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Department of the Treasury Internal-Revenue Service

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

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For calendar	year 2009, or tax year beg	inning			and endir		, 20
G Check all t	'' 		Initial return o	•	ublic chari	<u>ty</u>	Final return
	Amended	return	Addres	s change		Name change	
	Name of foundation					A Employer ide	ntification number
Use the IRS	MCD FOUNDAMION					,	1 1020026
label. Otherwise,	MGR FOUNDATION			- 44	Daniel de		1-1939826
print	Number and street (or P O box C/O TAX DEPARTMEN!		mail is not delivered to street	address)	Room/suit	(C B Telephone number	(see page 10 of the instructions)
or type.	10350 BREN ROAD W					1 ,	952) 656-4601
See Specific	City or town, state, and ZIP co						
Instructions.	City or town, state, and ZIP co	xue				pending, check	► 1
	MINNETONKA, MN 55	343				1-	nizations, check here .
U. Chook type	e of organization: X Sect		n)(3) evernt private f	oundation		85% test, chi	anizations meeting the eck here and attach
	1947(a)(1) nonexempt charitab		Other taxable pr		ion	computation	
	et value of all assets at end		unting method: X Ca				lation status was terminated
	m Part II, col. (c), line		ther (specify)			1	07(b)(1)(A), check here .
16) ▶ \$	3,817,189.		column (d) must be on	cash basis.)			on is in a 60-month termination 07(b)(1)(B), check here
	sis of Revenue and Expen						(d) Disbursements
total o	f amounts in ∞lumns (b), (c), ar	nd (d)	(a) Revenue and expenses per	(b) Net inve		(c) Adjusted net Income	for charitable
may r colum	not necessarily equal the amoun n (a) (see page 11 of the instruc	ts in ctions))	books	ilicon	16	income	purposes (cash basis only)
	tions, gilts, grants, etc., received (attach so				3, 7, 7,		
2 Check	if the foundation is not rec	quired to	3, 4	رد. در د جامع ها	7,000		
	on savings and temporary cash inve						
1	nds and interest from securities		. 5,791.	8	9,380.		ATCH 1
5 a Gross	rents						
	tal income or (loss)		,	τ	3 9 3 5		
ο 6a Netga⊪	n or (loss) from sale of assets not or	line 10	-4.	ورق بومدده	a) 1		,]
b Gross s	sales price for all	30.	1	* 31		-	
	gain net income (from Part IV,	line 2) .	.				, , ,
8 Netsh	ort-term capital gain			. Pg . 1.	اء ، ، ه ط		\$ 27
9 Income	e modifications • ; • • • • • •		·				
10 a Gross sa	ales less returns						0 7 "1
b Less C	ost of goods sold .			** \			
li .	profit or (loss) (attach schedule)		400 455	3 7	222		
11 Other	income (attach schedule)		480,458.		-387.		ATCH 2
	Add lines 1 through 11		486,245.	8	8,993.		<u> </u>
	nsation of officers, directors, trustees		0.				
က 14 Other	employee salaries and wages .			<u> </u>			
15 Pensio	on plans, employee benefits						
ଅଧାରି Legal 1	fees (attach schedule)			<u> </u>			
b Accou	nting fees (attach schedule)		5,508.		140.		5,36
<u> </u>	protessionaniees (attach schedu	ne) ','' '	3,300.				
s 1-7Interes	<u>"</u>	**			802.		
15 Pensic 16a Legal b Accou Political 17 Interes 18 Taxes (19 Gepre 20 Occup	attach schedule) (seppage 14 of the in	structions)			302.	·	ر تا الله الله الله الله الله الله الله ا
E 19 Gepre	Ration2(lattach scriedule) and d	epietion.					100 Bro 1 1 4 1 1
1	ancy						
	conferences, and meetings			L			
	g and publications J AT	CH 4	10,587.	2	1,046.		27
= 1	expenses (attach schedule) AT		10,307				
छ 24 Total	operating and administrative e	-	16,095.	2	1,988		5,64
	nes 13 through 23		112,000		10 / La F		112,00
Ö . Add III	butions, gifts, grants paid		128,095	10.70 12.00	1,988.		117,64
25 Contri		24 and 25		A 1887 25 EST	50 Jac 196		Data Charolia
25 Contri 26 Total ex	penses and disbursements. Add lines		(1)	1 100 C.S. 1 1 2 C. 2			
25 Contri 26 Total ex 27 Subtra	act line 26 from line 12:		358.150				
25 Contri 26 Total ex 27 Subtra a Excess	act line 26 from line 12: of revenue over expenses and disburses	ments	358,150		E THE STATE OF	., .	
25 Contri 26 Total ex 27 Subtra a Excess b Net in	act line 26 from line 12:	ments enter -0-)			57,005.	.′	

