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## Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

2008

Open to Public

Department of the Treasury Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

Inspection

Α	For the	2008 calendar year, or tax year beginning $ m JUL~01$ , 2008, and	l ending		JUN 3	0,2009
В	Check if	Please C Name of organization, number and street, city, town, state, and ZIP co	de D Em	ployer id	entification	number
	applicable Address ch	use IRS	1	41-	135607	2
Н		print or	E Tol	phone n		
Н	Name chan	ge   type   The below tookshirton		•		013
Ш	Initial return	Charte			<del>-</del> 279-9	
	Termination	Specific 130 W SUPERIOR ST SUITE 302	G Gros	is ipts	\$	150153.
	Amended re	hann	H(a)	Is this a	group return	1
П	Application	F Name and address of principal officer NEALE ROTH CHAIRMA	<b>—</b>	for affilia	-	Yes 🛛 No
ш	pending	130 W SUPERIOR DULUTH MN 55802				L C
_	<del></del>		— ⊓(b)	If "No", atta	ates included? ach a list	
느	rax-exen	npt status   X   501(c)( 3 ) ◀ (insert no )   4947(a)(1) or   527	_	(see instru	ctions)	∐ Yes ∐ No
J	Website:	▶ WWW.DEPOTFOUNDATION.ORG	H(c)	Group exe	mption number	
K	Type of orga	ınızatıon X Corporation   Trust   Association   Other ▶ L. Year o	f formation 1	.979	M State of leg	gal domicile MN
F	Part I	Summary				
	1 B	riefly describe the organization's mission or most significant activities				
	1	HE DEPOT FOUNDATION IS DEDICATED TO FURTHER	NC TIL	IE TO	ENTITY	OF THE
a)						
Governance		EPOT AS A VITAL AND THRIVING CULTURAL, ARTS,			TAGE C	ENTER
'n	T	HROUGH THE DISTRIBUTION OF ENDOWMENT FUND EA	ARNING	S		
ě	2 C	heck this box   If the organization discontinued its operations or disposed of more	than 25%	of its as:	sets	
တိ		umber of voting members of the governing body (Part VI, line 1a)			3	13
•ಶ	1		• • • • •		4	13
es		umber of independent voting members of the governing body (Part VI, line 1b)	•	• •	<del> </del>	
Ξ	5 To	otal number of employees (Part V, line 2a)	••		5	1
Activities &	6 To	otal number of volunteers (estimate if necessary)	•		6	20
⋖	7a To	otal gross unrelated business revenue from Part VIII, line 12, column (C)			7a	
	h N	et unrelated business taxable income from Form 990-T, line 34			7b	
	+	A difficultied beginned taxed in the first term of the first term	Prio	r Year		ırrent Year
		DECEIVED				
ē	1	ontributions and grants (Part VIII, line 1h)		7061	<i>'</i> -	<u> 151430.</u>
ĭ	9 Pi	ogram service revenue (Part VIII, line 2g)				
Revenue	10 In	vestment income (Part VIII, column (A), lines & 4, and Zd)	2	6135	0.	-8362.
œ	11 0	ther revenue (Part VIII, column (A), lines 5, 60 Bc, 9c, 10c, and 1 re)		660	7.	7085.
	1 10 T	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 15		3857		150153.
		rants and similar amounts paid (Part IX, column (A)) has 1 2 N. U.T	1	1210	4.	<u> 158625.</u>
	14 B	enefits paid to or for members (Part IX, column (A), line 4)				
Ø	15 S	alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1102	5.	18704.
Expenses	16a Pr	ofessional fundraising fees (Part IX, column (A), line 11e)		_		
ē	1	otal fundraising expenses, (Part IX, column (D), line 25) 22176.			-1	
ă	i i			5103	1	13606
		ther expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		-		43696.
	18 To	otal expenses - Add lines 13-17 (must equal Part IX, column (A), line 25)	1	7416	0.	221025.
	19 R	evenue less expenses Subtract line 18 from line 12	2	6441	4.	-70872.
	,		Beginnir	ng of Yea	r Er	nd of Year
Net Assets or	20 T	otal assets (Part X, line 16)		5819		4046640.
SSG	24 T	· · · · · · · · · · · · · · · · · · ·				
Net A	21 To	otal liabilities (Part X, line 26)		6204	<del></del>	213295.
		et assets or fund balances Subtract line 21 from line 20	46	9615	<u> </u>	<u>3833345.</u>
P	art II	Signature Block				
•		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and stater	nents, and to	the best of r	ny knowledge	
Á		and belief, it is rue carrect, and complete Declaration of preparer (other than officer) is based on all information of	which prepare	er has anv k	nowledge	
			,	•	·	_
o:				<i>[</i>	2-2-	- 09
Si	_					
He	ere	Signature of officer		Date	•	
5		NEALE ROTH CHAIRMAN				
7		Type or print name and title				
J Pa	id	Preparer's Date	Check if			ntifying number
<b>_</b>			self-		(see instruction	
<b>&gt;</b>	parer's		employed		P0010	
ეUs	e Only	Firms name (or yours and self-employed),  ANDERSON KUITI & ASUMA PLLC	EIN		27-04	
<u> </u>		address, and ZIP+4 5 N 3RD AV DULUTH MN 55802-1614	Pho	ne no 🕨	<u>218</u> -7	27-5066_
Ma	y the IRS	discuss this return with the preparer shown above? (See instructions)			X	Yes No
Fo	r Privacv	Act and Paperwork Reduction Act Notice, see the separate instructions.		117		orm <b>990</b> (2008)
	-	of form software each; 2009 Hayarasal Tay Systems less All proble recepted 115000664 Pay 1	- (	511	. · ·	(2000)

US990\$\$1

rai	Statement of Program 3	Service Accomplishments	(See instructions)	
1	Briefly describe the organization's r	mission		
•	THE FURTHERANCE OF	F THE IDENTITY OF	THE DEPOT AS A VIT	AL AND THRIVING
	CULTURAL, ARTS, A	ND HERITAGE CENTER	₹	
2	Did the organization undertake any	significant program services during	the year which were not listed on	
	the prior Form 990 or 990-EZ?			Yes 🔀 No
	If "Yes," describe these new service	es on Schedule O		
3			how it conducts any program service	es? X Yes No
	If "Yes," describe these changes or		, , , , , , , , , , , , , , , , , , , ,	
4			on's three largest program services b	v evnenses
•		<del>_</del>	rusts are required to report the amou	•
	allocations to others, the total expe			in or grants and
	allocations to others, the total expe	ilses, and revenue, il any, for each	program service reported	
40	(Code ) (Eypopson \$	169968. including gra	ints of \$ 158625.)(I	Pauanua C
4a	(Code ) (Expenses \$	109900. Including gra	130023.)(1	Revenue \$
	CDANT-MARING ACTIV	VITTES TO SUDDORT	THE IDENTITY OF TH	IE DEBOT AS A
	VITAL AND THRIVING	GULTURAL, ARIS,	AND HERITAGE CENTE	.R
			<del></del>	
				11
		<u></u>		
4b	(Code ) (Expenses \$	900 - including gra	ints of \$ ) (I	Revenue \$
	THE DEPOT FOUNDAT:	ION ARTS & CULTURE	AWARDS RECOGNIZE	
	MEMBERS OF THE COM	MMUNITY IN THE ARE	CAS OF THE ARTS, CU	LTURE
	AND HISTORICAL PRE	ESERVATION		
				· · · · · · · · · · · · · · · · · · ·
		· · · · · · · · · · · · · · · · · · ·	-	
40	(Code ) (Expenses \$	including gra	ints of \$	Revenue \$
4c	(Code ) (Expenses \$	including gra	) (i	Kevenue ψ
			<u> </u>	
		<del></del>		
		<del></del>		
				·
				· · · · · · · · · · · · · · · · · · ·
4d	Other program services (Describe	ın Schedule O )		
	(Expenses \$	including grants of \$	)(Revenue \$	)
4e	Total program service expenses \$		(Must equal Part IX, L	ine 25, column (B) )
	<del></del>			

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## 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?	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_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C,			
	Part II	4		×
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		L
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			
	Schedule D, Part I	6		×
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		-	
	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 Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, serve as a 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	Х	
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,			-
	Parts VI, VII, VIII, IX, or X as applicable	11	х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return			
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Х
ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	146		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		х
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17	-	Х
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18	_	Х
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	-	X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Х
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 on 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, questions 3, 4, or 5? 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 questions 24b-24d			
	and complete Schedule K. If "No," go to question 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	i	
c	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) and 501(c)(4) 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		Х
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified			
	person from a prior year? If "Yes," complete Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	230		^_
20	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		~
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or	26		<u>X</u> _
27	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		v
	Substantial commoutor, or to a person related to such an individual? If Tes, complete Schedule L, Falt III	27		(2009)

Form 990 (2008)

#### Part IV **Checklist of Required Schedules** (Continued) Yes No 28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV 28a b Have a family member who had a direct or indirect business relationship with the organization? If "Yes." complete Schedule L, Part IV 28b X c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV 28c Χ 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Х 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or gualified conservation contributions? If "Yes," complete Schedule M . . . 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. Part I 31 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 section 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, Parts II, III, IV, and V, line 1 Х 34 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes." complete 35 Х Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 Χ 36 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.

