions an	nd Relationships With Noncharitable	
	Exempt Organ	nizations		_		
. Colden consul		d.,		followed and the same at the s	wales were a section 50 (/a)	/ac No

(a) Reintal of facilities, equipments (d) Reinthursement arrangements (e) Performance of services or membership or fundraising solicitations (f) Loans or loan parameter (g) Performance of services or membership or fundraising solicitations (g) Performance of services or membership or fundraising solicitations (g) Performance of services or whether services or membership or fundraising solicitations (g) Interview of the abova is "Yes", complete the following schodulic Column (g) chould always chow the fair market value of the goods, other access, or services over by the reporting foundation if this foundation received loss than fair market value in any transaction or charing arrangement, when we column (g) the value of the goods, other access, or services received. (a) Item or (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of tensifiers, tensections, and sharing errangements N/A 1 Yes No H Yes, complete the following schedule. (a) Hare of organization (b) Type of organization (c) Description of reliationship N/A Sign Print' Type preparer's name Proparer's signature Print' Type parer's name Proparer's signature Print's name ➤ CASEY PETERSON, LTD. Firm's sim * A6 - 0 4 0 3 4 9 6	(0) a Tid (1) (2) b Ot (1)	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash (2) Other assets Other transactions: (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization							1a(1) 1a(2) 1b(1) 1b(2)	X X X X
(5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (7) Performance of services or membership or fundrasing solicitations (8) Performance of services or membership or fundrasing solicitations (8) International Control of the School of Management (19) A to ancwer to any of the above is "Yes," complete the following achieved less than fair market value in any transaction or change arrangement, show in column (9) the value of the goods, other assets, or services received. (9) Unexpression of the goods, other assets, or services received. (9) Amount involved (9) Amount involved (19) Amoun	• • •									
(6) Performance of services or membership or fundrasing solicitations 2. Sharing of facilities, equipment, mailing lists, other assets, or paid employees 3. In the convex given by the reporting foundation. If the following schedulo: Column (b) chould always chow the fair market value of the goods, other assets, or services received, or cervices given by the reporting foundation. If the foundation recorded loss than fair market value in any transaction or sharing arrangement, show in column (g) the value of the goods, other assets, or services received. (a) Line no. (b) Amount involved. (c) Name of noncharitable exempt organization. (d) Description of territors, transactions, and sharing errangements. N/A. 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 52?? 3. If Yes, complete the following schedule. (a) Name of organization. (b) Type of organization. (c) Description of relationship. N/A. Sign and head, if is time, correct, and complete Declaration of preview fother than isoprevent is based on all information of which preview has any translations. N/A. Print Yes, and complete the Collecting of the Collecting of the goods, and statements, and to the board only knowledge. Signature of officer or trustee. Print Yes are constant. Print Larson, CPA. Lori Larson, CPA. Dol Larson, CPA. Dol Of 09/20. Propared: Print Sini 46 -0 403496	•	•	•							
c Sharing of facilities, equipment, making lists, other assets, or paid employees d if this ancient to any of the above is "foc," complicit the following chedule Collumn (a) thould always chow the fair market value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing errangements N/A 2a is the foundation directly or indirectly affiliated wilth, or related to, une or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? b if "yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Observation of transfers, transactions, and sharing errangements	•		•	mhershin or fundrais	sına solicitatio	ns				
d if the pervice given by the above is "Yes," complete the following schedule Column (b) chould always show the fair market value of the goods, either assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements. N/A 2a Is the foundation directly or indirectly affiliated will, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 52?? b) If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign in "Service and complete the file of the content of the period	•	•		•	-					
column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of nonchartable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 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? b. If Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign Internation of purple, I declare that I have seamed the internation of pregions from them interpreted has an indirected has an indirected and elaboration of which require this sink incorrect, and complete Chesterior of pregions from them interpreted has an indirected part of the section of		-	• • •	-			lways show the fair i	market value of the god	ds, other assets,	
(a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 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? b if "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (e) Description of relationship N/A Sign Under paralless of pirplicy, I disclars that I have examined the return, including accompanying schedules and statements, and to the best of my knowledge and halfed, if is the correct, and complets Destration of preparer follows than insynews is has don all information of which preparer has any knowledge Way, the IRS discuss that shows below? See institute	Or	cervice	s given by the reporting fo	oundation If the four	ndation rocoive	ed loss than fair market val	uo in any transaction	or sharing arrangomo	nt, show in	