PAGE 3

Part	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of	year
	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	175.		
2	Savings and temporary cash investments	157,971.	161,829.	161,829.
3	Accounts receivable			
	Less allowance for doubtful accounts ▶			
4	Pledges receivable			
1	Less. allowance for doubtful accounts ▶			•
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
"	disqualified persons (attach schedule) (see page 16 of the instructions)			
-	Other notes and loans receivable (attach schedule)			
7			-	
	Less. allowance for doubtful accounts ▶		 -	·
ssets	Inventories for sale or use			
e SS	Prepaid expenses and deferred charges			
Q 104	Investments - U.S. and state government obligations (attach schedule)	142,819.	145,397.	145,397
	b Investments - corporate stock (attach schedule) ATCH 5	142,019.	145,397.	143,397
11	Investments - corporate bonds (attach schedule)			,
	(attach schedule)			
12	Investments - mortgage loans	2,667,574.	3,069,463.	3,069,463
13	Investments - other (attach schedule) ATCH 6			
'*	equipment basis			
-	Less accumulated depreciation (attach schedule)	400 500	440 500	440 500
15	Other assets (describe ATCH 7)	490,500.	440,500.	440,500
16	Total assets (to be completed by all filers - see the			
	ınstructions. Also, see page 1, item I)	3,459,039.	3,817,189.	3,817,189
17	Accounts payable and accrued expenses			
18	Grants payable			
ຊ 19	Deferred revenue			
≝ 20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities 5 19 20 21	Mortgages and other notes payable (attach schedule)			
تا 22	Other liabilities (describe			
	01101 1100 (0000100)			
23	Total liabilities (add lines 17 through 22)			
+==	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26 and lines 30 and 31			» ,,
Ø,				•
ည္ <u>ခ</u> ု 24	Unrestricted		, , ,	-
. 편 25	Temporarily restricted			•
26	Permanently restricted			
틹	Unrestricted			
띤	check here and complete lines 27 through 31. ▶ X			
-				1
Net Assets	Paid-in or capital surplus, or land, bldg, and equipment fund	2 450 020	2 917 190	
SS 29	Retained earnings, accumulated income, endowment, or other funds	3,459,039.	3,817,189.	
₹ 30	Total net assets or fund balances (see page 17 of the	2 450 020	2 017 100	•
ž	instructions)	3,459,039.	3,817,189.	
31	Total liabilities and net assets/fund balances (see page 17			
	of the instructions)	3,459,039.	3,817,189.	
Part	Analysis of Changes in Net Assets or Fund	Balances		
1 To	tal net assets or fund balances at beginning of year - Part II	, column (a), line 30 (must	agree with	
	d-of-year figure reported on prior year's return)		·	3,459,039
	ter amount from Part I, line 27a			358,150
3 Oti				<u></u> -
	d lines 1, 2, and 3		·	3,817,189
5 De	creases not included in line 2 (itemize) ▶		5	
	tal net assets or fund balances at end of year (line 4 minus	line 5) - Part II column (h)		3,817,189
<u>0 10</u>	tai net assets of fund palanoes at end of year fille 4 fillinus	mio oj - i arcij, columni (b)	, 00 0	