For	m 990 (2008) THE DEPOT FOUNDATION	11-13	560	72	Page 5
Pa	nt V Statements Regarding Other IRS Filings and Tax Compliance				
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		馬克拉		Salata i
	U.S. Information Returns. Enter -0- if not applicable	0 _			
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0		想 证证	新。 斯尔斯特。
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable				
	gaming (gambling) winnings to prize winners?		1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	1			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions	š)			的是
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by				will a
	this return?	• •	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority ov	er,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		X
þ	If "Yes," enter the name of the foreign country		THE PERSON		
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank				
	and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? .		5b		X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding		} }		
	Prohibited Tax Shelter Transaction?		5c		<b>ļ</b>
	Did the organization solicit any contributions that were not tax deductible?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or				
	gifts were not tax deductible?		6b	சிறு, <i>எ</i> ம்	PR 47 - 11 -
	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more		_		.,
	than \$75?	• •	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	••	7b		<del></del>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		_		
	required to file Form 8282?	-	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year				
е	Did the organization, during the year, 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?	•	7e 7f		X
T -	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	•	T = T		
9	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required		7g 7h	X	<del> </del>
h 8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and Section 509(a)(3)				
0	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, h	•			
	excess business holdings at any time during the year?		8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	•••		建建	
a	Did the organization make any taxable distribution under section 4966?		9a		Present H
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
	Section 501(c)(7) organizations.Enter		THE REAL PROPERTY.		
	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 10b				
	Section 501(c)(12) organizations.Enter		H. T.		
	Gross income from members or shareholders		於 於 所 能 所 定		
	Construction of the activities (Do not not execute due or need to other sources)		70	7.364 B	五位后,147.74

Form 990 (2008)

12a

against amounts due or received from them.) .. .... . ....

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

... 12b

Part VI Governance, Management, and Disclosure required by the Internal Revenue Code )

(Sections A, B, and C request information about policies not

Sect	tion A. Governing Body and Management					
				<del></del>	Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the				Tida	建树,
	circumstances, processes, or changes in Schedule O See instructions					
1a	Enter the number of voting members of the governing body		13			
b	Enter the number of voting members that are independent		13		4	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			30 20		内侧膜 1221年
	any other officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct	•				<del></del>
	supervision of officers, directors or trustees, or key employees to a management company or other person?			3		x
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed	12		4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	•	••	5		X
6	Does the organization have members or stockholders?	•	• •	6	Х	
7a	Does the organization have members, stockholders, or other persons who may elect one of more members	•	•	<u> </u>		
	of the governing body?			7a	х	
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	•		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		•	7.5	المرا العموريسيس	4 - T - 1-1
•	the year by the following?					马 智
а				القرائلية	ع <i>ل</i> قہ تعظر۔ ا	
h	Each committee with authority to act on behalf of the governing body?			8a	X	<del></del>
92	Does the organization have local chapters, branches, or affiliates?	•		8b	^	V
		-	٠	9a		X
D	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			٠. ا		1
40	affiliates, and branches to ensure their operations are consistent with those of the organization?			9b		<del>                                     </del>
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations					
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	••	٠	10	X	
77	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at		ĺ			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	<u>.                                    </u>		11		X
Sect	ion B. Policies				1	
120	Does the organization have a written conflict of interest policy? If "No", go to line 13		ı	40-	Yes	No
		• • • •	٠	12a	^-	
Ь	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?			401	. I	
_		•	••	12b	×	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			40-	, l	
42	describe in Schedule O how this is done		• •	12c	X	
	Does the organization have a written whistleblower policy?	•••		13		X
	Does the organization have a written document retention and destruction policy?	••	.	14		A Zuzen
15	Did the process for determining compensation of the following persons include a review and approval by					打造
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		ĺ			
	The organization's CEO, Executive Director, or top management official?	•		15a		<u> </u>
Ь	Other officers or key employees of the organization?		ļ	15b	X	
	Describe the process in Schedule O (see instructions)		į			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		Ì	e de la company		المن المنظمة على المنظمة المن المنظمة المنظمة المنظمة
	with a taxable entity during the year?		. [	16a		X
Ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			A STORY		ا جو ايسيانية ا العام سيفلساد
	the organization's exempt status with respect to such arrangements?			16b		
Sect	ion C. Disclosure					
17	List the States with which a copy of this Form 990 is required to be filed ▶ MN					
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only	)				
	available for public inspection. Indicate how you make these available. Check all that apply.					
	Own website Another's website Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes it governing documents, conflict of interest					
	policy, and financial statements available to the public.					
20	State the name, physical address, and telephone number of the person who possesses the books and records of the					
	organization ►MARLA THIBODEA 130 W SUPE DULUTH MN 55802 218-	-27	9-	991	3	

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## Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization'scurrent officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's fivecurrent highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization'sformer 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 List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons.

(A)	(B)								(E)	(F)
Name and Title	Average hours per week		nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
NEALE ROTH		İ								
CHAIR		X		Х				00	0	0
ROBERT WAHMAN										
VICE CHAIR		Х		X				0	0	0
DOLLY SCHNELL										
SECRETARY		Х		X				0	0	0
DAVID POLLARD										
TREASURER		Х		Х				0	0	0
CAROLINE BYE										
DIRECTOR		Х						0	0	0
RICHARD FISCHER						:			—	
DIRECTOR		Х						0	0	0
GARY HALGREN										
DIRECTOR		Х						0	0	0
SHERYL HOMAN										<del></del>
DIRECTOR		X						0	0	0
DEXTER LARSEN										
DIRECTOR		Х						0	0	0
JEAN OLSON										
DIRECTOR		х						0	0	0
KENNETH SCHOEN							_			
DIRECTOR		х						0	0	0
JAY STOFFEL										
DIRECTOR		x						0	0	0
THOMAS WHITTAKER										
DIRECTOR		x						0	0	0
				-						
				$\vdash$	Н		$\vdash$			
	<del> </del>									
				$\vdash$	$\vdash$		$\vdash$			

	Trustees,	rustees, Key Employees, and Highest Compensated Employeescontinued)							)	
(A)	(B)		Daarbaa (aba					(D)	(E)	(F)
Name and title	Average			1				1	Reportable	Estimated
	hours per week	Individual trustee or director	Insti	Officer	Key employee	Highest compensated employee	Former	compensation from	compensatio	
	WEEK	/idua	Institutional truste	ğ	E E	loye	ner	the	from related organization:	
		or tri	nal		호	ig Si		organization	(W-2/1099-MIS	
		uste	trus		ee	per		(W-2/1099-MISC)	,	organization
		e l	tee			Isat				and related
	_					<u> </u>				organizations
				-		<u>                                      </u>				
				-4						
				-						
·			-				$\neg$			
							l			
4b Tabel			3					0		
1b Total					tha		2.00		O ensation from th	0
organization►	s III Taj Wii	10 1606	iveu i	11016	ша	11 \$ 100	5,00	o in reportable comp	ensation nom til	e
										Yes No
3 Did the organization list anyformer officer,			-		•		hıgh	est compensated		
employee on line 1a? If "Yes," complete Se								· · · · · · · · · · · · · · · · · · ·		3 X
4 For any individual listed on line 1a, is the s										
the organization and related organizations	greater tha	ın ə iə	0,000	<i>,</i> 11	res	, com	piet	e Schedule J for suc	:n	. 4 X
5 Did any person listed on line 1a receive or	accrue cor	npens	ation :	from	any	unrei	 ated	organization for		
services rendered to the organization? If ")		•			•			•		. 5 X
Section B. Independent Contractors										
1 Complete this table for your five highest co	mpensated	d indep	pende	nt co	ontra	actors	that	received more than	\$100,000 of	
compensation from the organization (A)						—т		(B)		
Name and busines	s address							Description of s	ervices	(C) Compensation
NONE					_					Compensation
					-					
2 Total number of independent contractors (i	ncluding th	nse in	11 34/	10.70	CON	ed ma	re +	han \$100,000 in		
compensation from the organization ▶		.555 111	•, ••।	10	۱۷نۍ		(1	.a., \$100,000 III		الله الما الما الما الما الما الما الما

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		Statement of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a b c d e f	Federated campaigns  Membership dues  Fundraising events  Related organizations Government grants (contributions)  All other contributions, gifts,					
	g h	grants, and similar amounts not included above Noncash contributions included in lines 1a-1f  Total. Add lines 1a-1f	51430.	151430.			
Program Service Revenue	<sup>2a</sup> _		Business Code		The state of the s		A September 1
Iram Servic	c _ d _ e _	All other program service revenue					
Prog	g	Total. Add lines 2a-2f	▶				
	3 4 5	Investment income (including dividends, other similar amounts)	▶	145934.			145934.
	6a b	(i) Real ( Gross Rents. Less rental expenses Rental income	ii) Personal				
	d 7a	or (loss)  Net rental income or (loss)  Gross amount from sales of assets other than inventory  (i) Securities  656893.	▶ (II) Other				
	b	Less cost or other basis and sales expenses 811189.  Gain or (loss) -154296.		-154296.			-154538.
enne	d 8a	Net gain or (loss)					
Other Revenue	b c	See Part IV, line 18 a  Less direct expensesb  Net income or (loss) from fundraising ever	ents				
	9a b	Gross income from garning activities. See Part IV, line 19 . a Less direct expenses b					
	10a b	Net income or (loss) from gaming activities Gross sales of inventory, less returns and allowances	es •				
	С	Net income or (loss) from sales of invent	ory ▶				
		Miscellaneous Revenue	Business Code		The state of the s		1
	11a	CIRCLE OF FRIENDS	900099				6050.
	b	INVEST MGMT FEES	900099		<del> </del>		1019.
	C	MISC INCOME  All other revenue	900099	16.	<del> </del>		16.
	e 12	Total. Add lines 11a-11d  Total Revenue. Add lines 1h, 2g, 3, 4, 5,	<b>&gt;</b> 6d, 7d, 8c,	7085.			
BCA		9c, 10c, and 11e	▶	150153.	\$\$9 Rev 1	<u> </u>	-1519.

## Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

•	All other organizations must complete	column (A) but are no	ot required to complet	te columns (B), (C) an	d (D).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising
1	Grants and other assistance to governments and		CAPCIISCS	The search of th	expenses
•	organizations in the U.S. See Part IV, line 21	158625.	158625.		
2	Grants and other assistance to individuals in	130023.	130023.		
-	the U S See Part IV, line 22				
3	Grants and other assistance to governments,	· -			
3	organizations, and individuals outside the			Charles and an article of the second	
4	U S See Part IV, lines 15 and 16	·			
5	Compensation of current officers, directors,				
3					
6	trustees, and key employees	*		<del></del>	-
0	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	1.6015	0100		
7	Other salaries and wages	16215.	8108.	4054.	4053.
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	2489.	1245.	622.	622.
11	Fees for services (non-employees)				
а	Management				
b	Legal				
C	Accounting	11113.		11113.	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses	. 1990.	121.	810.	1059.
14	Information technology				
15	Royalties				
16	Occupancy	. 3600.		3600.	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates		-		
22	Depreciation, depletion, and amortization	5534.		5534.	
23	Insurance	1315.		1315.	
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together				The state of the s
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below )	All and the second of the seco			
а	DEVELOPMENT	10948.	246-79 . CH. ACO - 252 MAN, 271-11 St 127-5-5	ingles Meritik , Wall a bush which had I had a built facility in the	10948.
b	PRINTING/NEWSLETTERS	5261.			5261.
c	TELECOMMUNICATIONS	2336.	1869.	234.	233.
ď	ARTS & CULTURE AWARD	900.	900.	234.	۷۵۵۰
	MISCELLANEOUS	699.	500.	600	
e		699.		699.	
f ar	All other expenses	221005	170000	07001	
25	Total functional expenses.Add lines 1 through 24f	221025.	170868.	27981.	22176.
26	Joint Costs. Check here ▶ ☐ If following				
	SOP 98-2 Complete this line only if the org				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

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Part X Balance Sheet

				(A)			(B)	)	
				Beginning of year			End of	-	
	1	Cash - non-interest-bearing		2756.	1	<u> </u>		282	
	2	Savings and temporary cash investments		156961.	2			.038	
	3	Pledges and grants receivable, net		736.	3	<u></u>	4	220	)3.
	4	Accounts receivable, net			4			352	25.
	5	Receivables from current and former officers, directors, truste	ees, key						
		employees, or other related parties. Complete Part II of Sche	dule L .		5				
	6	Receivables from other disqualified persons (as defined under	er section			4- 31			100 TO
		4958(f)(1)) and persons described in section 4958(c)(3)(B) C	omplete					- 19 J	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1
		Part II of Schedule L			6				
g	7	Notes and loans receivable, net			7				
Assets	8	Inventories for sale or use		2293.	8			229	<del>9</del> 3.
ĕ	9	Prepaid expenses and deferred charges		883.	9			10	76.
	10a	Land, buildings, and equipment cost basis 10a	56698.		11111				عيد الآرات ما أو ياور
	ь	Less accumulated depreciation Complete					10.1		Tarrey Balanti ibi
	}	Part VI of Schedule D	27617.	34672.	10c			908	
	11	Investments - publicly traded securities		4741325.	11		394	204	40.
	12	Investments - other securities See Part IV, line 11			12	<del>                                     </del>			
	13	Investments - program-related See Part IV, line 11	_		13				
	14	Intangible assets	•	<del></del>	14				
	15	Other assets See Part IV, line 11		18573.	15	<del>                                     </del>	1	32:	ī 1 .
	16	Total assets. Add lines 1 through 15 (must equal line 34)		4958199.	16		404		
	17	Accounts payable and accrued expenses		1033.	17				29.
	18	Grants payable		5000.	18	-			
	19	Deferred revenue	• •	3000.	19	<del> </del>			
	20	Tax-exempt bond liabilities			20				
	21	Escrow account liability Complete Part IV of Schedule D		256014.	21	├	21	24	<del></del>
ies	22	Payables to current and former officers, directors, trustees, k			of the same				
Liabilities	22	employees, highest compensated employees, and disqualifie	•			a garar Haran		B.F.	
<u> </u>		persons Complete Part II of Schedule L	u	Maria Paris de America de la California	22			a Processing and Asia	jjir rikital.
_		•			23				
	23	Secured mortgages and notes payable to unrelated third part Unsecured notes and loans payable			24				
	24	Unsecured notes and loans payable  Other liabilities Complete Part X of Schedule D	, , ,	<u> </u>	25	<del> </del> -			
	25	•	• • • • • • • • • • • • • • • • • • • •	262047.	26		21	329	<u> </u>
	26	Total liabilities. Add lines 17 through 25					4 L	. J Z :	クリ・ 西田
		Organizations that follow SFAS 117, check here ► 🖺 ar	10				gioritado esta Agriculado —		
es		complete lines 27 through 29, and lines 33 and 34.		4567951.					o O
anc	27	Unrestricted net assets			27		373		
Bal	28	Temporarily restricted net assets		6292.	28			472	
Net Assets or Fund Balanc	29	Permanently restricted net assets	П	121909.		 ਦੁਆਰਥੀ ਦੁਸ਼	FINESE FINESE	724	1 L .
£		Organizations that do not follow SFAS 117, check here	Ц			T-V-1			ميا الآمالة أقد بن ع
ō		and complete lines 30 through 34.		The state of the s			tendelle manualis		
sets	30	Capital stock or trust principal, or current funds			30	<u> </u>			
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund			31				
<u>te</u>	32	Retained earnings, endowment, accumulated income, or other	er funds .	1606150	32				
~	33	Total net assets or fund balances		4696152.	33		383		
	34		<u> </u>	4958199.	34	l	404	664	<u> 10.</u>
Par	t XI	Financial Statements and Reporting		<del></del>					
				1		,		Yes	No
1	Acco	unting method used to prepare the Form 990.   Cash	X Accrual	Other		į	1		12.
2a		the organization's financial statements compiled or reviewed	•				2a	X	
b	Were	the organization's financial statements audited by an indepen	dent accountant?				2b	Х	
c	If "Ye	es" to lines 2a or 2b, does the organization have a committee t	hat assumes resp	onsibility for oversight of	the				
	audit	, review, or compilation of its financial statements and selection	n of an independe	nt accountant?			2c	Х	
3a	As a	result of a federal award, was the organization required to und	ergo an audit or a	udits as set forth in				T	
	the S	Single Audit Act and OMB Circular A-133?					3a	}	Х
b_	If "Ye	es," did the organization undergo the required audit or audits?	<u> </u>	<u> </u>	<u> </u>		3b		

#### SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

## **Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

► Attach to Form 990 or Form 990-EZ.

► See separate instructions.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization Employer identification number THE DEPOT FOUNDATION 41-1356072 **Reason for Public Charity Status** (All organizations must complete this part ) (see instructions) The organization is not a private foundation because it is (Please check online organization) A church, convention of churches, or association of churches described section 170(b)(1)(A)(i). 1 A school described insection 170(b)(1)(A)(ii). (Attach Schedule E) 2 3 A hospital or a cooperative hospital service organization described section 170(b)(1)(A)(iii) (Attach Schedule H) A medical research organization operated in conjunction with a hospital described section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete the Support Schedule in Part II ) A community trust described insection 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 Sesection 509(a)(2) (Complete Part III ) 10 An organization organized and operated exclusively to test for public safety. Seection 509(a)(4) (see instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) Section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h b Type II c | Type III - Functionally integrated d | Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box ..... ... ..... .. Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? q (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) Nο 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? ... 11g(iii) Provide the following information about the organizations the organization supports (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organ-(V) Did you (vi) Is the (vii) Amount of organization (described on lines 1-9 ization in col organization in notify the support above or IRC section (i) listed in your organization in col (i) (see instructions)) governing col (i) of your organized document? support? in the US? Yes No Yes No Yes No Total

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I)

