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

OMB No 1545-0047

Department of the Treasury

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

		dar year 2019 or tax year beginning	and ending			Oben to Louise hisbaction			
	ame of for	······································	RECE	IVED A Emp	loyer identification number				
		JIMA							
F	BLAC	K HILLS ANIMAL ALLY FOUNDATION	м 8 и	2020 8 65	-0415399				
Ni	umber and	d street (or P O box number if mail is not delivered to street address)	N 8 JUL IR	om/suite Teler	phone number (see instructions)				
		SIXTH ST			5-584-2800				
	•	n, state or province, country, and ZIP or foreign postal code D CITY SD 57701	OGDE	N, UT g If exc	emption application is pending, c	heck here			
G	Check	all that apply Initial return Initial return	n of a former public cha	arity D 1 F	oreign organizations, check here	▶ □			
		Final return Amended	•		oreign organizations meeting the				
		Address change Name cha	nge		5% test, check here and attach				
	Check	type of organization X Section 501(c)(3) exempt private	foundation	A I E If priv	vate foundation status was termi	nated under			
и —			e private foundation	/) / 1 1 '	on 507(b)(1)(A) check here	>			
1		rket value of all assets at J Accounting method	X Cash Acci	rual F If the	foundation is in a 60-month terr	nination			
,		ear (from Part II, col. (c), Other (specify)			r section 507(b)(1)(B), check he	. [
	ine 16)		be on cash basis)						
P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(h) Alet investment	(a) Advicted not	(d) Disbursements for chantable			
30 Received in Satehing Ogden		amounts in columns (b), (c) and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	(b) Net investment income	(c) Adjusted net income	purposes			
<u> </u>	T.		200,438			(cash basis only)			
<u></u>	1 2	Contributions, gifts, grants, etc , received (attach schedule) Check If the foundation is not required to attach Sch 8	200,436						
ဝှဲ့နို	3	Check if the foundation is not required to attach Sch 8 Interest on savings and temporary cash investments	530	530					
g 3	4	Dividends and interest from securities							
	5a	Gross rents							
က ့	Ь	Net rental income or (loss)							
43S	6a	Net gain or (loss) from sale of assets not on line 10		`					
EP 7 4 2020 EP 7 4 2020	b	Gross sales price for all assets on line 6a				······································			
	7	Capital gain net income (from Part IV, line 2)		0		<u> </u>			
	8	Net short-term capital gain			0				
	9	Income modifications							
	10a	Gross sales less returns and allowances							
	b	Less Cost of goods sold							
	С	Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule) STMT 1	51,697	51,697		**************************************			
	12	Total. Add lines 1 through 11	252,665	. 52 , 227	0				
s	13	Compensation of officers, directors, trustees, etc	0						
enses	14	Other employee salaries and wages			·				
en G	15	Pension plans, employee benefits	10.604	10.010					
X	16a	Legal fees (attach schedule) SEE STMT 2	13,624	10,218		3,406			
ē	b	Accounting fees (attach schedule) Other professional fees (attach schedule) STMT 3	1,894	1,420		474			
— :ई	1 C	Other professional fees (attach schedule) STMT 3	1,034	1,420		4/4			
\$ 53 E	17 18	Taxes (attach schedule) (see instructions) STMT 4	5,569	5,220					
	19	Depreciation (attach schedule) and depletion	3,303	3,220					
OE	20	Occupancy			,				
_ ĕ	21	Travel, conferences, and meetings		·····					
ط آ	22	Printing and publications		, ,	, , , , , , , , , , , , , , , , , , , 				
ANNED FEB 0 5 2021 Operating and Administrative Expe	23	Other expenses (att sch) STMT 5	631	. 483		148			
⋥ .ξ΄	24	Total operating and administrative expenses.							
SCANNED Operating		Add lines 13 through 23	21,718	<u> </u>	0	4,028			
₹ ĕ	25	Contributions, gifts, grants paid	200,000			200,000			
	26	Total expenses and disbursements. Add lines 24 and 25	221,718	17,341	0	204,028			
٠, 	27	Subtract line 26 from line 12							
	a	Excess of revenue over expenses and disbursements	30,947						
	b	Net investment income (if negative, enter -0-)		34,886					
	С	Adjusted net income (if negative, enter -0-)			0	·			

