Caution: Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency specifications. When using Acrobat, select the "Actual Size" in the Adobe "Print" dialog.

CLIENT'S COPY

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 for instructions and the latest information.

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

Department of the Treasury Internal Revenue Service

A F	or the	e 2022 calendar year, or tax year beginning and	ending		
Bo	heck if	C Name of organization		D Employer identific	cation number
	Addre				
	Name chang	Doing business as		82-10204	21
F	Initial return Final return	512 MATH CT CTC 240	Room/suite	E Telephone number 605-718-3	
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	3,030,912.
	Amen			H(a) Is this a group re	
	Application	F Name and address of principal officer: BROOK KAUFMAN		? Yes X No	
	pendir	SAME AS C ABOVE		H(b) Are all subordinates in	
17	ax-ex	empt status: 501(c)(3) X 501(c) (6) (insert no.) 4947(a)(1) c	or 527		list, See instructions
	Vebsi			H(c) Group exemption	n number
KF	orm of	organization: X Corporation Trust Association Other	L Year	of formation: 2017 N	State of legal domicile: SD
Pa	art I	Summary			
•		Briefly describe the organization's mission or most significant activities: ${ m \underline{TO}}{ m \ \ PF}$			
Activities & Governance	8	BLACK HILLS AREA AS A VISITOR DESTINATION	AND F	PROMOTE ECON	OMIC
r	2	Check this box if the organization discontinued its operations or dispos	ed of more	than 25% of its net ass	
ove.	640			3	18
ر مح		Number of independent voting members of the governing body (Part VI, line 1b)			18
es &		Total number of individuals employed in calendar year 2022 (Part V, line 2a)			29
ΣĘ		Total number of volunteers (estimate if necessary)			0
Act		Total unrelated business revenue from Part VIII, column (C), line 12			0.
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	······		0.
			-	Prior Year	Current Year
e		Contributions and grants (Part VIII, line 1h)		326,890.	0.
Revenue	375000	Program service revenue (Part VIII, line 2g)		3,072,131.	3,019,032.
Вè		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		9,530.	11,668.
_		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,408,774.	3,030,912.
_		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		14,250.	46,978.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	45	Benefits paid to or for members (Part IX, column (A), line 4)		927,575.	1,085,140.
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
ens	10a	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25)	0.		NEW STREAMS STREAMS
X	47	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,614,942.	2,437,134.
_		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,556,767.	3,569,252.
		Revenue less expenses. Subtract line 18 from line 12		852,007.	-538,340.
- S		Trevenue less expenses. Subtract line to from line 12		ginning of Current Year	End of Year
ets c	20	Total assets (Part X, line 16)		2,991,953.	3,252,507.
Net Assets	21	Total liabilities (Part X, line 26)		8,802.	235,448.
Net	22	Net assets or fund balances. Subtract line 21 from line 20		2,983,151.	3,017,059.
Pa	art II	Signature Block			
		Ities of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	ents, and to the best of my	knowledge and belief, it is
		t, and complete. Declaration of preparer (ether than officer) is based on all information of wh			
		V. I. ()		8/2	28/27
Sigi	n	Signature of difficer		Date	
Her		BROOK KAUFMAN, PRESIDENT			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Paid	ı	DEIDRE BUDAHL, CPA DEIDRE BUDAHL, C	8/22/23 self-employe		
Prep	arer	Firm's name CASEY PETERSON, LTD.			6-0403496
Use Only Firm's address 909 ST JOSEPH ST, STE 101					
		RAPID CITY, SD 57701		Phone no. (6	05) 348-1930
May	the If	RS discuss this return with the preparer shown above? See instructions			X Yes No

Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE ORGANIZATION WILL MARKET RAPID CITY AND THE BLACK HILLS AREA AND
	WILL ACT AS THE CATALYST BETWEEN MEETING PLANNERS, GROUP TOUR
	PLANNERS, TRAVEL AGENTS, TRAVEL WRITERS AND LEISURE VISITORS TO
	PROMOTE AREA ACCOMODATIONS, ATTRACTIONS, RESTAURANTS AND SERVICES.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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?
	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 \$ including grants of \$) (Revenue \$)
	FACILITATES MARKETING EFFORTS FOR RAPID CITY & THE BLACK HILLS ACROSS
	STATE, REGION, NATIONAL, & WORLD MARKETS BY PROVIDING FREE INFORMATION
	TO VISITORS AND POTENTIAL VISITORS ON THE AREA'S LODGING, DINING,
	EVENTS, NATIONAL AND STATE PARKS, AND MONUMENTS AND MEMORIALS, AND BY
	PROVIDING FREE SERVICING SUPPORT AND SPONSORSHIP FUNDING FOR MEETINGS,
	CONVENTIONS, SPORTS, GROUP TOURS & OTHER EVENTS BRINGING VISITORS TO
	THE AREA.
46	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses

Form 990 (2022) VISIT RAPID CITY
Part IV Checklist of Required Schedules

			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		X
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 candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	Ť		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
0	CONTROL OF THE CONTRO	8		х
9	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	-		
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
		ا ا	х	
40	If "Yes," complete Schedule D, Part IV	9	Λ	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			v
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	No.	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X,			
	as applicable.			
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	X	
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		X
C	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
d	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			222
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
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	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	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		Х
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		X
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? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	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? If "Yes," complete Schedule F, Parts II and IV	15		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		X
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		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
.5	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? // "Yes,"			
.5	1038 A 1979 30 17 800 1990 300 300 97 Web 1000 500	19		х
200	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
		20a 20b		- 22
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
21		ا ہم ا	v	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	

Form 990 (2022) VISIT RAPID CITY
Part IV Checklist of Required Schedules (continued)

			Yes	No
22	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? If "Yes," complete Schedule I, Parts I and III	22		<u>X</u>
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	X	
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_
	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		
	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		
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		
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%			Х
~~	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		
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	07		х
00	entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,	27	No.	
28				
	instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	SERVICE .	BEEVE	
а	SCHOOL CONTROL OF THE	28a		Х
h	"Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	200		
C	100 (100 to 100	28c		х
29	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	23		
50	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	<u> </u>		
02	Schedule N, Part II	32		Х
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		х
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
	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		
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 on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	X	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	

Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 29 filed for the calendar year ending with or within the year covered by this return 2a **b** If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Х 2b X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 3b 4a 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)? X 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). X 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? **b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? X 5b c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit X any contributions that were not tax deductible as charitable contributions? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). a 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 If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c X Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 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? Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? 9a b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: 11 a Gross income from members or shareholders Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note: See the instructions for additional information the organization must report on Schedule O. 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 14a Did the organization receive any payments for indoor tanning services during the tax year? X 14a b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or X excess parachute payment(s) during the year? <u>1</u>5 If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? Х 16 If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.

Form 990 (2022) VISIT RAPID CITY 82-1020421 Page
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

	to line 6a, 6b, or 10b below, describe the circumstances, processes, or changes on Schedule C. See instructions.			
<u></u>	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
4	Enter the number of voting members of the governing body at the end of the tax year 18	Magar.	Yes	No
та	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			
L	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0. Enter the number of voting members included on line 1a, above, who are independent 18			
ь				
2	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	RESIDEN	х
•	officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision			21
3		,		х
	of officers, directors, trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
4	Did the organization hake any significant changes to its governing documents since the prior Form 990 was med? Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
5 6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
1 a	more members of the governing body?	7a		х
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	10		
U	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	THE SECOND	Althur.	
а	The governing body?	8a	х	Barcara
b	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 the	0.5		
3	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	This occurr b reguests information about policies not required by the internal revenue code.		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100		
	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 on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	The state of the s	12a	Х	No. St. Co.
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
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 independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
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?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
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)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X 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	finan	cial	
	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			
	THE ORGANIZATION - 605-718-8486			
	512 MAIN ST STE 240, RAPID CITY, SD 57701-5020			

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

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Section A.

- 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the instructions for the order in which to list the persons above.

