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**SOUTHWEST INITIATIVE FOUNDATION**

**FORM 990 INCOME TAX RETURN**

**JULY 1, 2020 - JUNE 30, 2021**

**(PUBLIC INSPECTION COPY)**

Form **990**Department of the Treasury  
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

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

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**Open to Public  
Inspection**A** For the 2020 calendar year, or tax year beginning **JUL 1, 2020** and ending **JUN 30, 2021****B** Check if applicable:

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Final return/terminated  
☐ Amended return  
☐ Application pending

**C** Name of organization**SOUTHWEST INITIATIVE FOUNDATION**

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

**15 3RD AVE NW**

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

**HUTCHINSON, MN 55350****F** Name and address of principal officer: **DIANA D. ANDERSON****SAME AS C ABOVE****D** Employer identification number**41-1555592****E** Telephone number**(320) 587-4848****G** Gross receipts \$**41,811,065.****H(a)** Is this a group returnfor subordinates? ..... ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. See instructions

**H(c)** Group exemption number ▶**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ **WWW.SWIFFOUNDATION.ORG****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: **1986****M** State of legal domicile: **MN****Part I Summary**

Activities & Governance	<b>1</b>	Briefly describe the organization's mission or most significant activities: <b>OUR MISSION IS CONNECTING PEOPLE, INVESTING IN IDEAS AND BUILDING COMMUNITIES.</b>
	<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.
	<b>3</b>	Number of voting members of the governing body (Part VI, line 1a) ..... <b>12</b>
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b) ..... <b>12</b>
	<b>5</b>	Total number of individuals employed in calendar year 2020 (Part V, line 2a) ..... <b>25</b>
	<b>6</b>	Total number of volunteers (estimate if necessary) ..... <b>300</b>
	<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12 ..... <b>0.</b>
<b>7b</b>	Net unrelated business taxable income from Form 990-T, Part I, line 11 ..... <b>0.</b>	
Revenue	<b>8</b>	Contributions and grants (Part VIII, line 1h) ..... <b>6,744,893.</b>
	<b>9</b>	Program service revenue (Part VIII, line 2g) ..... <b>525,865.</b>
	<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d) ..... <b>3,338,387.</b>
	<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) ..... <b>60,832.</b>
	<b>12</b>	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) ..... <b>10,669,977.</b>
	Expenses	<b>13</b>
<b>14</b>		Benefits paid to or for members (Part IX, column (A), line 4) ..... <b>0.</b>
<b>15</b>		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) ..... <b>2,083,357.</b>
<b>16a</b>		Professional fundraising fees (Part IX, column (A), line 11e) ..... <b>0.</b>
<b>b</b>		Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>618,161.</b>
<b>17</b>		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) ..... <b>3,361,200.</b>
<b>18</b>		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) ..... <b>7,688,804.</b>
<b>19</b>		Revenue less expenses. Subtract line 18 from line 12 ..... <b>2,981,173.</b>
Net Assets or Fund Balances	<b>20</b>	Total assets (Part X, line 16) ..... <b>96,104,043.</b>
	<b>21</b>	Total liabilities (Part X, line 26) ..... <b>11,829,788.</b>
	<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20 ..... <b>84,274,255.</b>

**Part II Signature Block**

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 officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer	Date
	<b>DIANA D. ANDERSON, PRESIDENT/CEO</b> Type or print name and title	
Paid Preparer Use Only	Print/Type preparer's name <b>KRISTIN L SCHMIDT, CPA</b>	Preparer's signature <i>Kristin Schmidt</i>
	Date <b>05/13/22</b>	Check if self-employed <input type="checkbox"/> PTIN <b>P01487323</b>
Firm's name	<b>CLIFTONLARSONALLEN LLP</b>	Firm's EIN ▶ <b>41-0746749</b>
	Firm's address ▶ <b>818 SECOND STREET SOUTH, SUITE 320 WAITE PARK, MN 56387</b>	Phone no. <b>320-203-5500</b>

May the IRS discuss this return with the preparer shown above? See instructions

☒ Yes ☐ No

**Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line in this Part III ☒ **X****1** Briefly describe the organization's mission:SEE SCHEDULE O.

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No  
If "Yes," describe these new services on Schedule O.

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No  
If "Yes," describe these changes on Schedule O.

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

**4a** (Code: ) (Expenses \$ 6,215,364. including grants of \$ 4,778,300. ) (Revenue \$ 563,705. )

ECONOMIC DEVELOPMENT (SEE SCHEDULE O).

**4b** (Code: ) (Expenses \$ 1,988,364. including grants of \$ 723,734. ) (Revenue \$ )

PROGRAMS (SEE SCHEDULE O).

**4c** (Code: ) (Expenses \$ 2,006,017. including grants of \$ 2,029,347. ) (Revenue \$ )

AFFILIATE AND COMPONENT FUNDS (SEE SCHEDULE O).**4d** Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses 10,209,745.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	<b>1</b> X	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	<b>2</b> X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	<b>3</b>	X
<b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	<b>4</b> X	
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	<b>5</b>	X
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	<b>6</b> X	
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	<b>7</b>	X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	<b>8</b>	X
<b>9</b> Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	<b>9</b> X	
<b>10</b> Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	<b>10</b> X	
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	<b>11a</b> X	
<b>b</b> Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	<b>11b</b> X	
<b>c</b> Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	<b>11c</b>	X
<b>d</b> Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	<b>11d</b>	X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	<b>11e</b> X	
<b>f</b> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	<b>11f</b> X	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	<b>12a</b>	X
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	<b>12b</b> X	
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	<b>13</b>	X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?	<b>14a</b>	X
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	<b>14b</b>	X
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	<b>15</b>	X
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	<b>16</b>	X
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	<b>17</b>	X
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	<b>18</b>	X
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	<b>19</b>	X
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	<b>20a</b>	X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<b>20b</b>	
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	<b>21</b> X	



**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....	<b>22</b> X	
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .....	<b>23</b> X	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....	<b>24a</b> X	
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....	<b>24b</b>	X
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....	<b>24c</b>	X
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....	<b>24d</b>	X
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....	<b>25a</b>	X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .....	<b>25b</b>	X
<b>26</b> Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> .....	<b>26</b>	X
<b>27</b> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....	<b>27</b>	X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28a</b>	X
<b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28b</b>	X
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28c</b>	X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	<b>29</b> X	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....	<b>30</b>	X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....	<b>31</b>	X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....	<b>32</b>	X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....	<b>33</b> X	
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....	<b>34</b>	X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....	<b>35a</b>	X
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....	<b>35b</b>	
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....	<b>36</b>	X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....	<b>37</b>	X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? .....	<b>38</b> X	

Note: All Form 990 filers are required to complete Schedule O

**Part V Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
<b>1a</b> Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .....	<b>1a</b> 511	
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .....	<b>1b</b> 0	
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .....	<b>1c</b>	

**Part V** Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
<b>2a</b> Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	<b>2a</b> 25		
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	<b>2b</b>	X	
<b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>		X
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	<b>3b</b>		
<b>4a</b> At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<b>4a</b>		X
<b>b</b> If "Yes," enter the name of the foreign country			
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>		X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>		X
<b>c</b> If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>		
<b>6a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	<b>6a</b>		X
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>		
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>			
<b>a</b> Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	<b>7a</b>	X	
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>	X	
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>		X
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year	<b>7d</b>		
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>		X
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>		X
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>		
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>7h</b>		
<b>8 Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	<b>8</b>		
<b>9 Sponsoring organizations maintaining donor advised funds.</b>			
<b>a</b> Did the sponsoring organization make any taxable distributions under section 4966?	<b>9a</b>		X
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>		X
<b>10 Section 501(c)(7) organizations.</b> Enter:			
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>		
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>		
<b>11 Section 501(c)(12) organizations.</b> Enter:			
<b>a</b> Gross income from members or shareholders	<b>11a</b>		
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>		
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>		
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>			
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state?	<b>13a</b>		
<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			
<b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	<b>13b</b>		
<b>c</b> Enter the amount of reserves on hand	<b>13c</b>		
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>		X
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	<b>14b</b>		
<b>15</b> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	<b>15</b>		X
If "Yes," see instructions and file Form 4720, Schedule N.			
<b>16</b> Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	<b>16</b>		X
If "Yes," complete Form 4720, Schedule O.			

Form 990 (2020)

**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI

☒**Section A. Governing Body and Management**

	1a	12	Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year ..... If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		12		
<b>b</b> Enter the number of voting members included on line 1a, above, who are independent .....	1b	12		
<b>2</b> Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? .....		2		X
<b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? .....		3		X
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .....		4		X
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets? .....		5		X
<b>6</b> Did the organization have members or stockholders? .....		6		X
<b>7a</b> Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? .....		7a		X
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? .....		7b		X
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
<b>a</b> The governing body? .....		8a	X	
<b>b</b> Each committee with authority to act on behalf of the governing body? .....		8b	X	
<b>9</b> Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O .....		9		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
<b>10a</b> Did the organization have local chapters, branches, or affiliates? .....		X
<b>b</b> If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? .....		
<b>11a</b> Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? .....		X
<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990. ....		
<b>12a</b> Did the organization have a written conflict of interest policy? If "No," go to line 13 .....	X	
<b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? .....	X	
<b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done .....	X	
<b>13</b> Did the organization have a written whistleblower policy? .....	X	
<b>14</b> Did the organization have a written document retention and destruction policy? .....	X	
<b>15</b> Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
<b>a</b> The organization's CEO, Executive Director, or top management official .....	X	
<b>b</b> Other officers or key employees of the organization .....	X	
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). ....		
<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? .....	X	
<b>b</b> If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? .....	X	

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed ► **MN, CA, FL**

**18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

**19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

**20** State the name, address, and telephone number of the person who possesses the organization's books and records ►  
**MARGIE NELSEN, CFO - 320-484-9110**  
**15 3RD AVE NW, HUTCHINSON, MN 55350**

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
  - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
  - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
  - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See instructions for the order in which to list the persons above.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DIANA D. ANDERSON PRESIDENT/CEO	50.00			X				149,023.	0.	33,287.
(2) SCOTT MARQUARDT VICE PRESIDENT	50.00			X				109,136.	0.	23,065.
(3) MARGIE NELSEN CFO	50.00			X				110,282.	0.	5,570.
(4) TERESA PETERSON BOARD MEMBER	4.00	X						1,358.	0.	0.
(5) RANDY REINKE CHAIR	4.00	X		X				0.	0.	0.
(6) PATRICIA DOLS VICE CHAIR	4.00	X		X				0.	0.	0.
(7) MARY CHRISTINE ROCK TREASURER	4.00	X		X				0.	0.	0.
(8) MARK TITUS SECRETARY	4.00	X		X				0.	0.	0.
(9) TOM BRAKKE BOARD MEMBER	4.00	X						0.	0.	0.
(10) TERRY GAALSWYK BOARD MEMBER	4.00	X						0.	0.	0.
(11) DAN GREVE BOARD MEMBER	4.00	X						0.	0.	0.
(12) ABDIRIZAK MAHBOUB BOARD MEMBER	4.00	X						0.	0.	0.
(13) JANICE NELSON PAST CHAIR	4.00	X						0.	0.	0.
(14) KATHY WEHKING BOARD MEMBER	4.00	X						0.	0.	0.
(15) THERESA ZASKE BOARD MEMBER	4.00	X						0.	0.	0.

<b>Part VII</b>	<b>Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees</b> <i>(continued)</i>
-----------------	--

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position <small>(do not check more than one box, unless person is both an officer and a director/trustee)</small>						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
<b>1b Subtotal .....</b>								<b>369,799.</b>	<b>0.</b>	<b>61,922.</b>
<b>c Total from continuation sheets to Part VII, Section A .....</b>								<b>0.</b>	<b>0.</b>	<b>0.</b>
<b>d Total (add lines 1b and 1c) .....</b>								<b>369,799.</b>	<b>0.</b>	<b>61,922.</b>


**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►

3

		Yes	No
3	Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> .....		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> .....	X	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> .....		X

## Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		
<b>2</b> Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization	 0	

Form **990** (2020)

**Part VIII Statement of Revenue**Check if Schedule O contains a response or note to any line in this Part VIII ☐

				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	5,509,936.			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	3,459,413.			
	g	Noncash contributions included in lines 1a-1f	1g	\$ 230,511.			
	h Total. Add lines 1a-1f			8,969,349.			
Program Service Revenue	2 a LOAN INTEREST INCOME			Business Code 900099	515,794.	515,794.	
	b OTHER PROGRAM INCOME			900099	42,422.	42,422.	
	c LOAN ADMIN FEES			900099	5,489.	5,489.	
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			563,705.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)				2,050,338.		2,050,338.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a	(i) Real		(ii) Personal			
		6a	70,253.				
		6b	0.				
	c	Rental income or (loss)		6c	70,253.		
	d Net rental income or (loss)				70,253.		70,253.
	7 a	(i) Securities		(ii) Other			
		7a	30,156,945.		475.		
		7b	29,088,435.		0.		
	c	Gain or (loss)		7c	1,068,510.	475.	
	d Net gain or (loss)				1,068,985.		1,068,985.
	8 a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18		8a			
b Less: direct expenses		8b					
c Net income or (loss) from fundraising events							
9 a	Gross income from gaming activities. See Part IV, line 19		9a				
	b Less: direct expenses		9b				
c Net income or (loss) from gaming activities							
10 a	Gross sales of inventory, less returns and allowances		10a				
	b Less: cost of goods sold		10b				
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue	11 a			Business Code			
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions				12,722,630.	563,705.	0.	3,189,576.

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	5,831,381.	5,831,381.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22	1,700,000.	1,700,000.		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	482,050.	264,587.	163,918.	53,545.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	1,259,833.	752,026.	224,580.	283,227.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	61,615.	36,484.	11,242.	13,889.
<b>9</b> Other employee benefits	138,174.	80,742.	25,617.	31,815.
<b>10</b> Payroll taxes	114,728.	66,399.	25,767.	22,562.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management				
<b>b</b> Legal	71,349.	62,683.	38.	8,628.
<b>c</b> Accounting	35,881.	20,616.	8,500.	6,765.
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees	314,707.		314,707.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	306,060.	299,574.	3,396.	3,090.
<b>12</b> Advertising and promotion	63,430.	38,590.	14,377.	10,463.
<b>13</b> Office expenses	119,700.	61,667.	17,943.	40,090.
<b>14</b> Information technology	294,071.	182,494.	58,555.	53,022.
<b>15</b> Royalties				
<b>16</b> Occupancy	41,889.	22,315.	11,896.	7,678.
<b>17</b> Travel	35,947.	29,539.	3,174.	3,234.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings	115,658.	100,407.	7,070.	8,181.
<b>20</b> Interest	46,909.	36,921.	4,224.	5,764.
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	241,218.	117,629.	78,372.	45,217.
<b>23</b> Insurance	28,076.	24,447.		3,629.
<b>24</b> Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
<b>a</b> PROVISION FOR LOAN LOSS	110,574.	110,574.		
<b>b</b> FUNDRAISING COSTS	31,544.	22,842.		8,702.
<b>c</b> PUBLIC RELATIONS	12,727.	4,563.	6,923.	1,241.
<b>d</b>				
<b>e</b> All other expenses	375,063.	343,265.	24,379.	7,419.
<b>25</b> Total functional expenses. Add lines 1 through 24e	11,832,584.	10,209,745.	1,004,678.	618,161.
<b>26</b> Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ☐ if following SOP 98-2 (ASC 958-720)

**Part X Balance Sheet**Check if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	3,800.	<b>1</b>	3,800.
	<b>2</b> Savings and temporary cash investments .....	1,935,334.	<b>2</b>	1,466,486.
	<b>3</b> Pledges and grants receivable, net .....	1,120,216.	<b>3</b>	1,147,586.
	<b>4</b> Accounts receivable, net .....		<b>4</b>	
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....	7,684,059.	<b>7</b>	8,043,673.
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	59,073.	<b>9</b>	110,934.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 4,290,061.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 1,648,519.		
	<b>11</b> Investments - publicly traded securities .....	72,816,514.	<b>11</b>	85,234,552.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	9,937,237.	<b>12</b>	9,978,869.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	26,340.	<b>15</b>	51,518.
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	96,104,043.	<b>16</b>	108,678,960.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	356,469.	<b>17</b>	440,962.
	<b>18</b> Grants payable .....	2,193,859.	<b>18</b>	2,284,760.
	<b>19</b> Deferred revenue .....	815,004.	<b>19</b>	642,345.
	<b>20</b> Tax-exempt bond liabilities .....	873,395.	<b>20</b>	661,858.
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....	1,588,732.	<b>21</b>	1,826,058.
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....	1,739,094.	<b>23</b>	1,231,116.
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	385,458.
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	4,263,235.	<b>25</b>	4,062,932.
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....	11,829,788.	<b>26</b>	11,535,489.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	27,597,409.	<b>27</b>	35,809,780.
	<b>28</b> Net assets with donor restrictions .....	56,676,846.	<b>28</b>	61,333,691.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	84,274,255.	<b>32</b>	97,143,471.
	<b>33</b> Total liabilities and net assets/fund balances .....	96,104,043.	<b>33</b>	108,678,960.

Form 990 (2020)



**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response or note to any line in this Part XI ☒

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	12,722,630.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	11,832,584.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	890,046.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	84,274,255.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	11,791,811.
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	187,359.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	97,143,471.

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	<b>2a</b>	<input checked="" type="checkbox"/>
<b>b</b> Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	<b>2b</b>	<input checked="" type="checkbox"/>
<b>c</b> If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	<b>2c</b>	<input checked="" type="checkbox"/>
<b>3a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____	<b>3a</b>	<input checked="" type="checkbox"/>
<b>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____	<b>3b</b>	<input checked="" type="checkbox"/>

Form 990 (2020)

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
▶ Attach to Form 990 or Form 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

**Open to Public  
Inspection**

Name of the organization

**SOUTHWEST INITIATIVE FOUNDATION**

Employer identification number

**41-1555592**

**Part I Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: \_\_\_\_\_
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: \_\_\_\_\_
- 10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	4584088.	5931424.	3674093.	6744893.	8969349.	29903847.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	4584088.	5931424.	3674093.	6744893.	8969349.	29903847.
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) .....						6648442.
<b>6 Public support.</b> Subtract line 5 from line 4.						23255405.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>7</b> Amounts from line 4 .....	4584088.	5931424.	3674093.	6744893.	8969349.	29903847.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	1332883.	2431589.	3501894.	3515926.	2120591.	12902883.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>11 Total support.</b> Add lines 7 through 10						42806730.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	2,505,365.
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)) .....	<b>14</b>	54.33	%
<b>15</b> Public support percentage from 2019 Schedule A, Part II, line 14 .....	<b>15</b>	46.58	%
<b>16a 33 1/3% support test - 2020.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....			
<b>b 33 1/3% support test - 2019.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....			
<b>17a 10% -facts-and-circumstances test - 2020.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....			
<b>b 10% -facts-and-circumstances test - 2019.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....			
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....			

Schedule A (Form 990 or 990-EZ) 2020

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2019 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2019 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2020.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

**b 33 1/3% support tests - 2019.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

**Part IV Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
<b>b</b> Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
<b>c</b> Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>9a</b> Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</b> Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV** Supporting Organizations (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?		
<b>11a</b>		
<b>b</b> A family member of a person described in line 11a above?		
<b>11b</b>		
<b>c</b> A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in <b>Part VI</b> .		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
<b>1</b>		
<b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
<b>2</b>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
<b>1</b>		
<b>2</b> Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).		
<b>2</b>		
<b>3</b> By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see instructions).			
<b>2</b> Activities Test. Answer lines 2a and 2b below.			
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI</b> identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
<b>2a</b>			
<b>b</b> Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
<b>2b</b>			
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.			
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in <b>Part VI</b> .			
<b>3a</b>			
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.			
<b>3b</b>			

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( *explain in Part VI*). See instructions.  
All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990 or 990-EZ) 2020

**Part V** Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i> )	5
6	Other distributions ( <i>describe in Part VI</i> ). See instructions.	6
7	<b>Total annual distributions.</b> Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions.	8
9	Distributable amount for 2020 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2020 (reasonable cause required - <i>explain in Part VI</i> ). See instructions.		
3	Excess distributions carryover, if any, to 2020		
a	From 2015		
b	From 2016		
c	From 2017		
d	From 2018		
e	From 2019		
f	<b>Total</b> of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2020 distributable amount		
i	Carryover from 2015 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2020 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2020 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.		
6	Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.		
7	<b>Excess distributions carryover to 2021.</b> Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2016		
b	Excess from 2017		
c	Excess from 2018		
d	Excess from 2019		
e	Excess from 2020		

Schedule A (Form 990 or 990-EZ) 2020



### Supplemental Information.

(See instructions.)