		****	Palanas Shaata	Attached schedules and amou	unts in the description colum	nn	Beginning of year	E	nd o	of year
***		***** 	Balance Sheets	should be for end-of-year amo			(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cast	h – non-interest-bearing					<u> </u>		
	2	Savı	ngs and temporary cash	ninvestments			520,054	551,3	50	551,350
	3	Acco	ounts receivable 🕨						***	
		Less	allowance for doubtful	accounts >						
	4	Pled	ges receivable 🕨						***	
		Less	allowance for doubtful	accounts >						
	5	Gran	nts receivable							
	6	Rece	eivables due from officer	rs, directors, trustees, a	nd other			1		
		disqu	ualified persons (attach:	schedule) (see						
		ınstrı	uctions)							
	7	Other	notes and loans receivable (att. s	chedule)						
		Less	allowance for doubtful	accounts >		0		L		
N	8	Inver	ntories for sale or use					<u> </u>		
Assets	9	Prep	aid expenses and defer	red charges			906	5	57	557
As	10a	Inves	tments – US and state gov	vernment obligations (attacl	n schedule)					
	b	Inves	stments – corporate sto	ck (attach schedule)						
	С	Inves	stments – corporate bon	ids (attach schedule)						1
	11	Investr	ments – land, buildings, and equip	oment basis						
		Less a	accumulated depredation (attach	sch)						<u> </u>
	12	Inves	stments – mortgage loar	ns						L
	13	Inves	stments – other (attach s	schedule) SEE	STATEMENT	6	6		6	206,788
	14	Land, l	buildings, and equipment basis	•					▓	
		Less a	accumulated depreciation (attach	sch)]	<u> </u>
	15	Othe	r assets (describe)				L
	16	Tota	l assets (to be complete	ed by all filers - see the						
		ınstru	uctions Also, see page	1, item l)			520,966	551,9	13	<u>7</u> 58,695
	17	Acco	ounts payable and accru	ed expenses						
ı	18	Gran	its payable							
ies	19	Defe	rred revenue							
ij	20	Loan	s from officers, directors	s, trustees, and other di	squalified persons					
Liabilities	21	Mortg	ages and other notes payal	ble (attach schedule)						
J	22	Othe	r liabilities (describe)		_		
	23	Tota	I liabilities (add lines 1	7 through 22)			0		0	
		Four	ndations that follow FA	ASB ASC 958, check h	ere	>				
es		and	complete lines 24, 25,	29, and 30.						
2	24	Net a	assets without donor res	trictions						
aga	25	Net a	ssets with donor restric	tions						
Net Assets or Fund Balanc		Four	ndations that do not fo	llow FASB ASC 958,	check here	► X				
Ĕ		and o	complete lines 26 thro	ough 30.						
띱	26	Capit	tal stock, trust principal,	or current funds						
ō	27	Paid-	in or capital surplus, or	land, bldg , and equipm	ent fund					
ě	28	Retai	ined earnings, accumula	ated income, endowmer	nt, or other funds		520,966	551,9	13	
158	29	Total	l net assets or fund ba	lances (see instruction	ıs)		520,966	551,9	13	
4	30	Total	l liabilities and net ass	ets/fund balances (se	e					
ž		ınstru	uctions)				520,966	551,9	13	
			Analysis of Chan	ges in Net Assets	or Fund Balar	ices				
1	Total	net as	ssets or fund balances a	t beginning of year - Pa	art II, column (a), line	29 (must	agree with			
			figure reported on prior		, .				1	520,966
2	Enter	amou	int from Part I, line 27a	•					2	30,947
3	Other	ıncrea	ases not included in line	2 (itemize) ▶					3	
4			, 2, and 3	•					4	551,913
			not included in line 2 (ite	emize) 🕨					5	
			sets or fund balances a		us line 5) – Part II. c	olumn (b)	line 29	_	6	551,913