Check this box if neither the organization n	or any related	orga	niza	tion	con	nper	sate	ed any current officer, d	irector, or trustee.	
(A)	(B)	(C)					(D)	(E)	(F)	
Name and title	Average	/do	not c	Pos	ition	than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss per	rson i	s both	n an	compensation	compensation	amount of
	week		cer an	nd a d	recto	r/trus	tee)	from	from related	other
	(list any	director						the	organizations	compensation
	hours for	6	9			ated		organization	(W-2/1099-MISC/	from the
	related	trustee	trust		9	suadi		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	ual tr	ional		yold	t con		1099-NEC)		and related organizations
	line)	Individual 1	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) BROOK KAUFMAN	40.00	=	=	0	~	工む	H.			
PRESIDENT				Х				164,083.	0.	157.
(2) STACIE GRANUM	40.00							-		
INTERIM PRES. & CEO				X				97,009.	0.	22,720.
(3) GWYN WATHEN	1.00									
DIRECTOR		Х						0.	0.	0.
(4) CHRIS JOHNSON	1.00									
DIRECTOR		Х						0.	0.	0.
(5) ROBIN ZEBROSKI	1.00							_		
SECRETARY/TREASURER		Х		Х				0.	0.	0.
(6) DAN TRIBBY	1.00							2017	5600	
DIRECTOR		Х						0.	0.	0.
(7) KATELYN COOK	1.00							220	1967	
DIRECTOR		Х						0.	0.	0.
(8) PATRICK DAME	1.00							90.1		5.00
PAST CHAIR		Х		Х				0.	0.	0.
(9) STEPHANIE DOWLING	1.00							M/2	(260)	
DIRECTOR		X						0.	0.	0.
(10) JESSE SCHEITLER	1.00							2000	7900	
DIRECTOR		X						0.	0.	0.
(11) MICHELLE PAWELSKI	1.00									
DIRECTOR		Х						0.	0.	0.
(12) KELLY BUNTROCK	1.00									
CHAIR		X		Х				0.	0.	0.
(13) DOMICO RODRIGUEZ	1.00									
VICE CHAIR		Х		Х				0.	0.	0.
(14) SCOTT LANDGUTH	1.00									
DIRECTOR		X						0.	0.	0.
(15) TIM JOHNSON	1.00									
DIRECTOR		Х						0.	0.	0.
(16) MIKE DERBY	1.00									
DIRECTOR		Х						0.	0.	0.
(17) LYNZIE MONTAGUE	1.00									
VOTING LIAISON		Х						0.	0.	0.
200007 40 40 00										Form 990 (2022)

Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	Hig	ghes	t C	ompensated Employee	s (continued)				
(A) Name and title	(B) Average hours per week	(do	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				one n an	(D) Reportable compensation from	(E) Reportable compensation from related		an	(F) stimate nount o other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC 1099-NEC)	;/	com fr org and	pensa om the anizati d relate anizatio	e ion ed
(18) WADE LAMPERT	1.00												_
VOTING LIAISON		Х		_	_	-	_	0.		0.			0.
				_		-				\dashv			
						-	_			\dashv			
						-				\dashv			
										\neg			
								261 000		\dashv		0.01	77
1b Subtotal c Total from continuation sheets to Part VI								261,092.		0.		2,8	0.
d Total (add lines 1b and 1c)								261,092.		0.	2:	2,8	
2 Total number of individuals (including but no								eceived more than \$100,	000 of reportable				
compensation from the organization				_								Yes	No No
3 Did the organization list any former officer,	director, trust	ee, k	сеу є	empl	oye	e, or	hig	hest compensated emp	oyee on	ſ		103	
line 1a? If "Yes," complete Schedule J for si				•							3	MICHIGAN AND AND AND AND AND AND AND AND AND A	X
4 For any individual listed on line 1a, is the su												x	
and related organizations greater than \$150 5 Did any person listed on line 1a receive or a										···	4		
rendered to the organization? If "Yes." com	Andrew Control of the Control of the Control										5	EXECUTION .	Х
Section B. Independent Contractors		_			_				100,000 (
 Complete this table for your five highest con the organization. Report compensation for the 		25								nsat	ion irc	√m	
(A)	80 SP			3				(B)			(0		
Name and business MMGY, 7309 W 80TH ST SUIT		017	ED.	т л	NID			Description of s	ervices	C	omper	nsation	1
PARK, KS 66204	E 400,	ΟV	ĿК	LΗ	עא			MARKETING SE	RVICES		78	0,20	64.
DIGITAL EDGE, 14286 BEACH				. 1 610									
JACKSONVILLE BEACH, FL 32	250			13117-2			_	MARKETING SE	RVICES		264	4,50	00.
2 Total number of independent contractors (in	ncluding but no	ot lin	nited	l to	thos	se lis	ted	above) who received mo	ore than				
\$100,000 of compensation from the organiz	zation				2	2						000	000-
											Form '	ッ せ∪ (′,	2022)