N/A 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 521? b If "Yes," complete following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign and halfed, if a true, correct, and complete Destination of preparer follow from temperary is based on all information of which preparer has any knowledge and halfed, if a true, correct, and complete Destination of preparer follow from temperary is based on all information of which preparer in same incovincing the properary in the preparer in the preparer is name. Preparer's signature Print/Type preparer's name Preparer's signature Date Check If PTIN Self- employed PO0.74.5018 Proparer Firm's name CASEY PETERSON, LTD. Firm's name CASEY PETERSON, LTD.							1			
2a is the foundation directly or indirectly affiliated willi, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? b. If Yes, "complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Manual Complete (Indian, correct, and complete) Destination of preparer (other than two-power) is harded on all information of which preparer has any knowledge above the complete (other than two-power) is harded on all information of which preparer in the section of preparer's signature Vinder penalties of perjuny, 1 dectare that I have examined this return, including accompanying schedules and slatements, and to the best of my knowledge and halfelf, if is fine, correct, and complete) Destination of preparer (other than two-power) is harded on all information of which preparer has any knowledge above have with the sections and halfelf in the section in the section of the power section in the property of officer or trustee Print/Type preparer's name	(a) Line r	10	(b) Amount involved	(c) Name of		e exempt organization	(d) Description	n of transfers, transactions,	and sharing arranger	nents
In section 501(c) (other than section 501(c)(3)) or in section 527?					N/A					
In section 501(c) (other than section 501(c)(3)) or in section 527?		+								
In section 501(c) (other than section 501(c)(3)) or in section 527?										
In section 501(c) (other than section 501(c)(3)) or in section 527?										
In section 501(c) (other than section 501(c)(3)) or in section 527?										
In section 501(c) (other than section 501(c)(3)) or in section 527?						<u> </u>	-			
In section 501(c) (other than section 501(c)(3)) or in section 527?		_								
In section 501(c) (other than section 501(c)(3)) or in section 527?								· · · ·		
In section 501(c) (other than section 501(c)(3)) or in section 527?										
In section 501(c) (other than section 501(c)(3)) or in section 527?									· ·-·-	
In section 501(c) (other than section 501(c)(3)) or in section 527?				-						
In section 501(c) (other than section 501(c)(3)) or in section 527?										
In section 501(c) (other than section 501(c)(3)) or in section 527?										
In section 501(c) (other than section 501(c)(3)) or in section 527?						 				
b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A 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 helief, it is true, correct, and complete Declaration of preparer fother than taxpever) is hased on all information of which preparer has any knowledge. Signature of officer or trustee Print/Type preparer's name Preparer's signature Date Check ☐ if PTIN Self- employed Paid LORI LARSON, CPA LORI LARSON, CPA 06/09/20 P00745018 Preparer Firm's name ▶ CASEY PETERSON, LTD. Firm's EIN ▶ 46-0403496			•	•		or more tax-exempt organ	nzations described			⊽] _u _
(a) Name of organization N/A 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 helief, it is true, correct, and complete Declaration of preparer (other than taxpaver) is based on all information of which preparer has any knowledge Here 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 helief, it is true, correct, and complete Declaration of preparer (other than taxpaver) is based on all information of which preparer has any knowledge shown below? See instruction of filter or trustee Print/Type preparer's name					CHON 5277				Yes [A NO
N/A 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 helief, it is true, correct, and complete Declaration of preparer (other than taxpaver) is hased on all information of which preparer has any knowledge bound the preparer has any knowledge. Lila	<u> </u>	165, 6				(b) Type of organization		(c) Description of relat	tionship	
Sign Here Signature of officer or trustee Date Date Date Date Print/Type preparer's name Preparer's signature Date Date Date Print/Type preparer's name Preparer's signature Date Date Print/Type preparer's name Preparer's signature Date Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's name Preparer's name Preparer's name Preparer's name Preparer's name Preparer's name Preparer's name Preparer's name Preparer's name Print/Type preparer's name Preparer's			· ,			(4,7,7,1		<u> </u>		
Sign Here Signature of officer or trustee Date Date Date Date Print/Type preparer's name Preparer's signature Date Date Date Print/Type preparer's name Preparer's signature Date Date Print/Type preparer's name Preparer's signature Date Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's name Preparer's name Preparer's name Preparer's name Preparer's name Preparer's name Preparer's name Preparer's name Preparer's name Print/Type preparer's name Preparer's										
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Sign Here Signature of officer or trustee Date Date Date Date Print/Type preparer's name Preparer's signature Date Date Date Date Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Prepar				_						
Sign Here Signature of officer or trustee Date Date Date Date Print/Type preparer's name Preparer's signature Date		Under	panalties of persury I declare the	hat I have examined this	return including	accompanying schedules and s	statements, and to the be	st of my knowledge		
Print/Type preparer's name		and he	Julial, it is true, correct, and com			taxpaver) is based on all inform	ation of which preparer h	as anv knowledge	shown below? See	erer Instr
Paid LORI LARSON, CPA LORI LARSON, CPA 06/09/20 P00745018 Preparer Firm's name ► CASEY PETERSON, LTD. Firm's EIN ► 46-0403496		1 2.91		me	Preparer's si		T	Check If P	TIN	
Preparer Firm's name ► CASEY PETERSON, LTD. Firm's EIN ► 46-0403496					·			self- employed		
			LORI LARSO	06/09/20			8			
11 •	-		Firm's name ► CASEY PETERSON, LTD.					Firm's EIN ► 46	-0403496	
	Use Only									
			Firm's address ▶ 909 ST JOSEPH ST, STE 101					160	E \ 240 1	020
RAPID CITY, SD 57701 Phone no (605) 348-1930 Form 990-PF (2019)			ı KA	FID CITY,	ן כ עפּ	/ <u>U</u> I		Prione no (60:		

