Form 990 (2019)

May the IRS discuss this return with the preparer shown above? (see instructions)

Form	990 (2019) Disabled American Veterans 3 Rapid City	46-6011660	Page 2
Par	t III' Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	· · · · · · · · ·	<u> 🗍</u>
1	Briefly describe the organization's mission		
	SERVICE TO VETERANS AND DEPENDENTS		
			
			
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 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 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.	5,	
	the total expenses, and revenue, if any, for each program service reported		
	(Code) (Expenses \$ 9,241 including grants of \$) (Revenue	\$)
	VAVS PROGRAMS - THIS PROGRAM PROVIDES PERSONAL HYGIENE AND PERSONAL CARE/COME		COUPONS
	FOR CANTEEN USE AT VA HOSPITALS. TRAINING OF VOLUNTEERS AND PUBLICATION OF NE		
		·	
4b	(Code) (Expenses \$ including grants of \$) (Revenue	\$)
			-
			·
			
4c	(Code) (Expenses \$ including grants of \$) (Revenue	\$	
			
			
4d	Other program services (Describe on Schedule O)		
→u	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 9,241	,	
_			

Part IV

`			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A · · · · · · · · · · · · · · · · · ·	1_		х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			ļ
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			1
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	_		
e	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	_5_		<u> </u>
6	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If] [ĺ
	"Yes," complete Schedule D, Part I	6		۱.,
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		X.
,	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			-x
•	complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	<u> </u>		
•	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		,	ì
	VII, VIII, IX, or X as applicable			20 8
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	-		
	complete Schedule D, Part VI	11a	х	
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? If "Yes," complete Schedule D, Part VII	11b		х
С	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? If "Yes," complete Schedule D, Part VIII	11c		_x_
đ	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? If "Yes," complete Schedule D, Part IX	11d	 	X
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		х
f	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)? If "Yes," complete Schedule D, Part X	11f		<u> </u>
12a		400		۱
_	Schedule D, Parts XI and XII	12a		X
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		,,
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	 	x
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
14a b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	 	 	X
~	fundraising, business, investment, and program service activities outside the United States, or aggregate	Ī		
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			<u> </u>
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	L	x
16	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? If "Yes," complete Schedule F, Parts III and IV	16		х
17	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? If "Yes," complete Schedule G, Part I (see instructions)	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19	ļ	x
20 a		20a		x
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			1
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	L.	L X

<u> </u>				
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	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? If "Yes," complete Schedule J	23		х
24a	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? If "Yes," answer lines 24b			
	through 24d and complete Schedule K If "No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
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?			
	If "Yes," complete Schedule L, Part I · · · · · · · · · · · · · · · · · ·	25b		X
26	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 or any of these persons? If "Yes," complete Schedule L, Part II	26		<u>x</u>
27	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? If "Yes," complete Schedule L, Part III	27		X
28	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)			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes." complete Schedule L. Part IV	28a		
b	"Yes," complete Schedule L, Part IV	28b		<u> </u>
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	200		Х
C	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		×
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
••	conservation contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	. [X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1 · · · · · · · · · · · · · · · · · ·	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		х
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)? If "Yes," complete Schedule R, Part V, line 2	35b		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	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? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
_	19? Note: All Form 990 filers are required to complete Schedule O	38	х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V	• • •	_	Ш
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Form W-2G included in line 1a Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued) Yes No Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 2a Statements; filed for the calendar year ending with or within the year covered by this return If at least one is reported on line 2a, did the organization file all required federal employment tax returns? X Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 43/4 Did the organization have unrelated business gross income of \$1,000 or more during the year? Х b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, 4a a financial account in a foreign country (such as a bank account, securities account, or other financial account)? х 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) Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a 5a Х Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? X If "Yes" to line 5a or 5b, did the organization file Form 8886-T? C 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? 6a x If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods 7a x If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was c X d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Х Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f Х If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? a х 7h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? • • • • • • h X Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? X Sponsoring organizations maintaining donor advised funds. 9 Did the sponsoring organization make any taxable distributions under section 4966? 9a Х h Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? X 10 Section 501(c)(7) organizations. Enter а Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b b Section 501(c)(12) organizations. Enter 11 а Gross income from other sources (Do not net amounts due or paid to other sources b 11b 12a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year b Section 501(c)(29) qualified nonprofit health insurance issuers. 13 13a Is the organization licensed to issue qualified health plans in more than one state? а Note: See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which b 13b the organization is licensed to issue qualified health plans C Did the organization receive any payments for indoor tanning services during the tax year? X If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation on Schedule O 14b b 15 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? X If "Yes," see instructions and file Form 4720, Schedule N Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 x 16 If "Yes," complete Form 4720, Schedule O

