The Sanford Health 990 is part of a larger group return encompassing 20 different tax entities. As a result, the 990 document is almost 300 pages in length and is not distributed with grant applications.

However, if a funder requests a copy, we would be happy to share the document via email.

Thank you for understanding.
Change of Accounting Period, Extended to November 15, 2019
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.

A For the 2018 calendar year, or tax year beginning JUL 1, 2018 and ending DEC 31, 2018

B Check if applicable:

C Name of organization
Sanford Group Return

D Employer identification number
45-3791176

E Telephone number
605-333-1000

F Name and address of principal officer:
Kelby Krabbenhoft
2301 East 60th St, Sioux Falls, SD 57104

G Gross receipts
2,104,154,676

H(a) Is this a group return for subordinates? X Yes □ No
H(b) Are all subordinates included? X Yes □ No

I Tax-exempt status: □ 501(c)(3) X 501(c) ( ) (insert no.) □ 4947(a)(1) or □ 527

J Website: □ www.sanfordhealth.org □

K Form of organization: □ Corporation □ Trust □ Association □ Other □

L Year of formation: M State of legal domicile:

Part I Summary

1 Briefly describe the organization’s mission or most significant activities: “Dedicated to the Work of Health and Healing”

2 Check this box □ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)

4 Number of independent voting members of the governing body (Part VI, line 1b)

5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)

6 Total number of volunteers (estimate if necessary)

7a Total unrelated business revenue from Part VIII, column (C), line 12

7b Net unrelated business taxable income from Form 990-T, line 38

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)

16a Professional fundraising fees (Part IX, column (A), line 11a)

17b Total fundraising expenses (Part IX, column (D), line 25)

18 Other expenses (Part IX, column (A), lines 11a-11d, 11f24e)

19 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances. Subtract line 21 from line 20

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature of officer
Bill Marlette, Treasurer

Date
11/2/19

Type of print name and title

Print/Type preparer’s name
Chris Weiskirchen

Preparer’s signature

Date
11/6/19

Check □ self-employed

PTIN
01314196

Preparer’s name
Deloitte Tax LLP

Firm’s EIN
86-1865772

Use Only
Firm’s address
50 South Sixth Street, Suite 2800
Minneapolis, MN 55402

Phone no. 612-397-4000

May the IRS discuss this return with the preparer shown above? (see instructions) X Yes □ No

Form 990 (2018)