## 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](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

# 2020

Name of the organization

SOUTHWEST INITIATIVE FOUNDATION

Employer identification number

41-1555592

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)( 3 ) (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

### General Rule

- ☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

### Special Rules

- ☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization	Employer identification number
<b>SOUTHWEST INITIATIVE FOUNDATION</b>	<b>41-1555592</b>

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>		\$ <u>204,100.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>		\$ <u>555,777.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>		\$ <u>4,974,294.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>		\$ <u>207,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>		\$ <u>186,267.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

**SOUTHWEST INITIATIVE FOUNDATION****41-1555592****Part II** **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization

Employer identification number

**SOUTHWEST INITIATIVE FOUNDATION****41-1555592**

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) ► \$ \_\_\_\_\_

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

**SCHEDULE C**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527  
▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**  
▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2020**

**Open to Public  
Inspection**

**If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then**

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

**If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

**If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then**

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization

**SOUTHWEST INITIATIVE FOUNDATION**

Employer identification number

**41-1555592**

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures ..... ▶ \$ \_\_\_\_\_
- 3 Volunteer hours for political campaign activities ..... \_\_\_\_\_

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... ▶ \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... ▶ \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ..... ☐ Yes ☐ No
- 4a Was a correction made? ..... ☐ Yes ☐ No
- b If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ..... ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file **Form 1120-POL** for this year? ..... ☐ Yes ☐ No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2020

LHA

032041 12-02-20

**Part II-A** Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

**A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

**B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
<b>1a</b> Total lobbying expenditures to influence public opinion (grassroots lobbying) .....			
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....			
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) .....			
<b>d</b> Other exempt purpose expenditures .....			
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) .....			
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.			
<b>If the amount on line 1e, column (a) or (b) is:</b>	<b>The lobbying nontaxable amount is:</b>		
Not over \$500,000	20% of the amount on line 1e.		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
Over \$17,000,000	\$1,000,000.		
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) .....			
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- .....			
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- .....			
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....			

☐ Yes ☐ No

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2020

**Part II-B** Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
<b>a</b> Volunteers?		X	
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
<b>c</b> Media advertisements?		X	
<b>d</b> Mailings to members, legislators, or the public?		X	
<b>e</b> Publications, or published or broadcast statements?		X	
<b>f</b> Grants to other organizations for lobbying purposes?		X	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?		X	
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
<b>i</b> Other activities?		X	
<b>j</b> Total. Add lines 1c through 1i			0.
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members?	1	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
<b>3</b> Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

**Part III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

<b>1</b> Dues, assessments and similar amounts from members	1	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year	2a	
<b>b</b> Carryover from last year	2b	
<b>c</b> Total	2c	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
<b>5</b> Taxable amount of lobbying and political expenditures (See instructions)	5	

**Part IV** Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

**PART II-B, LINE 1, LOBBYING ACTIVITIES:**

TESTIFIED AT STATE LEGISLATIVE HEARINGS ON BEHALF OF FUNDING BILLS THAT

WOULD SUPPORT DEVELOPMENT OF RURAL CHILD CARE SERVICES, EXPANSION OF

RURAL BROADBAND SERVICES, AND INVESTMENTS IN RURAL ECONOMIC AND

WORKFORCE DEVELOPMENT PROGRAMS.



**SCHEDULE D**  
**(Form 990)**Department of the Treasury  
Internal Revenue Service**Supplemental Financial Statements**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**  
▶ **Attach to Form 990.**

▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2020****Open to Public Inspection****Name of the organization**

SOUTHWEST INITIATIVE FOUNDATION

**Employer identification number**

41-1555592

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....	30	228
2 Aggregate value of contributions to (during year) .....	203,748.	8,727,601.
3 Aggregate value of grants from (during year) .....	481,418.	6,992,706.
4 Aggregate value at end of year .....	4,183,776.	92,959,694.
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

**Part II Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

- 1 Purpose(s) of conservation easements held by the organization (check all that apply).  
☐ Preservation of land for public use (for example, recreation or education) ☐ Preservation of a historically important land area  
☐ Protection of natural habitat ☐ Preservation of a certified historic structure  
☐ Preservation of open space
- 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.
- |  | Held at the End of the Tax Year |
|--|---------------------------------|
| a Total number of conservation easements .....   | 2a                              |
| b Total acreage restricted by conservation easements .....   | 2b                              |
| c Number of conservation easements on a certified historic structure included in (a) .....   | 2c                              |
| d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register ..... | 2d                              |
- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ .....
- 4 Number of states where property subject to conservation easement is located ▶ .....
- 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....
- 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ .....
- 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ .....
- 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....
- 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ .....
- (ii) Assets included in Form 990, Part X ▶ \$ .....
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:
- a Revenue included on Form 990, Part VIII, line 1 ▶ \$ .....
- b Assets included in Form 990, Part X ▶ \$ .....

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2020

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

- a ☐ Public exhibition d ☐ Loan or exchange program  
 b ☐ Scholarly research e ☐ Other \_\_\_\_\_  
 c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☒ No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☒ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☒ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☒

**Part V Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	54,745,386.	55,881,915.	55,251,515.	51,425,215.	46,493,493.
b Contributions	1,156,537.	598,604.	752,309.	2,952,055.	625,171.
c Net investment earnings, gains, and losses	13,944,769.	920,282.	2,392,509.	3,160,317.	5,770,342.
d Grants or scholarships					
e Other expenditures for facilities and programs	2,624,054.	2,655,415.	2,514,418.	2,286,072.	1,463,791.
f Administrative expenses					
g End of year balance	67,222,638.	54,745,386.	55,881,915.	55,251,515.	51,425,215.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ☒ 35.0300 %  
 b Permanent endowment ☒ 55.5800 %  
 c Term endowment ☒ 9.3900 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) Unrelated organizations  
 (ii) Related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ☐

4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,015,000.		1,015,000.
b Buildings		1,655,624.	619,691.	1,035,933.
c Leasehold improvements		212,465.	207,264.	5,201.
d Equipment		1,406,972.	821,564.	585,408.
e Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				2,641,542.

Schedule D (Form 990) 2020

**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives .....		
(2) Closely held equity interests .....		
(3) Other .....		
(A) DONATED REAL ESTATE HELD		
(B) AS INVESTMENTS	2,124,500.	COST
(C) FARMLAND WITH LIFE ESTATE	5,884,585.	COST
(D) CHARITABLE REMAINDER		
(E) UNITRUST	240,293.	COST
(F) INVESTMENTS HELD IN TRUST	1,729,491.	COST
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	9,978,869.	

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ANNUITY PAYABLE	34,588.
(3) CAPITAL LEASE PAYABLE	13,583.
(4) LIFE ESTATE LIABILITY	3,343,450.
(5) OBLIGATIONS OF SPLIT-INTEREST	
(6) AGREEMENTS	240,293.
(7) INVESTMENT TRUST LIABILITY	431,018.
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	4,062,932.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ☒

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	24,309,303.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	11,791,811.
<b>b</b>	Donated services and use of facilities	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	229,065.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	12,020,876.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	12,288,427.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	314,707.
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	119,496.
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	434,203.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)	<b>5</b>	12,722,630.

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	11,440,087.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	0.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	11,440,087.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	314,707.
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	77,790.
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	392,497.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)	<b>5</b>	11,832,584.

**Part XIII Supplemental Information.**

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

**PART IV, LINE 2B:**

ASSETS HELD ON DONOR'S BEHALF CONSISTS OF 25 FUNDS IN WHICH THE BENEFICIARIES WERE DESIGNATED BY THE DONOR AT THE TIME THE FUNDS WERE ESTABLISHED. THEREFORE, THE FOUNDATION HAS NO CONTROL OVER THE DISTRIBUTION OF THESE FUNDS.

**PART V, LINE 4:**

THE SWIF GENERAL ENDOWMENT FUND IS ACCESSED THROUGH BOARD APPROVAL, GUIDED BY A SPENDING POLICY THAT ALLOWS RESOURCES TO BE USED TO SUPPLEMENT PROGRAM ACTIVITIES AND OPERATIONAL EXPENSES. OTHER DESIGNATED ENDOWED FUNDS ARE DIRECTED TO GRANTS AND EXPENSES RELATED TO THE DONOR'S ORIGINAL INTENT.

**Part XIII** Supplemental Information (continued)

## PART X, LINE 2:

THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND SIMILAR STATE INCOME TAX LAWS. THE FOUNDATION IS A NONPRIVATE FOUNDATION AND CONTRIBUTIONS TO THE ORGANIZATION QUALIFY AS A CHARITABLE TAX DEDUCTION BY THE CONTRIBUTOR. SWIF REAL ESTATE HOLDINGS LLC IS A 100% OWNED LLC AND IS CONSIDERED A DISREGARDED ENTITY FOR TAX PURPOSES. IT IS THE POLICY OF THE FOUNDATION, IN ACCORDANCE WITH GAAP, TO ASSESS ANY UNCERTAIN TAX PROVISIONS AND, IF NECESSARY, RECORD A TAX ASSET OR LIABILITY, AND THE RELATED INCOME TAX EXPENSE, FOR ANY UNCERTAIN TAX PROVISIONS. THE FOUNDATION DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS OR UNRELATED BUSINESS INCOME.

THE FOUNDATION FOLLOWS THE ACCOUNTING STANDARDS FOR CONTINGENCIES IN EVALUATING UNCERTAIN TAX POSITIONS. THIS GUIDANCE PRESCRIBES RECOGNITION THRESHOLD PRINCIPLES FOR THE FINANCIAL STATEMENT RECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN ON A TAX RETURN THAT ARE NOT CERTAIN TO BE REALIZED. THE FOUNDATION'S TAX RETURNS ARE SUBJECT TO REVIEW AND EXAMINATION BY FEDERAL AND STATE AUTHORITIES.

## PART XI, LINE 2D - OTHER ADJUSTMENTS:

CHANGE IN SPLIT INTEREST AGREEMENT 229,065.

## PART XI, LINE 4B - OTHER ADJUSTMENTS:

AGENCY FUND REVENUES 119,496.

## PART XII, LINE 4B - OTHER ADJUSTMENTS:

AGENCY FUND EXPENSES 77,790.

**SCHEDULE I**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2020**

Open to Public  
Inspection

Name of the organization

**SOUTHWEST INITIATIVE FOUNDATION**

Employer identification number  
**41-1555592**

**Part I** General Information on Grants and Assistance

**1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No

**2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
19 & 75 FILLING STATION, LLC 2792 US HIGHWAY 75 IVANHOE, MN 56142	46-3747571		10,000.	0.			SMALL BUSINESS RELIEF GRANT
2ND STREET, LLC 221 2ND ST NW ORTONVILLE, MN 56278	83-1420989		10,000.	0.			SMALL BUSINESS RELIEF GRANT
4B'Z EVENT CENTER, LLC 905 W 5TH ST LITCHFIELD, MN 55355	27-0542844		10,000.	0.			SMALL BUSINESS RELIEF GRANT
75 DINER, LLC 920 S KNISS AVE LUVERNE, MN 56156	82-4709238		10,000.	0.			SMALL BUSINESS RELIEF GRANT
7-75 CLUB, INC. 66844 STATE HIGHWAY 7 ODESSA, MN 56276	41-1341996		10,000.	0.			SMALL BUSINESS RELIEF GRANT
ADAM'S OFF THE GREEN, LLC 220 GRACE ST N ORTONVILLE, MN 56278	46-2026097		10,000.	0.			SMALL BUSINESS RELIEF GRANT

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **54.**

**3** Enter total number of other organizations listed in the line 1 table **340.**

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) 2020

<b>Part II</b> Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AIN-U-SHAMS, INC. 313 LITCHFIELD AVE SW #101 WILLMAR, MN 56201	27-1590287		10,000.	0.			SMALL BUSINESS RELIEF GRANT
AJ'S LONGBRANCH SALOON, LLC 312 2ND ST S FRANKLIN, MN 55333	45-3856930		10,000.	0.			SMALL BUSINESS RELIEF GRANT
ALLY CAT BOWLING, INC. 620 US HIGHWAY 75 ORTONVILLE, MN 56278	47-4597504		10,000.	0.			SMALL BUSINESS RELIEF GRANT
AMANDA BOUCEK 361 W MAIN ST MARSHALL, MN 56258	26-4043678		10,000.	0.			SMALL BUSINESS RELIEF GRANT
AMAZING GRACE BOUTIQUE, LLC 11 MAIN ST N HUTCHINSON, MN 55350	46-4114282		10,000.	0.			SMALL BUSINESS RELIEF GRANT
AMIN GROCERY, LLC 430 LITCHFIELD AVE SW WILLMAR, MN 56201	47-3406815		10,000.	0.			SMALL BUSINESS RELIEF GRANT
ANGEL NAILS OF WILLMAR, INC. 1605 1ST ST S STE A17 WILLMAR, MN 56201	26-2397485		10,000.	0.			SMALL BUSINESS RELIEF GRANT
APPLEBANK, INC. 43 W THIELKE AVE APPLETON, MN 56208	41-1852233		10,000.	0.			SMALL BUSINESS RELIEF GRANT
ASH & ARROW BOUTIQUE, LLC 307 6TH ST W CANBY, MN 56220	83-1883434		10,000.	0.			SMALL BUSINESS RELIEF GRANT

Schedule I (Form 990)

<b>Part II</b> Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AVALON SCHOOL OF COSMETOLOGY, LLC PO BOX 1022 WORTHINGTON, MN 56187	20-5577781		10,000.	0.			LCRC GRANT
AVERA GRANITE FALLS 345 10TH AVE GRANITE FALLS, MN 56241	84-3156881	501C3	10,000.	0.			GRANITE RIDGE OUTDOOR PATIO SPACE, MISSION SUPPORT, COVID-19 RELIEF
AVERA HEALTH FOUNDATION 3900 W AVERA DR STE 301 SIOUX FALLS, SD 57108	46-0422673	501C3	10,000.	0.			PIPESTONE CAPITAL CAMPAIGN
AZTECA MEXICAN RESTAURANT INCORPORATED - 215 4TH ST SW - WILLMAR, MN 56201	46-3058294		10,000.	0.			SMALL BUSINESS RELIEF GRANT
B & N BRADFORD, LLC 20593 89TH ST NE NEW LONDON, MN 56273	26-3695238		10,000.	0.			SMALL BUSINESS RELIEF GRANT
B&D, LLC 812 1ST ST S WILLMAR, MN 56201	46-4341872		10,000.	0.			SMALL BUSINESS RELIEF GRANT
BACK TO NATURE WELLNESS CENTER, INC. - 329 E HIGHWAY 12 STE 103 - LITCHFIELD, MN 55355	46-3371341		10,000.	0.			SMALL BUSINESS RELIEF GRANT
BACKROADS BAR & GRILL, LLC 370 ASH ST CLEMENTS, MN 56224	20-3849302		10,000.	0.			SMALL BUSINESS RELIEF GRANT
BARB'S HAIR STUDIO, INC. 246 S MILL ST REDWOOD FALLS, MN 56283	41-1987897		10,000.	0.			SMALL BUSINESS RELIEF GRANT

Schedule I (Form 990)



<b>Part II</b> Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BB & CS, INC 1305 PACIFIC AVE BENSON, MN 56215	41-1830241		10,000.	0.			SMALL BUSINESS RELIEF GRANT
BBLEICK, INC. PO BOX 314 BIRD ISLAND, MN 55310	45-5486792		10,000.	0.			SMALL BUSINESS RELIEF GRANT
BEALS & KRANZ, INC. PO BOX 322 DAWSON, MN 56232	26-3743164		10,000.	0.			SMALL BUSINESS RELIEF GRANT
BEER THIRTY P.M., INC. PO BOX 298 WOOD LAKE, MN 56297	74-3101544		10,000.	0.			SMALL BUSINESS RELIEF GRANT
BERKNER PIZZA, INC. 205 2ND ST NW ORTONVILLE, MN 56278	41-1663770		10,000.	0.			SMALL BUSINESS RELIEF GRANT
BETHEL LUTHERAN CHURCH ELCA 411 BECKER AVE SW WILLMAR, MN 56201	41-0721716	RELIGIOUS	31,000.	0.			MISSION SUPPORT, LENTEN BOOKS
BETHESDA OF WILLMAR 901 WILLMAR AVE SE WILLMAR, MN 56201	41-0693843	501C3	15,000.	0.			CHAPEL CONSTRUCTION, GENERAL/MISSION SUPPORT
BEYOND RELAXATION, INC. PO BOX 43 LESTER PRAIRIE, MN 55354	45-1598066		10,000.	0.			SMALL BUSINESS RELIEF GRANT
BIG G'S PUB & GRUB, LLC 26608 830TH AVE BEARDSLEY, MN 56211	82-1552680		10,000.	0.			SMALL BUSINESS RELIEF GRANT

Schedule I (Form 990)

<b>Part II</b> Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIG TOP TENT RENTALS, LLC 321 W HATTING ST LUVERNE, MN 56156	47-4407164		10,000.	0.			SMALL BUSINESS RELIEF GRANT
BIRD ISLAND CULTURAL CENTRE PO BOX 434 BIRD ISLAND, MN 55310	81-4413103	501C3	10,983.	0.			CHALKBOARD COLLECTIVE, COMMUNITY, FIVE YEAR GROWTH PLAN- COVID-19 RECOVERY, FACILITY UPDATE
BITTERSWEET AUTUMN INCORPORATED 388 15TH AVE NW WILLMAR, MN 56201	41-2011943		10,000.	0.			SMALL BUSINESS RELIEF GRANT
BITTON'S ROADHOUSE, LLC 101 2ND ST GARVIN, MN 56132	82-2487945		10,000.	0.			SMALL BUSINESS RELIEF GRANT
BK BAR & GRILL, LLC PO BOX 273 DAWSON, MN 56232	83-1894657		10,000.	0.			SMALL BUSINESS RELIEF GRANT
BLUENOSE GOPHER BREWERY 681 PRENTICE ST GRANITE FALLS, MN 56241	61-1735124		10,000.	0.			SMALL BUSINESS RELIEF GRANT
BOBBING BOBBER BREWING COMPANY, LLC - 900 HIGHWAY 15 S - HUTCHINSON, MN 55350	81-2841971		10,000.	0.			SMALL BUSINESS RELIEF GRANT
BODYTOGS, LLC 886 6TH ST DAWSON, MN 56232	81-4801561		10,000.	0.			SMALL BUSINESS RELIEF GRANT
BORGERDING MANAGEMENT, LLC 921 1ST ST S APT 2 WILLMAR, MN 56201	47-4542219		10,000.	0.			SMALL BUSINESS RELIEF GRANT

Schedule I (Form 990)

<b>Part II</b> Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRAU BROTHERS BREWING COMPANY, LLC 1010 E SOUTHWIND DR MARSHALL, MN 56258	20-4541773		10,000.	0.			SMALL BUSINESS RELIEF GRANT
BRAZEN FOODS, LLC 10 ASH ST SE NEW LONDON, MN 56273	83-4664660		10,000.	0.			SMALL BUSINESS RELIEF GRANT
BRLY'S, INC. 211 N 9TH ST OLIVIA, MN 56277	41-1795669		10,000.	0.			SMALL BUSINESS RELIEF GRANT
BROKEN SPOKE SALOON, LLC PO BOX 494 MORGAN, MN 56266	81-4350296		10,000.	0.			LCRC GRANT
BUFFALO RIDGE EXPRESS, INC PO BOX 27 RUTHTON, MN 56170	41-1896694		10,000.	0.			SMALL BUSINESS RELIEF GRANT
BUFFALO RIDGE WATER, INC. 1539 180TH AVE CANBY, MN 56220	26-2459691		10,000.	0.			SMALL BUSINESS RELIEF GRANT
CANBY DRUG AND GIFT, INC. 130 SAINT OLAF AVE N CANBY, MN 56220	41-1653048		10,000.	0.			SMALL BUSINESS RELIEF GRANT
CANBY HARDWARE, INC. PO BOX 37 CANBY, MN 56220	27-4323567		10,000.	0.			LCRC GRANT
CAS FITNESS, LLC 38480 280TH ST REDWOOD FALLS, MN 56283	90-0940238		10,000.	0.			SMALL BUSINESS RELIEF GRANT