Pai	rt 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 in Schedule O. See instructions			
	Check if Schedule O contains a response or note to any line in this Part VI			· 🛛
<u>Sec</u>	tion A. Governing Body and Management			
			Yes	No
1a	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			· !
b	Enter the number of voting members included in line 1a, above, who are independent	.		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	- ' -		þ
	any other officer, director, trustee, or key employee?	2		
3	Did the organization delegate control over management duties customarily performed by or under the direct	-		<u> </u>
_	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<u> </u>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			_ <u>x</u> _
6	Did the organization have members or stockholders?	5		_X_
_	•	6	Х	
7a	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	Х	
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_	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		į	4.4
	the year by the following			
a	The governing body?	8a	х	
þ	Each committee with authority to act on behalf of the governing body?	8b	х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at		ĺ	
<u> </u>	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		_x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		<u>x</u>
р	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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		х
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		х
14	Did the organization have a written document retention and destruction policy?	14		х
15	Did the process for determining compensation of the following persons include a review and approval by			1
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			[
а	The organization's CEO, Executive Director, or top management official	15a		×
b	Other officers or key employees of the organization	15b	1	х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		Ì	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	1		- 1
	with a taxable entity during the year?	16a		×
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			1
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the		j	}
	organization's exempt status with respect to such arrangements?	16b		J
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed	_		
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 Don 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			
	HG Kroscell (605) 348-5898, 101 E Madison, Rapid City, SD 57701			

•			
Form 990 (20	,	46-6011660	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compe	ensated Employe	es, and
•	Independent Contractors		
	Check if Schedule O contains a response or note to any line in this Part VII	<u> </u>	\cdots
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 c 	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 o	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	e)	
	reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the 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

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

See instructions for the order in which to list the persons above

(A) Name and title	(B) Average hours per week	Average box, hours office				ian one both an (trustee)	1	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
(1) David Meltz Commander	15.00			х				0	0	0
(2) Loren Murren	10.00									<u> </u>
Senior Vice Commander				х				0	o	0
(3) Greg Carter	10.00									
Junior Vice Commander				X				0	0	0
(4) HG Kroscell	_ 10.00	1								1
Treasurer	<u> </u>		-	Х			\dashv	0	0	0_
(5)									_	
<u>(6)</u>										
<u>(7)</u>										
<u>(8)</u>		- [_		
<u>(9)</u>										
(10)										
<u>(11)</u>										
(12)										
(13)										
(14)										