FORM 990-PF INTERE	ST ON SAVIN	GS AND TEM	PORARY	CASH IN	VESTMENTS	STATEMENT 1	
SOURCE	REVE			(B) VESTMENT COME	(C) ADJUSTED NET INCOME		
BANK INTEREST	· ·	<u> </u>	5.				
TOTAL TO PART I, LI	NE 3						
·							
FORM 990-PF	DIVIDENDS	AND INTER	EST FRO	M SECUR	ITIES	STATEMENT 2	
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	RE	(A) VENUE BOOKS	(B) NET INVES MENT INCO		
DIVIDEND AND INTEREST INCOME	59,054.	-	0.	59,054.	59,05	54.	
TO PART I, LINE 4	59,054.		0.	59,054. 59,05		4.	
			•				
FORM 990-PF		RENTAL IN	COME			STATEMENT 3	
KIND AND LOCATION O	F PROPERTY		•		ACTIVITY NUMBER	GROSS RENTAL INCOME	
RENTAL					1	122,252.	
TOTAL TO FORM 990-P	F, PART I,	LINE 5A				122,252.	
FORM 990-PF		LEGAL	FEES			STATEMENT 4	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B NET IN MENT I	VEST-	(C) ADJUSTED NET INCOM		
LEGAL FEES		4,752.		4,752.		0.	
TO FM 990-PF, PG 1,	LN 16A	4,752.		4,752.		0.	

		_	· · · · · · · · · · · · · · · · · · ·		
FORM 990-PF	ACCOUNTI		STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING FEES	4,257.	4,257.		0.	
TO FORM 990-PF, PG 1, LN 16B	4,257.	4,257.		0.	
FORM 990-PF	OTHER PROFES	SIONAL FEES	· S	TATEMENT 6	
DESCRIPTION INVESTMENT FEES TO FORM 990-PF, PG 1, LN 16C	(A) EXPENSES PER BOOKS 12,507.	·	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES 0.	
-	, , , , , , , , , , , , , , , , , , ,				
FORM 990-PF	TAX	TAXES STATEMENT			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FOREIGN TAX W/H PROPERTY TAXES EXCISE TAX PAYROLL TAX	422. 6,079. 870. 230.	6,079. 870.		0. 0. 0.	
TO FORM 990-PF, PG 1, LN 18	7,601.	7,601.		0.	
•					
FORM 990-PF	OTHER E	XPENSES	S	татемент 8	
DESCRIPTION '	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
UTILITIES INSURANCE MOWING MISCELLANEOUS EXPENSES	1,309. 3,871. 1,191. 3,821.	3,871. 1,191.		0. 0. 0.	
TO FORM 990-PF, PG 1, LN 23	10,192.	10,192.		0.	

FORM 990-PF	CORPORATE STOCK		STATEMENT 9	
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	
STRATEGIC PORTFOLIO SERVICE AD AMERIPRISE ACTIVE DIVERSIFIED AMERIPRISE FIXED ANNUITY AMERIPRISE ONE FINANCIAL AMERIPRISE POWERSHARES ACCT AMERIPRISE SERVICE ADVANTAGE AMERIPRISE SERVICE ADVANTAGE I		994,985. 121,267. 100,000. 47,881. 29,993. 107,934. 108,052.	126,330. 141,095. 60,001. 31,513.	
TOTAL TO FORM 990-PF, PART II,	LINE 10B	1,510,112.	1,794,129.	
FORM 990-PF	OTHER LIABILITIES		STATEMENT 10	
DESCRIPTION		BOY AMOUNT	EOY AMOUNT	
PAYROLL TAX LIABILITIES	-	458.	459.	
TOTAL TO FORM 990-PF, PART II,	LINE 22	458.	459.	

	PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS			
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
MONTY HARER 31437 151ST STREET HOVEN, SD 57450	PRESIDENT 2.00	500.	0.	0.
LILA HERICKS 16383 310TH AVENUE GETTYSBURG, SD 57442	SECRETARY/TREAS	SURER 3,500.	0.	0.
KEN IVERSON . 104 EAST LINCOLN AVE GETTYSBURG, SD 57442	VICE PRESIDENT 2.00	400.	0.	0.
KIM SHEEHAN 104 HILLTOP DR GETTYSBURG, SD 57442	MEMBER 2.00	500.	0.	0.
CHIP SUNDBERG 905 E GARFIELD AVE GETTYSBURG, SD 57442	MEMBER 2.00	400.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	5,300.	0.	0.