Calendary year (or fiscal year beginning in)	Sec	tion A. Public Support			<del> </del>			
1 Gifts, grants, Contributions, and membership teles received (Do not include any "unusual grants"). 2 Tar revenues leved for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilines furnished by a governmental unit to the organization without charge. 4 Total, Add lines 1-3 5 The portion of total contributions by each person (other than a governmental unit to the organization without charge. 5 The portion of total contributions by each person (other than a governmental unit or publicity supported organization) miduled on line 1 that exceeds 2% of the amount a bown on line 11, column (f) 6 Different form of the services of the amount above on line 11, column (f) 7 Section B. Total Support Calendar year (or fiscal year beginning in) > Amounts from line 4. 8 Gross income from ine 4. 9 Amounts from line 4. 9 Amounts from line 4. 9 Amounts from line 4. 9 Organization from services and the services or securities and scale that is a service with the services or securities loans, rents, royaltes and income from similar sources. 9 Net income from included gain or line 1 to the services or securities loans, rents, royaltes and income from similar sources. 1 38 28 2. 9 Ret income from include gain or line 1 to the services or securities loans, rents, royaltes and income from similar sources. 1 132 5 6 23 8 5 4 6 60 7. 1 70 8 2 90 8 7. 1 Total support. Add lines 7 through 10. 1 Total support. Add lines 7 through 10. 1 Total support percentage for 2008 (line 6, column (f) divided by line 11, column (f) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
neduce any "unusual grants ")	1	Gifts, grants, contributions, and						
2 Tax revenues leved for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1-3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) immuded on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4  Section B. Total Support. Calendary year (or fiscal year beginning in) > (a) 2004 (b) 2005 (c) 2008 (d) 2007 (e) 2008 (f) Total Calendary year (or fiscal year beginning in) > (a) 2004 (b) 2005 (c) 2008 (d) 2007 (e) 2008 (f) Total Supports or form interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business as regularly carried on unrelated business as regularly carried on 138282 86210 157785 224305 145934 752516. 9 Net income from unrelated business as regularly carried on 138282 86210 157785 224305 145934 752516. 9 Net income from unrelated diseases activities, whether or not the business as regularly carried on 138282 86210 157785 224305 145934 752516. 9 Net income from unrelated diseases as a complete organization, check this box andictop here 15 First five years. If the Form 930 is for the organization fishs, second, third, fourth, or fifth tax year as a section 501(c)(s) organization, check this box andictop here 15 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f) 14 1.1.55 % 15.1.56 % or more, and if the organization meets the "facts-and-circumstances" test, check this box and top here. The organization meets the "facts-and-circumstances" test, check this box and top here. The organization meets the "facts-and-circumstances" test, check this box and top here. The organization meets the "facts-and-circumstances" test, check this box and the organization meets the "facts-and-circumstances" test, check this box		membership fees received (Do not						
benefit and ether paid to or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organization without charge  1 Total. Add lines 1-3.  1 The potion of total contributions by each person (other than a governmental unit or publicly supported organization) micluded on line 1 that exceeds 2% of the amount shown on line 11, column (i) column (i) column (i) column (i) column (i) column (ii) column (ii) column (ii) column (iii) column (iiii) column (iiii) column (iiii) column (iiiii) column (iiiii) column (iiiiii) column (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii		include any "unusual grants ")	103179.	164788.	144245.	170617.	151430.	734259.
st behalf  The value of services or facilities furnished by a governmental unit to the organization without charge  Total, Add lines 1-3  The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  Public support. Subtract line 5 from line 4  Public support Subtract line 5 from line 4  Rection B. Total Support  Calendar year (or fiscal year beginning in) > (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total calendar year (or fiscal year beginning in) > (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total calendar year (or fiscal year beginning in) > (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total calendar year (or fiscal year beginning in) > (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total calendar year (or fiscal year beginning in) > (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total calendar year (or fiscal year beginning in) > (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total calendar year (or fiscal year beginning in) > (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total calendar year (or fiscal year beginning in) > (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total calendar year (or fiscal year beginning in) > (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total calendar year (or fiscal year year year year year year year year	2	Tax revenues levied for the organization's		-		-		
3 The value of services or facilities furnished by a governmental unit to the organization without charge.  4 Total Add lines 1-3.  5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).  6 Public support. Subtract line 5 from line 4.  Section B. Total Support.  Calendar year (or fiscal year beginning in)   7 Amounts from line 4.  6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.  9 Net income from unclated business activities, whether or not the business is regularly carned on.  10 Other income Do not include gain or loss from the sale of capital assets  (Explain in Part IV.)  17 Total support ded income from 207 Schedule A, Part IV-A, line 26f  18 Public support percentage from 2007 Schedule A, Part IV-A, line 28f  19 Section C. Computation of Public Support Percentage  19 Value is upport tested activities, etc. (see instructions).  19 Public support percentage from 2007 Schedule A, Part IV-A, line 28f  19 Sa 33 1/3% support test-2008 (fit fit perganization of did not check he box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization multiplies as a publicly supported organization and stop here. The organization qualifies as a publicly supported organization and stop here. The organization qualifies as a publicly supported organization of the 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization in did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances' test, check this box asbet here Explain in Part IV how the organization meets the "facts-and-circumstances' test, theck this box asbet here Explain in Part IV how the organization meets the "facts-and-circumstances' test, theck this box asbet here Explain in Part IV how the organization meets the "facts-and-circu		benefit and either paid to or expended on						
furnished by a governmental unit to the organization without charge  1 Total. Add lines 1-3  The portion of fotal contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, included on line 1 that exceeds 2% of the amount shown on line 11, included on line 1 that exceeds 2% of the amount shown on line 11, including the support Subtract line 5 from line 4  8ection B. Total Support  Amounts from line 4.  103179. 164788. 144245. 170617. 151430. 734259. 175068. Section B. Total Support  2 Fublic support subtract line 5 from line 4  103179. 164788. 144245. 170617. 151430. 734259. 175068.		ıts behalf						
a Total Add lines 1-3  The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  Public support. Subtract line 5 from line 4  Bection B. Total Support  Calendar year (or fiscal year beginning in)    Amounts from line 4.  Gross income from unrelated business activities, whether or not the business is regularly carned on.  138282. 86210. 157785. 224305. 145934. 752516.  Posse roome From unrelated business activities, whether or not the business is regularly carned on.  138282. 86210. 157785. 224305. 145934. 752516.  159483    159494    159495    1595991     1595991     1595991     1595991     1595991     1595991     1595991     1595991     1595991     1595991     1595991     1595991     1595991     1595991     1595991     1595991     1595991      1595991      1595991      1595991      1595991      1595991	3	The value of services or facilities						
Total Add lines 1-3  The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  Public support. Subtract line 5 from line 4  Public support. Subtract line 5 from line 4  Rection B. Total Support  Calendar year (or fiscal year beginning in)  Amounts from line 4.  103179   164788   144245   170617   151430   734259    Rection B. Total Support subtract line 5 from line 4   103179   164788   144245   170617   151430   734259    Rection B. Total Support subtract line 5 from line 4   103179   164788   144245   170617   151430   734259    Rection B. Total Support subtract line 5 from line 4   103179   164788   144245   170617   151430   734259    Rection B. Total Support subtract line 5 from line 4   103179   164788   144245   170617   151430   734259    Rection B. Total Support and income from similar sources   138282   86210   157785   224305   145934   752516    Rection C. Computation of Public Support Percentage   1192   5629   8574   6607   7085   29087    Total support Add lines 7 through 10   55629   8574   6607   7085   29087    First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box andstop here   1192   1		furnished by a governmental unit to the						
The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)		organization without charge						
person (other than a governmental unit or publicly supported organization) included to line 1 that exceeds 2% of the amount shown on line 11, column (f)  Public support. Subtract line 5 from line 4  Public support. Add lines 7 through 10  Public support. Add lines 7 through 10  Public support. Subtract line 5 from line 4  Public support. Subtract line 5 from line 6  Public support. Subtract line 5 from line 13  Public support. Subtract line 5 from line 6  Public Support. Subtract line 5 from line 13  Public support. Subtract line 5 from line 13  Public support. Subtract line 5 from line 13  Public support. Subtract line 5 from line 14  Publ	4	Total. Add lines 1-3	103179.		144245.	170617.	151430.	734259.
or publicly supported organization) included on line of 1 that exceeds 2% of the amount shown on line 11, column (f)	5	The portion of total contributions by each						
included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 4 559191.    Public support. Subtract line 5 from line 4   Subtract line 5 from line 6   Subtract line		person (other than a governmental unit						
the amount shown on line 11, column (f)  Public support. Subtract line 5 from line 4  Section B. Total Support  Calendar year (or fiscal year beginning in)  A mounts from line 4		or publicly supported organization)						
Section B. Total Support  Calendar year (or fiscal year beginning in) ►  Amounts from line 4.		included on line 1 that exceeds 2% of						
Section B. Total Support  Calendar year (or fiscal year beginning in) ▶ (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total  7 Amounts from line 4		the amount shown on line 11,						
Section B. Total Support  Calendar year (or fiscal year beginning in)    Amounts from line 4		column (f)						559191.
Calendar year (or fiscal year beginning in)    A mounts from line 4.								175068.
Amounts from line 4. 103179 164788 144245 170617 151430 734259.  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. 138282 86210 157785 224305 145934 752516.  Net income from unrelated business activities, whether or not the business is regularly carried on. 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 1170ata support. Add lines 7 through 10 1192 5629 8574 6607 7085 29087.  Total support Add lines 7 through 10 1192 5629 8574 6607 7085 29087.  First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box andstop here.  Section C. Computation of Public Support Percentage  Section C. Computation of Public Support Percentage  4 Public support percentage from 2007 Schedule A, Part IV-A, line 26f 15 13.10 %  15 Public support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.  15 3 1/3% support test - 2008. If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and percentage for more, and if the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization qualifies as a pu	_							
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	Ca	lendar year (or fiscal year beginning in) ▶			` '	(d) 2007	(e) 2008	
payments received on securities loans, rents, royalties and income from similar sources	7		103179.	164788.	144245.	170617.	151430.	734259.
rents, royalties and income from similar sources	8	Gross income from interest, dividends,						
Sources		payments received on securities loans,						
9 Net income from unrelated business activities, whether or not the business is regularly carned on  10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  11 Total support. Add lines 7 through 10  12 Gross receipts from related activities, etc. (see instructions)  13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box andstop here.  Section C. Computation of Public Support Percentage  14 Public support percentage from 2007 Schedule A, Part IV-A, line 26f  15 J 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization  15 J 33 1/3% support test - 2007. If the organization did not check a box on line 13, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization  16 J 30 1/3% support test - 2007. If the organization did not check a box on line 13, 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization meets the "facts-and-circumstances" test, check this box astip here Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organ		rents, royalties and income from similar						
activities, whether or not the business is regularly carried on  10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)		sources	138282.	86210.	157785.	224305.	145934.	752516.
regularly carried on  10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  11 Total support. Add lines 7 through 10  12 Gross receipts from related activities, etc. (see instructions)	9	Net income from unrelated business						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)		activities, whether or not the business is						
loss from the sale of capital assets (Explain in Part IV.)  11 Total support. Add lines 7 through 10		regularly carried on						
(Explain in Part IV.)   1192.   5629.   8574.   6607.   7085.   29087.	10	Other income Do not include gain or						
Total support. Add lines 7 through 10		•				İ		
First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box andstop here  Section C. Computation of Public Support Percentage  Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))  Public support percentage from 2007 Schedule A, Part IV-A, line 26f  33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization  b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization  17a 10% facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box astbp here Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization  b 10% facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line  15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box astbp here  Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box astbp here  Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box astbp here  Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box astbp here  Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box astbp here  Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box astbp here  Explain in Part IV how the organization meets the "facts-and-circumstances" tes		· · · · · · · · · · · · · · · · · · ·		5629.	8574.	6607.		
First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)    Section C. Computation of Public Support Percentage	11	· · · · · · · · · · · · · · · · · · ·					<del></del>	1515862.
Section C. Computation of Public Support Percentage  14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	12	•						
Section C. Computation of Public Support Percentage  14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	13	-			•	year as a section	1 501(c)(3)	
Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	_					<u> </u>		<b>&gt;</b>
Public support percentage from 2007 Schedule A, Part IV-A, line 26f  15	_						<del></del>	
16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		· · · · · ·		-				
and stop here. The organization qualifies as a publicly supported organization							<del></del>	
b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	16a							х . п
and stop here. The organization qualifies as a publicly supported organization								·. • 📙
17a 10% facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box astbp here Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	D							is box
is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box astbp here Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization								▶ []
in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	17a		=			-		
b 10% facts-and-circumstances test - 2007.If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box astop here  Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization  Private foundation. If the organization did not check a box in line 13, 16a, 16b, 17a or 17b, check this box and see instructions							-	
b 10% facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box astbp here Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization  Private foundation. If the organization did not check a box in line 13, 16a, 16b, 17a or 17b, check this box and see instructions							сіу ѕирропеа	٠. 🗆
15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box astbp here  Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization								▶ 🗷
Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	þ		•		-			
supported organization		·				•		
Private foundation. If the organization did not check a box in line 13, 16a, 16b, 17a or 17b, check this box and see instructions					-	· ·	s a publicly	. 🗅
instructions	40	•						. ▶ ∐
	18	_				eck this box and	see	. □
		instructions	· · · ·	· ·· ·	··	r		- 000 EZ\ 2002