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(A) Name and title		(B) Average hours per week	box,	unles	Pos eck m s per	son is	nan one s both ar /trustee)		(D) Reportable compensation from the	(E) Reportat compensa from relat	tion ed	соп	(F) ated amo of other npensate	
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizati (W-2/1099- N		orga	om the nization a forganiz	
(15)												<u> </u>	-	
(16)										,				
(17)														
(18)					•••									
(19)														
(20)														
(21)									<u> </u>					
(22)														
(23)														
(24)														
(25)														
1b c d	Subtotal	on A .	· · ·		 	 <u></u>		· •	<u> </u>		0			0
	reportable compensation from the organization	> 10 (1103E 113)			WI10								· 1	
3 4	Did the organization list any former officer, director, employee on line 1a? <i>If "Yes," complete Schedule J</i> For any individual listed on line 1a, is the sum of reorganization and related organizations greater than \$\frac{1}{2} \text{ individual} indi	for such indiviportable com 6150,000? If "	idual pensal Yes," c	tion a	and o	· · othe Sch	 r comp edule J	ens	ation from the			3	Yes	X
5	Did any person listed on line 1a receive or accrue of for services rendered to the organization? If "Yes," co	compensation	n from	any ι	unrel	ated	d orgar					5		<u>x</u>
Section	on B. Independent Contractors Complete this table for your five highest compensa	ted independ	lent co	ntrac	tors	that	receiv	ed r	more than \$100,000) of	 		_	
	compensation from the organization Report compe										/ear			_
	(A) Name and business addres	s							(B) Description of service	es		(C) Compens	ation	_
	Total number of independent contractors (including	but not limite	ed to th	ose	liste	d ab	ove) w	ho/ho						-2 · 1

Form 990 (2019) Disabled American Veterans 3 Rapid City 46-6011660 Page 9 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 Unrelated Revenue excluded function revenue business revenue from tax under sections 512-514 1a 1b 5,779 Contributions, Gifts, Grants and Other Similar Amounts Fundraising events 1c 2,584 Related organizations 1d Government grants (contributions) . . 1e All other contributions, gifts, grants, and similar amounts not included above 1f 14,202 Noncash contributions included in 1g Total. Add lines 1a-1f 22,565 **Business Code** 2a Program Service Revenue f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 4,359 4,359 Income from investment of tax-exempt bond proceeds 5 (II) Personal (i) Real 6a Gross rents 6a b Less rental expenses · · 6b c Rental income or (loss) 6c d Net rental income or (loss) (II) Other (i) Securities 7a Gross amount from sales of assets other than inventory
b Less cost or other basis Other Revenue 7b and sales expenses . c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events (not including \$ 2,584 of contributions reported on line 1c) See Part IV, line 18 8a 8b **b** Less direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities, See Part IV, line 19 9a 9b b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less 10a returns and allowances . . . 10b b Less cost of goods sold c Net income or (loss) from sales of inventory Business Code Miscellanous Revenue 11a