(a) List and descr	the the kind(s) of property sold (for example, real estate, warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P Purchase	(c) Date acqui		
			D – Donation			
h b			 			
			<u> </u>			
d		_,				
e			1			
(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis ense of sale		(h) Gain or (loss) r) plus (f) minus (g))	
a						
_ b						
С						
_d						
_ e	<u></u>					
Complete only for assets shown	ng gain in column (h) and owned by the for	undation on 12/31/69			ins (Col. (h) gain minus	
(I) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ess of col (i) ol (j), if any	col (k), but not less than -0-) or Losses (from col (h))		
_ a		<u> </u>				
_ b		 				
_ <u>c</u>						
_ <u>d</u>	 					
_ e		D-+1 (7 7				
2 Capital gain net income or (net o	capital loss) If (loss), enter -0- in			!		
3 Net short-term capital gain or (lo	oss) as defined in sections 1222(5) and (6)			ļ		
If gain, also enter in Part I, line 8	s, column (c). See instructions If (loss), en	ter -0- ın				
Part V Qualification L	Inder Section 4940(e) for Reduc		3	<u> </u>		
If "Yes," the foundation doesn't quali	ction 4942 tax on the distributable amount fy under section 4940(e) Do not complete	this part	<u> </u>	-	Yes X No	
	each column for each year, see the instru	ctions before making	any entries.			
(a) Base penod years Calendar year (or tax year beginning	n) Adjusted qualifying distributions	s Net valu	(c) ue of nonchantable-use assets		(d) Distribution ratio col (b) divided by col (c))	
2018	130	,809	776,49		0.168461	
2017		,161	792,61		0.203329	
2016		,944	1,181,31		0.115925	
2015		5,304	1,238,95		0.142301	
2014	1/4	1,177	1,746,07	<u> </u>	0.099754	
2 Total of line 1, column (d)				2	0.729770	
•	5-year base period – divide the total on lir ion has been in existence if less than 5 year			3	0.145954	
4 Enter the net value of noncharita	able-use assets for 2019 from Part X, line	5		4	775,459	
5 Multiply line 4 by line 3				5	113,181	
6 Enter 1% of net investment incom	me (1% of Part I, line 27b)			6	349	
7 Add lines 5 and 6				7	113,530	
8 Enter qualifying distributions from If line 8 is equal to or greater that	n Part XII, line 4 n line 7, check the box in Part VI, line 1b, a	and complete that pa	rt using a 1% tax rate. Se	8 the	204,028	
Part VI instructions						

	1 990-PF (2019) BLACK HILLS ANIMAL ALLY FOUNDATION 65-0415399		Page 4
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	– see in:	structions)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.		
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)		240
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1	349
	here X and enter 1% of Part I, line 27b		
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of		
	Part I, line 12, col (b)	ł	•
2	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	349
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	349
6	Credits/Payments		
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 906		
b	Exempt foreign organizations – tax withheld at source 6b		
С	Tax paid with application for extension of time to file (Form 8868)		
d	Backup withholding erroneously withheld 6d 6		
7	Total credits and payments Add lines 6a through 6d	7	906
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	557
11	Enter the amount of line 10 to be Credited to 2020 estimated tax ▶ 557 Refunded ▶		
	Statements Regarding Activities		Minimum I
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes No
	participate or intervene in any political campaign?		1a X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the		
	Instructions for the definition		1b X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		
	published or distributed by the foundation in connection with the activities.		
C	Did the foundation file Form 1120-POL for this year?		1c X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.		
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$	_	
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		
	on foundation managers > \$		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		_2 X
	If "Yes," attach a detailed description of the activities.		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles		
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3 X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5 X
	If "Yes," attach the statement required by General Instruction T		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.		
	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 state law remain in the governing instrument?		6 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		7 X
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.		
	SD		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		
-	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		
-	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See instructions for Part XIV. If "Yes,"		^
	complete Part XIV		g x 2
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		
-	names and addresses		10 X
			Form 990-PF (2019)
			(-0.0)

Form 990-PF (2019)