Part IV Capital Gains	and Losses for Tax on Inve	estment Income				
(a) List and	describe the kind(s) of property sold (e g , real estate,	(b) How acquired	(c) Date acquired	(d) Date sold	
	ick warehouse; or common stock, 200 s	shs. MLC Co)	P-Purchase D-Donation	(mo , day, yr)	(mo, day, yr)	
1a · SEE PART IV SCHE	DULE					
b						
С						
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini		
_a						
b						
С						
d						
<u>e</u>						
Complete only for assets st	nowing gain in column (h) and own	ed by the foundation on 12/31/69		Gains (Col (h) g		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	col	(k), but not less t Losses (from co		
_a						
b						
С						
d						
<u>e</u>						
2 Capital gain net income or	(net capital loss) {	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		-88,818.	
3 Net short-term capital gain	or (loss) as defined in sections 12	22(5) and (6):				
	line 8, column (c) (see pages 13 a	•				
	ine 8		3			
Part V Qualification Un	ider Section 4940(e) for Redu	iced Tax on Net Investment Inc	ome			
	•	utable amount of any year in the ba	ase perio	d?	Yes X No	
1 Enter the appropriate amo	ount in each column for each year;	see page 18 of the instructions be	efore mak	ing any entries.		
(a) Base penod years	(b)	(c)		(d)		
Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution ra (col (b) divided by		
2008	247,154.	3,562,693.			0.069373	
2007	131,094.	3,845,564.			0.034090	
2006	122,282.	2,674,789.			0.045717	
2005	115,846.	2,664,595.			0.043476	
2004	54,500.	2,489,316.			0.021894	
2 Total of line 1, column (d)	,	• • • • • • • • • • • • • • • • • • • •	2		0.214550	
3 Average distribution ratio	for the 5-year base period - divide dation has been in existence if less	the total on line 2 by 5, or by the	3		0.042910	
4 Enter the net value of non	charitable-use assets for 2009 fro	m Part X, line 5	4	4 3,025,469.		
5 Multiply line 4 by line 3	5 Multiply line 4 by line 3					
6 Enter 1% of net investmen	nt income (1% of Part I, line 27b)		6		670.	
7 Add lines 5 and 6			7		130,493.	
8 Enter qualifying distribution If line 8 is equal to or gree Part VI instructions on page	eater than line 7, check the box in	n Part VI, line 1b, and complete t	8 hat part	using a 1% tax	117,643. c rate. See the	

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page

8a Enter the states to which the foundation reports or with which it is registered (see page 19 of the

Form 990-PF (2009)

x

8 b

instructions) ► MN,

names and addresses

Χ

Х

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?

and Contractors (continued)		
3 Five highest-paid independent contractors for professional services (see page 23		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	· · · · · · · · · · · · · · · · · · ·	▶ NON
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical inform of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	nation such as the number	Expenses
1 PLANNING AND CARRYING OUT GRANT MAKING TO OTHER UNRELA AND CHARITABLE ORGANIZATIONS.	ATED	
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see page 23 of the inst Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and		A
1 NONE	12	Amount
2		
All other program-related investments See page 24 of the instructions		
3 NONE		
Total. Add lines 1 through 3		1

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	gn foundations,	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	2 83	
	purposes:	4	
а	Average monthly fair market value of securities	1a	129,469.
b	Average of monthly cash balances	1b	205,762.
С	Fair market value of all other assets (see page 24 of the instructions)	1c	2,736,311.
đ		1d	3,071,542.
е		· L o	
	1c (attach detailed explanation)	ا	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Cubtract line 2 from line 1d	3	3,071,542.
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25		
		4	46,073.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,025,469.
6	Minimum investment return. Enter 5% of line 5	6	151,273.
Pa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privation foundations and certain foreign organizations check here ▶ and do not complete this private that the private is the private that the private thas the private that the private that the private that the private	ate operating	
			151,273.
1	Minimum investment return from Part X, line 6	1 分数数	151,273.
2 a	Tax on investment income for 2009 from Part VI, line 5 2a 1,340.	4	
D	income tax for 2009. (This does not include the tax from Part VI.)		1 240
C	Add lines 2a and 2b Distributable amount before adjustments. Subtract line 2c from line 1	2c	1,340.
3	Distributable amount before adjustments. Subtract line 2c from line 1		
4	Recoveries of amounts treated as qualifying distributions	4	39,874.
5	Add lines 3 and 4 Deduction from distributable amount (see page 25 of the instructions)	5	189,807.
6	Deduction from distributable amount (see page 25 of the instructions)	6	·
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	_	100 007
	line 1	7	189,807.
Pa	Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	117,643.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
		2	0.
3	purposes Amounts set aside for specific charitable projects that satisfy the:	4 2 4	
а		3a	0.
b		3b	0.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	117,643.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		<u> </u>
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	117,643.
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating v		
	qualifies for the section 4940(e) reduction of tax in those years.		