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

(Complete only if you checked the box on line 9 of Part I)

Sec	tion A. Public Support		/				
	lendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and	, , ,	(-/	(3/233	(4) 200.	(0) 2000	(1) ( ) ( )
	membership fees received (Do not					1	
	include any "unusual grants ")						
2	Gross receipts from admissions, merchan-						
	dise sold or services performed, or facilities		1			]	
	facilities furnished in any activity that is rela-		ļ				
	ted to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business						
	under section 513					:	
4	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						
	its behalf			·			
5	The value of services or facilities		İ				
	furnished by a governmental unit to the				i		
	organization without charge						
6	Total. Add lines 1-5						
7 a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of 1%						
	of the total of lines 9, 10c, 11, and 12						
	for the year or \$5,000						
_	Add lines 7a and 7b					noolika program, nortana, k si	
8	Public support (Subtract line 7c from line 6)			10-01-02-			
	tion B. Total Support	(=) 2004	(1) 2005	(-) 2000	4 11 0007		
Ga 9	lendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
_	Gross income from interest, dividends						
IVa	payments received on securities loans,			i			
	rents, royalties and income from similar		:				
	sources						
ь	Unrelated business taxable income (less						
•	section 511 taxes) from businesses	  -					
	acquired after June 30,1975						
С	Add lines 10a and 10b	**					
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on .						
12	Other income Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11 and 12)			<b>的特别是"意思"</b>	聖記法法法議		
14	First five years. If the Form 990 is for the orga	anization's first,	second, third, fo	urth, or fifth tax y	ear as a section	501(c)(3)	
_	organization, check this box andstop here			. <u> </u>	· · · · · · · · · · · · · · · · · · ·	<u> </u>	▶ □
Sec	tion C. Computation of Public Suppo	rt Percentag	e				
	Public support percentage for 2008 (line 8, co	• •	•			15	0.00 %
	Public support percentage from 2007 Schedu					16	0.00 %
<u>Sec</u>	tion D. Computation of Investment In	come Percer	ntage				
17	Investment income percentage fo/2008 (line 1)	Oc, column (f) dı	vided by line 13,	column (f))		17	0.00 %
18	Investment income percentage from 2007 Sche	edule A, Part IV-	A, line 27h			18	0.00 %
19a	33 1/3 % support tests - 2008. If the organizat	ion did not chec	k the box on line	14, and line 15	is more than 33	1/3 %, and line	17 is
	not more than 33 1/3 %, check this box and to	p here The org	anızatıon qualıfie	es as a publicly s	supported organ	zation .	▶ 🔲
b	33 1/3 % support tests - 2007. If the organizat						and line 18
	is not more than 33 1/3 %, check this box and						▶ ∐
20	Private foundation. If the organization did not	check a box on	line 14, 19a, or	19b. check this b	oox and see inst	ructions	. <b>▶</b>  x

THESE ORGANIZATIONS INCLUDE THE HISTORIC UNION DEPOT, ST LOUIS COUNTY HISTORCIAL SOCIETY, MINNESOTA BALLET, LAKE SUPERIOR RAILROAD MUSEUM, DULUTH-SUPERIOR SYMPHONY ORCHESTRA, MATINEE MUSICALE, DULUTH PLAYHOUSE,

		90-EZ) 2008 「	THE DEP	OT FOUNDAT	ION		41-1356072	Page 4
Part I\	Supple	mental Inforr	nation. Co	omplete this part to	provide the expla	nation required by F	Part II, line 10,	
_	Part II, lii	ne 17a or 17b, o	r Part III, line	12 Provide any other	er additional infor	mation (see instruc	tions)	
•								
PART	II LINE 1	17A CONT	INUED					
DULUI	TH ART INS	STITUTE,	DULUTH	CHILDRENS	MUSEUM,	AND ARROW	HEAD CHORALE	
							····	
		· · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·				
THE A	CTTVTTES	S OF THE	DEPOT	FOUNDATION	WTT.T. AP	PENT. TO DE	RSONS HAVING	
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DROAL	COMMON .	INTEREST	TN TUE	ARI, COLI	UKE, AND	HISTORY O	F NORTHEASTER	KIN
MINNE	SOTA				<del> </del>			
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#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

## Supplemental Financial Statements

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization **Employer identification number** THE DEPOT FOUNDATION 41-1356072 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Aggregate contributions to (during year) . Aggregate grants from (during year) . . . Aggregate value at end of year .... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?... No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to 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 pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space 2 Complete lines 2a-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 Year a Total number of conservation easements ..... 2b c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06 . . . . . . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) . . . In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1 a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, 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 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items b Assets included in Form 990, Part X . . . .

Par	t III. Organiz	_	Collections of Art, I	Historical Treasures	s, or Other Similar A	ssets		
3		<del></del>	ecords, check any of the	following that are a sign	nificant use of its collection	on items (	heck al	l that
	apply)		•	J		(		
а	Public exhibition			d Loan or exchange	ge programs			
b	Scholarly research	h		e Other				
С	Preservation for fu	uture generations						
4	Provide a description	of the organization's coll	ections and explain how	they further the organiza	ation's exempt purpose ir	Part XIV		
5	During the year, did th	ne organization solicit or	receive donations of art,	historical treasures, or o	ther similar assets to be	sold_	_	_
		nan to be maintained as	part of the organization's	collection?	<u> </u>	_ Y	es	No
Par			al Arrangements.	Complete if organizati	on answered "Yes" to F	orm 990, I	art IV,	line 9,
		d an amount on Form 99						
1a	-		n or other intermediary fo			_	_	٦ .
	on Form 990, Part X?					∐ Y	es 🛚	∐ No
Ь	If "Yes," explain the ai	rrangement in Part XIV a	and complete the followin	g table	<del></del>			
	_					Ar	nount	
	Beginning balance .				1c			
	Additions during the year				<u>1d</u>			
е	•	e year			1e			
f	•			•	[1f]		<del></del> -	
	<u>-</u>		m 990, Part X, line 21?.			X	es _	」No
	b If "Yes," explain the arrangement in Part XIV							
Par	Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10  (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back							
	<b>5</b>	(a) Current year	(b) Prior year	(c) Two years back	d) Three years back	(e) Fou	r years	back
та	Beginning of year	120 201						
	balance	128,201.						
	Contributions	<u> </u>				The factor of the Co	Geralia. Calendaria	i dei
С	Investment earnings	(20.726.)						
	or losses	(20,736.)						Fig. 18 July 19 19 19 19 19 19 19 19 19 19 19 19 19
	Grants or scholarships	3,500.					変数 ニカー	
е	Other expenditures							
	for facilities and							
	programs	<u> </u>					BETWEET T	1937—19 1944 (1)
T	Administrative							<b>抗胶管</b>
	expenses	101,965.					HERETE T	
g	End of year balance.	<u> </u>			中國"中華國門" 建二氢四氢	地區等特別	\$5 E-12, 12	*65755
2		percentage of the year						
a		uasi-endowment ▶ 0	.00 %					
	Permanent endowmer							
	Term endowment ▶_		6 46				1	T
3 <b>a</b>		*	ion of the organization th		•	· —	Yes	No X
	(i) unrelated organiza			•••		. 3a		$\frac{1}{x}$
	(ii) related organization					3a(		<del>  ^</del>
		=	organization's endowmer		•• •	[3]	<u>'                                    </u>	
4 Par		ents-Land, Building		See Form 990, Part	Y line 10			
r ar	Description of		(a) Cost or other	(b) Cost or other	(c) Depreciation	(d) F	look vali	
	Description of	nivestinent	basis (investment)	basis (other)	(c) Depreciation	(4)	OOK Vali	ue
12	Land		Jaco (myesiment)	223.3 (011101)	   1987年			
	Buildings			<del></del>	The state of the s			
			13,025.	<del>'</del>	960.	1	2,06	55
	Leasehold improveme		43,673.		26,657.		7,01	
	Other		33,073.	<del></del>	20,037.		,,01	· • •
		<del></del>	m 990, Part X, column (I	B) line 10(c) )	. •	2	9,08	1
rotal	. Aud intes 18-18. (COIL	anni (u) should equal For	m Jao, Fait A, Column (I	<i>Dj</i> , mie 10( <i>Cj</i> )		lule D (Fo		
					Sched	iale D (FO	111 330)	2000