, <u>P</u>	art VII-A Statements Regarding Activities (continued)					
					Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			1	!	
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions			11	<u> </u>	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			ł		
	person had advisory privileges? If "Yes," attach statement. See instructions			12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applica-	ation?		13	X	ļ <u>.</u>
	Website address NONE					
14		elephone no. 🕨	605-5	84-	280	0
	21868 STAGE STOP LANE					
	Located at ► LEAD SD	ZIP+4 ▶	57754	}		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here	i	1			▶ [
	and enter the amount of tax-exempt interest received or accrued during the year	▶ [_1	5			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority				Yes	No
	over a bank, securities, or other financial account in a foreign country?			16	L	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of					
	the foreign country ▶			<u> </u>		
<u>P</u>	art VII-B Statements Regarding Activities for Which Form 4720 May Be Require	ed				
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
1a	During the year, did the foundation (either directly or indirectly)	г Э	₹			
	(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?	Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			
	(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 for	□ v	X No			
	the benefit or use of a disqualified person)?	Yes	X No			
	(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	Yes	X No		:	
b	termination of government service, if terminating within 90 days) If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in	res	22 140			
ь	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions		N/A	1b	1	
	Organizations relying on a current notice regarding disaster assistance, check here			-10		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that					
·	were not corrected before the first day of the tax year beginning in 2019?		N/A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		,			
-	operating foundation defined in section 4942(j)(3) or 4942(j)(5))					
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines					
	6d and 6e) for tax year(s) beginning before 2019?	Yes	X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20					
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)					
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to				1	
	all years listed, answer "No" and attach statement – see instructions)		N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here					
	▶ 20 , 20 , 20 , 20					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise				1	
	at any time during the year?	Yes	X No			
b	If "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 of holdings acquired by gift or bequest, or (3) the lapse of				-	
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the					
	foundation had excess business holdings in 2019)		N/A	_3b	I	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purpose	s?		4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	S			1	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2	019?		4b		X

******		LS ANIMAL ALLY FOUND		0415399				F	age (
~		arding Activities for Which For	m 4/20 May Be R	equirea (conti	nuea)	—г		T.,	Γ
5a	During the year did the foundation p		46454 220		. .	- 1		Yes	No
		vise attempt to influence legislation (section			Yes X No	'	j	1	
	• •	pecific public election (see section 4955), o	r to carry on,		. .	Į	ĺ		
	directly or indirectly, any voter re	<u> </u>	_	 - 	Yes X No				
	• •	for travel, study, or other similar purposes?			Yes 🗓 No	1 °			
		on other than a charitable, etc , organizatio	on described in		্ৰিক				
	section 4945(d)(4)(A)? See inst			L. '	Yes 🗓 No)			
	(5) Provide for any purpose other the	ian religious, charitable, scientific, literary,	or educational			Ì	1.	.11)1.2410	,
		of cruelty to children or animals?			Yes 🔀 No)			
b	If any answer is "Yes" to 5a(1)–(5), of	did any of the transactions fail to qualify un	der the exceptions desc	cribed	4	_ [
	in Regulations section 53 4945 or In	a current notice regarding disaster assista	ance? See instructions		N/	<u> </u>	5b_	<u> </u>	<u> </u>
	Organizations relying on a current n	otice regarding disaster assistance, check	here		▶ {	_		1	
С	If the answer is "Yes" to question 5a	(4), does the foundation claim exemption f	from the tax						
	because it maintained expenditure r	esponsibility for the grant?		N/A 🗌	Yes 📙 No	•]			
	If "Yes," attach the statement require	ed by Regulations section 53 4945–5(d)				İ			
6a	Did the foundation, during the year,	receive any funds, directly or indirectly, to p	pay premiums	_	_				
	on a personal benefit contract?			∐ ,	Yes 🔀 No	,			
b	Did the foundation, during the year,	pay premiums, directly or indirectly, on a p	ersonal benefit contract	7			6b		X
	If "Yes" to 6b, file Form 8870								
7a	At any time during the tax year, was	the foundation a party to a prohibited tax s	shelter transaction?		Yes 🛛 No	,	Ì		
b	If "Yes," did the foundation receive a	my proceeds or have any net income attrib	outable to the transaction	η?	N/	A	7b		
8	Is the foundation subject to the secti	on 4960 tax on payment(s) of more than \$	1,000,000 in		(53)	İ			ĺ
	remuneration or excess parachute p				Yes X No			<u> </u>	
P	art VIII Information Abou	t Officers, Directors, Trustees,	Foundation Mana	gers, Highly I	Paid Emplo	yee	s,		
	and Contractors								
1 1	ist all officers, directors, trustees,	and foundation managers and their co	mpensation. See inst	ructions.					
			(b) Title, and average	(c) Compensation	(d) Contributions				
	(a) Nam	e and address	hours per week	(If not paid,	employee bene plans and defer			pense a er allowa	
			devoted to position	enter -0-)	compensation	<u>'</u>			
JA	MIE A ROBINSON	LEAD	PRESIDENT/CE						
21	868 STAGE STOP LANE	SD 57754	0.06	0	ļ	0			
DA	VID BRADSKY	RAPID CITY ,	VICE PRESIDE						
92	7 MAIN ST	SD 57701	0.06			0			C
PE	TE CAPPA	RAPID CITY	TREASURER	1		1			
40	14 MOUNTAIN SHADOW PL	SD 57702	0.06	o	_	0			
DE	AN FALCON, DVM	RAPID CITY	SECRETARY						
90	7 JACKSON BLVD	SD 57702	0 06	lo		٥	ı		O
2	Compensation of five highest-pai	d employees (other than those include	d on line 1 – see instri	uctions). If none,	enter				
	"NONE."								
			(b) Title, and average		(d) Contributions				
	(a) Name and address of each empl	oyee paid more than \$50,000	hours per week	(c) Compensation	employee bene plans and defen			pense al er allowa	
			devoted to position		compensation		OBIC	: allowa	iices
NO	NE					\neg			
			· ·						
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			•						
¥-4-1	number of other employees paid ove	- 050 000		<u> </u>		•			0