Form 990 (2022) VISIT RAPID CITY
Part VIII Statement of Revenue

		Check if Schedule O contains a response o	r note to any lin	e in this Part VIII			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
2 2	1:	Federated campaigns 1a					
an		Membership dues 1b					
2 8		Fundraising events 1c					
E E		Related organizations 1d					
S, #		Government grants (contributions) 1e					
Ë	1	All other contributions, gifts, grants, and					
Bet		similar amounts not included above 1f					
Ē		Noncash contributions included in lines 1a-1f					
Contributions, Gifts, Grants and Other Similar Amounts		Total. Add lines 1a-1f					
			Business Code				
ا بو	2 :	HOTEL OCCUPANCY SHARE	900003	1,623,408.	1,623,408.		
Program Service Revenue	ı	BED/BOARD/BOOZE SHARE	900003	1,369,611.			
S		MARKETING SERVICE FEES	900003	26,013.	26,013.		
am							
P. B.							
ፈ		All other program service revenue					
		Total. Add lines 2a-2f		3,019,032.			
	3	Investment income (including dividends, interes	t, and	Production Co.			
		other similar amounts)		11,668.			11,668.
	4	Income from investment of tax-exempt bond pro	oceeds				
	5	Royalties					
		(i) Real	(ii) Personal				
		Gross rents 6a					
	ı	Less: rental expenses 6b					
	(Rental income or (loss)					
		Net rental income or (loss)		TO SEE SEE SEE SEE SEE SEE SEE SEE SEE SE	Boulous Viscos Construction Construction		THE WORLD THE SECOND CONTROL TO SECOND
	7 :	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a					
	ı	Less: cost or other basis					
Other Revenue		and sales expenses 7b					
§	(Gain or (loss) 7c					
~ i		Net gain or (loss)					
	8 8	Gross income from fundraising events (not					
δ		including \$ of					
		contributions reported on line 1c). See					
	No.	Part IV, line 18					
		Less: direct expenses 8b					
		Net income or (loss) from fundraising events					
	9 8	Gross income from gaming activities. See					
		Part IV, line 19 9a 9b					
		Net income or (loss) from gaming activities					
		Gross sales of inventory, less returns					
	10 6	and allowances					
		Less: cost of goods sold 10b					
		Net income or (loss) from sales of inventory				STEED TO SEE STEED STREET	
\neg			Business Code				
sn	11 :						
e a	'''						· · · · · · · · · · · · · · · · · · ·
ella							
Miscellaneous Revenue		All other revenue	900003	212.			212.
Σ		Total. Add lines 11a-11d		212.			
	12	Total revenue. See instructions		3,030,912.	3,019,032.	0.	11,880.

Form 990 (2022) VISIT RAPID CITY
Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must comp			mplete column (A).	X
	Check if Schedule O contains a respons	(A)		(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	(C) Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		охроново	general expenses	охроново
	and domestic governments. See Part IV, line 21	46,978.			
2	Grants and other assistance to domestic	•			
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	283,969.			
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	500 006			
7	Other salaries and wages	589,286.			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	140 247			
9	Other employee benefits	148,347. 63,538.			
10	Payroll taxes	03,330.			
11	Fees for services (nonemployees):				
a	Management	42,589.			
b	Legal	79,674.			
d	Accounting Lobbying	75,074.			
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	2,251.		STATE OF THE STATE	
g	Other. (If line 11g amount exceeds 10% of line 25,	_/			
9	column (A), amount, list line 11g expenses on Sch O.)	570,940.			
12	Advertising and promotion	1,086,522.			
13	Office expenses	48,916.			
14	Information technology	17,274.			
15	Royalties				
16	Occupancy	64,378.			
17	Travel	47,472.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	F 000			
20	Interest	5,000.			
21	Payments to affiliates	27,954.			
22	Depreciation, depletion, and amortization	8,470.			
23	Other expenses. Itemize expenses not covered	0,470.	S. S. Charles Consequently		
24	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 0.)				
а	DUES & SUBSCRIPTIONS	228,835.			MARKET ST. TO SERVICE SERVICES
a b	VISITOR MATERIALS	144,524.			-
c	COMMUNITY RELATIONS	62,335.			
d		•			
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	3,569,252.			
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 if following SOP 98-2 (ASC 958-720)				