Part VII	Investments-Other Securities. See For	m 990, Part X, line 12	
	(a) Description of security or category	(b) Book value	(c) Method of valuation
	(including name of security)		Cost or end-of-year market value
	vatives and other financial products		
	equity interests		
Other			
	· · · · · · · · · · · · · · · · · · ·		
	ın (b) should equal Form 990, Part X, col. (B) line 12.)▶		
Part VIII		rm 990, Part X, line 13	
	(a) Description of investment type	(b) Book value	(c) Method of valuation
			Cost or end-of-year market value
	in (b) should equal Form 990, Part X, col. (B) line 13.)▶		
Part IX	Other Assets. See Form 990, Part X, line 15		
	(a) Description	on	(b) Book value
ACCROEL	INVESTMENT INCOME		13,211.
	n (b) should equal Form 990, Part X, col (B) line 15).		13,211.
Part X	Other Liabilities. See Form 990, Part X, line		
E to allege	(a) Description of Liability	(b) Amount	
Federal Incon	ne Taxes	···· · · · · · · · · · · · · · · · · ·	
Total. Column	n (b) should equal Form 990, Part X, col. (B) line 25 ) ▶		The state of the s
		cial statements that rep	ports the organization's liability for uncertain tax positions

Rev 1

under FIN 48

THOSE OF THE DEPOT FOUNDATION TO ACHIEVE A GREATER ECONOMY OF SCALE

AND LEVEL OF DIVERSIFICATION THAN IS POSSIBLE ALONE

TO ACHIEVE THIS GOAL, THE INVESTMENT PORTFOLIO IS INTERMINGLED WITH

EACH INVESTING ORGANIZATION AND THE DEPOT FOUNDATION OWNING A PORTION

OF THE INVESTED FUNDS

Schedule D (Form 990) 2008 THE DEPOT FOUNDATION  Part XIV Supplemental Information (continued)	41-1356072	Page 5
FOR ACCOUNTING PURPOSES THEREFORE 100% OF THE INVESTMENT	S ARE RECORDE	D
AS ASSETS WITH A CORRESPONDING LIABILITY FOR THE AMOUNT	INVESTED ON	
BEHALF OF THE PARTICIPATING ORGANIZATIONS		
PART V, LINE 4, ENDOWMENT FUNDS		
THE PRINDLE/WOOD FAMILY MEMORIAL ENDOWMENT IS A PERMANEN	T ENDOWMENT	
WHOSE INCOME MAY BE USED FOR THE FUNDING OF ARTISTIC PER	FORMANCE AND	
PRESENTATION INCLUDING BALLET, DANCE, DRAMA, THEATRICAL,	SYMPHONIC AN	D
CHORAL MUSIC AND THE VISUAL ARTS, ARTS AND CULTURAL EDUC	ATIONAL	
PROGRAMMING, CULTURAL PRESERVATION AND INTERPRETATION, H	ISTORIC	<del></del>
PRESERVATION AND INTERPRETATION, OR SUPPORT OF EMERGING	ARTISTS	
		· -
PART XI, LINE 8, OTHER		
DONATED USE OF FACILITIES -17,300		
DEPRECIATION ON CAPITALIZED DONATED SERVICES -57		
PART XIII, LINE 2D, OTHER		· · ·
DEPRECIATION ON CAPITALIZED DONATED SERVICES -57		
	<del></del>	
		<del></del>
		<del></del>
	<del></del>	

# SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.

► Complete if the organization answered "Yes," of Form 990, Part IV, lines 21 or 22. ▶ Attach to Form 990.

OMB No 1545-0047

2008 Open to Public Inspection

of the organiz						Employer id	Employer identification number
THE DEPOT FOUNDATION	n On Grants and	d Accietance				41-1356072	6072
oes th	ecords to substantia	ate the amount of the ors	or assistance the or	rantees' eliminity for the	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria	the selection criteria	
used to award the grants or assistance?	stance?						X Yes No
scrib	ion's procedures for	r monitoring the use of g	rant funds in the United S	States			]
Partile—Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered ``Yes'' on Form 990. Part IV. line 21. for any recipient that received more than \$5,000. Check this hox if no one recipient received more	Assistance to G V. line 21. for a	Sovernments and O	Irganizations in the	United States. Con \$5,000, Check this I	nplete if the organiz	tation answered ``Y	'es"
than \$5,000. Use Part IV and Schedule I-1 (Form	art IV and Sche	dule I-1 (Form 990)	990) if additional space is needed	e is needed			<b>▲</b>
1 (a) Name and address of	(p) EIN	(c) IRC	(d) Amount of cash	(d) Amount of cash (e) Amount of non-cash (f) Method of valuation	(f) Method of valuation	(g) Description of	(h) Purpose of grant
organization or government		section	grant	assistance	(book, FMV, appraisal,	non-cash assistance	or assistance .
		ıf applıcable			other)		
DULUTH ART INSTITUTE	TE	0	0				
M ONGOOTING	41-0740449	JUTCS	43,000.				PKOGKAMS .
CHILDNENS	41-0718361	50103	13,373.				PROGRAMS
DULUTH PLAYHOUSE							
Н	41-0694692	501C3	57,408.				PROGRAMS
LAKE SUPERIOR RAIL ROAD	OAD						
DULUTH 2	23-7312204	501C3	13,360.				PROGRAMS
MINNESOTA BALLET							
DULUTH 4	41-6055588	501C3	10,343.				PROGRAMS
ST LOUIS COUNTY HIST	HISTORICAL SOCIETY	IETY					
DULUTH 4	41-0773781	501C3	14,725.				PROGRAMS
ARROWHEAD CHORALE							
DULUTH 4	41-1733559	501C3	410.				PROGRAMS
	-						
	-				•		
	I(c)(3) and governm	nent organizations	:			<b>A</b>	7
3 Enter total number of other organizations	izations					•	
For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	ction Act Notice, se	99 the Instructions for F	orm 990.			Schedu	Schedule I (Form 990) 2008

US9901\$1

Page 2 (f) Description of non-cash assistance Schedule I (Form 990) 2008 Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, BE (e) Method of valuation (book, FMV, appraisal, ADDITIONALLY, BASED ON THE NATURE OF INDIVIDUAL GRANTS, AWARDS MAY SOMETIMES DISBURSED ONLY AFTER COMPLETION OF THE PROJECT AND RECEIVING A FINAL GRANT Þ REPORT OR A PARTIAL DISTRIBUTION OF THE AWARD MAY OCCUR AFTER RECEIVING 41-1356072 THE DEPOT FOUNDATION REQUIRES A FINAL GRANT REPORT FOR ALL GRANTS (d) Amount of assistance non-cash (c) Amount of cash grant line 22. Use Schedule I-1 (Form 990) if additional space is needed. THE DEPOT FOUNDATION (b) Number of recipients PROGRESS REPORT FROM THE RECIPIENT LINE 2, MONITORING (a) Type of grant or assistance Schedule i (Form 990) 2008 PART I, Part IV Part III

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## SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047 2008 Open to Public

Inspection

Name of the organization Employer identification number THE DEPOT FOUNDATION 41-1356072 PAGE 2, III-3, LN 3, SIGNIFICANT CHANGES TO PROGRAM SERVICES EFFECTIVE SEPTEMBER 17, 2008, THE ORGANIZATION AMENDED ITS MISSION STATEMENT AND NARROWED ITS FOCUS FROM THE PRESERVATION AND PRESENTATION OF THE ARTS, CULTURE, AND HISTORY OF THE REGION OF NORTHEAST MINNESOTA TO THE FURTHERANCE OF THE IDENTITY OF THE DEPOT BUILDING AS A VITAL AND THRIVING CULTURAL, ARTS, AND HERITAGE CENTER AT THE SAME TIME GRANT GUIDELINES WERE REVISED TO REQUIRE THAT ALL UNDESIGNATED FUND GRANTS MUST NOW BE FOR PROJECTS LOCATED OR CONDUCTED IN THE DEPOT AND ALSO BE PROJECTS THAT INCREASE PATRONAGE FOR THE DEPOT BUILDING PAGE 6, VI-A, LN 6 MEMBERS THE MEMBERSHIP OF THE ORGANIZATION CONSISTS OF MEMBERS OF THE BOARD OF DIRECTORS AND MEMBERS OF THE FOUNDERS CIRCLE, HERITAGE CIRCLE AND MAGIC CIRCLE CONSISTING OF DONORS WHO HAVE CONTRIBUTED OR PLEDGED AT LEAST 1,000 DOLLARS PAGE 6, VI-A, LN 7A, VOTING THE MEMBERSHIP OF THE ORGANIZATION ELECTS THE BOARD OF DIRECTORS PAGE 6, VI-A, LN 7B, APPROVAL OF DECISIONS OF GOVERNING BODY THE GENERAL MEMBERSHIP HAS NO APPROVAL CAPACITY OVER THE DECISIONS OF THE GOVERNING BOARD OF DIRECTORS