Form 990-PF (20	019) BLACK HILLS ANIMAL ALLY FOUNDATION	ON 65-0415399		Page 7
Part VIII	Information About Officers, Directors, Trustees, Found	dation Managers, Highly Paid E	mplo	yees,
	and Contractors (continued)			
_3 Five highe	est-paid independent contractors for professional services. See instru	uctions. 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			
Part IX-A	Summary of Direct Charitable Activities			<u> </u>
	of our largest direct chantable activities during the tax year. Include relevant statistical information suc	ch as the number of	\top	
	ther beneficianes served, conferences convened, research papers produced, etc			Expenses
1 N/A				
2				-
3				
			1	
			_	
4				
			1	
Part IX-B	Summary of Program-Related Investments (see instru	untions		
	gest program-related investments made by the foundation during the tax year on lines 1 and 2	ictions)	\top	Amount
1 N/A	gest program-related investments made by the roundation during the tax year on lines i and a		+	Amount
,,				
2				
All other program-re	lated investments. See instructions			
3			-	
			1	

Total. Add lines 1 through 3

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

	see instructions.)	n toundatioi	15,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.		
•	purposes		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	580,480
c	Fair market value of all other assets (see instructions)	1c	206,788
ď	Total (add lines 1a, b, and c)	1d	787,268
e	Reduction claimed for blockage or other factors reported on lines 1a and		
•	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	787,268
4	Cash deemed held for charitable activities Enter 1½% of line 3 (for greater amount, see		
•	instructions)	4	11,809
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	775,459
6	Minimum investment return. Enter 5% of line 5	6	38,773
	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	foundations	
***********	and certain foreign organizations, check here ▶ ☐ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	38,773
2a	Tax on investment income for 2019 from Part VI, line 5		
ь	Income tax for 2019 (This does not include the tax from Part VI)	1	
С	Add lines 2a and 2b	2c	349
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	38,424
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	38,424
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	38,424
	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	204,028
b	Program-related investments – total from Part IX-B	1b	
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	204,028
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. See instructions	5	349
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	203,679
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	on	

Form 990-PF (2019)