0

0

4,359

26,924

d All other revenue

Total revenue. See instructions · · · · · · · · · ▶

e Total. Add lines 11a-11d

	t IX Statement of Functional Expenses				
Secti	on 501(c)(3) and 501(c)(4) organizations must complete all colum	ns All other organization	ns must complete colum	n (A)	
	Check if Schedule O contains a response or note to a	ny line in this Part IX			[
Do n	ot include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D)
8b, 9	b, and 10b of Part VIII.	iotal expenses	expenses	general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				, 13 . A
	and domestic governments See Part IV, line 21				447 122
2	Grants and other assistance to domestic				art the state of
	ındıvıduals See Part IV, line 22	3,984	3,984		A STATE
3	Grants and other assistance to foreign				S. (0) 1 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	organizations, foreign governments, and	į			4 4 4
	foreign individuals See Part IV, lines 15 and 16 · · · ·			a .	11/2 1/20
4	Benefits paid to or for members	420	420	•	the same
5	Compensation of current officers, directors,			,	
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				`
	persons described in section 4958(c)(3)(B) · · · · · ·				
7	Other salaries and wages			····	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions) · ·				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees)				
а	Management				
b	Legal				
C	Accounting				
d	Lobbying		-	*10 95	
e	Professional fundraising services See Part IV, line 17	400	* * * * * * * * * * * * * * * * * * * *	<u> </u>	400
f	Investment management fees		····		
g	Other (If line 11g amount exceeds 10% of line 25, column				
40	(A) amount, list line 11g expenses on Schedule O) Advertising and promotion	050		050	
12	Office expenses	250		250	
13	Information technology	4,606		4,606	
14 15	Royalties	-			
16	Occupancy · · · · · · · · · · · · · · · · · · ·	9,557		9,557	
17	Travel	9,551		9,337	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,657		3,657	
20	Interest · · · · · · · · · · · · · · · · · · ·	3,037			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,488	4,837	651	<u> </u>
23	Insurance	1,882	3700.	1,882	
24	Other expenses Itemize expenses not covered	1972			
	above (List miscellaneous expenses on line 24e If				,
	line 24e amount exceeds 10% of line 25, column	# 12 A			
	(A) amount, list line 24e expenses on Schedule O)		· .		
а	SUPPLIES	2,725		2,725	
b					
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e · · ·	32,969	9,241	23,328	400
26	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				
	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) (B) Beginning of year End of year Cash - non-interest-bearing 1 7,657 7,091 2 2 3 Pledges and grants receivable, net 3 4 4 Accounts receivable, net 5 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 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 7 Notes and loans receivable, net 7 Assets 8 8 Inventories for sale or use 200 150 Prepaid expenses and deferred charges 9 9 26 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 151,316 10b Less accumulated depreciation b 48,663 108,141 10c 102,653 Investments - publicly traded securities 11 11 163,798 160,634 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 14 15 Other assets See Part IV, line 11 15 Total assets. Add lines 1 through 15 (must equal line 33) 16 16 279,796 270,528 17 17 Accounts payable and accrued expenses 18 18 19 19 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 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 22 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 25 26 26 Total liabilities. Add lines 17 through 25 0 0 Organizations that follow FASB ASC 958, check here Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 27 27 Net assets without donor restrictions 28 Net assets with donor restrictions 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds 29 153,504 29 153,504 30 Paid-in or capital surplus, or land, building, or equipment fund 86,000 30 86,000

31,024

270,528

270,528

31

33

40,292

279,796

279,796

31

32

33

Retained earnings, endowment, accumulated income, or other funds

Total liabilities and net assets/fund balances

		<u>46-601</u>	<u> 1660</u>		Pa	age 12
Pai	t XI Reconciliation of Net Assets			_		
•	Check if Schedule O contains a response or note to any line in this Part XI		<u></u> .			. 🗌
1	Total revenue (must equal Part VIII, column (A), line 12)	. 1			26,	924
2	Total expenses (must equal Part IX, column (A), line 25)	. 2				969
3	Revenue less expenses Subtract line 2 from line 1	. 3				045)
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	. 4		_		796
5	Net unrealized gains (losses) on investments	. 5				223)
6	Donated services and use of facilities	. 6				
7	Investment expenses	. 7			,	
8	Prior period adjustments	. 8				
9	Other changes in net assets or fund balances (explain on Schedule O)	. 9				0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	. 10		٠,	270,	528
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					$\cdot \square$
					Yes	No
1	Accounting method used to prepare the Form 990 🗵 Cash 🗌 Accrual 🔲 Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		}			70
	Schedule O					_ ′
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		x
	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		j)
	Separate basis Consolidated basis Both consolidated and separate basis		ŀ			l
b	Were the organization's financial statements audited by an independent accountant?		[2b		х
	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		1	٠.	,	'
	Separate basis Consolidated basis Both consolidated and separate basis					
С	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?		· . L	2c		
	if the organization changed either its oversight process or selection process during the tax year, explain on		[
	Schedule O		-			ļ
3a	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?			3a_		х
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	<u></u>		3ь		
EEA			F	orm	990 (2	2019)

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service
Name of the organization

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 for instructions and the latest information.