Name of the organization **Employer identification number** THE DEPOT FOUNDATION 41-1356072 PAGE 6, VI-A, LN 10, REVIEW OF 990 THE COMPLETED FORM 990 IS DISTRIBUTED TO THE BOARD OF DIRECTORS AFTER ITS COMPLETION AND REVIEWED AT THE NEXT SCHEDULED BOARD MEETING THE TAX PREPARER THEN FILES THE SIGNED 990 AFTER RECEIVING AUTHORIZATION FROM THE BOARD OF DIRECTORS AFTER IT HAS BEEN REVIEWED PAGE 6, VI-B, LN 12B&C, CONFLICT OF INTEREST OFFICERS, DIRECTORS, & KEY EMPLOYEES ANNUALLY COMPLETE A CONFLICT OF INTEREST DISCLOSURE FORM MONITORING AND ENFORCING POLICY REQUIRES MINIMAL PROCEDURES DUE TO THE LIMITED SIZE AND SCOPE OF OPERATIONS OF THE ORGANIZATION COMPLETED DISCLOSURE FORMS ARE REVIEWED, A LIST OF ALL VENDORS AND GRANTEES ARE REVIEWED FOR CONFLICTS, BOARD SELF-POLICES ITSELF FOR POTENTIAL CONFLICTS AND INQUIRIES ARE PERFORMED BY OFFICERS AND INDEPENDENT AUDITORS IN THE COURSE OF PREPARING THE ORGANIZATIONS TAX RETURN AND AUDITED FINANCIAL STATEMENTS FOR RELATED PARTY TRANSACTIONS PAGE 6, VI-B, LN 15A&B, COMPENSATION THE ORGANIZATION DOES NOT HAVE A CEO, EXECUTIVE DIRECTOR, OR ANY KEY EMPLOYEES CURRENTLY THE BOARD DIRECTLY MANAGES AND OPERATES THE ORGANIZATION WITH THE ASSISTANCE OF A PART-TIME PAID OFFICE MANAGER AN EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS DETERMINES COMPENSATION OF THE OFFICE MANAGER BASED ON PREVAILING LOCAL WAGES

Rev 1

Name of the organization	Employer identification number
THE DEPOT FOUNDATION	41-1356072
PAGE 6, VI-C, LN 19 GOVERNING DOCUMENTS	
ALONG WITH THE 990, AUDITED FINANCIAL STATEMENTS ARE AVA	ILABLE UPON
REQUEST AT THE ORGANIZATIONS OFFICE DURING NORMAL BUSINE	SS HOURS
COPIES OF THE ORGANIZATIONS CONFLICT OF INTEREST POLICY	AND GOVERNING
DOCUMENTS MAY ALSO BE REQUESTED	
	<u> </u>
	1944

### **SCHEDULE D** (Form 1041)

Department of the Treasury Internal Revenue Service

## **Capital Gains and Losses**

▶ Attach to Form 1041, Form 5227, or Form 990-T. See the separate instructions for Form 1041 (also for Form 5227 or Form 990-T, if applicable).

2008

OMB No 1545-0092

Name of estate or trust Employer identification number 41-1356072 DEPOT FOUNDATION Note: Form 5227 filers need to completeonly Parts I and II

Part I	Short-Term Ca	apital Gains and l	Losses - Assets	Held One Year or L	_ess		
` '	cription of property s 7% preferred of 'Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price	(e) Cost or other		(f) Gain or (loss) for the entire year Subtract (e) from (d)
1a				· · · · · · · · · · · · · · · · · · ·			
SEE S	CHEDULE			110630.	1682	82.	-57652.
				-			
			<del></del>				
					<u> </u>		
						[	
h Enter	and the state of t	(loca) if any from So	hadula D.1. luna 1h			46	
b Entery	our short-term gain or	(loss), if any, from Sc	nedule D-1, line 15		• • • •	1b	
2 Short-t	erm capital gain or (los	s) from Forms 4684, (	6252, 6781, and 882			2	
3 Net sh	ort-term gain or (loss) f	rom partnerships, S c	orporations, and oth	er estates or trusts		3	
	•		•	of the 2007 Capital Loss			
-						4 (	( )
	(3) on page 2				<b>&gt;</b>	5	-57652.
Part II	Long-Term Ca	pital Gains and L	.osses - Assets	Held More Than Or	ne Year		
	cription of property	(b) Date acquired	(c) Date sold	(d) Sales price	(e) Cost or other		(f) Gain or (loss) for the entire year
	s 7% preferred of Z"Co)	(mo , day, yr )	(mo , day, yr )	.,,,	(see instruction	ns)	Subtract (e) from (d)
6a SEE SO	CHEDULE			546263.	6429	07.	-96644.
				•			
<del>.</del>							
			_				
	·						
							<del> </del>
		2->	4 la D 4 la a 65				
b Enter t	he long-term gain or (lo	iss), if any, from Sche	dule D-1, line 6b .			6b	
7 Long-te	erm capital gain or (loss	s) from Forms 2439, 4	684, 6252, 6781, ar	nd 8824		7	
8 Net lon	g-term gain or (loss) fro	om partnerships. S co	rporations, and othe	er estates or trusts		8	
9 Capital	gain distributions					9	
				of the 2007 O t-11		10	
	erm capital loss carryov ver Worksheet	er Enterthe amount, 	if any, from line 14	of the 2007 Capital Loss		11 (	(
			•	) Enter here and on line	e 14a,		
column	(3) on page 2					12	-96644.

Schedule D (Form 1041) 2008 DEPOT FOUNDATION			41-13560	072 Page 2
Part III Summary of Parts I and II		(1) Beneficiaries'	(2) Estate's	
Caution: Read the instructionsbefore completing this	part	(see instructions)	or trust's	(3) Total
13 Net short-term gain or (loss)	13		-57652.	-57652.
14 Net long-term gain or (loss):			1	
a Total for year	14	a	-96644.	-96644.
b Unrecaptured section 1250 gain (see the worksheet in the instruc	tions) 14I	<u> </u>		<u> </u>
c 28% rate gain	14	<u> </u>		
15 Total net gain or (loss). Combine lines 13 and 14a	▶ 15	;	-154296.	-154296.
Note: If line 15, column (3), is a net gain, enter the gain on Form 1041,	line 4 (or Form	990-T, Part I, line 4a)		
are net gains, go to Part V, anddo not complete Part IV. If line 15, colun				
Worksheet, as necessary				-
Part IV Capital Loss Limitation				
16 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 99	0-T, Part I, line	4c, if a trust), t <b>henalle</b> i	of	
a The loss on line 15, column (3) or b \$3,000				3,000.
Note: If the loss on line 15, column (3), is more than \$3,000or if Form 10	_	22 (or Form 990-T, III	ne 34), is a loss, com	plete th <b>@apital</b>
Loss Carryover Worksheet in the instructions to figure your capital loss  Part V Tax Computation Using Maximum Capital G			J=""	
Form 1041 filers. Complete this partonly if both lines 14a and 15 in colu	ımn (2) are gaın	s, or an amount is ent	ered in Part I or Part I	I and there is an
entry on Form 1041, line 2b(2),and Form 1041, line 22 is more than zero				
Caution: Skip this part and complete the worksheet in the instructions if	-			
• Either line 14b, column (2) or line 14c, column (2) is more than zero	, or			
Both Form 1041, line 2b(1), and Form 4952, line 4g are more than 2	ero.			
Form 990-T trusts. Complete this partonly if both lines 14a and 15 are g	gains, or qualifie	d dividends are includ	ed in income in Part I	of Form 990-T,
and Form 990-T, line 34, is more than zero. Skip this part and complete	the worksheet i	n the instructions if ei	ther line 14b, col (2)	or line 14c,
col (2) is more than zero				
17 Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	34)	17		
18 Enter the smaller of line 14a or 15 in column (2) but not				
less than zero	18			
19 Enter the estate's or trust's qualified dividends from Form				
1041, line 2b(2) (or enter the qualified dividends included				
in income in Part I of Form 990-T)	19			
20 Add lines 18 and 19				
21 If the estate or trust is filing Form 4952, enter the	24		File Andreas File Andreas File Andreas	
amount from line 4g, otherwise, enter -0	21			
22 Subtract line 21 from line 20 If zero or less, enter -0-		22		
23 Subtract line 22 from line 17 If zero or less, enter -0		23		
24 Enter the smaller of the amount on line 17 or \$2,200		24	100 (100 (100 (100 (100 (100 (100 (100	
<ul><li>24 Enter the smaller of the amount on line 17 or \$2,200</li><li>25 Is the amount on line 23 equal to or more than the amount on line 2.</li></ul>		24		
Yes. Skip lines 25 and 26, go to line 27 and check the "No" box				
No. Enter the amount from line 23		25		
26 Subtract line 25 from line 24				
27 Are the amounts on lines 22 and 26 the same?				
Yes. Skip lines 27 thru 30, go to line 31. No. Enter the smi	aller of line 17 o	r line 22 27		
			ો લાજ હો	
28 Enter the amount from line 26 (If line 26 is blank, enter -0-)		. 28	12 12 12 12 12 12 12 12 12 12 12 12 12 1	
,				
29 Subtract line 28 from line 27		29		
30 Multiply line 29 by 15% ( 15)				
31 Figure the tax on the amount on line 23. Use the 2008 Tax Rate Sci	hedule for Estat	es and Trusts (see the	Schedule	
G instructions)			31	
32 Add lines 30 and 31	hadula for Esta	tae and Truste (acc th	32	
G instructions)			33	
34 Tax on all taxable income. Enter the smaller of line 32 or line 33 he (or line 36 of Form 990-T)	re and on line 1	a of Schedule G, Forr	n 1041	

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US		pital Gains a eld One Year	nd Losses - or Less		2008
(a) · Describe	(b) Date	(c) Date	(d) Sales	(e) Cost	(f) Gain
property	acquired	sold	price	or basis	or loss
ACTIVISION BLIZZAR	11/12/2008	02/09/2009	1375.	1680.	-305.
ADOBE SYS INC	VA/RI/OUS	02/09/2009	2373.	4814.	-2441.
APPLE INC	11/04/2008	02/09/2009	1340.	1551.	-211.
CELGENE CORP	07/25/2008	02/09/2009	1827.	2537.	-710 <i>.</i>
CELGENE CORP	07/25/2008	05/01/2009	755.	1343.	-588.
CITIGROUP INC	05/22/2008	09/29/2008	33554.	49880.	-16326.
ME GROUP INC	10/07/2008	11/17/2008	1353.	2494.	-1141.
COOPER INDS LTD	04/22/2008	02/09/2009	2383.	3811.	-1428.
DIAGEO PLC ADR	VA/RI/OUS	02/09/2009	2489.	3716.	-1227.
OOLBY LABORATORIES	08/22/2008	02/09/2009	2973.	4689.	-1716.
FNMA	05/22/2008	09/08/2008	28160.	49061.	-20901.
GENZYME CORP	05/16/2008		3164.	3011.	153.
NTERCONTINENTIALE	11/12/2008		1750.	1980.	-230.
MEDCO HEALTH SOLUT	VA/RI/OUS	02/09/2009	4097.	4239.	-142.
MONSANTO CO	10/07/2008	i i	2408.	2342.	66.
NESTLE SA	11/20/2007		21.	24.	-3.
PAYCHEX INC	VA/RI/OUS	07/15/2008	7826.	10339.	-2513.
DUALCOMM INC	VA/RI/OUS	02/09/2009	3105.	4659.	-1554.
SCHLUMBERGER LTD	VA/RI/OUS	02/09/2009	2068.	4735.	-2667.
STERICYCLE INC	12/09/2008		1827.	1894.	-67.
THERMO FISHER SCI	05/16/2008		2180.	3331.	-1151.
JNION PACIFIC CORP	VA/RI/OUS	02/09/2009	2152.	3583.	-1431.
TO ENERGY INC	05/16/2008		1450.	2569.	-1119.
TO ENERGI INC	03/10/2000	02/03/2003	110630.	168282.	-57652.