Pŧ	art XIII Undistributed Income	(see instructions)				_
			(a)	(b)	(c)	(d)
1	Distributable amount for 2019 from Part X	I,	Corpus	Years prior to 2018	2018	2019
	line 7					38,424
2	Undistributed income, if any, as of the end	d of 2019.				
а	Enter amount for 2018 only				,,	
b	Total for prior years 20 , 20	, 20				
3	Excess distributions carryover, if any, to 2	019				
а	From 2014	91,881				
b	From 2015	117,013		l		
С	From 2016	78,944	1			
d	From 2017	122,706				1
е	From 2018	92,816				
f	Total of lines 3a through e		503,360			<u> </u>
4	Qualifying distributions for 2019 from Part	XII,				
	line 4 ▶ \$ 204,028					
а	Applied to 2018, but not more than line 2a	١				
þ	Applied to undistributed income of prior ye	ears]		‡
	(Election required – see instructions)					
C	Treated as distributions out of corpus (Ele	ection				1
	required – see instructions)	l				
d	Applied to 2019 distributable amount				***************************************	38,424
e	Remaining amount distributed out of corp	us	165,604			
5	Excess distributions carryover applied to 2	2019				
	(If an amount appears in column (d), the s	same				
	amount must be shown in column (a).)	,				
6	Enter the net total of each column as					!
	indicated below:					I
а	Corpus Add lines 3f, 4c, and 4e Subtract	l line 5	668,964			<u> </u>
b	Prior years' undistributed income Subtract	t [‡
	line 4b from line 2b					
C	Enter the amount of prior years' undistribu	ited				1
	income for which a notice of deficiency ha	s				•
	been issued, or on which the section 4942	2(a)				•
	tax has been previously assessed	ĺ				
d	Subtract line 6c from line 6b Taxable					
	amount - see instructions					<u> </u>
е	Undistributed income for 2018 Subtract li	ne		1		
	4a from line 2a Taxable amount - see					
	instructions					
f	Undistributed income for 2019. Subtract li			1		
	4d and 5 from line 1. This amount must be	e		1		
	distributed in 2020					0
7	Amounts treated as distributions out of co					!
	to satisfy requirements imposed by section	n J				
	170(b)(1)(F) or 4942(g)(3) (Election may b	pe				
	required—see instructions)			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
8	Excess distributions carryover from 2014					1
	applied on line 5 or line 7 (see instructions	· .	91,881			<u> </u>
9	Excess distributions carryover to 2020).				I .
	Subtract lines 7 and 8 from line 6a	ļ	577,083			<u> </u>
0	Analysis of line 9	1		-		
а	Excess from 2015	117,013				‡
b	Excess from 2016	78,944	1			
С	Excess from 2017	122,706				
d	Excess from 2018	92,816				Į.
е	Excess from 2019	165,604				1

Part XV Supplementary Information (co	ontinued)			
3 Grants and Contributions Paid During t	he Year or Approved for	Future Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year SD WEST RIVER SPAY/NEUTER O PO BOX 286	OALITION	PC		
DEADWOOD SD 57732	CHARITAE	LE - PROGRAM	SERVICES	20,000
BLACK HILLS HUMANE SOCIETY 1820 E ST PATRICK ST RAPID CITY SD 57703	CHARITABI	PC E - PROGRAM	SERVICES	180,000
			:	
Total			▶ 3a	200,000
b Approved for future payment			Jaj	200,000
N/A				
	,			
Total		<u> </u>	▶ 3b	

	Rant XVIIIA Analysis of Income-Producing	ACTIVITIES				
Ε'n	iter gross amounts unless otherwise indicated.		(b) Amount	(c) Exclusion	d by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income
1	Program service revenue			code		(See instructions)
	a					
	b					
	c					
	d			<u> </u>		· · · · · · · · · · · · · · · · · · ·
	e					
	f		<u> </u>	<u> </u>		
	g Fees and contracts from government agencies					
2	Membership dues and assessments			<u> </u>		
3	Interest on savings and temporary cash investments			14	530	
4	Dividends and interest from securities					
5	Net rental income or (loss) from real estate					
	a Debt-financed property					
	b Not debt-financed property			-		<u></u> -
6	Net rental income or (loss) from personal property			 		
	Other investment income	ļ		15	51,697	
	Gain or (loss) from sales of assets other than inventory					
	Net income or (loss) from special events					
	Gross profit or (loss) from sales of inventory			-		
11	Other revenue a					
	b			+	<u> </u>	
	<u> </u>	—- 		+		
	d					
	e(t) (t)			0	52 227	
	Subtotal Add columns (b), (d), and (e)			U	52,227	
	Total. Add line 12, columns (b), (d), and (e)				13	52,22
	ee worksheet in line 13 instructions to verify calculations.) Relationship of Activities to th	o Accomplishme	nt of Evennt D	urnoso		
	Line No. Explain below how each activity for which inc	ome is reported in colu	ımn (e) of Part XVI-A	contribute	ed importantly to the	-
	 accomplishment of the foundation's exempt p 	ournoses (other than b	y providing funds for		oses) (See instructions	
		74. P0000 (41. 10. 11. 11. 11. 11. 11. 11. 11. 11. 1		such purp)
	N/A			such purp		
_				such purp		
_				such purp		
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				such purp		