Pa	The XIII Undistributed income (see page	26 of the instruction	ns)		
		(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
	line 7				189,807.
2	Undistributed income, if any, as of the end of 2009				
а	Enter amount for 2008 only			111,813.	
b	Total for prior years 20 07 ,20 06 ,20 05				
3	Excess distributions carryover, if any, to 2009.				
а	From 2004				
b	From 2005 0.				
C	From 2006				
d	From 2007 0 .				
е	From 2008				
f		0.			
4	Qualifying distributions for 2009 from Part XII,				
	line 4: ▶ \$117,643.				
а	Applied to 2008, but not more than line 2a			111,813.	
	Applied to undistributed income of prior years (Election				
D	required - see page 26 of the instructions)				
	Treated as distributions out of corpus (Election				
U	required - see page 26 of the instructions)		į		ı
d	Applied to 2009 distributable amount				5,830.
	Remaining amount distributed out of corpus	0.			
5	Excess distributions carryover applied to 2009	0.		<u> </u>	0.
	(If an amount appears in column (d), the same				
e	amount must be shown in column (a)) Enter the net total of each column as				
6	indicated below:				
2	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	ō.			
	·				, , ,
D	Prior years' undistributed income. Subtract line 4b from line 2b		1		
С	Enter the amount of prior years' undistributed			1 1	The state of the s
	income for which a notice of deficiency has been				
	issued, or on which the section 4942(a) tax has been previously assessed				7
					The state of the s
a	Subtract line 6c from line 6b. Taxable amount - see page 27 of the instructions				-
е	Undistributed income for 2008 Subtract line				- 18 3 - N- N- 1
	4a from line 2a. Taxable amount - see page				'
	27 of the instructions		·		
f	Undistributed income for 2009. Subtract lines				
	4d and 5 from line 1. This amount must be distributed in 2010.				183,977.
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)				
8	Excess distributions carryover from 2004 not		2,11		· · · · · · · · · · · · · · · · · ·
	applied on line 5 or line 7 (see page 27 of the				
	instructions)				· - ·
9	Excess distributions carryover to 2010.	0.			
	Subtract lines 7 and 8 from line 6a				
	Analysis of line 9:	ļ			
	Excess from 2005				
b	Excess from 2000				
C	LACESS HOLL 2007				
d	LACESS HOIR 2000				
е	Excess from 2009				

a The name, address, and telephone number of the person to whom applications should be addressed:

14/14

b The form in which applications should be submitted and information and materials they should include:

N/A

c Any submission deadlines:

N/P

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

N/A

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation status of recipient Recipient Purpose of grant or contribution Amount · Name and address (home or business) a Paid during the year SEE ATTACHED STATEMENTS - #9 112,000. **▶** 3a 112,000. **b** Approved for future payment

- •	Analysis of income-Produ		·			(0)
	amounts unless otherwise indicated.	(a) Business code	ted business income (b) Amount	(c) Exclusion code	/ section 512, 513, or 514 (d) Amount	(e) Related or exempt function income (See page 28 of the instructions)
•	service revenue:		· · · · · · · · · · · · · · · · · · ·		Amount	the instructions)
a b	·····		······································			
			-			
d				 		
e						
, <u> </u>		-				
g Fees	and contracts from government agencies					
_	ship dues and assessments					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	on savings and temporary cash investments					
	ds and interest from securities			14	5,791.	
	al income or (loss) from real estate		1.20	·,		
	t-financed property		 	·		
	debt-financed property					
	Il income or (loss) from personal property					·· · · · · · · · · · · · · · · · · ·
	vestment income			18	480,454.	·
	loss) from sales of assets other than inventory					
-	ome or (loss) from special events	T				
	rofit or (loss) from sales of inventory					
11 Other re						
b OTH	HER INCOME					
С						
d						
е						
12 Subtotal	l. Add columns (b), (d), and (e)	21 _			486,245.	
13 Total. A	dd line 12, columns (b), (d), and (e)				13	486,245.
	heet in line 13 instructions on page 28					
Part XVI-						
Line No.	Explain below how each activ	ity for which	ch income is reporte	ed in column	(e) of Part XVI-A con	tributed importantly to
▼	the accomplishment of the fo	oundation's	exempt purposes (other than t	by providing funds for	such purposes). (See
	page 29 of the instructions.)		·			
						