Schedule I (Form 990)

<b>Part II</b> Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHAIN REACTION MARTIAL ARTS, LLC 601 CEDAR STREET MILROY, MN 56263	82-1137679		10,000.	0.			SMALL BUSINESS RELIEF GRANT
CHEERS OF RAYMOND, MN. INC. 12268 62ND ST NE SPICER, MN 56288	20-2052161		10,000.	0.			SMALL BUSINESS RELIEF GRANT
CHILD'S PLACE CHILDREN'S ADVOCACY CENTER - PO BOX 431 - REDWOOD FALLS, MN 56283	85-2103004	501C3	10,000.	0.			CAREGIVER EDUCATION PROGRAM - COVID-19 RECOVERY
CHURCH OF ST. ANTHONY PO BOX 158 LISMORE, MN 56155	41-0695517	RELIGIOUS	9,000.	0.			SUMMER 2021 BUILDING PROJECT
CITY OF BALATON PO BOX 388 BALATON, MN 56115	41-6004955	GOVERNMENT	22,307.	0.			LEGION LION PARK CONCRETE, HANDICAP SIDEWALK, REFRIGERATOR, BENCHES FOR LAKESIDE
CITY OF BENSON 1410 KANSAS AVE BENSON, MN 56215	41-6004975	GOVERNMENT	15,000.	0.			DEMARCE THEATER
CITY OF CLARKFIELD PO BOX 278 CLARKFIELD, MN 56223	41-6005042	GOVERNMENT	9,412.	0.			DEFIBRILLATOR, VALHALLA PARK BATHROOM REMODEL, VALHALLA EAST GARDEN BED RENEWAL, CITY POOL
CITY OF DARWIN PO BOX 67 DARWIN, MN 55324	41-6008390	GOVERNMENT	31,303.	0.			ROADSIDE SIGNS, BEAUTIFICATION OF MAIN STREET, VETERANS MEMORIAL
CITY OF DAWSON PO BOX 552 DAWSON, MN 56232	41-6005088	GOVERNMENT	36,078.	0.			GHOSTS OF CHRISTMAS FOOD VOUCHERS, HANGING FLOWER BASKETS, ICE SKATE SHARPENER

Schedule I (Form 990)

<b>Part II</b> Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITY OF GRANITE FALLS 641 PRENTICE ST GRANITE FALLS, MN 56241	41-6005203	GOVERNMENT	13,500.	0.			COMMUNICATIONS UPDATE, RADIOS AND THERMAL IMAGERS, FITNESS ROOM ENHANCEMENT
CITY OF JACKSON 80 W ASHLEY ST JACKSON, MN 56143	41-6005262	GOVERNMENT	95,346.	0.			SPLASH 'N JACKSON SPLASH PAD PROJECT
CITY OF MARSHALL 344 W MAIN ST MARSHALL, MN 56258	41-6005351	GOVERNMENT	10,450.	0.			STRIDER EDUCATION EARLY LEARNING PROGRAM, CULTIVATING THE BEST IN PLAY
CITY OF MORTON PO BOX 127 MORTON, MN 56270	41-1619901	GOVERNMENT	15,000.	0.			ENGINEERING INVESTIGATION
CITY OF MOUNTAIN LAKE PO BOX C MOUNTAIN LAKE, MN 56159	41-6005401	GOVERNMENT	9,187.	0.			ICE SKATING RINK IMPROVEMENTS, POW POW, POW POWCOMMUNITY CELEBRATION, DOWNTOWN
CITY OF TYLER PO BOX C TYLER, MN 56178	41-6005587	GOVERNMENT	20,991.	0.			SWIMMING POOL EQUIPMENT
CITY OF WALNUT GROVE PO BOX 335 WALNUT GROVE, MN 56180	41-6005611	GOVERNMENT	8,000.	0.			HABITAT FOR HUMANITY HOUSE, WALNUT GROVE FIRE EQUIPMENT
CLAY COYOTE ARTS, INC. PO BOX 363 HUTCHINSON, MN 55350	81-2734162		10,000.	0.			SMALL BUSINESS RELIEF GRANT
CLONTARF BAR AND GRILL, LLC PO BOX 218 CLONTARF, MN 56226	83-2394699		10,000.	0.			SMALL BUSINESS RELIEF GRANT

Schedule I (Form 990)

<b>Part II</b> Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLOSET TO CLOSET, INC. 200 MAINE AVE ADRIAN, MN 56110	83-0358167		10,000.	0.			SMALL BUSINESS RELIEF GRANT
COMMON CUP MINISTRY 105 2ND AVE SW STE 2 HUTCHINSON, MN 55350	27-0012506	501C3	20,000.	0.			WINGS-MCLEOD COUNTY
COMPASS OCCASIONS, LLC 1287 DENVER AVE SE HUTCHINSON, MN 55350	47-2650479		10,000.	0.			SMALL BUSINESS RELIEF GRANT
CORNERSTONE COFFEE OF WILLMAR, LLC 14590 BREEZY POINT RD ATWATER, MN 56209	46-2882516		10,000.	0.			SMALL BUSINESS RELIEF GRANT
COTTONWOOD COUNTRY CLUB, INC. 233 SHOREVIEW DR COTTONWOOD, MN 56229	41-1269375		10,000.	0.			SMALL BUSINESS RELIEF GRANT
COUNTRYSIDE PUBLIC HEALTH 201 13TH ST S BENSON, MN 56215	41-1693727	GOVERNMENT	10,428.	0.		COVID-19 ESSENTIAL SERVICES, BENSON BIKES FOR ALL, MINDUP CURRICULUM	
CTD CRYO, LLC 1401 NWAKAMA ST MARSHALL, MN 56258	83-4150977		10,000.	0.			SMALL BUSINESS RELIEF GRANT
D & W ENTERPRISES, LLC 2613 BROADWAY AVE SLAYTON, MN 56172	27-2814354		10,000.	0.			SMALL BUSINESS RELIEF GRANT
D.J. FOODS OF MINNESOTA, INC. 206 3RD ST JACKSON, MN 56143	41-1710723		10,000.	0.			SMALL BUSINESS RELIEF GRANT

Schedule I (Form 990)

<b>Part II</b> Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
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DAKOTA WICOHAN PO BOX 2 MORTON, MN 56270	42-1552956	501C3	10,000.	0.			YOUTH WICOZANI DURING COVID-19, SUPPORTING OUR COMMUNITY DURING A PANDEMIC
DANVERS LIQUOR, LLC 1311 PACIFIC AVE BENSON, MN 56215	82-2877178		10,000.	0.			SMALL BUSINESS RELIEF GRANT
DAR'S PIZZA OF PIPESTONE, INC. 607 8TH AVE SW PIPESTONE, MN 56164	46-0481823		10,000.	0.			SMALL BUSINESS RELIEF GRANT
DATIMI, LIMITED 539 W CHRISTENSON AVE APPLETON, MN 56208	41-1829279		10,000.	0.			SMALL BUSINESS RELIEF GRANT
DEANN'S COUNTRY VILLAGE SHOPPE, INC. - 115 N SIBLEY AVE - LITCHFIELD, MN 55355	47-0937025		10,000.	0.			SMALL BUSINESS RELIEF GRANT
DEBOER CHEVROLET COMPANY 930 MAIN ST EDGERTON, MN 56128	41-0967128		10,000.	0.			SMALL BUSINESS RELIEF GRANT
DEEM, INC. PO BOX 133 WABASSO, MN 56293	20-3636534		10,000.	0.			SMALL BUSINESS RELIEF GRANT
DESIGNED ENVIRONMENTS, INC. 421 BENSON AVE SE WILLMAR, MN 56201	41-1570843		10,000.	0.			SMALL BUSINESS RELIEF GRANT
DIOCESE OF NEW ULM CATHOLIC CHARITIES - 1421 6TH ST N - NEW ULM, MN 56073	41-0807570	RELIGIOUS	25,000.	0.			GENERAL/MISSION SUPPORT, CATHOLIC CHARITIES

Schedule I (Form 990)

<b>Part II</b> Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DISTINCTIVE DENTAL SERVICES, P.A. PO BOX 599 WINSTED, MN 55395	41-1562565		10,000.	0.			SMALL BUSINESS RELIEF GRANT
DIVERSIFIED VENTURES OF WORTHINGTON, LLC - PO BOX 1029 - WORTHINGTON, MN 56187	74-3095783		10,000.	0.			SMALL BUSINESS RELIEF GRANT
DM DEPOT, LLC PO BOX 81 FRANKLIN, MN 55333	82-3341616		10,000.	0.			SMALL BUSINESS RELIEF GRANT
DROP-N-GO, INC. 124 4TH AVE NE HUTCHINSON, MN 55350	75-3010109		10,000.	0.			SMALL BUSINESS RELIEF GRANT
DUNG JONSON, LLC 1303 1ST ST S STE 10 WILLMAR, MN 56201	84-1959758		10,000.	0.			SMALL BUSINESS RELIEF GRANT
EARTHLY DELIGHTS LIMITED 35 WASHINGTON AVE HUTCHINSON, MN 55350	41-1824573		10,000.	0.			SMALL BUSINESS RELIEF GRANT
EAST HONEBRINK, LLC 510 60TH ST NE BENSON, MN 56215	46-5608986		10,000.	0.			SMALL BUSINESS RELIEF GRANT
EAST MEDICINE PHEASANTS FOREVER 2762 470TH ST GRANITE FALLS, MN 56241	41-1429149	501C3	5,400.	0.			CLAY THROWERS
ELITE SALON, INC. PO BOX 26 DANUBE, MN 56230	27-2047382		10,000.	0.			SMALL BUSINESS RELIEF GRANT

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<b>Part II</b> Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
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ERRO, INC. 208 5TH ST SW WILLMAR, MN 56201	41-1616711		10,000.	0.			SMALL BUSINESS RELIEF GRANT
E-SQUARED COLLABORATIVE, LLC 130 LAKE AVE N STE 2 SPICER, MN 56288	83-4514497		10,000.	0.			SMALL BUSINESS RELIEF GRANT
ETERNAL WORD TELEVISION NETWORK, INC - 5817 OLD LEEDS RD - IRONDALE, AL 35210	63-0801391	501C3	10,000.	0.			MISSION SUPPORT, GENERAL / MISSION SUPPORT
FAAFAN, LLC 426 LITCHFIELD AVE SW WILLMAR, MN 56201	82-2408403		10,000.	0.			SMALL BUSINESS RELIEF GRANT
FABRICSOURCE, LLC 414 BECKER AVE SW WILLMAR, MN 56201	75-3123259		10,000.	0.			SMALL BUSINESS RELIEF GRANT
FAIRFAX FITNESS, INC. PO BOX 22 FAIRFAX, MN 55332	13-4340324		10,000.	0.			LCRC GRANT
FAT FREDDY'S, INC. PO BOX 93 WILLMAR, MN 56201	41-1801419		10,000.	0.			SMALL BUSINESS RELIEF GRANT
FAWN RUSTAND, LLC 703 N FREEMAN AVE LUVERNE, MN 56156	47-3532190		10,000.	0.			SMALL BUSINESS RELIEF GRANT
FIDDLER'S GREEN, LLC 63054 CSAH 11 LITCHFIELD, MN 55355	82-3360469		10,000.	0.			SMALL BUSINESS RELIEF GRANT

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FIRST CHILDREN'S FINANCE 212 3RD AVE N STE 310 MINNEAPOLIS, MN 55401	41-1694837	501C3	40,000.	0.			CHILD CARE BUSINESS TRAINING AND COMMUNITY SUPPORT
FIRST FLORAL WINDOM, INC. 314 10TH ST WINDOM, MN 56101	82-2691564		10,000.	0.			SMALL BUSINESS RELIEF GRANT
FIRST LUTHERAN CHURCH ELCA 1200 4TH AVE WORTHINGTON, MN 56187	41-0721717	RELIGIOUS	10,000.	0.			SHARING SEEDS
FITNESS DEPOT, LLC 221 S 4TH ST TRACY, MN 56175	26-2211813		10,000.	0.			SMALL BUSINESS RELIEF GRANT
FITNESS REVOLUTION, LLC PO BOX 103 MORGAN, MN 56266	80-0630145		10,000.	0.			SMALL BUSINESS RELIEF GRANT
FLOWER FEED & LIVESTOCK, LLC 430 35TH AVE SW BENSON, MN 56215	84-1865394		10,000.	0.			SMALL BUSINESS RELIEF GRANT
FLOWERS FROM THE HEART LLC 305 N 1ST ST MONTEVIDEO, MN 56265	81-4381705		10,000.	0.			SMALL BUSINESS RELIEF GRANT
FORTYKES, LLC PO BOX 34 SILVER LAKE, MN 55381	83-2320580		10,000.	0.			SMALL BUSINESS RELIEF GRANT
FROMMEL, INC. 311 STATE RD MONTEVIDEO, MN 56265	41-1594923		10,000.	0.			SMALL BUSINESS RELIEF GRANT

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FULDA VITALITY FITNESS, LLC 101 N ST PAUL AVE FULDA, MN 56131	81-4577409		10,000.	0.			LCRC GRANT
G&B WOODCHIPS, INC. 225 E 4TH ST COTTONWOOD, MN 56229	40-0001216		10,000.	0.			SMALL BUSINESS RELIEF GRANT
G3 QUAD FREESTYLE, INC. PO BOX 59 WABASSO, MN 56293	27-2939571		10,000.	0.			SMALL BUSINESS RELIEF GRANT
GENESIS SALON AND ENSO SPA, LLC 238 MAIN ST S HUTCHINSON, MN 55350	20-8134578		10,000.	0.			SMALL BUSINESS RELIEF GRANT
GERVAIS JEWELERS, INC. 116 N 1ST ST MONTEVIDEO, MN 56265	84-1717323		10,000.	0.			SMALL BUSINESS RELIEF GRANT
GEYERMANS CLOTHING COMPANY, INC. 201 W MAIN ST PIPESTONE, MN 56164	26-3331396		10,000.	0.			SMALL BUSINESS RELIEF GRANT
GILLETTE CHILDREN'S FOUNDATION 200 UNIVERSITY AVE E SAINT PAUL, MN 55101	41-1200302	501C3	5,500.	0.			GENERAL/MISSION SUPPORT
GLACIAL RIDGE WINERY, INC. 15455 CO RD 131 SPICER, MN 56288	20-5711678		10,000.	0.			LCRC GRANT
GLACIAL WATERS WELLNESS, LLC 2405 COUNTRY CLUB DR NE WILLMAR, MN 56201	82-1667379		10,000.	0.			LCRC GRANT

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GLENCOE UNHINGED, INC. 2408 9TH ST E GLENCOE, MN 55336	41-1842491		10,000.	0.			SMALL BUSINESS RELIEF GRANT
GOALS NUTRITION, LLC 207 N SIBLEY AVE LITCHFIELD, MN 55355	83-3986008		10,000.	0.			LCRC GRANT
GORDLU, LLC PO BOX 66 LAKEFIELD, MN 56150	27-0544932		10,000.	0.			SMALL BUSINESS RELIEF GRANT
GREATER MINNESOTA FAMILY SERVICES 2320 HIGHWAY 12 E STE 2 WILLMAR, MN 56201	41-1851475	501C3	10,000.	0.			SEED PROGRAMMING IN SIX SWIF COMMUNITIES
GREEN LAKE CRUISES, LLC PO BOX 504 SPICER, MN 56288	45-1009873		10,000.	0.			SMALL BUSINESS RELIEF GRANT
GREENWOOD NURSERY, INC. 611 S 4TH ST TRACY, MN 56175	20-4143988		10,000.	0.			SMALL BUSINESS RELIEF GRANT
GROAT'S, INC. 309 S 1ST ST MONTEVIDEO, MN 56265	41-1994297		10,000.	0.			SMALL BUSINESS RELIEF GRANT
GROVE CREEK RACEWAY, INC. 15050 LAWNDALE LN N DAYTON, MN 55327	41-1718372		10,000.	0.			SMALL BUSINESS RELIEF GRANT
GZORKIO'S, INCORPORATED 115 SAINT OLAF AVE N CANBY, MN 56220	41-1315954		10,000.	0.			SMALL BUSINESS RELIEF GRANT

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HAGER JEWELRY, INC. 138 MAIN ST S HUTCHINSON, MN 55350	41-1950988		10,000.	0.			SMALL BUSINESS RELIEF GRANT
HAIR EXPRESSIONS BY KARI, LLC 675 PRENTICE ST GRANITE FALLS, MN 56241	26-4817213		10,000.	0.			SMALL BUSINESS RELIEF GRANT
HANNY'S BAR & GRILL, LLC 1135 PACIFIC AVE BENSON, MN 56215	83-4419358		10,000.	0.			SMALL BUSINESS RELIEF GRANT
HAPPY SOL, LLP PO BOX 755 NEW LONDON, MN 56273	27-4197512		10,000.	0.			SMALL BUSINESS RELIEF GRANT
HATFIELD ROADHOUSE, LLC 1640 140TH AVE HOLLAND, MN 56139	47-1418054		10,000.	0.			SMALL BUSINESS RELIEF GRANT
HEADQUARTERS BAR, INC. PO BOX 253 GRACEVILLE, MN 56240	20-0641732		10,000.	0.			SMALL BUSINESS RELIEF GRANT
HERITAGE EVENT CENTER, LLC 3621 COUNTY HIGHWAY 8 TAUNTON, MN 56291	46-3978363		10,000.	0.			SMALL BUSINESS RELIEF GRANT
HESER AUTO AND DETAILING, INC. 206 4TH ST JACKSON, MN 56143	20-4090969		10,000.	0.			SMALL BUSINESS RELIEF GRANT
HEX CLOTHING COMPANY PO BOX 163 APPLETON, MN 56208	81-4294474		10,000.	0.			SMALL BUSINESS RELIEF GRANT

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HICKORY LODGE BAR & GRILL, LLC PO BOX 68 WORTHINGTON, MN 56187	27-2544431		10,000.	0.			SMALL BUSINESS RELIEF GRANT
HIGHWAY 59 PIT STOP, LLC 403 US HIGHWAY 59 S FULDA, MN 56131	46-4040157		10,000.	0.			SMALL BUSINESS RELIEF GRANT
HI-LO RESTAURANT & CATERING, LLC PO BOX 427 LAKEFIELD, MN 56150	81-2599821		10,000.	0.			SMALL BUSINESS RELIEF GRANT
HINTERLAND VINEYARDS, LLC 3060 120TH AVE SE CLARA CITY, MN 56222	26-2231216		10,000.	0.			SMALL BUSINESS RELIEF GRANT
HISPANIC ADVOCACY AND COMMUNITY EMPOWERMENT THROUGH RESEARCH - 155 WABASHA ST S STE 110 - SAINT PAUL, MN 55107	41-1900934	501C3	10,000.	0.		EL VERDADERO IMPACTO DEL COVID (THE REAL COVID IMPACT), ECONOMIC IMPACT BY UNAUTHORIZED WORKERS	
HOGNTHEROAD, LLC 55916 260TH ST GROVE CITY, MN 56243	45-5267626		10,000.	0.			SMALL BUSINESS RELIEF GRANT
HOPE PREGNANCY CENTER PO BOX 334 WILLMAR, MN 56201	41-1641235	501C3	25,000.	0.			GENERAL/MISSION SUPPORT, MISSION SUPPORT
HOWLING DOG SALOON, LLC 909 S KNISS AVE LUVERNE, MN 56156	26-2506452		10,000.	0.			SMALL BUSINESS RELIEF GRANT
HUNAN LION, INC. 228 W MAIN ST MARSHALL, MN 56258	80-0448606		10,000.	0.			LCRC GRANT