************	990-PF (20 [,] t XVII	Information Reg					0415399 Onships Wit	h Noncharitat	le Exe		ge 1
		Organizations								q	т
	_	anization directly or indi		=	-		scribed			Yes	No
		01(c) (other than sectio	on 501(c)(3) c	organizations) or in	section 527, rela	iting to political					ŧ
	organizatior Transfers fr	ns / om the reporting found:	ation to a nor	ncharitable evemnt	organization of						ĺ
	(1) Cash	om the reporting loaner	ation to a nor	ichantable exempt	organization of				1a(1)	Ì	x
	(2) Other a	ssets							1a(2)	 	X
	Other trans										
	(1) Sales o	f assets to a noncharita	able exempt o	organization					1b(1)		X
((2) Purcha	ses of assets from a no	ncharitable e	exempt organization	n				1b(2)		X
((3) Rental (of facilities, equipment,	or other asse	ets					1b(3)		X
		rsement arrangements	;						1b(4)	<u> </u>	X
		or loan guarantees							1b(5)	<u> </u>	X
	' '	nance of services or me	•	-					1b(6)	-	X
	_	acılıties, equipment, ma er to any of the above is	•	•		a (b) should always	show the four r	markat	1c	L	
		goods, other assets, o	-	-							
		transaction or sharing	_								
) Line no	(b) Amount involved		ne of nonchantable exem				ransactions, and sharing	аптапдете	 18	
N/A											
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		ation directly or indirect	•			xempt organization	s			TV.	1
		section 501(c) (other t		001(c)(3)) or in sec	tion 52/7				☐ ¥	es X	No
		nplete the following sch	equie	(b) Type of o		γ	(c) Descri	ption of relationship			
N	/A	<u> </u>		(, . , , , , , , , , , , , , , , , ,	<u>gam=====</u>		(0, 2000				
				<u> </u>	·						
		/		<u> </u>		l					
		naities of perjury, I déclare than nd contplete. Declaration of p						knowledge and belief, r	is true,		
								May the IRS do			
Sign		1 a V /			n			See instruction		Yes	No
Here		IDIAV			17/2-	-7 -7575	N DDFC	IDENT/CEC			=-
	Signa	ture of officer or trustee			Date		Title		,		
	'	pe preparer's name	-		Preparer's signatur	<i>z/</i>		Date			$\overline{}$
	Cilioty	ho Archaigi a riame				1		1	ı	Check self-em	lıf ploved
Paid	PAUL	J. THORSTENSO	ON, CPA,	CVA	1 am	0/16	- CPB	<u> </u>	-20		, 50
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Use Or	Firm's a	ddress ► PO BC	X 3140)				Firm's EIN ▶ 46	-025	753	8