				·····		
						
				_ ·		
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			NOT MITHICAL			
	 					
						
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Form	990-PF	(2009)				41	-1939826			Pa	ge 13
	rt XVII	Information F Exempt Orga		nsfers To and	Transaction	ons ar	nd Relationships	With N	oncl	narit	able
1	Did th	ne organization directly ction 501(c) of the Co zations? ers from the reporting fo	or indirectly engode (other than se	ection 501(c)(3) org	anizations) oi					Yes	No
		sh]	1a(1)		X
		her assets							1a(2)		X
b		transactions: iles of assets to a nonch	aritable evennt orga	nization				-	 16/1)		- <u>-</u> -
		rchases of assets from									<u> </u>
		ental of facilities, equipme									X
		eimbursement arrangeme									X
		ans or loan guarantees									_ X
_		erformance of services on ig of facilities, equipmen							- I		$\frac{x}{x}$
ď		answer to any of t							1c the	faır n	
_		of the goods, other						=			
	value	in any transaction or	sharing arrangen	nent, show in colur	mn (d) the	value of	the goods, other	assets, or s	ervice	s rec	eived
(2)	Line no	(b) Amount involved	(c) Name of none	charitable exempt organiz	zation (d) Descrir	otion of transfers, transact	ons and share	ng arrai	ngemer	
(a)		N/A	(c) Hamb of Hom	Sharitable exempt organiz		I/A	Thor or translers, transact	ons, and sham	ig anai	igeniei	11.5
			 								
							·	 -			
									 -		
									-		
							<u> </u>				
		<u> </u>									
	_										
											
2a	ls the	foundation directly or	indirectly affiliated	with, or related to,	one or more	tax-exe	mpt organizations de	scribed in _			
	section	n 501(c) of the Code (oth	er than section 501	(c)(3)) or in section 52	27?			<i>.</i> L	Ye	s 📑	No
<u>b</u>	If "Yes	s," complete the following		(h) Type of ergy	nization .		(a) Descripti	an of relationsh			
		(a) Name of organization	<u>' </u>	(b) Type of orga	mzation		(c) Descripti	on of relationsh	up		
											
											
	belief,	penalties of perjury I decli it is true, correct, and comp	are that I have examinated by the polytopic of p	reparer (other than taxp	ig accompanying ager or fiduciar	y) is based	es and statements, and stateme	hich preparer	has ar	iy knov	ge and vledge
<u>ə</u>	Sı	gnature of officer or trustee			D:	ate	Title				
Sign Here	r's Iy	Preparer's			Date		Check if self-employed	Preparer's in number (See page 30 of th	Signa	ture or	
Š	ald parer's 9 Only	signature	· :								
	Paid Preparer's Use Only	Firm's name (or yours if self-employed), address.					EIN ▶				

Form 990-PF (2009)

Firm's name (or yours if self-employed), address,

and ZIP code

Phone no.

FORM 990-PF - PART IV

· Kınd of P		INS AND LO				P	Date	Date sold
		Description					acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		TOTAL SHORT PARTNERSHIP ESTATES OR	TERM COMMO	ON TRUST FUR	ND AND		3,465.	
		TOTAL LONG- PARTNERSHIP ESTATES OR	, S CORPORA	ATION, AND			-92,279.	
7.		FRACTIONAL	SHARES OF A	AOL INC.			07/26/2002 7.	12/09/200
17.		.67 SHARES 22.	OF TIME WAR	RNER CABL			07/26/2002 -5.	03/27/200
6.		.333 SHARES	OF TIME WA	ARNER INC			07/26/2002 -6.	03/27/20
TAL GAIN(LC							-88,818.	
		:						

SCHEDULE D (Form 1041)

Capital Gains and Losses

OMB No 1545-0092

Employer identification number

Department of the Treasury Internal Revenue Service Name of estate or trust

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

M	GR FOUNDATION				41-19398	26	
Note	: Form 5227 filers need to complete only P	arts I and II.					
Par	Short-Term Capital Gains and Lo	sses - Assets	Held One Ye	ar or Less			
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other I (see page 4 of instructions)	the	(f) Gain or (loss) for the entire year Subtract (e) from (d)
1a							<u> </u>
							· · · · · · · · · · · · · · · · · · ·
		 					