Form 990 (2022)

Part X | Balance Shee

aı	LA	Balance Sheet Chack if School do Cooptains a response or note to any line in this Bort V				
		Check if Schedule O contains a response or note to any line in this Part X	Т	(A)	Т	(B)
				Beginning of year		End of year
	1	Cash - non-interest-bearing		378,526.	1	316,967
	2	Savings and temporary cash investments		2,591,769.	2	1,350,959
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		0.	4	384,034
	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			5	
	6	Loans and other receivables from other disqualified persons (as defined	1			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6	
ا ي	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use		1,319.	8	0
AS	9	Prepaid expenses and deferred charges		0.	9	8,592
		Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D 10a 243,	614.			
	b	Less: accumulated depreciation 10b 60,	388.	20,339.	10c	183,226
	11	Investments - publicly traded securities		0.	11	1,008,729
	12	Investments - other securities. See Part IV, line 11			12	
	13	Investments - program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
45	15	Other assets. See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)		2,991,953.	16	3,252,507
	17	Accounts payable and accrued expenses		8,802.	17	88,879
	18	Grants payable			18	
	19	Deferred revenue		0.	19	43,900
	20	Tax-exempt bond liabilities			20	
	21	E		0.	21	18,931
,	22	Loans and other payables to any current or former officer, director,				
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%				
		controlled entity or family member of any of these persons		tome stand as electing, to had sold with may approximate that	22	
2	23	Secured mortgages and notes payable to unrelated third parties		0.	23	83,738
	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				
		of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		8,802.	26	235,448
		Organizations that follow FASB ASC 958, check here				
es		and complete lines 27, 28, 32, and 33.				
ا <u>ع</u> اد	27	Net assets without donor restrictions		2,983,151.	27	3,017,059
gai	28	Net assets with donor restrictions			28	
2		Organizations that do not follow FASB ASC 958, check here				
2		and complete lines 29 through 33.				
6	29	Capital stock or trust principal, or current funds		U.S. 20-500-0-2-10-00-11-12-12-13-13-13-13-13-13-13-13-13-13-13-13-13-	29	
Sets	30	Paid-in or capital surplus, or land, building, or equipment fund			30	
ASS	31	Data to the state of the state			31	
Net Assets or Fund Balances	32	Total net assets or fund balances	0.0101010101010101	2,983,151.	32	3,017,059.
۷	33	Total liabilities and net assets/fund balances		2,991,953.	33	3,252,507

Form 990 (2022)

-orm	1990 (2022) VISII RAFID CIII	04	1020421	Pag	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,030		
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,569		
3	Revenue less expenses, Subtract line 2 from line 1	3	-538		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,983		
5	Net unrealized gains (losses) on investments	5		6,6	74.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8	563	5,5	74.
9	Other changes in net assets or fund balances (explain on Schedule 0)	9			<u> 0 </u>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	3,017	, 0	<u>59.</u>
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
			The second of	Yes	No
1	Accounting method used to prepare the Form 990:				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	MINES AND THE	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:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	PROPERTY
	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:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	anaros 1	X
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	dule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	ed aud	it		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits				
			Form	990 ((2022)

SCHEDULE D

(Form 990)

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.