57709-3140

605-342-5630

Phone no

RAPID CITY, SD

Schedule B , (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

2019

Name of the organization

Employer identification number

BLACK HILLS AN	IMAL ALLY FOU	INDATION	65-0415399
Organization type (check one)		
Filers of:	Section:		
Form 990 or 990-EZ	501(c)() (ent	ter number) organization	
	4947(a)(1) nonexemp	pt charitable trust not treated as a private foundation	
	527 political organiza	ation	
Form 990-PF	X 501(c)(3) exempt priv	vate foundation	
	4947(a)(1) nonexemp	pt charitable trust treated as a private foundation	
	501(c)(3) taxable priv	vate foundation	
Check if your organization is co Note : Only a section 501(c)(7), instructions	-	or a Special Rule. In check boxes for both the General Rule and a Speci	al Rule. See
General Rule			
-	operty) from any one contri	0-PF that received, during the year, contributions total ibutor. Complete Parts I and II. See instructions for de	•
Special Rules			
regulations under section 13, 16a, or 16b, and the	ons 509(a)(1) and 170(b)(1) at received from any one co	filing Form 990 or 990-EZ that met the 33 ¹ /3% suppo)(A)(vi), that checked Schedule A (Form 990 or 990-E ontributor, during the year, total contributions of the gra Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete	Z), Part II, line eater of (1)
contributor, during the y	ear, total contributions of m	, (8), or (10) filing Form 990 or 990-EZ that received fi nore than \$1,000 exclusively for religious, charitable, s tion of cruelty to children or animals. Complete Parts I e and address), II, and III	scientific,
contributor, during the y contributions totaled mo during the year for an e	ear, contributions exclusive ore than \$1,000. If this box is exclusively religious, charitab or this organization because	(8), or (10) filing Form 990 or 990-EZ that received frely for religious, charitable, etc., purposes, but no sucles checked, enter here the total contributions that were ble, etc., purpose. Don't complete any of the parts unled it received nonexclusively religious, charitable, etc., or	n e received ess the
990-EZ, or 990-PF), but it must	answer "No" on Part IV, line	Rule and/or the Special Rules doesn't file Schedule 6 to 2, of its Form 990, or check the box on line H of its e filing requirements of Schedule B (Form 990, 990-E	Form 990-EZ or on its

Name of organization

BLACK HILLS ANIMAL ALLY FOUNDATION

Employer identification number 65-0415399

Part I	Contributors (see instructions). Use duplicate copies of	Part I if additional space is nee	eded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JAMIE A ROBINSON 21868 STAGE STOP LN LEAD SD 57754	\$ 200,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No <u>.</u>	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

	, e						
	Charitable Purpose	s	8		\$ 148		
	sted				0		
Expenses	Adjus Ne	\$,	ψ.		rm 990-PF, Part II, Line 13 - Other Investments
23 - Other	Vet stment		22 421	40	483		13 - Other I
Part I, Line	Inve	Ś			S		art II, Line
n 990-PF, I	otal		30 561	40	631		990-PF, Pa
Statement 5 - Forn)	v,			\$		Statement 6 - Form
	Description	EXPENSES	BANK CHARGES INSURANCE	MISCELLANEOUS	TOTAL		321
	Statement 5 - Form 990-PF, Part I, Line 23 - Other Expenses	Statement 5 - Form 990-PF, Part I, Line 23 - Other Expenses Net Adjusted Investment Net	Statement 5 - Form 990-PF, Part I, Line 23 - Other Expenses Net Adjusted Investment S \$	Statement 5 - Form 990-PF, Part I, Line 23 - Other Expenses Net Adjusted Charitable Investment S S S S S S S S S S S S S S S S S S S	Statement 5 - Form 990-PF, Part I, Line 23 - Other Expenses Description Total Net line stment stment stment stment state Adjusted line stment state Charitable Purpose state SHARGES INCE STANCE Statement 5 - Form 990-PF, Part I, Line 23 - Other Expenses Description Total Investment Investment S Adjusted Net S Charitable Purpose S ANCE AND STANCE 30 S61 A121 A121 A121 A121 A121 A121 A121 A1	Statement 5 - Form 990-PF, Part I, Line 23 - Other Expenses Description Total Net Adjusted Net Charitable Purpose SHARGES 30 \$ \$ \$ \$ ANCE AND STANCE 561 421 421 \$ \$ ALANEOUS \$ 6631 \$ \$ \$ \$	

Fair Market Value	\$ 206,788
Basis of Valuation	MARKET
End of Year	\$ \$
Beginning of Year	\$ \$
Description	s GAS INTEREST TOTAL

5-0415399	Federal State	ements		
Form 990-PF.	Part XV, Line 1a - Managers	Who Contributed Over	2% or \$5.000	
	ame of Manager	Amo		
ONE		\$ \$	0	
Form 990-l	PF, Part XV, Line 1b - Manage	ers Who Own 10% or M	lore Stock	
N	ame of Manager	Amo	Amount	
ONE TOTAL		\$ \$	0	