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HUTCHINSON AREA COMMUNITY FOUNDATION, INC. - 2 MAIN ST S - HUTCHINSON, MN 55350	41-1938474	501C3	9,434.	0.			HACF OPERATING EXPENSES FOR CY2021, FOUNDERS PATHWAY REPAIRS AND IMPROVEMENTS, HUTCHINSON
HUTCHINSON TOBACCO & ACCESSORIES PLUS, INC. - 725 BALTIMORE AVE SW - HUTCHINSON, MN 55350	46-1569608		10,000.	0.			SMALL BUSINESS RELIEF GRANT
IMMIGRANT LAW CENTER OF MINNESOTA 1206 OXFORD ST WORTHINGTON, MN 56187	41-0909036	501C3	17,000.	0.			SOUTHWEST MINNESOTA COVID-19 RESPONSE PROJECT, SOUTHWEST IMMIGRATION PROJECT, ILCM
INNOVATIVE FOAM, INC. 1164 BENJAMIN AVE UNIT 5 HUTCHINSON, MN 55350	82-3664204		10,000.	0.			SMALL BUSINESS RELIEF GRANT
INSPIRE SALON, LLC 826 PRENTICE ST GRANITE FALLS, MN 56241	47-3572979		10,000.	0.			LCRC GRANT
INTERIOR DESIGN STUDIO & GALLERY OF WILLMAR, INC. - 344 LITCHFIELD AVE SW - WILLMAR, MN 56201	41-1689363		10,000.	0.			SMALL BUSINESS RELIEF GRANT
ISD #129 - MONTEVIDEO 2001 WILLIAMS AVE MONTEVIDEO, MN 56265	41-6000507	EDUCATION	16,800.	0.			THUNDER HAWK CARE, SCHOLARSHIPS, TECHNOLOGY AND SUPPLY/CHILD CARE PROGRAM
ISD #173 - MOUNTAIN LAKE PO BOX 400 MOUNTAIN LAKE, MN 56159	41-6000682	EDUCATION	14,780.	0.			SUMMER INNOVATION PROJECT, EARLY CHILDHOOD FAMILY EDUCATION, PLANT GROWTH FACILITY, BOODS
ISD #2159 - BUFFALO LAKE-HECTOR-STEWART - PO BOX 307 - HECTOR, MN 55342	41-1751593	EDUCATION	16,471.	0.			TEACHER GRANT REQUESTS, SPECIAL COVID GRANT SESSION, TEACHER GRANT REQUEST

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ISD #2184 - LUVERNE PUBLIC SCHOOLS 709 N KNISS AVE LUVERNE, MN 56156	41-6008465	EDUCATION	33,513.	0.			LUVERNE CHILD GUIDE PROGRAM, FAMILY U CHILD CARE
ISD #2190 - YELLOW MEDICINE EAST 450 9TH AVE GRANITE FALLS, MN 56241	41-6004911	EDUCATION	6,307.	0.			SWIVL 4 STING, BOOKS FOR KIDS, ROBOTICS TEAM COMPUTER, ROCKIN' RYTHM AND READING, BRE
ISD #2853 - LAC QUI PARLE VALLEY 2860 291ST AVE MADISON, MN 56256	41-1837788	EDUCATION	24,492.	0.			MENTAL HEALTH TRAINING - LITTLE EAGLES DAYCARE, LQPV PROM ACTIVITIES, MULTICULTURAL BOOKS, LQPV
ISD #2890 - RENVILLE COUNTY WEST SCHOOLS - PO BOX 338 - RENVILLE, MN 56284	41-1813675	EDUCATION	5,653.	0.			TEACHER GRANT REQUESTS, XYLOPHONE
ISD #2895 - JACKSON COUNTY CENTRAL PO BOX 119 JACKSON, MN 56143	41-1872029	EDUCATION	22,729.	0.			JACKSON COUNTY CENTRAL SCHOLARSHIPS, LAKEFIELD SAND VOLLEYBALL COURT, SPECIAL EDUCATION
ISD #2897 - REDWOOD AREA SCHOOLS 100 GEORGE RAMSETH DR REDWOOD FALLS, MN 56283	41-8013222	EDUCATION	10,000.	0.			REDWOOD AREA EARLY CHILDHOOD COVID-19 RELIEF
ISD #2898 - WESTBROOK WALNUT GROVE SCHOOLS - PO BOX 129 - WESTBROOK, MN 56183	41-6000705	EDUCATION	9,527.	0.			WGAF SCHOLARSHIPS, BOTHEY ROBOTS, PORTA PHONE, ELEMENTARY ART EQUIPMENT
ISD #2902 - RUSSELL TYLER RUTHTON PUBLIC SCHOOLS - PO BOX 659 - TYLER, MN 56178	20-4928015	EDUCATION	497,347.	0.			RTR SCHOOL BUILDING PROJECT, NUTRITIONAL POSTER STAND, LEARNING THROUGH BLOCK PLAY,
ISD #2903 - ORTONVILLE PUBLIC SCHOOL - 200 TROJAN DR - ORTONVILLE, MN 56278	41-6000273	EDUCATION	34,830.	0.			DIGITAL SIGN, BAND SAW, ORTONVILLE SCHOLARSHIPS, TROPHY CASE, VIRTUAL GLASSES

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ISD #330 - HERON LAKE-OKABENA SCHOOLS - 321 STEARNS AVE - HERON LAKE, MN 56137	41-1330168	EDUCATION	8,760.	0.			HIGH TECH MACHINE, SUMMER FOOD PROGRAMS, FAMILY CONSUMER SCIENCE CLASSROOM, TREE AND SHRUB
ISD #347 - WILLMAR 611 5TH ST SW WILLMAR, MN 56201	41-6001746	EDUCATION	26,000.	0.			CHILD GUIDE PROGRAM, THRIVING IN A CHANGING WORLD
ISD #378 - DAWSON-BOYD 848 CHESTNUT ST DAWSON, MN 56232	41-6001874	EDUCATION	11,494.	0.			ROBOTICS TEAM EXPANSION, REACH PROGRAM, ESSAY CONTEST WINNER, BUILD AND LEARN TO PROGRAM YOUR OWN
ISD #413 - MARSHALL 401 SOUTH SARATOGA STREET MARSHALL, MN 56258	41-6002001	EDUCATION	12,500.	0.			ONLINE LEARNING CLASSES FOR ADULT BASIC EDUCATION, INTERNET HOTSPOTS, HYBRID ABE
ISD #465 - LITCHFIELD SCHOOL 114 N HOLCOMBE AVE STE 110 LITCHFIELD, MN 55355	41-6002290	EDUCATION	16,800.	0.			STEAM CURRICULUM, WRESTLING ROOM CLEANING, AND SANITIZING, CPR TRAINING SUPPLIES, ENGLISH
ISD #777 - BENSON PUBLIC SCHOOLS 1400 MONTANA AVE BENSON, MN 56215	41-6004181	EDUCATION	17,718.	0.			BENSON NORTHSIDE RECREATION IMPROVEMENT PROJECT PHASE 2, SMART ROOM, PROJECT GRANT
ISLAND BALLROOM, INC. PO BOX 486 BIRD ISLAND, MN 55310	41-1507915		10,000.	0.			SMALL BUSINESS RELIEF GRANT
J & D LAKE RANCH 2, INC. 1170 MENKE CIR SHAKOPEE, MN 55379	81-1715282		10,000.	0.			SMALL BUSINESS RELIEF GRANT
J & N SCHLAGEL ENTERPRISES II, LTD. - PO BOX 847 - WINSTED, MN 55395	20-1947305		10,000.	0.			SMALL BUSINESS RELIEF GRANT

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JACK OF ALL TRADES ENTERPRISES, LLC - 307 W MAIN ST - MARSHALL, MN 56258	26-2749971		10,000.	0.			SMALL BUSINESS RELIEF GRANT
JACKSON COUNTY PO BOX 226 JACKSON, MN 56143	41-0714417	GOVERNMENT	23,300.	0.			JACKSON COUNTY LIBRARY, SUMMER LIBRARY PROGRAM 2021, CRAFT & ACTIVITY KITS, JACKSON COUNTY
JAMAR MANAGEMENT, INC. 528 HIGHWAY 7 E HUTCHINSON, MN 55350	41-1363723		10,000.	0.			SMALL BUSINESS RELIEF GRANT
JANNING OLSON HOLDING II, LLC 1801 19TH AVE SW WILLMAR, MN 56201	27-2902295		10,000.	0.			SMALL BUSINESS RELIEF GRANT
JEFFERS MAIN STREET LIQUORS, LLC PO BOX 153 JEFFERS, MN 56145	83-3714203		10,000.	0.			SMALL BUSINESS RELIEF GRANT
JERRY BARBER ENTERPRISES, LLC 28672 COUNTY ROAD 15 REDWOOD FALLS, MN 56283	83-4588410		10,000.	0.			SMALL BUSINESS RELIEF GRANT
JERRY'S AUTO SUPPLY OF WORTHINGTON, INC. - 1518 OXFORD ST - WORTHINGTON, MN 56187	90-0790675		10,000.	0.			SMALL BUSINESS RELIEF GRANT
JIM'S CLOTHING & SPORTING GOODS, LLC - PO BOX 445 - DAWSON, MN 56232	41-1285798		10,000.	0.			SMALL BUSINESS RELIEF GRANT
JJ'S BAR AND GRILL, INC. 405 MAIN ST PO BOX 351 DANUBE, MN 56230	82-3555539		10,000.	0.			SMALL BUSINESS RELIEF GRANT

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JML GROUP, INC. 11232 MOUNT CURVE RD EDEN PRAIRIE, MN 55347	27-0176724		10,000.	0.			SMALL BUSINESS RELIEF GRANT
JO JO'S FOODS, INC. 610 W HIGHWAY 212 MONTEVIDEO, MN 56265	47-4463093		10,000.	0.			SMALL BUSINESS RELIEF GRANT
JOHN STILES & PATRICIA STILES 202 2ND AVE W LAMBERTON, MN 56152	82-4693162		10,000.	0.			SMALL BUSINESS RELIEF GRANT
JOHNSON JEWELRY, INC. 1009 4TH AVE WORTHINGTON, MN 56187	41-1249240		10,000.	0.			SMALL BUSINESS RELIEF GRANT
JOHNSON'S RUSTLING ELMS RESORT, LLC - 74637 RUSTLING ELMS RD W - ORTONVILLE, MN 56278	47-3281225		10,000.	0.			SMALL BUSINESS RELIEF GRANT
JRRYOGA, LLC 800 ASH ST NE HUTCHINSON, MN 55350	83-2624659		10,000.	0.			SMALL BUSINESS RELIEF GRANT
JS VENTURES, LLC 130 7TH AVE GRANITE FALLS, MN 56241	81-3132760		10,000.	0.			SMALL BUSINESS RELIEF GRANT
K NAIL & HAIR, LLC 1240 FLOYD WILD DR STE B MARSHALL, MN 56258	46-4747251		10,000.	0.			SMALL BUSINESS RELIEF GRANT
K.O. COFFEE COMPANY, LLC 2800 1ST ST S WILLMAR, MN 56201	26-0684334		10,000.	0.			SMALL BUSINESS RELIEF GRANT

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KAPTURED BY KARIE, LLC 2015 W MAIN ST WABASSO, MN 56293	81-1465513		10,000.	0.			SMALL BUSINESS RELIEF GRANT
KAUFENBERG ENTERPRISES, LLC PO BOX 73 WABASSO, MN 56293	84-3194609		10,000.	0.			SMALL BUSINESS RELIEF GRANT
KB'S BAR & GRILL, LLC PO BOX 167 GHENT, MN 56239	46-3570155		10,000.	0.			SMALL BUSINESS RELIEF GRANT
KC FIT LLC PO BOX 129 NEW LONDON, MN 56273	27-3411072		10,000.	0.			SMALL BUSINESS RELIEF GRANT
KEAVENY DRUG, INC. 150 MAIN AVE W WINSTED, MN 55395	20-2198122		10,000.	0.			SMALL BUSINESS RELIEF GRANT
KELLY'S SCHOOL OF DANCE, LLC 704 S DOUGLAS ST LAMBERTON, MN 56152	83-3538970		10,000.	0.			SMALL BUSINESS RELIEF GRANT
KEY LARGO ON SHETEK, LLC 29 VALHALLA DR SLAYTON, MN 56172	84-4822578		10,000.	0.			SMALL BUSINESS RELIEF GRANT
KIDS-R-IT INC. 1118 JOHNSON AVE WORTHINGTON, MN 56187	41-1881615	501C3	12,500.	0.		STAFFING FOR DISTANCE LEARNING AND STAFF TRAININGS, PARKING LOT AND INTERNET UPGRADE	
KING PIN PUB, LLC PO BOX 183 PLATO, MN 55370	46-4502378		10,000.	0.			SMALL BUSINESS RELIEF GRANT

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<b>Part II</b> Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KINGS AUTO INCORPORATED PO BOX 389 NEW LONDON, MN 56273	45-5114497		10,000.	0.			LCRC GRANT
KNIGHTS OF COLUMBUS COUNCIL NO. 13529 - 6680 153RD AVE NE - SPICER, MN 56288	55-0875418	501C8	5,500.	0.			MISSION SUPPORT, GENERAL /MISSION SUPPORT
KWARDO AUTO SALES, LLC 406 MAIN STREET SOUTH #2 BOX 417 BUFFALO LAKE, MN 55314	84-2059107		10,000.	0.			SMALL BUSINESS RELIEF GRANT
LAKE AREA TECHNICAL INSTITUTE PO BOX 730 WATERTOWN, SD 57201	36-3860861	EDUCATION	7,650.	0.			CANBY HIGH SCHOOL SCHOLARSHIP AWARD
LAKE SHETEK LODGE, LLC 21 VALHALLA DR SLAYTON, MN 56172	83-2602532		10,000.	0.			LCRC GRANT
LARSON'S HOME FURNISHING, INC. 342 S MILL ST REDWOOD FALLS, MN 56283	41-0901701		10,000.	0.			SMALL BUSINESS RELIEF GRANT
LAZY LOON BREWING COMPANY, LLC 8750 COUNTY ROAD 43 CHASKA, MN 55318	46-3175665		10,000.	0.			SMALL BUSINESS RELIEF GRANT
LIGHTFOOT OUTDOORS, LLC 14384 300TH ST VESTA, MN 56292	23-2480736		10,000.	0.			SMALL BUSINESS RELIEF GRANT
LINGONBERRY'S, LLC 312 JACKSON AVE ORTONVILLE, MN 56278	47-4288437		10,000.	0.			SMALL BUSINESS RELIEF GRANT

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LISMORE INVESTMENT GROUP, LLC PO BOX 53 LISMORE, MN 56155	83-1632783		10,000.	0.			LCRC GRANT
LITCHFIELD BOWLING CENTER, LLC PO BOX 250 LITCHFIELD, MN 55355	26-2018764		10,000.	0.			SMALL BUSINESS RELIEF GRANT
LONG HE, INC. 1305 1ST ST S WILLMAR, MN 56201	81-1504679		10,000.	0.			SMALL BUSINESS RELIEF GRANT
LORELEI, INC. PO BOX 425 GRACEVILLE, MN 56240	33-0994923		10,000.	0.			SMALL BUSINESS RELIEF GRANT
LULU BEANS, INC. OF WILLMAR 1020 1ST ST S WILLMAR, MN 56201	20-4702580		10,000.	0.			LCRC GRANT
LUTHERAN SOCIAL SERVICE OF MINNESOTA - PO BOX 86 - MINNEAPOLIS, MN 55486	41-0872993	501C3	7,000.	0.		MEALS ON WHEELS PACKAGING - JACKSON MN SENIOR CENTER, EMERGENCY MEALS, COMMERCIAL DISHWASHER,	
LUVERNE LANES, LLC 117 N CEDAR ST LUVERNE, MN 56156	27-4068427		10,000.	0.			SMALL BUSINESS RELIEF GRANT
LUVERNE POWER FITNESS, LLC 205 E MAIN ST LUVERNE, MN 56156	45-2209509		10,000.	0.			SMALL BUSINESS RELIEF GRANT
M G ENTERTAINMENT, LLC PO BOX 70 MADISON, MN 56256	41-1765857		10,000.	0.			SMALL BUSINESS RELIEF GRANT

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M L C ENTERPRISES, INC. PO BOX 322 DASSEL, MN 55325	04-3623649		10,000.	0.			SMALL BUSINESS RELIEF GRANT
M&B, LLC 405 S GEINITZ AVE APT 3 LITCHFIELD, MN 55355	81-5137388		10,000.	0.			LCRC GRANT
MARIACHI FIESTA, LLC 329 W MAIN ST MARSHALL, MN 56258	45-5185635		10,000.	0.			LCRC GRANT
MARSHALL ACADEMY OF DANCE, LLC 348 W MAIN ST MARSHALL, MN 56258	81-2436889		10,000.	0.			SMALL BUSINESS RELIEF GRANT
MARSHALL AREA YMCA 200 S A ST MARSHALL, MN 56258	41-1984589	501C3	25,000.	0.			PANDEMIC RELATED DISTANCE LEARNING & ENHANCED AFTER SCHOOL PROGRAMS, EMERGENCY CHILDCARE,
MARSHALL FOOD4KIDS PO BOX 771 MARSHALL, MN 56258	83-0865066	501C3	7,500.	0.			MISSION SUPPORT, FOOD 4KIDS
MASSAGE 303, LLC 303 S OCONNELL ST MARSHALL, MN 56258	83-2345365		10,000.	0.			SMALL BUSINESS RELIEF GRANT
MCGREAVEY, LLC 20530 HIGHWAY 15 N HUTCHINSON, MN 55350	81-3005419		10,000.	0.			SMALL BUSINESS RELIEF GRANT
MCLEOD ALLIANCE PO BOX 393 HUTCHINSON, MN 55350	41-1742743	501C3	10,500.	0.			DIRECT ADVOCACY, LATINA SUPPORT, DOMESTIC VIOLENCE ADVOCACY

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MCLEOD EMERGENCY FOOD SHELF - GLENCOE - 808 12TH ST E - GLENCOE, MN 55336	41-1470696	501C3	10,000.	0.			MCLEOD EMERGENCY FOOD SHELF OPERATIONS
MICHAEL & BRIDGET, INC. 413 MORRISON AVE JACKSON, MN 56143	20-3301213		10,000.	0.			SMALL BUSINESS RELIEF GRANT
MIDDLE FORK CAFE, LLC 6820 150TH AVE NW NEW LONDON, MN 56273	46-3015305		10,000.	0.			SMALL BUSINESS RELIEF GRANT
MILL POND MERCANTILE, INC. PO BOX 369 NEW LONDON, MN 56273	41-2015372		10,000.	0.			SMALL BUSINESS RELIEF GRANT
MINNESOTA FITNESS, LLC 41650 700TH AVE SAINT JAMES, MN 56081	36-4796257		10,000.	0.			SMALL BUSINESS RELIEF GRANT
MINNESOTA OPTOMETRIC EYE DOCTOR, PA - 2990 SHERRY CT - LITTLE CANADA, MN 55117	47-3179007		10,000.	0.			SMALL BUSINESS RELIEF GRANT
MINNESOTA RIVER AREA AGENCY ON AGING - 201 N BROAD ST STE 102 - MANKATO, MN 56001	26-1632413	501C3	76,500.	0.			AGE-FRIENDLY COMMUNITY-BUILDING PROJECT
MINNESOTA RIVER VALLEY EDUCATION DISTRICT - 1315 BLACK OAK AVE - MONTEVIDEO, MN 56265	41-6000507	EDUCATION	5,600.	0.			RENNVILLE COUNTY JAIL WELDING PROGRAM
MINNESOTA STATE UNIVERSITY - MANKATO - 120 WIGLEY ADMINISTRATION CTR - MANKATO, MN 56001	41-6033423	EDUCATION	5,500.	0.			KRISTI ELAINE TEIGEN SCHOLARSHIP AWARD, CANBY HIGH SCHOOL SCHOLARSHIP AWARD

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MISTER COOL'S CLOTHING, INC. 337 W MAIN ST MARSHALL, MN 56258	41-2059328		10,000.	0.			SMALL BUSINESS RELIEF GRANT
MOJO'S BOUTIQUE, LLC 716 8TH AVE MADISON, MN 56256	32-0411962		10,000.	0.			SMALL BUSINESS RELIEF GRANT
MONTEVIDEO DUFFY'S, INC. 5014 HIGHWAY 212 SW MONTEVIDEO, MN 56265	84-2797194		10,000.	0.			SMALL BUSINESS RELIEF GRANT
MONTEVIDEO GOLF, LLC 4490 HIGHWAY 212 MONTEVIDEO, MN 56265	83-3499072		10,000.	0.			SMALL BUSINESS RELIEF GRANT
MORGAN'S DELI & CATERING, LLC PO BOX 504 REDWOOD FALLS, MN 56283	20-5944449		10,000.	0.			SMALL BUSINESS RELIEF GRANT
MUCH KNEADED MASSAGE, LLC 765 SCHOOL RD NW APT 108 HUTCHINSON, MN 55350	83-2803514		10,000.	0.			SMALL BUSINESS RELIEF GRANT
MY THREE SONS OF GRANITE FALLS, INC. - 1904 11TH AVENUE - GRANITE FALLS, MN 56241	82-1105853		10,000.	0.			SMALL BUSINESS RELIEF GRANT
NATIVE GOVERNANCE CENTER 1730 NEW BRINGTON BLVD SUITE 104-2 MINNEAPOLIS, MN 55413	47-4901644	501C3	10,000.	0.			INDIGENOUS LEADERS IN GOVERNANCE
NETTIE'S, LLC 114 N 3RD ST STE A MARSHALL, MN 56258	83-1560921		10,000.	0.			SMALL BUSINESS RELIEF GRANT