OMB No 1545-0047

Employer identification number

2019

Open to Public

Disabled American Veterans 3 Rapid City 46-6011660 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 Aggregate value of contributions to (during year) 2 3 Aggregate value of grants from (during year) 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? 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? Yes No Conservation Easements. Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., 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 Total number of conservation easements 2a 2b Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) 2c C Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax vear Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 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)? 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8 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 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 Assets included in Form 990, Part X

	ule D (Form 990) 2019 Disabled Americ						46-6011		Page 2
Par	t III/ Organizations Maintaining	Collections of	Art, Histo	rical Tr	easures, c	or Oth	er Similar Ass	ets (cont	inued)
.3	Using the organization's acquisition, accession	, and other records,	check any of	f the follow	ing that make	signific	ant use of its		
	collection items (check all that apply)								
а	Public exhibition		d [Loan c	r exchange p	rograms	i		
b	Scholarly research		e	_		-			
С	Preservation for future generations		•						
4	Provide a description of the organization's colle	ections and explain h	ow they furth	ner the ora	anization's ex	empt pu	rpose in Part		
•	XIII	octorio dila explaini	on may lake	ier ine org	amzanom o Cx	ciiipi pu	ii pooc ii i ait		
5	During the year, did the organization solicit or r	eceive donations of a	art historical	traneurae	or other sim	ilos			
3	• • •				-			□ v	□ N-
Da	assets to be sold to raise funds rather than to be maintained as part of the organization's collection?								
L ai	Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form								
	990, Part X, line 21	answered les	OII I OIIII	990, r a	iit iv, iiiie s	9, OI 16	ported an anio	unt on i	Offi
- -									
1a	Is the organization an agent, trustee, custodiar							П.,	О
	•				• • • • • •			. ∐ Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII ar	nd complete the follow	wing table				· 		
						<u> </u>	Am	ount	
С	Beginning balance						:		
d	Additions during the year						<u> </u>		
е	Distributions during the year					. <u>1e</u>			
f	Ending balance					. <u>1f</u>			
2a	Did the organization include an amount on For	m 990, Part X, line 2	1, for escrov	v or custod	lial account lia	ability?		Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII C	Check here if the expl	anation has	been prov	ided on Part)	KIII			
Pai	rt V Endowment Funds.								
	Complete if the organization	answered "Yes"	on Form	990, Pa	irt IV, line 1	10.			
		(a) Current year	(b) Pric	or year	(c) Two years	back	(d) Three years back	(e) Four	years back
1a	Beginning of year balance				,				
b	Contributions		T		··				
c	Net investment earnings, gains, and		†					†	
•	losses · · · · · · · · · · · · · · · · ·								
a	Grants or scholarships		 					+	
đ			 					+	
е	Other expenditures for facilities and								
_	programs				<u> </u>			 -	
T	Administrative expenses		<u> </u>					 	
g	End of year balance · · · · · · ·							ــــــــــــــــــــــــــــــــــــــ	<u>.</u>
2	Provide the estimated percentage of the current	•	line 1g, colu	mn (a)) he	ld as				
а	Boal d designated or quasi-endowment	%							
b	Permanent endowment	%							
C	Term endowment ▶ %								
	The percentages on lines 2a, 2b, and 2c should	ld equal 100%							
3a	Are there endowment funds not in the possess	sion of the organization	on that are h	eld and ad	ministered for	r the		_	
	organization by								Yes No
	(i) Unrelated organizations							3a(i)	
	(ii) Related organizations							3a(ii)	
b	If "Yes" on line 3a(ii), are the related organizati	ons listed as required	d on Schedu	le R?			• • • • • • • • • • • • • • • • • • •	3b	
4	Describe in Part XIII the intended uses of the d	organization's endowi	ment funds						
Pai	rt VI Land, Buildings, and Equip								
تستا	Complete if the organization		on Form	990. Pa	rt IV, line 1	11a S	ee Form 990. P	art X. lir	e 10
	Description of property	(a) Cost or ot			r other basis		Accumulated	(d) Book	
	Description of property	(a) cost of co			other)		epreciation	(0) 500	value
	Land				· ,				
			02 000				205		03 677
b	Buildings	-	83,902				225		<u>83,677</u>
С	Leasehold improvements	· ·				_			
d	Equipment		9,734		2,565		8,971		3,328
0	Other STMD1		37,557	<u> </u>	17,558		39,467		15,648
Tota	I. Add lines 1a through 1e (Column (d) must equ	ıal Form 990, Part X,	column (B),	line 10c)		· · · ·		1	02,653