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

VISIT RAPID CITY

Employer identification number 82-1020421

Pa	rt I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin		,
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	sed funds
•	are the organization's property, subject to the organization's		AND THE RESIDENCE OF THE PROPERTY OF THE PROPE
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor o		or (1,000 × 1
	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		
Pa		ganization answered "Yes" on Form 990,	
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (for example, recrea		f a historically important land area
	Protection of natural habitat		f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied 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
а	Total number of conservation easements		2a
b			
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a		
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel		
	year		
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per	iodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cons	servation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserva	tion easements during the year
8	Does each conservation easement reported on line 2(d) above	5	
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense	statement and
	balance sheet, and include, if applicable, the text of the footn	ote to the organization's financial statem	ents that describes the
- D-	organization's accounting for conservation easements.	A. 11:-1:	ll an Olmillan Assaula
Pa	rt III Organizations Maintaining Collections of		iner Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under FASB ASC 95		
	of art, historical treasures, or other similar assets held for pub		
	service, provide in Part XIII the text of the footnote to its finar		
b	If the organization elected, as permitted under FASB ASC 95		
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furth	nerance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		\$
2	If the organization received or held works of art, historical treatment	asures, or other similar assets for financia	l gain, provide
	the following amounts required to be reported under FASB A	: (1987년 1987년 1987년 - 1987년	
а	Revenue included on Form 990, Part VIII, line 1		\$
h	Assets included in Form 990, Part Y		¢

Sche		APID CITY								Page 2
Par	t III Organizations Maintaining C	collections of Ar	t, Hist	orical Tre	asures, or	Other	Simila	Assets	(continu	ied)
3	Using the organization's acquisition, accessi	on, and other record	s, chec	k any of the f	following that	make sig	nificant ι	use of its		
	collection items (check all that apply):									
а	Public exhibition	C	ı 🖂	Loan or exc	hange progra	m				
b	Scholarly research	•	, 🗀	Other						
C	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how th	ney further th	ne organization	n's exem	pt purpos	se in Part	XIII.	
5	During the year, did the organization solicit of	or receive donations	of art, h	istorical treas	sures, or othe	r similar a	assets		_	
	to be sold to raise funds rather than to be ma								Yes	No
Par	t IV Escrow and Custodial Arran		ete if th	e organizatio	n answered "	Yes" on F	orm 990	, Part IV, I	ine 9, or	
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod	ian or other intermed	liary for	contributions	s or other ass	ets not in	cluded		_	
	on Form 990, Part X?							L	Yes	X No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing	table:						
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
	Did the organization include an amount on F						y?	[X	Yes	No
-	If "Yes," explain the arrangement in Part XIII.				AND DESCRIPTION OF THE PARTY OF	ALL DESCRIPTION OF THE PROPERTY OF THE PROPERT				X
Par	t V Endowment Funds. Complete				1 10 to 100					baala
		(a) Current year	(b) I	Prior year	(c) Two years	s Dack (d) Three y	ears back	(e) Four y	ears back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs	-								
f	Administrative expenses									
g	End of year balance				<u> </u>					
2	Provide the estimated percentage of the curr			g, column (a)) held as:					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С		<u>%</u>								
696	The percentages on lines 2a, 2b, and 2c sho									
3a	Are there endowment funds not in the posse	ession of the organiza	ation tha	at are held ar	nd administere	ed for the	E.		<u></u>	res No
	organization by:									Yes No
	(i) Unrelated organizations								3a(i)	
	(ii) Related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiza								3b	
Dar	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		wment	tunas.						
Па	Complete if the organization answere) Dort I	/ line 11a S	00 Form 000	Dart Y li	no 10			
				700 0000		96 10 WY	7.395537		(-I) Deals	
	Description of property	(a) Cost or o		2.00	or other (other)		cumulate reciation		(d) Book	value
	Land	•	nent)	Dasis	(otrier)	uep	Colation			
	Land		-	1						
	Buildings			1	9,000.				20	,000.
	Leasehold improvements				4,614.		60,38	20		,226.
	Equipment				-, U14.		00,50	,,,,	174	, 440.
	Other		v	<u> </u>	0)			-	183	,226.
rotal	. Augu lines Ta mrough Te. (Column (d) must e	adual Form 990 Part	x colu	nn (R) line 1	ucı				TO 2	, 440.