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NEW LINE PRODUCTS, INC. 12905 US HIGHWAY 71 SANBORN, MN 56083	41-1433773		10,000.	0.			SMALL BUSINESS RELIEF GRANT
NOBLE WOMAN BOUTIQUE, INC. 252 W MAIN ST MARSHALL, MN 56258	45-4916365		10,000.	0.			SMALL BUSINESS RELIEF GRANT
NOBLES COUNTY HISTORICAL SOCIETY, INC. - PO BOX 614 - WORTHINGTON, MN 56187	41-6029584	501C3	26,500.	0.			GENERAL/MISSION SUPPORT, MAKING HISTORY COME ALIVE, ARMORY BUILDING PROJECT
OUR LADY OF THE LAKES 6680 153RD AVE NE SPICER, MN 56288	41-1308081	RELIGIOUS	18,500.	0.			OUR LADY OF THE LAKES, CEMETERY FUNDS, GENERAL/MISSION SUPPORT
PAISLEY THREADS, LLC PO BOX 16 NEW LONDON, MN 56273	84-2407803		10,000.	0.			SMALL BUSINESS RELIEF GRANT
PAPIK MOTORS, INC 801 COMMERCE RD LUVERNE, MN 56156	41-0953150		10,000.	0.			SMALL BUSINESS RELIEF GRANT
PEBBLES MASSAGE & SPA, LLC 925 3RD AVE WINDOW, MN 56101	83-3750510		10,000.	0.			SMALL BUSINESS RELIEF GRANT
PIONEER PBS 1 PIONEER DR GRANITE FALLS, MN 56241	41-6038611	5013C	26,000.	0.			"FUND FOR TOMORROW", LEARNING AT HOME RESOURCES
PIPESTONE INTERIORS, LLC 204 W MAIN ST PIPESTONE, MN 56164	41-1851184		10,000.	0.			SMALL BUSINESS RELIEF GRANT

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PLAZA GRILL HERON LAKE, LLC 225 10TH ST HERON LAKE, MN 56137	46-4856793		10,000.	0.			SMALL BUSINESS RELIEF GRANT
PLOEGER PR, INC. 108 W MAIN ST PIPESTONE, MN 56164	81-4883637		10,000.	0.			SMALL BUSINESS RELIEF GRANT
POLISH NAIL LOUNGE, LLC 1217 E COLLEGE DR MARSHALL, MN 56258	47-4973941		10,000.	0.			SMALL BUSINESS RELIEF GRANT
PORTER COMMUNITY CAFE, LLC 304 MAPLE ST PORTER, MN 56280	47-1994238		10,000.	0.			SMALL BUSINESS RELIEF GRANT
PRAIRIE FIVE COMMUNITY ACTION COUNCIL - PO BOX 159 - MONTEVIDEO, MN 56265	41-0904802	501C3	123,050.	0.		LIVE WELL CARE COORDINATION, SWIFT COUNTY FOOD SHELF-BENSON, HOLIDAY PROJECT 2021,	
PRAIRIE HOME HOSPICE AND COMMUNITY CARE - 408 E MAIN ST STE 8 - MARSHALL, MN 56258	41-1494079	501C3	7,498.	0.		FISCAL YEAR 2021 DISBURSEMENTS	
PREMIER MESSAGE OF MARSHALL, INC. 104 W REDWOOD ST MARSHALL, MN 56258	46-4372331		10,000.	0.			SMALL BUSINESS RELIEF GRANT
PREMIER PLATINUM PARTNERS, LLC 400 CENTRAL AVE LESTER PRAIRIE, MN 55354	82-4446655		10,000.	0.			SMALL BUSINESS RELIEF GRANT
PRINT EXPRESS, LLC 207 E MAIN ST LUVERNE, MN 56156	83-3075520		10,000.	0.			SMALL BUSINESS RELIEF GRANT

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PRO FITNESS 43, INC. PO BOX 692 ATWATER, MN 56209	82-1426604		10,000.	0.			SMALL BUSINESS RELIEF GRANT
PRO IMAGE PARTNERS, INC. 229 2ND ST NW ORTONVILLE, MN 56278	32-0185263		10,000.	0.			SMALL BUSINESS RELIEF GRANT
PROJECT MORNING STAR PO BOX 1050 WORTHINGTON, MN 56187	46-5019243	501C3	10,000.	0.			RENTAL ASSISTANCE, GIVING HOPE- COVID-19 RECOVERY
PURSE PROUD, INC. 21 MAIN ST N HUTCHINSON, MN 55350	27-1373394		10,000.	0.			SMALL BUSINESS RELIEF GRANT
RAW, INC. 412 10TH ST WORTHINGTON, MN 56187	41-1748194		10,000.	0.			SMALL BUSINESS RELIEF GRANT
REBORN HOME FURNISHINGS, LLC 470 31ST ST CHANDLER, MN 56122	47-2634696		10,000.	0.			SMALL BUSINESS RELIEF GRANT
RESTORED STRENGTH, LLC 1411 E COLLEGE DR #4 MARSHALL, MN 56258	81-4529740		10,000.	0.			SMALL BUSINESS RELIEF GRANT
REVITALIZE MESSAGE THERAPY, LLC 1450 HIGHWAY 60 71 N STE 3 WINDOM, MN 56101	30-0777927		10,000.	0.			SMALL BUSINESS RELIEF GRANT
RIDGEWATER COLLEGE FOUNDATION 2101 15TH AVE NW WILLMAR, MN 56201	41-1847315	EDUCATION	6,700.	0.			PEOPLE HELPING PEOPLE NURSING SCHOLARSHIP, BUFFALO LAKE-HECTOR-STEWARD,

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RISE AND ROAM 715 N SIBLEY AVE STE 102 LITCHFIELD, MN 55355	84-3047863	501C3	7,000.	0.			RISE + ROAM, COMMUNITY INDOOR PLAY SPACE
RIVER CITY EATERY, LLC 344 10TH ST WINDOM, MN 56101	45-2105908		10,000.	0.			SMALL BUSINESS RELIEF GRANT
ROLLING ACRES GOLF CLUB, INC. 55106 COUNTY ROAD 38 BUFFALO LAKE, MN 55314	45-2968409		10,000.	0.			SMALL BUSINESS RELIEF GRANT
ROOSTIN RIDGE WOODWORKS, LLC PO BOX 371 ATWATER, MN 56209	38-3922946		10,000.	0.			SMALL BUSINESS RELIEF GRANT
ROUND LAKE VINEYARDS & WINERY, LLC 30124 STATE HIGHWAY 264 ROUND LAKE, MN 56167	46-5157986		10,000.	0.			SMALL BUSINESS RELIEF GRANT
RUNE'S FURNITURE & CARPET COMPANY, INC. - 106 11TH ST - WORTHINGTON, MN 56187	41-0879503		10,000.	0.			SMALL BUSINESS RELIEF GRANT
RURAL SOLUTIONS, INC. 302 6TH AVE MADISON, MN 56256	41-1925509		10,000.	0.			SMALL BUSINESS RELIEF GRANT
RUSTIC DESIGNS FLOWER FARM, LLC 25801 COUNTY ROAD 9 NE BELGRADE, MN 56312	82-5146591		10,000.	0.			SMALL BUSINESS RELIEF GRANT
RUSTIC HIDEAWAY BOUTIQUE, LLC 113 N 3RD ST MARSHALL, MN 56258	46-0993547		10,000.	0.			SMALL BUSINESS RELIEF GRANT

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SABRINA CONDELLI, LLC PO BOX 325 TYLER, MN 56178	83-4548474		10,000.	0.			LCRC GRANT
SAINT JOHN'S SCHOOL OF THEOLOGY AND SEMINARY - PO BOX 5866 - COLLEGEVILLE, MN 56321	45-3656162	RELIGIOUS	15,000.	0.			STUDENT SUPPORT
SALON 310, LLC PO BOX 263 MOUNTAIN LAKE, MN 56159	47-2813861		10,000.	0.			SMALL BUSINESS RELIEF GRANT
SALON NO. 310, LLC 310 N 1ST ST MONTEVIDEO, MN 56265	81-4710086		10,000.	0.			SMALL BUSINESS RELIEF GRANT
SALOON NO. 7 ENTERPRISES, LLC 402 4TH AVE WILMONT, MN 56185	84-3036292		10,000.	0.			SMALL BUSINESS RELIEF GRANT
SASSY SECONDS, LLC 121 E MAIN ST LUVERNE, MN 56156	84-2263875		10,000.	0.			SMALL BUSINESS RELIEF GRANT
SCHLAND, INC. 180 LOCUST ST DAWSON, MN 56232	81-5157126		10,000.	0.			SMALL BUSINESS RELIEF GRANT
SCO-TER, INC. 102 S 1ST ST MONTEVIDEO, MN 56265	75-2981593		10,000.	0.			SMALL BUSINESS RELIEF GRANT
SCOTT AND GRETA KRAFT, LLC 1024 3RD AVE WORTHINGTON, MN 56187	47-2981365		10,000.	0.			LCRC GRANT

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SCRAP IRON EXPRESS, LLC 1367 260TH ST LYND, MN 56157	27-2133946		10,000.	0.			SMALL BUSINESS RELIEF GRANT
SHEAR EXPRESSIONS OF WORTHINGTON, INC. - 913 MCMILLAN ST - WORTHINGTON, MN 56187	41-1793078		10,000.	0.			SMALL BUSINESS RELIEF GRANT
SHINING FAME PERFORMANCE, LLC 724 OXFORD ST WORTHINGTON, MN 56187	45-4170154		10,000.	0.			SMALL BUSINESS RELIEF GRANT
SHOOTERS SPORTING CLAYS, INC. 11272 STATE HIGHWAY 19 MARSHALL, MN 56258	41-1948168		10,000.	0.			SMALL BUSINESS RELIEF GRANT
SILVERBACK'S, LLC PO BOX 364 LAKEFIELD, MN 56150	80-0367738		10,000.	0.			SMALL BUSINESS RELIEF GRANT
SIMPLY BLESSED BOUTIQUE, LLC 10070 HIGHWAY 7 SW WATSON, MN 56295	83-2218689		10,000.	0.			SMALL BUSINESS RELIEF GRANT
SJP DESIGNS, LLC 823 N SIBLEY AVE LITCHFIELD, MN 55355	81-4838618		10,000.	0.			SMALL BUSINESS RELIEF GRANT
SKEWES JEWELRY, INC. PO BOX 588 MARSHALL, MN 56258	41-1226547		10,000.	0.			SMALL BUSINESS RELIEF GRANT
SLAYTON COUNTRY CLUB, INC. 1075 HIGHWAY 59 SLAYTON, MN 56172	41-0904853		10,000.	0.			SMALL BUSINESS RELIEF GRANT

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SOUTH DAKOTA STATE UNIVERSITY PO BOX 511A BROOKINGS, SD 57007	46-0273801	EDUCATION	9,300.	0.			KRISTI ELAINE TEIGEN SCHOLARSHIP AWARD (X2), BERNICE HALVORSON EDUCATION SCHOLARSHIP FOR
SOUTHWEST REGIONAL DEVELOPMENT COMMISSION - 2401 BROADWAY AVE STE 1 - SLAYTON, MN 56172	41-1235045		10,000.	0.			MINNESOTA RURAL BROADBAND COALITION
SPLIT ROCK BURGERS & BREWS, LLC 102 WALDO AVE S IHLEN, MN 56164	83-2626971		10,000.	0.			SMALL BUSINESS RELIEF GRANT
SPURS CORPORATION 313 4TH ST SW STE 2 WILLMAR, MN 56201	47-5649448		10,000.	0.			SMALL BUSINESS RELIEF GRANT
SSM ENTERPRISES, LLC 18 MAIN ST N HUTCHINSON, MN 55350	45-4463541		10,000.	0.			SMALL BUSINESS RELIEF GRANT
ST FITNESS, LLC 212 MAINE AVE ADRIAN, MN 56110	46-5605367		10,000.	0.			SMALL BUSINESS RELIEF GRANT
ST. JAMES EPISCOPAL CHURCH 101 N 5TH ST MARSHALL, MN 56258	41-6098516	RELIGIOUS	9,214.	0.			FISCAL YEAR 2021 DISBURSEMENT
ST. JOHNS PREPARATORY SCHOOL PO BOX 4000 COLLEGEVILLE, MN 56321	41-0693973	EDUCATION	10,000.	0.			STUDENT SUPPORT
ST. LAWRENCE SEMINARY 301 CHURCH ST MOUNT CALVARY, WI 53057	39-0807050	RELIGIOUS	15,000.	0.			GENERAL/MISSION SUPPORT

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ST. MARY'S SCHOOL BIRD ISLAND PO BOX 500 BIRD ISLAND, MN 55310	41-0773789	RELIGIOUS	8,593.	0.			LEVELED LIBRARY EXPANSION, INDOOR GROW TOWER GARDEN, ONLINE SCIENCE RESOURCES FOR
STERLING'S CAFE & GRILLE, LLC 105 E MAIN ST LUVERNE, MN 56156	47-1184755		10,000.	0.			SMALL BUSINESS RELIEF GRANT
STEWART'S PHOTOGRAPHY, INC. 918 3RD AVE WORTHINGTON, MN 56187	41-1565221		10,000.	0.			SMALL BUSINESS RELIEF GRANT
STONEWALL BAR & GRILL, LLC PO BOX 103 JASPER, MN 56144	46-4564089		10,000.	0.			SMALL BUSINESS RELIEF GRANT
STUBB'S PUB, LLC 316 AETNA ST RUTHTON, MN 56170	81-3295212		10,000.	0.			SMALL BUSINESS RELIEF GRANT
STUDIO Z INTERIORS, INC. PO BOX 133 LYND, MN 56157	41-1635481		10,000.	0.			SMALL BUSINESS RELIEF GRANT
SWEAT, LLC 525 S GRADE RD SW HUTCHINSON, MN 55350	47-1871983		10,000.	0.			SMALL BUSINESS RELIEF GRANT
SWIFT COUNTY FAIR ASSOCIATION PO BOX 395 KERKHOVEN, MN 56252	41-0570095	501C3	7,500.	0.			MONTANA'S WEST WING, CHUCK BROWN BUILDING EXPANSION
SWIFT COUNTY HUMAN SERVICES 410 21ST ST S BENSON, MN 56215	41-6005906	GOVERNMENT	10,000.	0.			SCANDI HAVEN VILLAGE - FIREPLACE LOUNGE, SCANDI HAVEN VILLAGE "THERAPEUTIC ACTIVITY

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TALLY HO KOFFIE, LLC 207 120TH AVE EDGERTON, MN 56128	82-2589184		10,000.	0.			SMALL BUSINESS RELIEF GRANT
TAM FITNESS, INC. 27 E DEPOT ST LITCHFIELD, MN 55355	30-0305339		10,000.	0.			SMALL BUSINESS RELIEF GRANT
TANTASTIC ANYTIME TAN, LLC 221 W MAIN ST PIPESTONE, MN 56164	84-4321448		10,000.	0.			SMALL BUSINESS RELIEF GRANT
TATTLE TALES, LLC 212 W MAIN ST MARSHALL, MN 56258	81-1189368		10,000.	0.			SMALL BUSINESS RELIEF GRANT
TAYLOR'D CAKES, LLC 69 LAKEVIEW DR SLAYTON, MN 56172	45-4368138		10,000.	0.			SMALL BUSINESS RELIEF GRANT
TC'S TAVERN, INC. PO BOX 254 BREWSTER, MN 56119	81-1189775		10,000.	0.			SMALL BUSINESS RELIEF GRANT
THE ABODE SALON & SPA, LLC 21855 52ND ST NE NEW LONDON, MN 56273	82-2813994		10,000.	0.			SMALL BUSINESS RELIEF GRANT
THE BACK YARD, INC. 1060 HIGHWAY 15 S STE 48 HUTCHINSON, MN 55350	41-1931627		10,000.	0.			SMALL BUSINESS RELIEF GRANT
THE CLOTHIER BY DAWN, INC. 110 E MAIN ST PIPESTONE, MN 56164	20-4083404		10,000.	0.			SMALL BUSINESS RELIEF GRANT

Schedule I (Form 990)

<b>Part II</b> Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE COFFEE SHOPPE, LLC PO BOX 97 CLARA CITY, MN 56222	20-5265088		10,000.	0.			SMALL BUSINESS RELIEF GRANT
THE CREATIVE COLLECTIVE, LLC 35538 COUNTY ROAD 2 MORTON, MN 56270	82-4797207		10,000.	0.			SMALL BUSINESS RELIEF GRANT
THE DAILY GRIND MARSHALL, LLC 316 W MAIN ST MARSHALL, MN 56258	47-2060656		10,000.	0.			SMALL BUSINESS RELIEF GRANT
THE FRENCH BUCKET FLORAL AND GIFT SHOP, LLC - 1102 HENNEPIN AVE N - GLENCOE, MN 55336	45-4729227		10,000.	0.			SMALL BUSINESS RELIEF GRANT
THE GOOSE BAR AND GRILL, LLC PO BOX 104 WATSON, MN 56295	90-0630247		10,000.	0.			SMALL BUSINESS RELIEF GRANT
THE HITCHING POST OF MARSHALL, INC. - 1104 E MAIN ST - MARSHALL, MN 56258	26-0059436		10,000.	0.			SMALL BUSINESS RELIEF GRANT
THE HOMESTORE DESIGN CENTER, INC. 554 SW 1ST ST MONTEVIDEO, MN 56265	26-3356676		10,000.	0.			SMALL BUSINESS RELIEF GRANT
THE HUT OF SLAYTON, INC. 2620 BROADWAY AVE SLAYTON, MN 56172	41-1916480		10,000.	0.			SMALL BUSINESS RELIEF GRANT
THE LAMB SHOPPE, LLC 61231 HIGHWAY 7 W HUTCHINSON, MN 55350	81-4927820		10,000.	0.			SMALL BUSINESS RELIEF GRANT

Schedule I (Form 990)

<b>Part II</b> Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE LAMBERTON MAIN STREET PEDDLER, LLC - 404 S GROVE ST - LAMBERTON, MN 56152	46-0785953		10,000.	0.			LCRC GRANT
THE LINK OF NORTHERN KANDIYOHI COUNTY - PO BOX 823 - NEW LONDON, MN 56273	82-1911575	501C3	15,000.	0.			GENERAL/MISSION SUPPORT, THE LINK OF NORTHERN KANDIYOHI
THE MUNCHIES, LLP 924 1ST ST S WILLMAR, MN 56201	84-2293630		10,000.	0.			SMALL BUSINESS RELIEF GRANT
THE NOTE GALLERY, LLC 356 W MAIN ST MARSHALL, MN 56258	80-0827572		10,000.	0.			SMALL BUSINESS RELIEF GRANT
THE WAREHOUSE, LLC 504 6TH ST SE PIPESTONE, MN 56164	30-1196133		10,000.	0.			SMALL BUSINESS RELIEF GRANT
THE WORKROOM, LLC 801 N 3RD ST MONTEVIDEO, MN 56265	47-1020781		10,000.	0.			SMALL BUSINESS RELIEF GRANT
THOMPSON'S SIOUX HISTORIC, INC. 74535 367TH ST ORTONVILLE, MN 56278	47-4695258		10,000.	0.			SMALL BUSINESS RELIEF GRANT
THREE HUNDRED MANAGEMENT, LLC 568 S 1ST ST MONTEVIDEO, MN 56265	83-2993500		10,000.	0.			SMALL BUSINESS RELIEF GRANT
THREE SISTERS FURNISHINGS, LLC 2550 HIGHWAY 9 NE NEW LONDON, MN 56273	26-3935721		10,000.	0.			SMALL BUSINESS RELIEF GRANT

Schedule I (Form 990)