							
b	Enter the short-term gain or (loss), if any,	from Schedule D)-1, line 1b			1 <u>b</u>	
2	Short-term capital gain or (loss) from For	ms 4684, 6252,	6781, and 882	24		2_	
3	Net short-term gain or (loss) from partner Short-term capital loss carryover. Enter the					3_	3,465.
•	Carryover Worksheet					4_	(
5	Net short-term gain or (loss). Combine lin column (3) on the back	<u> </u>	<u> </u>	<u> </u>		5	3,465.
Par	t II Long-Term Capital Gains and Loss	es - Assets Held	More Than O	ne Year	1.00		
_	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo, day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other (see page 4 of instructions)	the	(f) Gain or (loss) for the entire year Subtract (e) from (d)
6a							!
	Enter the long-term gain or (loss), if any,	from Schedule D	-1 line 6h	<u> </u>		6 b	-4.
						_	
7	Long-term capital gain or (loss) from For					7_	00.070
8	Net long-term gain or (loss) from partners					8	-92,279.
9	Capital gain distributions		• • • • • • • •			9	
10	Gain from Form 4797, Part I					10	
11	Long-term capital loss carryover. Enter the	ne amount, if any	y, from line 14	of the 2008 Capital Lo	ss		
12	Carryover Worksheet	es 6a through 1°	l ın column (f).	Enter here and on li	ne 14a,	11	
	column (3) on the back			<u> </u>		12	-92,283.
-07	PROPERTY OF THE PROPERTY OF TH	THE HOUSE FOR HORM	III III I		50		

Sche	dule D (Form 1041) 2009					Page 2
Pa	t, Summary of Parts I and II		(1) Beneficiaries'	(2) Esta	ate's	
	Caution: Read the instructions before completing this pa	rt.	(see page 5)	or trus		(3) Total
13	Net short-term gain or (loss)	3				3,465.
	Net long-term gain or (loss):					
а	Total for year1	4a				-92,283.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht.)	4b				
С	28% rate gain	4 c				
15	Total net gain or (loss). Combine lines 13 and 14a ▶ 1	5				-88,818.
Note to Pa	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form and V, and do not complete Part IV. If line 15, column (3), is a net loss, complete Part	990 IV a	T, Part I, line 4a) If line and the Capital Loss Can	s 14a and 15 yover Works	, colum s heet, as	n (2), are net gains, go s necessary.
Pai	rt IV Capital Loss Limitation					
	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part					
а	The loss on line 15, column (3) or b \$3,000			[16 (3,000)
Note <i>Cam</i>	The loss on line 15, column (3) or b \$3,000 or if Form 1041, page 1 over Worksheet on page 7 of the instructions to figure your capital loss carryover.	, lını	e 22 (or Form 990-T, lıı	ne 34), is a l	oss, con	nplete the Capital Loss
	t V Tax Computation Using Maximum Capital Gains Rates	_			· · · · · · · · · · · · · · · · · · ·	
	n 1041 filers. Complete this part only if both lines 14a and 15 in column	n (2) are dains or an am	ount is ent	arad in	Dart Lor Dart II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more t			iount is ent	ereu iri	rantior Fantiland
	tion: Skip this part and complete the worksheet on page 8 of the instruction					
• E	ther line 14b, col. (2) or line 14c, col. (2) is more than zero, or					
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.					
Forr	n 990-T trusts. Complete this part only if both lines 14a and 15 are g	gain	s, or qualified divide	nds are in	cluded	in income in Part I
of F	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part a	and	complete the works	sheet on pa	age 8 o	of the instructions if
eune	er 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 34)		. 17			
18	Enter the smaller of line 14a or 15 in column (2)					
	but not less than zero					
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					
	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 \$2,300		. 24		~	
25	Is the amount on line 23 equal to or more than the amount on line 24?					
	Yes. Skip lines 25 and 26; go to line 27 and check the "No" box.				4	
	No. Enter the amount from line 23					
26	Subtract line 25 from line 24		. 26			
27	Are the amounts on lines 22 and 26 the same?					
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line 2	2	27			
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		. 28			
					-	
29	Subtract line 28 from line 27					
30	Multiply line 29 by 15% (.15)		• • • • • • • • • • • • • • • • • • • •		30	
31	Figure the tax on the amount on line 23. Use the 2009 Tax Rate S					
	(see the Schedule G instructions in the instructions for Form 1041)				31	
32	Add lines 30 and 31				32	
33	Figure the tax on the amount on line 17. Use the 2009 Tax Rate S					
	(see the Schedule Ginstructions in the instructions for Form 1041)				33	
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 her	· 2	nd on Form 10/11 S	chadula L	I	

Schedule D (Form 1041) 2009

G, line 1a (or Form 990-T, line 36).

