

5) Investment Income

Partners in Education Tax Credit Program Scholarship Granting Organization Excess Contributions Calculation Form Division of Insurance 124 South Euclid Avenue, 2nd Floor Pierre, SD 57501 605.773.3563

SGOID#:
Date Rec'd:
Rec'd/Rcrd by:
For SD DOI use only

Section I: Scholarship Granting Organization Information:

Schol	arship Granting Organization Name	nting Organization Name SGO Identification #			
<u>Sectio</u>	n II: Summary of Contributions and Scholarships Awarded for Fis	scal Year (f	rom	to	<u> </u>
	Partners in Education Scholarships awarded by this organization wer nools pursuant to the requirements/parameters outlined in SDCL Chap		nts atten	ding qua	ılifying
summ	ete Calculating Excess Program Contributions Worksheet - work ary below are listed. If multiple worksheets have been completed aggregate total for the cell reference.				
	otals on this form or accompanying worksheet do not agree to those si ents, attach reconciliation.	hown on the SGO	audited	financial	
Pai	rt A. Educational Scholarship Contributions Received from Insu	<u>ırance Companie</u>	<u>es:</u>		Cell Ref.
1)	Total number (#) of contributions to SGO received from all insurance	e companies	0		Column A
2)	Total amount (\$) of contributions received by organization received for companies	from insurance	\$ 0		(C21)
3)	Total number (#) of contributions to SGO received from insurance conseeking tax credit	ompanies	0		(B22)
4)	Total amount (\$) of contributions to SGO received from insurance conseeking tax credit	ompanies	\$ 0		(C22)
Pai	rt B. <u>Educational Scholarships Awarded to Eligible Students:</u>				
1)	Total amount (\$) of Partners in Education Tax Credit Program scholars to all eligible students	arships awarded	\$ 0		(D24)
<u>Sectio</u>	n III: Scholarship Granting Organization Excess Contributions:				
	rsuant to 13-65-4 (7) – Carry forward to the next fiscal year no mo				
contributions in the educational scholarship fund account from the fiscal year in which the 1) Total amount (\$) of Partners in Education Tax Credit Program scholarship contributions to SGO by insurance companies seeking tax credit				were re 0	(C22)
Less: Total amount (\$) of scholarships awarded from contributions from insurance companies seeking tax credit		\$	0	(D24)	
	 a. Equals excess contributions not awarded as scholarships subject restriction 	ct to carry-over	\$	0.00	
	b. 25% of line 1, carry-over allowed pursuant to SDCL 13-65-4 (7)		\$	0.00	
co	rsuant to 13-65-4 (6) - Ensure that at least ninety percent of its re ntributions and all revenue from interest or investments is spent	on educational s	scholars		
	Total amount (\$) of Partners in Education Tax Credit Program scholars SGO by insurance companies seeking tax credit (as reported in Sectic			0	(C22)
4) (Calculation of 90% of contributions received from insurance companie	e seeking tay cre	dit \$	0.00	

\$0

Tota	al of line 4 plus line 5	\$ 0.00	
6) Carryover from previous year required to be spent in calendar year		\$	
 Total amount (\$) of scholarships awarded from contributions from insurance seeking tax credit (as reported in Section III, line 2) 	ance companies	\$ 0	
8) Preliminary carry-over calculation (line 4 plus line 5 plus line 6 less line	7)	\$ 0.00	
9) Carry-over allowed (line 2b above)		\$ 0.00	
10) Is the preliminary carry-over calculation greater than the carry-over all	owed amount?	☐ Yes	☐ No
If yes, the difference must be remitted to the South Dakota Division of funds to the Division may disqualify the organization from participation tax credits may be disallowed to insurance companies seeking tax credits with the Voucher to remit funds available at bottom	on in the Program ar redit.		
If the totals on this form or the accompanying worksheet do not agre financial statements, attach reconciliation.	e to those shown on	the SGO a	udited
Section IV: Scholarship Granting Organization Affirmations:			
I affirm, on behalf of the organization as its authorized representative that the Contribution Filing and any supporting documentation true and correct representative previous fiscal year.			
Signature of Authorized Representative of Scholarship Granting Organization	Date		
Printed Name of Authorized Representative	_		
Completed form and accompanying Calculating Excess Contributions w Division by email to SDInsuranceTaxCredit@state.sd.us . Remittance of excess contributions should be completed with the vouch payable to the South Dakota Division of Insurance			
DO NOT SUBMIT THIS VOUCHER UNLESS EXCESS CONTRIB	UTION REMITTAN	CE IS RE	QUIRED
DETACH FROM UPPER PORTION BEFORE I	MAILING 🛼		
In accordance with the Partners in Education Program, no more than 25% of revenue to companies seeking a tax credit can be carried forward to the organization's next fiscal South Dakota Division of Insurance.			
Scholarship Granting Organization:	SGO Identification #		
Address:	Phone:		
City, State Zip	Email:		
Amount Remitted: \$			
For excess contributions subject to carry-over restriction for fiscal	(to)
year Mail voucher and check payable to the South Dakota Division of Insurance to: South Dakota Division of Insurance Partners in Education Program 124 South Euclid Avenue, 2 nd Floor Pierre, SD 57501	` <u></u>		