<b>Part II</b> Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TIPKA HOSPITALITY, LLC 311 N SIBLEY AVE LITCHFIELD, MN 55355	46-1920563		10,000.	0.			SMALL BUSINESS RELIEF GRANT
TOTAL FITNESS, LLC 1303 1ST ST S STE 6 WILLMAR, MN 56201	45-4863334		10,000.	0.			SMALL BUSINESS RELIEF GRANT
TRACY CHIROPRACTIC, P.A. 271 3RD ST TRACY, MN 56175	41-1987263		10,000.	0.			SMALL BUSINESS RELIEF GRANT
TRACY LANES, LLC 242 MORGAN ST TRACY, MN 56175	83-4359803		10,000.	0.			LCRC GRANT
TRC REAL ESTATE, LLC 214 N SIBLEY AVE LITCHFIELD, MN 55355	47-3461144		10,000.	0.			SMALL BUSINESS RELIEF GRANT
TREC, LLC 1305 E COLLEGE DR MARSHALL, MN 56258	41-0978542		10,000.	0.			SMALL BUSINESS RELIEF GRANT
TRENDS SALON, LLC 927 6TH AVE WORTHINGTON, MN 56187	90-0631744		10,000.	0.			SMALL BUSINESS RELIEF GRANT
TRICIA'S TAVERN, INC. 140 MAIN ST S BIRD ISLAND, MN 55310	26-2684464		10,000.	0.			SMALL BUSINESS RELIEF GRANT
TSK PRODUCTIONS, LLC 2055 PRAIRIE VIEW CIR BENSON, MN 56215	27-4554802		10,000.	0.			LCRC GRANT

Schedule I (Form 990)

<b>Part II</b> Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TYANAS BOUTIQUE, LLC 211 E MAIN ST LUVERNE, MN 56156	83-1592818		10,000.	0.			SMALL BUSINESS RELIEF GRANT
ULTIMA SKINCARE, LLC PO BOX 257 DAWSON, MN 56232	81-2761145		10,000.	0.			SMALL BUSINESS RELIEF GRANT
UNITED COMMUNITY ACTION PARTNERSHIP - 1400 S SARATOGA ST - MARSHALL, MN 56258	41-0904860	501C3	43,500.	0.			HELPING PEOPLE GET THERE, COATS FOR KIDS, YOUTH DEVELOPMENT PROGRAMS
UNITED WAY OF WEST CENTRAL MINNESOTA - PO BOX 895 - WILLMAR, MN 56201	41-0844871	501C3	12,500.	0.			MISSION SUPPORT, ANNUAL CAMPAIGN, GENERAL SUPPORT, GROWMOBILE, PRESCHOOL-CONNECT,
UPTOWN FITNESS, LLC PO BOX 12 GRACEVILLE, MN 56240	81-4498639		10,000.	0.			SMALL BUSINESS RELIEF GRANT
VALERIE MEINERTS 219 S MAIN AVE HILLS, MN 56138	81-1238247		10,000.	0.			SMALL BUSINESS RELIEF GRANT
VALHALLA CAMPGROUND, INC. 6 VALHALLA DR SLAYTON, MN 56172	46-3907968		10,000.	0.			SMALL BUSINESS RELIEF GRANT
VANDER STOEP FURNITURE INC. PO BOX 8 EDGERTON, MN 56128	41-1314535		10,000.	0.			SMALL BUSINESS RELIEF GRANT
VICKI NORMAN 7075 20TH AVE SW MONTEVIDEO, MN 56265	83-3119153		10,000.	0.			SMALL BUSINESS RELIEF GRANT

Schedule I (Form 990)

<b>Part II</b> Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VICTORIAN ENTERPRISES, INC. 1221 E MAIN ST MARSHALL, MN 56258	41-1801981		10,000.	0.			SMALL BUSINESS RELIEF GRANT
VILLAGE GREEN, LLC PO BOX 565 LAKEFIELD, MN 56150	83-2020707		10,000.	0.			SMALL BUSINESS RELIEF GRANT
VINTAGE VINYL, TOYS AND GAMES, LLC 111 E 2ND ST REDWOOD FALLS, MN 56283	84-4592132		10,000.	0.			SMALL BUSINESS RELIEF GRANT
VISION SYSTEMS & CONSULTING, INC. 104 9TH ST S OLIVIA, MN 56277	41-1692998		10,000.	0.			SMALL BUSINESS RELIEF GRANT
WATSON HUNTING CAMP, LLC 13070 10TH ST NW WATSON, MN 56295	20-2577160		10,000.	0.			SMALL BUSINESS RELIEF GRANT
WAVES AQUATIC CLUB, LLC 16590 92ND ST NE SPICER, MN 56288	84-4027373		10,000.	0.			LCRC GRANT
WENDY'S FLOWERS & SCENTS, LLC PO BOX 314 EDGERTON, MN 56128	41-1729925		10,000.	0.			SMALL BUSINESS RELIEF GRANT
WEST CENTRAL ROCKHOUNDS, LLC 1630 HIGHWAY 12 E WILLMAR, MN 56201	84-4613232		10,000.	0.			SMALL BUSINESS RELIEF GRANT
WEST HOSPITALITY, INC. PO BOX 565 SPICER, MN 56288	41-1980616		10,000.	0.			SMALL BUSINESS RELIEF GRANT

Schedule I (Form 990)

<b>Part II</b> Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WESTERN MENTAL HEALTH CENTER 1212 E COLLEGE DR MARSHALL, MN 56258	41-0877940		10,000.	0.			CIRCLES OF SECURITY
WHITE PINES PROPERTIES, LLC PO BOX 411 CRANE LAKE, MN 55725	80-0931688		10,000.	0.			SMALL BUSINESS RELIEF GRANT
WIDETH ENTERPRISES, LLC 601 CHURCH ST BENSON, MN 56215	45-4413920		10,000.	0.			SMALL BUSINESS RELIEF GRANT
WILDWOOD MONTESSORI 215 S 5TH ST MONTEVIDEO, MN 56265	81-2826681	501C3	43,000.	0.		EDUCATIONAL OPPORTUNITIES, FURNITURE AND EQUIPMENT TO SUPPORT EXPANSION	
WILLIE'S, INC. 305 S CHURCH AVE HILLS, MN 56138	82-1496602		10,000.	0.			SMALL BUSINESS RELIEF GRANT
WILLMAR AREA COMMUNITY FOUNDATION 1601 HIGHWAY 12 E STE 9 WILLMAR, MN 56201	36-3412544	501C3	11,450.	0.		MISSION SUPPORT, WOMEN'S FUND, WILLMAR ARE WOMEN'S FUND, KANDIYOHI COUNTY CEO(CREATING	
WILLMAR BASEBALL, LLC 24396 17TH AVE SAINT AUGUSTA, MN 56301	27-0923795		10,000.	0.			SMALL BUSINESS RELIEF GRANT
WILLMAR FINANCIAL INVESTMENT CORPORATION - 2620 1ST ST S - WILLMAR, MN 56201	41-1356478		10,000.	0.			SMALL BUSINESS RELIEF GRANT
WILLMAR FIREPLACE & DESIGN INC 1001 HIGHWAY 12 E WILLMAR, MN 56201	20-8451112		10,000.	0.			SMALL BUSINESS RELIEF GRANT

Schedule I (Form 990)



<b>Part II</b> Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WILLMAR PIZZA PARTNERS, INC. 514 JAGUAR CT MARSHALL, MN 56258	81-3773742		10,000.	0.			SMALL BUSINESS RELIEF GRANT
WILMONT RECREATION, LLC 3425 ADAIR AVE N CRYSTAL, MN 55422	82-1011744		10,000.	0.			SMALL BUSINESS RELIEF GRANT
WINDY'S WELLNESS, INC. PO BOX 404 KERKHOVEN, MN 56252	83-3470737		10,000.	0.			SMALL BUSINESS RELIEF GRANT
WINTER FAMILY ENTERPRISES, INC. 560 SW 1ST ST MONTEVIDEO, MN 56265	81-4461765		10,000.	0.			SMALL BUSINESS RELIEF GRANT
WITWER TRAINING SYSTEMS, LLC 700 E BRIDGE ST REDWOOD FALLS, MN 56283	27-4429190		10,000.	0.			SMALL BUSINESS RELIEF GRANT
WORTHINGTON AREA YMCA 1501 COLLEGEWAY WORTHINGTON, MN 56187	41-6007569	501C3	15,070.	0.		FISCAL YEAR 2021 DISBURSEMENT, COVID RECOVERY, LEARNING CAMP	
WRIGHT'S MUSIC STREET, INC. 212 W MAIN ST MARSHALL, MN 56258	41-1529186		10,000.	0.			SMALL BUSINESS RELIEF GRANT
X PRESS FITNESS LODGE, LLC 900 LITCHFIELD AVE SE WILLMAR, MN 56201	81-0794170		10,000.	0.			SMALL BUSINESS RELIEF GRANT
YBC ENTERPRISES, LLC 15445 COUNTY ROAD 41 COLOGNE, MN 55322	46-3329368		10,000.	0.			SMALL BUSINESS RELIEF GRANT

Schedule I (Form 990)

**Part III** **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
CARES ACT GRANTS	170	1,700,000.	0.		

**Part IV** **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

THE GRANTS MANAGEMENT FUNCTION OF THE DATABASE IS THE REPOSITORY FOR ALL RECORDS RELATED TO GRANTS MADE AND/OR ASSISTANCE PROVIDED. SWIF CONDUCTS RESEARCH TO VERIFY THE ELIGIBILITY OF ALL GRANTEES, USING RESOURCES SUCH AS GUIDESTAR AND THE IRS PUBLICATION 78. EACH ADVISED FUND COMMITTEE MUST SUBMIT A ROSTER OF THEIR ADVISORS FOR BOARD REVIEW AND APPROVAL ANNUALLY, AND CRITERIA FOR THEIR GRANT IS REVIEWED TO ENSURE COMPLIANCE WITH ALL STATE AND FEDERAL REGULATIONS AND MEETS THE REQUIRED CHARITABLE PURPOSE OF THE FUND AGREEMENTS IN PLACE.

**Part IV** Supplemental Information

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PART II, LINE 1, COLUMN (H):

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NAME OF ORGANIZATION OR GOVERNMENT: CITY OF BALATON

---

(H) PURPOSE OF GRANT OR ASSISTANCE: LEGION LION PARK CONCRETE, HANDICAP  
SIDEWALK, REFRIGERATOR, BENCHES FOR LAKESIDE PARK, AND EAST BAY PARK, NEW  
HELMETS FOR FIREFIGHTERS, PLANTING OF TREES, LEGION LION PARK UPGRADE

---

NAME OF ORGANIZATION OR GOVERNMENT: CITY OF CLARKFIELD

---

(H) PURPOSE OF GRANT OR ASSISTANCE: DEFIBRILLATOR, VALHALLA PARK  
BATHROOM REMODEL, VALHALLA EAST GARDEN BED RENEWAL, CITY POOL  
IMPROVEMENTS, COMMUNITY EVENTS, CARDINAL DAYS PARADE, FIREFIGHTER CANDER  
REDUCTION, CARDINAL DAY-MUSIC EVENT

---

NAME OF ORGANIZATION OR GOVERNMENT: CITY OF MOUNTAIN LAKE

---

(H) PURPOSE OF GRANT OR ASSISTANCE: ICE SKATING RINK IMPROVEMENTS, POW  
POW, POW POWCOMMUNITY CELEBRATION, DOWNTOWN BEAUTIFICATION, COMMUNITY  
CENTER IMPROVEMENTS

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NAME OF ORGANIZATION OR GOVERNMENT:

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HISPANIC ADVOCACY AND COMMUNITY EMPOWERMENT THROUGH RESEARCH

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(H) PURPOSE OF GRANT OR ASSISTANCE: EL VERDADERO IMPACTO DEL COVID (THE  
REAL COVID IMPACT), ECONOMIC IMPACT BY UNAUTHORIZED WORKERS IN GREATER  
MINNESOTA

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NAME OF ORGANIZATION OR GOVERNMENT:

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HUTCHINSON AREA COMMUNITY FOUNDATION, INC.

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(H) PURPOSE OF GRANT OR ASSISTANCE: HACF OPERATING EXPENSES FOR CY2021,  
FOUNDERS PATHWAY REPAIRS AND IMPROVEMENTS, HUTCHINSON FIREMEN'S MEMORIAL

**Part IV** Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: IMMIGRANT LAW CENTER OF MINNESOTA

(H) PURPOSE OF GRANT OR ASSISTANCE: SOUTHWEST MINNESOTA COVID-19

RESPONSE PROJECT, SOUTHWEST IMIGRATION PROJECT, ILCM SOUTHWEST MINNESOTA  
PROJECT

NAME OF ORGANIZATION OR GOVERNMENT: ISD #173 - MOUNTAIN LAKE

(H) PURPOSE OF GRANT OR ASSISTANCE: SUMMER INNOVATION PROJECT, EARLY

CHILDHOOD FAMILY EDUCATION, PLANT GROWTH FACILITY, BOODS FOR SECOND  
GRADERS, FARM TO TABLE

NAME OF ORGANIZATION OR GOVERNMENT: ISD #2190 - YELLOW MEDICINE EAST

(H) PURPOSE OF GRANT OR ASSISTANCE: SWIVL 4 STING, BOOKS FOR KIDS,

ROBOTICS TEAM COMPUTER, ROCKIN' RYTHM AND READING, BRE SAXOPHONE, PRAIRIE  
FIRE THEATHER RESIDENCY, 6-12 GRADE ART CLUB

NAME OF ORGANIZATION OR GOVERNMENT: ISD #2853 - LAC QUI PARLE VALLEY

(H) PURPOSE OF GRANT OR ASSISTANCE: MENTAL HEALTH TRAINING - LITTLE

EAGLES DAYCARE, LQPV PROM ACTIVITIES, MULTICULTURAL BOOKS, LQPV PROM,  
LQPV BAND TO DISNEY WORLD, TECHNOLOGY WITHIN FOOTBALL, SUMMER RECREATION,  
OFF INSTRUMENTS, TRAINING, AND TOOLS-LITTLE EAGLES DAYCARE

NAME OF ORGANIZATION OR GOVERNMENT: ISD #2895 - JACKSON COUNTY CENTRAL

(H) PURPOSE OF GRANT OR ASSISTANCE: JACKSON COUNTY CENTRAL SCHOLARSHIPS,

LAKEFIELD SAND VOLLEYBALL COURT, SPECIAL EDUCATION TRAINING, OUTDOOR  
SOUND SYSTEM, TEACHERS GRANT

NAME OF ORGANIZATION OR GOVERNMENT:

**Part IV** Supplemental Information

ISD #2902 - RUSSELL TYLER RUTHTON PUBLIC SCHOOLS

(H) PURPOSE OF GRANT OR ASSISTANCE: RTR SCHOOL BUILDING PROJECT,  
NUTRITIONAL POSTER STAND, LEARNING THROUGH BLOCK PLAY, PLAYGROUND AT NEW  
SCHOOL, BASKETBALL AND BASEBALL PROGRAM, OUTDOOR BASKETBALL, RTR SCHOOL  
BUILDING PROJECT, NEW APPLIANCES, DONOR'S WALL, RTR SPORTS COMPLEX, RTR  
FOOTBALL, TAKE YOUR SEAT CAMPAIGN

NAME OF ORGANIZATION OR GOVERNMENT: ISD #330 - HERON LAKE-OKABENA SCHOOLS

(H) PURPOSE OF GRANT OR ASSISTANCE: HIGH TECH MACHINE, SUMMER FOOD  
PROGRAMS, FAMILY CONSUMER SCIENCE CLASSROOM, TREE AND SHRUB PLANTING &  
MAINTENANCE, LIBRARY UPDATE, HUDL FOCUS CAMERA, HYDROPONIC LETTUCE AND  
POTATO PRODUCTION, PROJECT DUMBELL UPGRADE

NAME OF ORGANIZATION OR GOVERNMENT: ISD #378 - DAWSON-BOYD

(H) PURPOSE OF GRANT OR ASSISTANCE: ROBOTICS TEAM EXPANSION, REACH  
PROGRAM, ESSAY CONTEST WINNER, BUILD AND LEARN TO PROGRAM YOUR OWN ROBOT,  
FOOTBALL FIELD RETAINING WALL

NAME OF ORGANIZATION OR GOVERNMENT: ISD #413 - MARSHALL

(H) PURPOSE OF GRANT OR ASSISTANCE: ONLINE LEARNING CLASSES FOR ADULT  
BASIC EDUCATION, INTERNET HOTSPOTS, HYBRID ABE CLASSES

NAME OF ORGANIZATION OR GOVERNMENT: ISD #465 - LITCHFIELD SCHOOL

(H) PURPOSE OF GRANT OR ASSISTANCE: STEAM CURRICULUM, WRESTLING ROOM  
CLEANING, AND SANITIZING, CPR TRAINING SUPPLIES, ENGLISH 10 CHOICE BOOK,  
SCIENCE WHITEBOARDS, INDIVIDUAL CANDY BAR AWARD CERTIFICATES, CALMING  
SENSORY TOOLS, ACTIVE SENSORY, MIDDLE SCHOOL MATH MANIPULATIVES, LINK  
CREW, ALP EFFICIENCY KITCHEN, BAND EXPLORATION, LET'S GET GROWING,

**Part IV** Supplemental Information

## INTRODUCTION TO ROBOTICS

NAME OF ORGANIZATION OR GOVERNMENT: ISD #777 - BENSON PUBLIC SCHOOLS

(H) PURPOSE OF GRANT OR ASSISTANCE: BENSON NORTHSIDE RECREATION

IMPROVEMENT PROJECT PHASE 2, SMART ROOM, PROJECT GRANT PIANO, HOOPS AT  
NORTHSIDE ELEMENTARY

NAME OF ORGANIZATION OR GOVERNMENT: JACKSON COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: JACKSON COUNTY LIBRARY, SUMMER

LIBRARY PROGRAM 2021, CRAFT & ACTIVITY KITS, JACKSON COUNTY LIBRARY  
DAYCARE, STORY STROLL DISPLAY, CREATIVE BUG CRAFTS

NAME OF ORGANIZATION OR GOVERNMENT: LUTHERAN SOCIAL SERVICE OF MINNESOTA

(H) PURPOSE OF GRANT OR ASSISTANCE: MEALS ON WHEELS PACKAGING - JACKSON

MN SENIOR CENTER, EMERGENCY MEALS, COMMERCIAL DISHWASHER, GENERAL /  
MISSION SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: MARSHALL AREA YMCA

(H) PURPOSE OF GRANT OR ASSISTANCE: PANDEMIC RELATED DISTANCE LEARNING &amp;

ENHANCED AFTER SCHOOL PROGRAMS, EMERGENCY CHILDCARE, PANDEMIC RELATED  
DISTANCE LEARNING, MYZONE-ATTAINABLE GAMIFICATION FITNESS FOR ALL

NAME OF ORGANIZATION OR GOVERNMENT: PRAIRIE FIVE COMMUNITY ACTION COUNCIL

(H) PURPOSE OF GRANT OR ASSISTANCE: LIVE WELL CARE COORDINATION, SWIFT

COUNTY FOOD SHELF-BENSON, HOLIDAY PROJECT 2021, VITA FREE TAX CLINIC,  
SUPPORTING STUDENT LEARNING, HOLIDAY BASKET, SUPPORTING STAFF AND  
STUDENTS-COVID-19

**Part IV** Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: RIDGEWATER COLLEGE FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: PEOPLE HELPING PEOPLE NURSING

SCHOLARSHIP, BUFFALO LAKE-HECTOR-STEWARD, CANBY HIGH SCHOOL SCHOLARSHIP,  
COLLEGE YES! (ONLINE)

NAME OF ORGANIZATION OR GOVERNMENT: SOUTH DAKOTA STATE UNIVERSITY

(H) PURPOSE OF GRANT OR ASSISTANCE: KRISTI ELAINE TEIGEN SCHOLARSHIP

AWARD (X2), BERNICE HALVORSON EDUCATION SCHOLARSHIP FOR 2020, CANBY HIGH  
SCHOOL SCHOLARSHIP AWARD

NAME OF ORGANIZATION OR GOVERNMENT: ST. MARY'S SCHOOL BIRD ISLAND

(H) PURPOSE OF GRANT OR ASSISTANCE: LEVELED LIBRARY EXPANSION, INDOOR

GROW TOWER GARDEN, ONLINE SCIENCE RESOURCES FOR K-8TH GRADE, PHONICS  
INSTRUCTION, READING SIDE BY SIDE

NAME OF ORGANIZATION OR GOVERNMENT: SWIFT COUNTY HUMAN SERVICES

(H) PURPOSE OF GRANT OR ASSISTANCE: SCANDI HAVEN VILLAGE - FIREPLACE

LOUNGE, SCANDI HAVEN VILLAGE "THERAPEUTIC ACTIVITY SUPPLIES", THE  
REMEMBER PROJECT

NAME OF ORGANIZATION OR GOVERNMENT: UNITED WAY OF WEST CENTRAL MINNESOTA

(H) PURPOSE OF GRANT OR ASSISTANCE: MISSION SUPPORT, ANNUAL CAMPAIGN,

GENERAL SUPPORT, GROWMOBILE, PRESCHOOL-CONNECT, MISSION SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: WILLMAR AREA COMMUNITY FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: MISSION SUPPORT, WOMEN'S FUND,

WILLMAR ARE WOMEN'S FUND, KANDIYOHI COUNTY CEO(CREATING ENTREPRENURIAL  
OPPORTUNITIES), MISSION SUPPORT

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

- For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
- ▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**
- ▶ **Attach to Form 990.**
- ▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2020**

**Open to Public  
Inspection**

Name of the organization

**SOUTHWEST INITIATIVE FOUNDATION**

Employer identification number

**41-155592**

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use   |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence   |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees     |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain .....