Schedule D (Form 990) 2022

Part VII Investments - Other Securities. Complete if the organization answered "Yes" of			TODOTOL Page
(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)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)		Management of the second of th	
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related. Complete if the organization answered "Yes" o	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-vear market value
(1)	.,		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" of	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)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.			
Complete if the organization answered "Yes" o	n Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.	(h) Daak value
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
<u>(8)</u> (9)			
IMI			

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 ... X

STATEMENT. THE ORGANIZATION'S INCOME TAX FILINGS ARE SUBJECT TO AUDIT BY VARIOUS TAXING AUTHORITIES. THE ORGANIZATION IS NO LONGER SUBJECT TO FEDERAL AND STATE INCOME TAX EXAMINATIONS BY TAXING AUTHORITIES FOR YEARS BEFORE FISCAL YEAR 2019. MANAGEMENT CONTINUALLY EVALUATES EXPIRING STATUTES OF LIMITATION, AUDITS, PROPOSED SETTLEMENTS, CHANGES IN TAX LAW, AND NEW AUTHORITATIVE RULINGS. THE ORGANIZATION BELIEVES ITS ESTIMATES ARE

Schedule D (Form 990) 2022 VISIT RAPID CITY Part XIII Supplemental Information (continued)	82-1020421 Pa	age 5
Part XIII Supplemental Information (continued)		
APPROPRIATE BASED ON CURRENT FACTS AND CIRCUMSTANCES. INTERE	ST AND	
PENALTIES ASSESSED BY INCOME TAXING AUTHORITIES, IF ANY, ARE	INCLUDED IN	
INTEREST EXPENSE.		

SCHEDULE (Form 990)

Grants and Other Assistance to Organizations,

orm 990)	Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.	2022
epartment of the Treasury ternal Revenue Service	Attach to Form 990. Go to www.irs.gov/Form990 for the latest information.	Open to Public Inspection
ame of the organization		Employer identification number
	VISIT RAPID CITY	82-1020421
Part General	Part I General Information on Grants and Assistance	
1 Does the organi	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	criteria used to award the grants or assistance?	X Yes No

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

Name of the organization

Parti

Department of the Treasury Internal Revenue Service

PartII	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.	Domestic Organiz 35,000. Part II can	ations and Domestic be duplicated if additio	Governments. Con nal space is neede	omplete if the orga	nization answered "Y	es" on Form 990, Part	IV, line 21, for any
1 (a)	1 (a) Name and address of organization or government	(9) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
LAKOTA NATI PO BOX 3140 RAPID CITY,	LAKOTA NATION INVITATIONAL PO BOX 3140 RAPID CITY, SD 57709	46-1310975	TVOG	7,600.	.0			SPONSORSHIP OF LNI TOURNAMENT
MAIN STREET 512 MAIN ST RAPID CITY,	MAIN STREET SQUARE INC 512 MAIN STREET RAPID CITY, SD 57701	27-3983146	501C3	.005,6	.0			PARTNERS IN PROGRESS
2 Ente	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table	nd government org s listed in the line 1	janizations listed in the table	line 1 table				2.
LHA Fo	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instructi	ons for Form 990.					Schedule I (Form 990) 2022

Schedule I (Form 990) 2022 VISIT RAPID CITY

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
			14		
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	luired in Part I, line	e 2; Part III, column	(b); and any other ad	ditional information.	
IZATIONS		APPLICATIONS T	TO VISIT RA	RAPID CITY.	
VISIT RAPID CITY REVIEWS THE APPLIC	APPLICATIONS A	AND SELECTS	SELECTS ORGANIZATIONS	IONS BASED	
ON THE MERIT OF THEIR PROJECT/PROGRAM. VISIT RAPID	RAM. VISI		CITY MAINTAINS	NS RECORDS	
TO SUBSTANTIATE THE GRANT/SPONSORSHIP	HIP AWARDS	S.			