US .	Assets Held	More Than	One Year		2008
(a) · Describe	(b) Date	(c) Date	(d) Sales	(e) Cost	(f) Gain
property	acquired	sold	price	or basis	or loss
ACCENTURE LTD		02/09/2009	1	5371.	-819.
AMERICAN GENERAL	1	09/17/2008		124546.	1
APPLE INC BANCO SANTANDER	1	02/09/2009		3641.	-1439.
BEST BUY INC		08/27/2008		6276.	-574.
BOEING CO	•	02/09/2009		1811.	272.
CARNIVAL CORP	•	07/30/2008 10/24/2008	-	10502.	-248.
CARNIVAL CORP		11/07/2008		2104.	-969.
CARNIVAL CORP		02/09/2009		2658. 4259.	-1462.
CHEVRON CORP		02/09/2009		1157.	-2604.
CHEVRON CORP	1	05/28/2009		496.	870. 291.
CHEVRON CORP	i i	06/30/2009		1984.	1166.
CISCO SYSTEMS INC		02/09/2009		4753.	-1020.
CISCO SYSTEMS INC		02/17/2009		1551.	-117.
CIT GROUP INC		09/16/2008		98861.	-14461.
CITRIX SYS INC		02/09/2009		2989.	-1357.
CITRIX SYS INC		05/01/2009		2174.	-696.
CME GROUP INC	l I	11/17/2008	5413.	13643.	-8230.
CORNING INC	01/12/2006		4551.	8511.	-3960.
CORNING INC	l	11/07/2008		6689.	-3542.
CORNING INC	VA/RI/OUS			9000.	-5377.
DANAHER CORP	01/28/2003			1254.	1149.
DANAHER CORP	01/28/2003	02/09/2009		2630.	2283.
DANAHER CORP	01/28/2003	02/17/2009		795.	679.
DEERE & CO	VA/RI/OUS	02/09/2009	1610.	2659.	-1049.
DEERE & CO	05/08/2007	02/27/2009	2772.	5665.	-2893.
ECOLAB INC	07/05/2005	02/09/2009	3203.	2992.	211.
EXXON MOBIL	11/15/2001	02/09/2009	4839.	2673.	2166.
FHLMC MAT10/15/08	05/15/2002	10/15/2008	50000.	49547.	453.
FIRST SOLAR INK	12/17/2007		1622.	2598.	-976.
GENENTECH INC	11/08/2006	1	12150.	10630.	1520.
GENERAL DYNAMICS	07/05/2005		2427.	2048.	379.
GENERAL DYNAMICS	07/05/2005		3027.	2989.	38.
GENERAL DYNAMICS	07/05/2005		4839.	6089.	-1250.
GENZYME CORP	06/20/2007			657.	62.
GENZYME CORP	06/20/2007		1137.	1314.	-177.
GENZYME CORP	06/20/2007	· ·	712.	854.	-142.
GILEAD SCIENCES	VA/RI/OUS		3654.	3083.	571.
GILEAD SCIENCES	VA/RI/OUS	j i	1366.	1117.	249.
GILEAD SCIENCES	01/12/2007		717.	496.	221.
HEWLETT PACKARD CO	VA/RI/OUS	· · · · · · · · · · · · · · · · · · ·	3384.	4797.	-1413.
ITT CORPORATION	07/05/2005	1	3758.	4087.	-329.
ITT CORPORATION	07/05/2005		1417.	1645.	-228.
ITT CORPORATION	07/05/2005		963.	1097.	-134.
JOHNSON & JOHNSON	01/17/1992		3270.	751.	2519.
JOHNSON & JOHNSON JOHNSON & JOHNSON	01/17/1992		688.	174.	514.
JPMORGAN CHASE	01/17/1992		765.	201.	564.
MEDTRONIC INC	05/21/1999 VA/RI/OUS		100000.	101285.	-1285.
MEDTRONIC INC	04/23/2001		2944.	3957.	-1013.
LIDITONIC INC	04/23/2001	02/1//2009	2174.	3020.	-846.
		1	450851.	534080.	-83229.
		1			
	<del></del>	L			

Long Term Capital Gains and Losses -

41-1356072

US **Assets Held More Than One Year** 2008 (a) . Describe (b) Date Date Sales (f) Gain (e) Cost property acquired sold ргісе or basis or loss MEDTRONIC INC 04/23/200105/28/2009 3493. 4869 -1376.MICROSOFT CORP VA/RI/OUS 02/09/2009 3169. 3176. -7. MONSANTO CO VA/RI/OUS 02/09/2009 3612. 3646. -34. NESTLE SA 11/20/200702/09/2009 3125. 4524. -1399. PEPSICO INC 11/05/199902/09/2009 2686. 1765. 921. PRAXAIR INC 07/18/2006|02/09/2009 2080. 1675. 405. PRECISION CASTPART VA/RI/OUS 02/09/2009 4121. 6887. -2766. PRECISION CASTPART VA/RI/OUS 02/17/2009 1444. 1973. -529. PRECISION CASTPART VA/RI/OUS 06/30/2009 1552. 1709. -157. SAP AG 05/02/200610/24/2008 2236. 3470. -1234.SAP AG VA/RI/OUS |12/12/2008 9771. 14441. -4670. STATE STREET CORP 07/05/2005|07/15/2008| 5956. 4844. 1112. STATE STREET CORP 07/05/2005|02/09/2009 1373. 2691. -1318. SUNPOWER CORP 12/04/2007|02/09/2009| 964. 3509. -2545. SUNPOWER CORP VA/RI/OUS 05/28/2009 1661. 5559. -3898. SYSCO CORP VA/RI/OUS 02/09/2009 3228. 4613. -1385.TARGET CORP 07/05/2005|08/27/2008 1881. 2018. -137.TARGET CORP VA/RI/OUS 02/09/2009 3320. 3314. 6. TEXAS INSTRUMENTS 07/05/200507/15/2008 9922. 10523. -601. THERMO FISHER SCI 11/05/200702/09/2009 150. 229. -79. 07/05/2005|12/15/2008| TRACTOR SUPPLY CO 1021. 1239. -218. TRACTOR SUPPLY CO 07/05/2005|02/09/2009| 4080. 5950. -1870.WALGREEN CO 8774. WA/RI/OUS |07/15/2008| 8693. 81. 07/05/2005|07/30/2008| ZIMMER HOLDINGS 8626. 9734. -1108. MICROSOFT CORP |07/05/2005|08/27/2008| 6355. 5732. 623. LESS ALLOCATED TO MNGD FUNDS -8526. 8526. METLIFE INC 04/09/2009 570. 570. FHLMC CLASS ACTION 08/14/2008 242. 242. 95412. 108827. -13415.

Long Term Capital Gains and Losses -

## Form **4562**

Department of the Treasury nternal Revenue Service

## Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172 2008

Attachment Sequence No 67

Name(s) shown on return Business or activity to which this form relates Identifying number THE DEPOT FOUNDATION FORM 990, PART IX, LINE 22 41-1356072 Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 Maximum amount See the instructions for a higher limit for certain businesses . 2 Total cost of section 179 property placed in service (see instructions) 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 4 5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0- If married filing separately, see instructions (a) Description of property (b) Cost (business use only) 6 7 Listed property. Enter the amount from line 29 .. .. 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 . . 8 9 Tentative deduction. Enter the smaller of line 5 or line 8. .... 9 10 Carryover of disallowed deduction from line 13 of your 2007 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2009 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property Instead, use Part V Part II Special Depreciation Allowance and Other Depreciation(Do not include listed property) (See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) . 14 15 16 Other depreciation (including ACRS) ..... ... MACRS Depreciation (Do not include listed property) (See instructions )  $5,53\overline{4}$ . 17 MACRS deductions for assets placed in service in tax years beginning before 2008 ... 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2008 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depr (d) Recovery (g) Depreciation (a) Classification of property (f) Method year placed in Convention period deduction service only - see instructions) 3-year property b 5-year property c 7-year property d 10-year property 15-year property 20-year property 25-year property 25 yrs Residential rental 27 5 yrs MM S/L 27.5 yrs MM S/L property MM Nonresidential real 39 yrs S/L ММ S/L property Section C-Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System

Summary (See instructions)

20a Class life

b 12-year

40-year

Listed property. Enter amount from line 28 . . . . .

Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations - see instructions

For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

S/L

S/L

S/L

MM

12 yrs

40 yrs.