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? .....

**3** Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- |   |   |
|---|---|
| <input type="checkbox"/> Compensation committee                     | <input type="checkbox"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant        | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

**a** Receive a severance payment or change-of-control payment? .....

**b** Participate in or receive payment from a supplemental nonqualified retirement plan? .....

**c** Participate in or receive payment from an equity-based compensation arrangement? .....

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

**a** The organization? .....

**b** Any related organization? .....

If "Yes" on line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

**a** The organization? .....

**b** Any related organization? .....

If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III .....

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III .....

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....

Yes No

<b>1b</b>		
<b>2</b>		
<b>4a</b>		<b>X</b>
<b>4b</b>		<b>X</b>
<b>4c</b>		<b>X</b>
<b>5a</b>		<b>X</b>
<b>5b</b>		<b>X</b>
<b>6a</b>		<b>X</b>
<b>6b</b>		<b>X</b>
<b>7</b>		<b>X</b>
<b>8</b>		<b>X</b>
<b>9</b>		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2020





**Part III** **Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 3:

THE EXECUTIVE COMMITTEE REVIEWED INFORMATION FROM SIMILAR ORGANIZATION'S REPORTED SALARIES WHICH INCLUDED LOOKING AT OTHER ORGANIZATION'S 990'S AS WELL AS A SURVEY OF OTHER SIMILAR ORGANIZATION'S COMPENSATION PRACTICES. THE EXECUTIVE COMMITTEE REVIEWS THE COMPENSATION OF KEY EXECUTIVES OF THE FOUNDATION ANNUALLY AND APPROVES AT A REGULARLY SCHEDULED MEETING. SEE FURTHER DETAILS OF THIS PROCESS IN SCHEDULE O.

**SCHEDULE K**  
**(Form 990)**  
Department of the Treasury  
Internal Revenue Service

**Supplemental Information on Tax-Exempt Bonds**  
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.  
▶ Attach to Form 990. ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047  
**2020**  
Open to Public  
Inspection

Name of the organization

**SOUTHWEST INITIATIVE FOUNDATION**

Employer identification number  
**41-1555592**

**Part I Bond Issues** SEE PART VI FOR COLUMN (F) CONTINUATIONS

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
A MCLEOD COUNTY	41-6005841	582258AR0	03/10/16	1,830,000.	REFUNDED BONDS ISSUED ON 12/29/2				X		X
B											
C											
D											

**Part II Proceeds**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Amount of bonds retired		1,130,000.						
2 Amount of bonds legally defeased								
3 Total proceeds of issue		1,830,000.						
4 Gross proceeds in reserve funds								
5 Capitalized interest from proceeds								
6 Proceeds in refunding escrows								
7 Issuance costs from proceeds		18,300.						
8 Credit enhancement from proceeds								
9 Working capital expenditures from proceeds		4,908.						
10 Capital expenditures from proceeds								
11 Other spent proceeds		1,806,792.						
12 Other unspent proceeds								
13 Year of substantial completion								

	Yes	No	Yes	No	Yes	No
14 Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?	X					
15 Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?		X				
16 Has the final allocation of proceeds been made?	X					
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule K (Form 990) 2020

**Part III Private Business Use**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>1</b> Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds? .....		X						
<b>2</b> Are there any lease arrangements that may result in private business use of bond-financed property? .....		X						
<b>3a</b> Are there any management or service contracts that may result in private business use of bond-financed property? .....		X						
<b>b</b> If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? .....								
<b>c</b> Are there any research agreements that may result in private business use of bond-financed property? .....		X						
<b>d</b> If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? .....								
<b>4</b> Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government .....		%		%		%		%
<b>5</b> Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government .....		%		%		%		%
<b>6</b> Total of lines 4 and 5 .....		%		%		%		%
<b>7</b> Does the bond issue meet the private security or payment test? .....		X						
<b>8a</b> Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued? .....		X						
<b>b</b> If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of .....		%		%		%		%
<b>c</b> If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2? .....								
<b>9</b> Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2? .....		X						

**Part IV Arbitrage**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>1</b> Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate? .....		X						
<b>2</b> If "No" to line 1, did the following apply? .....								
<b>a</b> Rebate not due yet? .....		X						
<b>b</b> Exception to rebate? .....	X							
<b>c</b> No rebate due? .....		X						
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed .....								
<b>3</b> Is the bond issue a variable rate issue? .....		X						



**SCHEDULE M  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Noncash Contributions**

OMB No. 1545-0047

**2020**

Open to Public  
Inspection

- ▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**  
▶ **Attach to Form 990.**  
▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

Name of the organization

**SOUTHWEST INITIATIVE FOUNDATION**

Employer identification number

**41-155592**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art .....				
2 Art - Historical treasures .....				
3 Art - Fractional interests .....				
4 Books and publications .....				
5 Clothing and household goods .....				
6 Cars and other vehicles .....				
7 Boats and planes .....				
8 Intellectual property .....				
9 Securities - Publicly traded .....	X	19	230,511.	HI/LOW AVERAGE SALE
10 Securities - Closely held stock .....				
11 Securities - Partnership, LLC, or trust interests .....				
12 Securities - Miscellaneous .....				
13 Qualified conservation contribution - Historic structures .....				
14 Qualified conservation contribution - Other ...				
15 Real estate - Residential .....				
16 Real estate - Commercial .....				
17 Real estate - Other .....				
18 Collectibles .....				
19 Food inventory .....				
20 Drugs and medical supplies .....				
21 Taxidermy .....				
22 Historical artifacts .....				
23 Scientific specimens .....				
24 Archeological artifacts .....				
25 Other ▶ ( ) .....				
26 Other ▶ ( ) .....				
27 Other ▶ ( ) .....				
28 Other ▶ ( ) .....				

29 Number of Forms 8283 received by the organization during the tax year for contributions  
for which the organization completed Form 8283, Part V, Donee Acknowledgement .....

29

0

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it  
must hold for at least three years from the date of the initial contribution, and which isn't required to be used for  
exempt purposes for the entire holding period? .....

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? .....

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash  
contributions? .....

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,  
describe in Part II.

	Yes	No
30a		X
31	X	
32a		X
33		

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Schedule M (Form 990) 2020

**Part II** **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

THERE WERE 19 ITEMS CONTRIBUTED DURING THE YEAR.

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

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2020**

**Open to Public  
Inspection**

Name of the organization

**SOUTHWEST INITIATIVE FOUNDATION**

Employer identification number

**41-155592**

**FORM 990, PART III, LINE 1, ORGANIZATION'S MISSION**

**OUR MISSION IS CONNECTING PEOPLE, INVESTING IN IDEAS AND BUILDING**

**COMMUNITIES. IT IS LED BY A 12-MEMBER VOLUNTEER BOARD OF**

**DIRECTORS-WHICH REPRESENTS DIVERSE GEOGRAPHIC LOCATIONS, PROFESSIONS,**

**RACES, ETHNICITIES AND BACKGROUNDS-TOGETHER WITH SWIF'S PROFESSIONAL**

**STAFF, AND MANY REGIONAL, COLLABORATIVE PARTNERS.**

**SINCE 1986, SOUTHWEST INITIATIVE FOUNDATION (SWIF) HAS BEEN COMMITTED**

**TO SOCIAL AND ECONOMIC GROWTH IN SOUTHWEST MINNESOTA. THE 18 COUNTIES**

**AND TWO NATIVE NATIONS WE CALL HOME ARE CONTINUOUSLY EVOLVING, AND SWIF**

**HAS GROWN AND RESPONDED TO OUR REGION'S CHANGING NEEDS. OUR WORK CAN**

**LOOK DIFFERENT FROM ONE PROGRAM, PARTNERSHIP OR PLACE TO ANOTHER. OUR**

**ORGANIZATIONAL VALUES OF EQUITY, INTEGRITY, CURIOSITY, COLLABORATION**

**AND OPTIMISM GUIDE OUR WORK AND ENSURE WE BRING THE SAME CARE AND**

**COMMITMENT TO EVERY INTERACTION.**

**SWIF'S ORIGINAL MISSION WAS TO STRENGTHEN SOUTHWEST MINNESOTA IN THREE**

**WAYS: IMPROVING THE REGION'S ECONOMIC SELF-RELIANCE, OVERCOMING HUMAN**

**DISTRESS, AND PROMOTING REGIONAL LEADERSHIP, COORDINATION AND**

**PARTNERSHIPS. WHILE OUR WORK CONTINUES TO ADDRESS THESE BROAD AREAS,**

**THE CHANGING REGIONAL REALITY CALLS SWIF TO ACT IN NEW WAYS. IN 2016,**

**SWIF ADOPTED A FOCUS WE'RE CALLING GROW OUR OWN TO CLOSE THE**

**"OPPORTUNITY GAP"-THE WAYS IN WHICH SOCIOECONOMIC STATUS, COMMUNITY**

**WEALTH, FAMILIAL SITUATIONS, RACE, ETHNICITY, ENGLISH PROFICIENCY, OR**

**OTHER FACTORS IMPACT CHILDREN'S ABILITY TO REACH THEIR FULL POTENTIAL.**

**OUR WORK TODAY REPRESENTS A DEEP HISTORY AND DETERMINED VISION FOR THE**

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) 2020



Name of the organization

SOUTHWEST INITIATIVE FOUNDATION

Employer identification number

41-155592

FUTURE: OUR VISION IS A SOUTHWEST MINNESOTA WHERE ALL PEOPLE THRIVE.

MANY SOUTHWEST MINNESOTA CHILDREN AND FAMILIES ARE FACING OBSTACLES THAT REMOVE STEPPING STONES TO ECONOMIC MOBILITY. RURAL ECONOMIC MOBILITY AS WE DEFINE IT IS THE COLLECTIVE AMBITION AROUND A REASONABLE STANDARD OF LIVING, DIGNITY THAT COMES FROM HAVING POWER AND AUTONOMY OVER ONE'S LIFE, AND BEING ENGAGED AND VALUED IN THE COMMUNITY.

WE HAVE A STRONG AND GROWING ECONOMY IN OUR REGION, AND AN INCLUSIVE APPROACH THAT REMOVES BARRIERS TO PARTICIPATION THAT WILL ENSURE ALL PEOPLE CAN ACCESS THE ABUNDANT OPPORTUNITIES. WE BELIEVE THE REGION'S FUTURE ECONOMIC SUCCESS DEPENDS ON THE SUCCESS OF OUR NEXT GENERATION. OUR KIDS TODAY ARE SOUTHWEST MINNESOTA'S FUTURE EMPLOYEES, ENTREPRENEURS, COMMUNITY LEADERS, VOLUNTEERS, HOMEOWNERS AND PARENTS.

SWIF IS UNIQUELY POSITIONED TO PROVIDE LEADERSHIP FOR THE REGION ON THIS ISSUE, OFFERING A TRUSTED PERSPECTIVE THAT CAN UNITE EFFORTS AND LEADERS THROUGHOUT SOUTHWEST MINNESOTA. AS AN INDEPENDENT COMMUNITY FOUNDATION, SWIF CARRIES A LONG-TERM COMMITMENT TO THE REGION AND IS LEVERAGING OUTSIDE FUNDING AND EXPERTISE TO SUPPORT WORK IN OUR COMMUNITIES. SWIF ALSO HAS A DEEP HISTORY OF BRINGING PEOPLE TOGETHER FROM ALL SECTORS TO EXPLORE AND IMPLEMENT LOCAL SOLUTIONS. SWIF'S EXPERIENCE DELIVERING EDUCATION AND PROGRAMMING DIRECTLY ALIGNS WITH OUR CRADLE-TO-CAREER FRAMEWORK OF WHAT KIDS NEED TO SUCCEED: STABLE FAMILY AND PARENTING, HIGH-QUALITY EARLY CARE AND EDUCATION, ENGAGEMENT IN THE K-12 YEARS IN AND OUT OF SCHOOL, VIBRANT AND WELCOMING COMMUNITIES, AND PATHS TO CAREER AND WORKFORCE READINESS.

Name of the organization

SOUTHWEST INITIATIVE FOUNDATION

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41-1555592

THE "HOW" OF SWIF'S MISSION CONTINUES THROUGH BUSINESS FINANCE AND ECONOMIC DEVELOPMENT, GRANTMAKING AND COMMUNITY PROGRAMMING, AND COMMUNITY GIVING AND PHILANTHROPY. THE "WHY" IS OUR COMMITMENT TO GROW OUR OWN. WE BELIEVE THAT PREPARING THE NEXT GENERATION TO REACH THEIR FULL POTENTIAL IS A LONG-TERM ECONOMIC DEVELOPMENT STRATEGY WITH A TRIPLE BOTTOM LINE RETURN. OUR KIDS WIN-THEY ARE HEALTHY, WELL-EDUCATED, AND READY TO PARTICIPATE IN THE WORLD OF WORK. OUR COMMUNITIES WIN-PRECIOUS RESOURCES THAT MIGHT OTHERWISE GO TO SHORT-TERM REMEDIATION SUCH AS PUBLIC ASSISTANCE AND INCARCERATION ARE INSTEAD AVAILABLE FOR INVESTMENT IN INFRASTRUCTURE AND INNOVATION. AND OUR BUSINESSES WIN-MORE YOUNG PEOPLE ARE ENTERING THE WORLD OF WORK READY TO FULLY PARTICIPATE. MOST IMPORTANTLY, WE'RE SUPPORTING ALL OUR SOUTHWEST MINNESOTA KIDS BECAUSE IT'S SIMPLY THE RIGHT THING TO DO.

THIS WORK IS MORE IMPORTANT THAN EVER AS WE SUPPORT RELIEF EFFORTS FOR PEOPLE MOST IMPACTED BY THE CORONAVIRUS PANDEMIC AND CRISES AFFECTING OUR ENTIRE COUNTRY. LONGSTANDING DISPARITIES THAT SEPARATE PEOPLE ALONG RACIAL AND ECONOMIC LINES-INCLUDING IN SOUTHWEST MINNESOTA-MUST BE ADDRESSED, AND WE ARE ASKING OUR FRIENDS AND PARTNERS TO BE PART OF THIS WORK. SWIF CONTINUES TO MOVE STRATEGIC WORK FORWARD, AS WELL AS PROVIDE THOUGHTFUL AND IMPACTFUL SUPPORT TO SOCIAL AND ECONOMIC RECOVERY.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS FOSTERING ENTREPRENEURSHIP, SUPPORTING THE RETENTION AND EXPANSION OF EMPLOYERS, AND HELPING ENSURE A PIPELINE OF SKILLED AND AVAILABLE TALENT ARE CRITICAL FOR SWIF'S GROW OUR OWN INITIATIVE, A COMPREHENSIVE

Name of the organization

SOUTHWEST INITIATIVE FOUNDATION

Employer identification number

41-155592

APPROACH TO HELP ALL SOUTHWEST MINNESOTA KIDS SUCCEED.

SOUTHWEST INITIATIVE FOUNDATION PROVIDES FLEXIBLE AND INNOVATIVE ECONOMIC DEVELOPMENT FINANCE SOLUTIONS FOR BUSINESS RETENTION, EXPANSION, STARTUP AND OWNERSHIP SUCCESSION PROJECTS THROUGH ITS BUSINESS FINANCE PROGRAM AND ITS MICROENTERPRISE LOAN PROGRAM. ITS FINANCING PROGRAMS SUPPORT PROJECTS IN THE RETAIL, SERVICE, MANUFACTURING, CHILD CARE, HOSPITALITY, AND OTHER SECTORS, WITH A SPECIAL INTEREST IN SUPPORTING PROJECTS IN FOOD AND AGRICULTURE, MANUFACTURING, RENEWABLE ENERGY AND BIOSCIENCE. IN ADDITION, THE MICROENTERPRISE LOAN PROGRAM PROVIDES VALUABLE TECHNICAL ASSISTANCE FOR BORROWERS IN THE AREAS OF BUSINESS MANAGEMENT AND OPERATIONS, FINANCE AND ACCOUNTING, AND MARKETING. SWIF IS ESPECIALLY INTERESTED IN OPPORTUNITIES TO SUPPORT POPULATIONS WHO HAVE BEEN HISTORICALLY UNDERINVESTED IN BY THE MARKETPLACE INCLUDING WOMEN, BIPOC ENTREPRENEURS, VETERANS, PEOPLE WITH DISABILITIES, AND LOW-INCOME PEOPLE.

SWIF ALSO OPERATES THE INITIATE PROSPERITY WEBSITE (IN PARTNERSHIP WITH NORTHERN ECONOMIC INITIATIVES CORPORATION) [WWW.INITIATEPROSPERITY.ORG](http://WWW.INITIATEPROSPERITY.ORG) WHICH PROVIDES COMPREHENSIVE TECHNICAL ASSISTANCE RESOURCES INCLUDING INTERACTIVE TOOLS, TEMPLATES, VIDEOS AND GUIDES.

SWIF IS A LENDER FOR THE MINNESOTA EMERGING ENTREPRENEUR LOAN PROGRAM THROUGH THE MINNESOTA DEPARTMENT OF EMPLOYMENT AND ECONOMIC DEVELOPMENT, IN ADDITION TO SERVING AS AN ENROLLED LENDER FOR THE MINNESOTA SMALL BUSINESS LOAN GUARANTEE PROGRAM AND AS AN INTERMEDIARY FOR THE MINNESOTA SMALL BUSINESS EMERGENCY LOAN PROGRAM.

Name of the organization

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SWIF HAS SUPPORTED PROFESSIONAL DEVELOPMENT OF THE REGION'S ECONOMIC DEVELOPMENT PROFESSIONALS, IN ADDITION TO SPONSORING ECONOMIC DEVELOPMENT RELATED PROGRAMMING, EVENTS, AND RELATIONSHIP BUILDING OPPORTUNITIES. SWIF HAS ALSO SERVED AS A CONVENER, FACILITATOR, FUNDER, ADVOCATE, AND/OR PROGRAM ADMINISTRATOR FOR PROJECTS RELATED TO CAREER PATHWAYS AND CHILD CARE. OUR RURAL COMMUNITIES FACE UNIQUE CHALLENGES, AS WELL AS OPPORTUNITIES TO COLLABORATE AROUND THESE AND OTHER ISSUES. KEY ISSUES FACING OUR REGION'S ECONOMIC DEVELOPMENT INCLUDE CHILD CARE, HOUSING, AND BROADBAND.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS  
SOUTHWEST INITIATIVE FOUNDATION HAS EMBARKED UPON A SHIFT IN FOCUSED PROGRAMMATIC WORK. WORK IN COMMUNITY IMPACT, ECONOMIC DEVELOPMENT AND PHILANTHROPY ARE BEING ALIGNED WITH THE DIRECTION THE BOARD AND LEADERSHIP AGREED TO GO-A COMPREHENSIVE APPROACH TO HELP ALL SOUTHWEST MINNESOTA KIDS SUCCEED, KNOWN AS THE GROW OUR OWN INITIATIVE.