SCHEDULE J (Form 990)

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 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

VISIT RAPID CITY

Part I Questions Regarding Compensation

Employer identification number 82-1020421

			Yes	No
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.			
	First-class or charter travel			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account 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	1b		
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?	2		
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.			
	Compensation committee X Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X 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:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	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:			
а	The organization?	5a		
	Any related organization?	5b		
	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:			
а	The organization?	6a		
b	Any related organization?	6b		
	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	7		
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	8		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation	-2 and/or 1099-MISC compensation	and/or 1099-NEC	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) BROOK KAUFMAN	(5)	164,083.	0	0.	0	157.	164,240.	0
PRESIDENT	(ii)	0.	0	0.	0.	0.	0	0
5	(i)							
	€							
	(i)							
								
	(E)							
								
	Θ							
	(ii)							
	(i)							
	€							
	(i)							
	(ii)							
	(i)							
	(ii)							
	Θ							
	(ii)							
	Ξ							
	⊞							
	Ξ							
	(ii)							
	Ξ							
	▣							
	Ξ							
	<u> </u>							
	Ξ							
	▣							
	Ξ							
	⊞							
	Ξ							
	▤							

Schedule J (Form 990) 2022

	Ĕ.
	matic
	l infor
	litiona
	y add
	for an
	part
	e this
	mplet
	၁၁ ၁၁
	t II. Al
	or Parl
	and fo
	d 8, 8
	, 7, ar
	a, 6b,
	5b, 6
	.c, 5a,
	4b, 4
	3, 4a,
	a, 1b,
	nes 1a
	art I, li
	for Pa
	uired
	ıs req
	riptior
	descrip
tion	on, or (
orma	lanati
al Inf	dxə 'ر
ment	nation
alddn	inform
2	le the
Part III	Provid

PART I, LINE 3:	THE EXECUTIVE COMMITTEE WORKED WITH A THIRD PARTY RECRUITER TO DETERMINE A	FAIR AND COMPETITIVE COMPENSATION PACKAGE.									Schedule J (Form 990) 2022
PART I, I	THE EXECU	FAIR AND									

SCHEDULE 0 (Form 990)

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 Form 990-EZ.

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

OMB No. 1545-0047 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

VISIT RAPID CITY

Employer identification number 82-1020421

VIII 11111 VIII 1
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
GROWTH TO ENHANCE THE AREA FOR VISITORS AND RESIDENTS.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THE PURPOSE OF THESE ACTIVITIES IS TO PROMOTE RAPID CITY AS A PLACE
WHERE PEOPLE WANT TO VISIT AND AFTER THE VISIT, A PLACE WHERE PEOPLE
WANT TO LIVE AND WORK.
FORM 990, PART VI, SECTION B, LINE 11B:
THE ORGANIZATION'S MANAGEMENT REVIEWS THE 990. THE 990 IS PRESENTED TO THE
BOARD AT A REGULAR MEETING FOR REVIEW AND APPROVAL PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 12C:
OFFICERS AND DIRECTORS ARE REQUIRED TO DISCLOSE TO THE BOARD OF DIRECTORS
ANY FINANCIAL OR PERSONAL INTEREST IN ANY MATTER COMING BEFORE THE BOARD.
THIS PRECLUDES THEM FROM VOTING OR LOBBYING ON ANY SUCH MATTERS. THE POLICY
IS SET FORTH IN ARTICLE 7 OF THE ORGANIZATION'S BYLAWS. DISCLOSURES ARE
RECORDED IN THE MINUTES OF THE BOARD OF DIRECTORS MEETINGS.
FORM 990, PART VI, SECTION B, LINE 15:
COMPENSATION ARRANGEMENTS WILL BE DETERMINED BASED ON INFORMATION ABOUT
COMPENSATION PAID BY SIMILARLY SITUATED TAXABLE OR TAX-EXEMPT ORGANIZATIONS
FOR SIMILAR SERVICES. THE INFORMATION AND SOURCES RELIED UPON TO BASE
DECISIONS ABOUT COMPENSATION WILL BE RECORDED IN WRITING AS WILL DECISIONS
MADE BY THE DIRECTORS WHO DECIDED ON OR VOTED ON COMPENSATION ARRANGEMENTS.

2022 DEPRECIATION AND AMORTIZATION REPORT

Ending Accumulated Depreciation			ALC MALE	5 d 400 d 2 5 0	S. State Land	
Current Year Deduction						
Current Sec 179 Expense						
Beginning Accumulated Depreciation						
Basis For Depreciation					1000155	
Reduction In Basis						
Section 179 Expense						
Bus % Excl		#				
Unadjusted Cost Or Basis						
Ooc>						
Life						
Method		745 (U.S. 22.5)				
Date Acquired						1-12-15-12-10
Description						
Asset No.						