Partners in Education Tax Credit Program Scholarship Granting Organization Excess Contributions Calculation Form Instructions

A scholarship granting organization ("SGO") participating in the Partners in Education Tax Credit Program ("Program") cannot carry forward more than 25% of its revenue from program contributions from the fiscal year in which they were received to the next fiscal year. Contributions that cannot be carried forward must be remitted to the South Dakota Division of Insurance ("Division"). If the totals reflected on this form or accompanying worksheet do not agree to those shown on the SGO audited financial statements, reconciliation must be attached.

Section I: Scholarship Granting Organization Information

- ⇒ Enter SGO Name
- ⇒ Enter SGO Identification Number assigned by the Division

Section II: Summary of Contributions and Scholarships Awarded for Fiscal Year

- ⇒ Enter fiscal year for form completion
- ⇒ Enter starting and ending month for fiscal year
- ⇒ Check to confirm that scholarships awarded were within the Program guidelines and requirements.

Use the Calculating Excess Contributions Worksheet to complete the information below. Column references are highlighted on worksheet; row references are indicated on right and left side of worksheet. If multiple worksheets are completed to accommodate all contribution detail listings, please list the aggregate total for cell referenced in this area.

If the totals on this form or the accompanying worksheet do not agree to those shown on the SGO audited financial statements, attach reconciliation.

Part A. Educational Scholarship Contributions Received from Insurance Companies:

- ⇒ Enter number (#) shown in column A associated with final insurance company listing (The worksheet allows for 20 entries. If an SGO has more than 20 to report, additional worksheets should be completed as needed.)
- ⇒ Total amount (\$) of contributions received from all insurance companies
- ⇒ Total number (#) of contributions from insurance companies seeking tax credit
- ⇒ Total amount (\$) of contributions from insurance companies seeking tax credit

Part B. Educational Scholarships Awarded to Eligible Students:

⇒ Total amount (\$) of Program scholarships awarded

Section III: Scholarship Granting Organization Excess Contributions:

- ⇒ Total amount (\$) of Program scholarships contributions received by the SGO from insurance companies seeking tax credit
- ⇒ Total amount (\$) of Program scholarships awarded from contributions received from insurance companies seeking tax credit
- ⇒ (a) Calculation of excess contributions not awarded subject to carry-over restriction
- ⇒ (b) Calculation of 25% carry-over allowed pursuant to SDCL 13-65-4 (7)
- ⇒ Total amount (\$) of Program scholarships contributions received by the SGO from insurance companies seeking tax credit
- ⇒ Calculation of 90% of contributions received from insurance companies seeking tax credit
- ⇒ Amount of Investment Income earned during fiscal year

- ⇒ Carry-over amount from previous year required to be spent
- ⇒ Total amount (\$) of Program scholarships awarded by the SGO from contributions received from insurance companies seeking tax credit
- ⇒ Preliminary carry-over calculation
- ⇒ Carry-over allowed
- ⇒ Indicate if preliminary carry-over calculation is greater than carry-over allowed

Section IV: Scholarship Granting Organization Affirmations:

⇒ Completed report must be signed and dated by authorized representative of SGO

Section V: Excess Contribution Remittance Voucher:

- ⇒ Business name of SGO
- ⇒ SGO identification number assigned by the Division
- ⇒ SGO business address (including city, state, zip)
- ⇒ SGO phone number
- ⇒ SGO email
- ⇒ Amount of excess contributions being remitted to the Division
- ⇒ Fiscal year for contributions being reported

Completed form and accompanying documentation must be submitted to the Division by email to SDInsuranceTaxCredit@state.sd.us.

If applicable, the voucher and check payable to the South Dakota Division of Insurance should be mailed to:

South Dakota Division of Insurance Partners in Education Program 124 South Euclid Avenue, 2nd Floor Pierre, SD 57501