SWIF IS WELL-KNOWN AS A CONVENER AND FACILITATOR AND HAS HOSTED A SERIES OF GROW OUR OWN SUMMITS IN DECEMBER 2016 AND NOVEMBER OF 2018. THESE CONVENINGS EACH ATTRACTED APPROXIMATELY 500 INDIVIDUALS, ELECTED OFFICIALS, EMPLOYERS, COMMUNITY LEADERS, EDUCATORS AND STUDENTS TO HEAR A FULL LINE-UP OF EXPERTS LED BY ROBERT D. PUTNAM, MALKIN PROFESSOR OF PUBLIC POLICY AT HARVARD UNIVERSITY AND AUTHOR OF OUR KIDS: THE AMERICAN DREAM IN CRISIS AND NISHA PATEL OF THE U.S. PARTNERSHIP ON MOBILITY FROM POVERTY.

Name of the organization

SOUTHWEST INITIATIVE FOUNDATION

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SWIF STAFF BEGAN AN INTENSIVE COMMUNITY ENGAGEMENT PROCESS WITH SEVERAL REGIONAL COMMUNITIES TO COME UP WITH LOCAL SOLUTIONS TO SUPPORT THEIR OWN LOCAL KIDS. ANOTHER VALUABLE TOOL FOR THESE CONVERSATIONS IS THE GROW OUR OWN 30-MINUTE TELEVISION PROGRAM PRODUCED AND BROADCASTED TO 2.5 MILLION HOUSEHOLDS IN PIONEER PBS'S COVERAGE AREA. THIS IS A PRIME EXAMPLE OF HOW SWIF LEVERAGES AND ENHANCES ITS WORK THROUGH STRONG PARTNERSHIPS.

OVER THE PAST FOUR YEARS, SWIF GRANTS HAVE ALIGNED WITH GROW OUR OWN. AN OPEN GRANT ROUND ATTRACTED PROJECTS AND PROGRAMS THAT SUPPORT STABLE PARENTING AND FAMILIES, EARLY CARE AND EDUCATION, YOUTH ENGAGEMENT, VIBRANT AND WELCOMING COMMUNITIES AND CAREER READINESS. EXAMPLES INCLUDE SUPPORT FOR WEEKEND FOOD PROGRAMS, FINANCIAL PLANNING, EARLY CHILDHOOD DEVELOPMENT, YOUTH ACTIVITIES AND JOB SHADOWING.

SWIF HAS UNDERTAKEN A MULTI-FACETED APPROACH TO ADDRESSING THE CHILD CARE CRISIS IN SOUTHWEST MINNESOTA. THROUGH THE INITIATIVE'S DEVELOPMENT COORDINATED BY THE RURAL ECONOMIC DEVELOPMENT PHILANTHROPY INNOVATORS NETWORK (REDPIN), A PROGRAM OF THE ASPEN INSTITUTE, SWIF'S CHILD CARE EFFORTS ARE GROUNDED IN FIVE CORE AREAS OF FOCUS: PROJECT INVESTMENT AND TECHNICAL ASSISTANCE, COMMUNITY PLANNING, PROFESSIONAL DEVELOPMENT, PUBLIC POLICY AND PUBLIC RELATIONS. WE DEPLOY FINANCIAL RESOURCES, STAFF ENGAGEMENT, AND COLLABORATIVE EFFORTS THROUGH THIS COMPOUND APPROACH. DURING THE COVID-19 PANDEMIC, SWIF WAS ABLE TO ASSIST 520 CHILD CARE PROVIDERS WITH EMERGENCY GRANTS.

IN ADDITION TO CHILD CARE, RELIEF EFFORTS DURING THE PANDEMIC ALSO INCLUDED SUPPORT GRANTS TO SOUTHWEST MINNESOTA NONPROFITS PROVIDING

Name of the organization

SOUTHWEST INITIATIVE FOUNDATION

Employer identification number

41-155592

BASIC NEEDS AND WORKING WITH PEOPLE WHO NEED MORE AND DIFFERENT SUPPORT DURING THIS CRISIS. THE FOCUS OF THIS WORK INCLUDE SUPPORT TO NONPROFIT ORGANIZATIONS ADDRESSING CRITICAL BASIC NEEDS IN OUR COMMUNITIES RELATED TO THE FOLLOWING AREAS: FOOD SECURITY, MENTAL HEALTH, DOMESTIC VIOLENCE, HOMELESSNESS, AND SUPPORT FOR NONPROFIT ORGANIZATIONS.

SOUTHWEST MINNESOTA EMPLOYERS FACE CHALLENGES WITH WORKFORCE RECRUITMENT, RETENTION AND DEVELOPMENT. SWIF RECEIVED FUNDING FROM THE GREATER TWIN CITIES UNITED WAY AND THE MCKNIGHT FOUNDATION FOR THE DEVELOPMENT OF LOCAL CAREER PATHWAYS FOR STUDENTS IN THE WORTHINGTON, WINDOM, AND JACKSON COUNTY CENTRAL SCHOOL DISTRICTS, IN COLLABORATION WITH MINNESOTA WEST COMMUNITY AND TECHNICAL COLLEGE, SOUTHWEST MINNESOTA STATE UNIVERSITY AND OTHER LOCAL PARTNERS AND STAKEHOLDERS. CAREER READINESS IS A KEY STRATEGY TO ADVANCE GROW OUR OWN, CONNECTING FUTURE WORKFORCE WITH THE JOB OPPORTUNITIES LOCATED IN THEIR OWN COMMUNITIES AND REGION.

SWIF IS CREATING PARTNERSHIPS THROUGH ITS EMERGING LEADERS CABINET. IT IS A COMMITTEE OF THE BOARD OF DIRECTORS COMPRISED SPECIFICALLY OF PEOPLE UNDER THE AGE OF 40 WHO REPRESENT THE DIVERSITY OF THE REGION. THE ROLE OF THE COMMITTEE IS TO EXPLORE CURRENT REALITIES AND TRENDS AND TO CREATE AVENUES OF INFLUENCE, INCLUDING THROUGH GRANTMAKING.

SOUTHWEST INITIATIVE FOUNDATION ALSO DEMONSTRATED THE BEST PRACTICES LEARNED THROUGH THE PHILANTHROPIC PREPAREDNESS, RESILIENCY & EMERGENCY PARTNERSHIP. SWIF IS ONE OF 18 COMMUNITY FOUNDATIONS FROM ACROSS A 10-STATE NETWORK PARTICIPATING IN A DISASTER-PREPAREDNESS, RESPONSE AND RECOVERY PROGRAM.

Name of the organization

SOUTHWEST INITIATIVE FOUNDATION

Employer identification number

41-155592

SWIF'S PAUL AND ALMA SCHWAN AGING TRUST ENDOWMENT FUND CONTINUES TO PROMOTE PRODUCTIVE AGING IN SOUTHWEST MINNESOTA. ESTABLISHED IN 1991, THIS IS A KEY EXAMPLE OF THE LEGACY AND IMPACT DONORS CAN MAKE THROUGH SWIF. IT FUNDED AGE FRIENDLY COMMUNITY WORK LAUNCHED IN 2016, WHICH CONTINUES THROUGH A PARTNERSHIP WITH MINNESOTA RIVER AREA AGENCY ON AGING, PRAIRIE FIVE COMMUNITY ACTION AND THE LOWER SIOUX INDIAN COMMUNITY.

THE ENTIRETY OF THE COMMUNITY IMPACT TEAM IS ALIGNED TO WORK AT THE COMMUNITY LEVEL, EQUIPPING RESIDENTS AND ORGANIZATIONS WITH OPPORTUNITIES TO STRENGTHEN THEIR NETWORKS, BONDS, SUPPORTS AND PROGRAMS. THROUGH THESE COMMUNITY DEVELOPMENT EFFORTS, WE ARE ABLE TO BRING AN EQUITY LENS TO LEAD COMMUNITIES THROUGH A GROWTH PROCESS. IN THE NEXT PHASE OF OUR WORK, STAFF CONTINUE TO SPEARHEAD THESE EFFORTS THAT ADVANCE EQUITY WORK WITH OUR RESIDENTS WHOSE LEADERSHIP IS VITAL IN OUR RURAL COMMUNITIES. IT IS IMPERATIVE THAT WE SET AN INCLUSIVE TABLE FOR ALL. THROUGH THIS, WE WILL CREATE PROSPERITY FOR ALL OF OUR KIDS AND THE COMMUNITIES THEY CALL HOME.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS  
SOUTHWEST INITIATIVE FOUNDATION MOBILIZES VOLUNTEERS AND DONORS THROUGHOUT SOUTHWEST MINNESOTA TO CREATE A CULTURE OF GIVING THAT IS, AT ITS CORE, INCLUSIVE, TRANSFORMATIVE AND LOCALLY-INVESTED. THIS NETWORK OF VOLUNTEERS EXTENDS SWIF'S REACH INTO LOCAL COMMUNITIES AND OFFERS A UNIQUE MODEL FOR PEOPLE TO SUPPORT THE CAUSES THEY CARE MOST ABOUT IN THE PLACE THEY CALL HOME.

Name of the organization

SOUTHWEST INITIATIVE FOUNDATION

Employer identification number

41-155592

SWIF'S COMMUNITY FOUNDATION PROGRAM ESTABLISHES A LOCAL "FOUNDATION" KNOWN AS AN AFFILIATE. THROUGH A PARTNERSHIP THAT IS MUTUALLY BENEFICIAL, THE COMMUNITY FOUNDATION PROGRAM FUNCTIONS AS A WELL-ESTABLISHED METHOD OF RETAINING CHARITABLE DOLLARS IN THE REGION. VOLUNTEER ADVISORY BOARDS DRIVE LOCAL MISSION, ACTIVITIES AND IMPACT FOR SWIF'S 30 AFFILIATES. SWIF PROVIDES THE ADMINISTRATIVE, INVESTMENT AND 501(C)(3) INFRASTRUCTURE, AS WELL AS A SERIES OF SEVEN "LAUNCH MEETINGS" TO PROVIDE BOARD TRAINING FOR NEW AFFILIATES. ADDITIONALLY, TECHNICAL AND PROFESSIONAL SUPPORT IN AREAS LIKE STRATEGIC PLANNING, FUNDRAISING, MARKETING, PUBLIC RELATIONS AND GRANTMAKING ARE ONGOING. SWIF'S 14 SCHOOL FOUNDATION PARTNERS OPERATE WITH A SIMILAR STRUCTURE.

LOCAL AFFILIATE VOLUNTEERS BECOME NATURAL COMMUNITY LEADERS, MAKING PROJECTS LIKE PARK IMPROVEMENTS, SWIMMING POOLS, BACKPACK FOOD PROGRAMS, BAND INSTRUMENTS, STUDENT FIELD TRIPS AND SO MUCH MORE POSSIBLE THROUGH SPECIAL PROJECTS AND ANNUAL GRANTMAKING. AFFILIATES ALSO REPRESENT A KEY GROUP OF SWIF PARTNERS DIGGING INTO LOCAL YOUTH POVERTY DATA AND SUPPORTING THE GROW OUR OWN FOCUS TO HELP ALL SOUTHWEST MINNESOTA KIDS SUCCEED.

IN ADDITION TO AFFILIATE FUNDS, SWIF HOSTS DONOR-ADVISED FUNDS WHICH ALLOW AN INDIVIDUAL DONOR OR FAMILY TO PROVIDE INPUT REGARDING GRANT DISTRIBUTIONS. THESE FUNDS, WHICH RESEMBLE A PRIVATE FOUNDATION, CAN BE ENDOWED OR NON-ENDOWED (PASS-THROUGH) AND ARE CREATED WITH A SPECIFIC PURPOSE IN MIND. MANY DONORS FIND SWIF FUNDS ARE ATTRACTIVE OPTIONS TO SUPPORT THEIR CHARITABLE INTERESTS WHILE RELIEVING THEM OF THE ADMINISTRATIVE RESPONSIBILITIES THAT CAN OFTEN BECOME OVERWHELMING FOR



Name of the organization

SOUTHWEST INITIATIVE FOUNDATION

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41-1555592

FAMILIES AND VOLUNTEERS. ALL FUNDS CAN RECEIVE MANY TYPES OF GIFTS, INCLUDING CASH, APPRECIATED STOCK, REAL ESTATE, FARMLAND-WHICH CAN STAY IN PRODUCTION THROUGH SWIF'S KEEP IT GROWING PROGRAM-AND PLANNED GIFTS, SUCH AS CHARITABLE GIFT ANNUITIES AND BEQUESTS. SWIF CAN CREATE A FUND THAT FULFILLS ANY CHARITABLE GOAL OF A DONOR.

SWIF FUNDS OFFER UNIQUE POTENTIAL TO KEEP SOUTHWEST MINNESOTA COMMUNITIES, SCHOOLS AND ORGANIZATIONS STRONG AND VIBRANT. THEY CONNECT COMMUNITY-MINDED PEOPLE AND LOCAL NEEDS WITH THE RESOURCES NECESSARY FOR LONG LASTING IMPACT.

FORM 990, PART VI, SECTION A, LINE 1:

THE EXECUTIVE COMMITTEE IS COMPRISED OF THE OFFICERS OF THE CORPORATION; CHAIRPERSON, VICE-CHAIRPERSON, SECRETARY AND TREASURER AS WELL AS THE IMMEDIATE PAST CHAIRPERSON. THE EXECUTIVE COMMITTEE MAY ACT ON BEHALF OF THE BOARD TO REVIEW AND ACT UPON GRANTS AND LOANS, REVIEW AND ACT UPON POLICIES, REVIEW AND ACT UPON BUDGETARY VARIANCES, AND CONDUCT OTHER BUSINESS OF THE CORPORATION BETWEEN REGULARLY SCHEDULED BOARD MEETINGS. ALL ACTIONS OF THE EXECUTIVE COMMITTEE ARE REVIEWED BY THE FULL BOARD THROUGH THE APPROVAL OF EXECUTIVE COMMITTEE MEETING MINUTES AT THE NEXT SCHEDULED FULL BOARD MEETING.

FORM 990 PART VI SECTION A, LINE 2:

BOARD MEMBERS DO NOT HAVE FAMILY OR BUSINESS RELATIONSHIPS WITH EACH OTHER. A CONFLICT OF INTEREST QUESTIONNAIRE IS DISTRIBUTED ANNUALLY AND EACH BOARD MEETING HAS A STANDING AGENDA ITEM ASKING FOR DISCLOSURES AS WELL.

Name of the organization	Employer identification number
SOUTHWEST INITIATIVE FOUNDATION	41-1555592

## FORM 990, PART VI, SECTION B, LINE 11B:

THE IRS FORM 990 IS REVIEWED BY APPROPRIATE STAFF IN THE FOUNDATION AND THEN PRESENTED TO THE AUDIT/FINANCE COMMITTEE FOR REVIEW AND RECOMMENDATION TO THE BOARD. THE FULL BOARD OF DIRECTORS RECEIVE A COPY THROUGH THE SECURE BOARD PORTAL OF THE WEBSITE ONE WEEK PRIOR TO FILING. THE AUDIT/FINANCE COMMITTEE RECEIVES A FULL COPY OF THE FORM 990. THE BOARD RECEIVES A PUBLIC INSPECTION COPY OF THE FORM 990 THAT DOES NOT INCLUDE THE CONFIDENTIAL LIST OF MAJOR DONORS. OTHER THAN THIS LIST, THE FORM IS GIVEN IN ITS ENTIRETY TO THE BOARD AND COMMITTEE FOR REVIEW.

## FORM 990, PART VI, SECTION B, LINE 12C:

AT THE START OF EACH FISCAL YEAR, THE CONFLICT OF INTEREST POLICY, ACCOMPANYING QUESTIONNAIRE, AND THE CODE OF ETHICS AND CONDUCT ARE DISTRIBUTED TO ALL BOARD MEMBERS TO COMPLETE. DISCLOSURE OF CONFLICTS IS THE STANDING FIRST ITEM ON EVERY BOARD AGENDA. THE BOARD OF DIRECTORS ARE INSTRUCTED AT EACH MEETING TO DISCLOSE IF THEY FEEL THERE IS A CONFLICT OF INTEREST ON ANY AGENDA ITEM BEFORE IT IS BROUGHT TO DISCUSSION. THE BOARD AND/OR CEO QUESTION AND DETERMINE IF THE CONFLICT IS VALID; AND IF SO, THE BOARD MEMBER DOES NOT PARTICIPATE IN THE VOTE. THE CONFLICT IS NOTED IN THE MINUTES. IF THE ITEM IS LOCATED ON THE CONSENT AGENDA, IT IS REMOVED PRIOR TO THE VOTE TO APPROVE ALL ITEMS ON THE CONSENT AGENDA AND MOVED TO THE REGULAR AGENDA WHERE THE CONFLICT IS NOTED AND THE BOARD MEMBER WITH THE CONFLICT ABSTAINS FROM DISCUSSION AND VOTING. THE EMPLOYEE CONFLICT OF INTEREST POLICY IS DISTRIBUTED TO KEY DECISION MAKING EMPLOYEES, REVIEWED, AND SIGNED ANNUALLY WITH UPDATES TO ANY POTENTIAL CONFLICTS OF INTERESTS NOTED. POTENTIAL CONFLICTS OF INTEREST FOR STAFF MUST BE REPORTED TO THE PRESIDENT/CEO AND ARE HANDLED ACCORDING TO THE BOARD APPROVED POLICY REQUIREMENTS.

Name of the organization

SOUTHWEST INITIATIVE FOUNDATION

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FORM 990, PART VI, SECTION B, LINE 15:

SOUTHWEST INITIATIVE FOUNDATION'S EXECUTIVE COMPENSATION PROGRAM IS ADMINISTERED BY THE EXECUTIVE COMMITTEE OF THE BOARD. THE EXECUTIVE COMMITTEE IS RESPONSIBLE FOR ESTABLISHING AND MAINTAINING A COMPETITIVE COMPENSATION PROGRAM FOR THE KEY EXECUTIVES OF THE FOUNDATION. THE EXECUTIVE COMMITTEE UNDERTAKES AN ANNUAL REVIEW TO EVALUATE THE FOUNDATION'S EXECUTIVE COMPENSATION PROGRAM AGAINST THE COMPETITIVE MARKET USING INFORMATION GATHERED ON COMPARABLE POSITIONS WITHIN THE SPECIFIC INDUSTRY SECTOR AND FROM INDEPENDENTLY PUBLISHED SURVEYS. THE EXECUTIVE COMMITTEE MEETS INDEPENDENT OF THE PRESIDENT/CEO TO DISCUSS PERFORMANCE RELATIVE TO THE POSITION DESCRIPTION. DURING THESE DELIBERATIONS, THE COMMITTEE ALSO CONSIDERS INPUT OBTAINED FROM OTHER BOARD MEMBERS, STAFF, PROFESSIONAL ADVISORS, GRANT RECIPIENTS AND OTHER INFORMED COMMUNITY LEADERS. THE DATE OF DELIBERATIONS AND SUBSEQUENT MEETING WITH PRESIDENT/CEO ARE DOCUMENTED IN THE MINUTES OF THE BOARD MEETING AND THE OUTCOME MAINTAINED IN THE CONFIDENTIAL PERSONNEL FILES OF THE FOUNDATION.

THE LAST REVIEW WAS COMPLETED IN 2021 FOR THE PRESIDENT/CEO, D. ANDERSON.

FORM 990, PART VI, SECTION C, LINE 19:

CONDENSED FINANCIAL STATEMENTS ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST. THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE NOT MADE PUBLIC.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN AGENCY FUNDS

-41,706.

Name of the organization

SOUTHWEST INITIATIVE FOUNDATION

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CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS

229,065.

TOTAL TO FORM 990, PART XI, LINE 9

187,359.





Part V

Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			
b	Gift, grant, or capital contribution to related organization(s)			
c	Gift, grant, or capital contribution from related organization(s)			
d	Loans or loan guarantees to or for related organization(s)			
e	Loans or loan guarantees by related organization(s)			
f	Dividends from related organization(s)			
g	Sale of assets to related organization(s)			
h	Purchase of assets from related organization(s)			
i	Exchange of assets with related organization(s)			
j	Lease of facilities, equipment, or other assets to related organization(s)			
k	Lease of facilities, equipment, or other assets from related organization(s)			
l	Performance of services or membership or fundraising solicitations for related organization(s)			
m	Performance of services or membership or fundraising solicitations by related organization(s)			
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			
o	Sharing of paid employees with related organization(s)			
p	Reimbursement paid to related organization(s) for expenses			
q	Reimbursement paid by related organization(s) for expenses			
r	Other transfer of cash or property to related organization(s)			
s	Other transfer of cash or property from related organization(s)			

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				





Provide additional information for responses to questions on Schedule R. See instructions.

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