Part VII	Investments - Other Securities. Complete if the organization answered "Yes" on Fo	rm 990. Part IV. line	e 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 d	lerivatives		
(2) Closely-he	ld equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D)			
_(E)			
_(F)			
_(G)			
(H)			-,2
Part VIII	In (b) must equal Form 990, Part X, col (B) line 12) Investments - Program Related. Complete if the organization answered "Yes" on Fo	rm 990. Part IV lin	
	(a) Description of investment	(b) Book value	(c) Method of valuation
(1)			Cost or end-of-year market value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	n (b) must equal Form 990, Part X, col (B) line 13)		· ,
Part IX	Other Assets.		
	Complete if the organization answered "Yes" on Fo	rm 990, Part IV, lin	e 11d See Form 990, Part X, line 15
	(a) Description		(b) Book value
(1)			
(2)			
(3)			
(4)	<u> </u>		
(5)	·· <u>···································</u>		
(6)			
(8)			
(9)			
	n (b) must equal Form 990, Part X, col (B) line 15)	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · •
, Part X.	Other Liabilities. Complete if the organization answered "Yes" on Foline 25	rm 990, Part IV, lin	e 11e or 11f See Form 990, Part X,
1.	(a) Description of liability (b) Book	value	
(1) Federal II			
(2)			
(3)			
(4)			•
(5)			
(6)			
(7)			·
(8)			
(9)			a to a c
	(b) must equal Form 990, Part X, col (B) line 25) - ▶		
2. Liability for	uncertain tax positions. In Part XIII, provide the text of the footnote to	the organization's financi	al statements that reports the
organization's	liability for uncertain tax positions under FASB ASC 740 Check here i	f the text of the footnote	has been provided in Part XIII

	ule D (Form 990) 2019 Disabled American Veterans 3 Rapid City	46-6011660	Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue	per Return.	-
<u>. </u>	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII) 2d		
e	Add lines 2a through 2d		
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	 	
а	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · 4a		
b	Other (Describe in Part XIII)	\dashv \mid \cdot	
	Add lines 4a and 4b	4c	
c	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	10	
5 Da	rt XII Reconciliation of Expenses per Audited Financial Statements With Expense		
Га	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	es per Keturn.	14
1	Total expenses and losses per distinct statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments	_	
С	Other losses		
d	Other (Describe in Part XIII)		
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	-	
а	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · 4a	′	
þ	Other (Describe in Part XIII)		
С	Add lines 4a and 4b		
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
	rt XIII Supplemental Information.	- ·	
	de 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, F	art X, line	
2, Pa	it XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information		
	,		

SCHEDULE O (Form 990 or 990-EZ)

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.

OMB No 1545-0047 **2019**

2019Open to Public

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

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

Inspection
Employer identification number

Disabled American Veterans 3 Rapid City	46-6011660
01. Unrelated business income explanation (Part V, line 3b)	
ORGANIZATION RECEIVES DIVIDENDS FROM FUNDS INVESTED.	
02. Members or stockholder classes and rights (Part VI, line 6)	
THE ORGANIZATION HAS MEMBERS.	
03. Member election for additional members (Part VI, line 7a)	
THE MEMBERSHIP OF THE ORGANZITION ELECTS THE MEMBERS OF THE GOVERNING	BOARD.
04. Governing body decisions (Part VI, line 7b)	
MEMBERS APPROVE THE DECISIONS OF THE GOVERNING BOARD.	
05. Form 990 governing body review (Part VI, line 11)	
GOVERNING BODY REVIEWS THE TAX RETURN BEFORE IT IS FILED.	
06. Governing documents, etc, available to public (Part VI, line 19)	
LINE 18 - THE ORGANIZATION PROVIDES ACCESS TO ITS GOVERNING DOCUMENTS	AND FINANCIAL
STATEMENTS UPON REQUEST.	