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side MGR FOUNDATION

Employer identification number 41-1939826

Part II Long-Term Capital Gains and	d Losses - Asset	s Held More Tha	n One Year	11 133302	
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
6a FRACTIONAL SHARES OF AOL INC.	07/26/2002	12/09/2009	7.		7.
.67 SHARES OF TIME WARNER CABL	07/26/2002	03/27/2009	17.	22.	-5.
.333 SHARES OF TIME WARNER INC	07/26/2002	03/27/2009	6.	12.	-6.
				-	
					·
					·
			_		
			<u></u>	·	_
					
6b Total. Combine the amounts in column	n (f). Enter here a	nd on Schedule D,	line 6b		-4. D-1 (Form 1041) 2009

PAGE 17

ATTACHMENT 1

ATTACHMENT 1

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1 990PF PART - TUTUI	
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M GGORF PART T - TIVIN	
M GOODE DART - TIVID	

MGR FOUNDATION

REVENUE		PER BOOKS INCOME	5,791. 5,791.	
		DESCRIPTION	OTHER INTEREST & DIVIDEND INCOME	FROM K-1S

89,380.

5,791.

TOTAL

ATTACHMENT 2

3:23:30 PM

ATTACHMENT

 \sim

- OTHER INCOME PART I FORM 990PF,

ORDINARY INCOME (LOSS) FROM PASSTHROUGHS EXCISE TAX REFUND
PARTNERSHIP INCOME MARKET VALUE APPRECIATION

DESCRIPTION

INVESTMENT INCOME NET 2,610. PER BOOKS EXPENSES REVENUE AND

958. 476,890.

480,458.

TOTALS

-387.

-387.

PAGE 18

MGR FOUNDATION

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FORM 990PF, PART I - OTHER PROFESSIONAL FEES

MGR FOUNDATION

ATTACHMENT 3

ATTACHMENT

OTHER EXPENSES 1 PART I FORM 990PE,

	REVENUE		
	AND	NET	
	EXPENSES	INVESTMENT	CHARITABLE
DESCRIPTION	PER BOOKS	INCOME	PURPOSES
BANK CHARGES	186.	186.	
PORTFOLIO DEDUCTIONS		20,860.	
MISCELLANEOUS	275.		275.
NON DEDUCTIBLE CONTRIBUTIONS	10,126.		
TOTALS	10,587.	21,046.	275.

275.

275.

E6E07L 0000 7/6/2010

41-1939826		NG V	60,722. 84,675.	145,397.
	ATTACHMENT 5	ENDING <u>FMV</u>		
	¥	ENDING BOOK VALUE	60,722. 84,675.	145,397
	OCK	BEGINNING BOOK VALUE	60,755. 82,064.	142,819.
	FORM 990PF, PART II - CORPORATE STOCK	DESCRIPTION	SECURITIES AT USB/MORGAN STANL UNREALIZED GAIN (LOSS)	TOTALS

ATTACHMENT 6	ENDING <u>EMV</u>	1,058,207. 2,011,256.	3,069,463.
ATTA	ENDING BOOK VALUE	1,058,207. 2,011,256.	3,069,463.
THEINIS	BEGINNING BOOK VALUE	855,250. 1,812,324.	2,667,574.
- OTHER TRVES			TOTALS
FORM 990FF, FARI II - OIRER INVESTMENTS	DESCRIPTION	ADLER BOND FUND ADLER EQUITY FUND	

3:23:30 PM

PAGE 22

MGR FOUNDATION

	ENDING <u>FMV</u>	4,807. -4,807. 440,500.	440,500.			
ATTACHMENT 7	ENDING BOOK VALUE	4,807. -4,807. 440,500.	440,500.			
	BEGINNING BOOK VALUE	4,807. -4,807. 490,500.	490,500.			
FORM 990PF, PART II - OTHER ASSETS	DESCRIPTION	ORGANIZATION COSTS ACCUMULATED AMORTIZATION PROGRAM RELATED INVESTMENTS	TOTALS			

ATTACHMENT 7

MENT 8	EXPENSE AC AND OTHER ALLOWANCE			
ATTACHMENT	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	. 0	.0	0
	COMPENSATION	ò	.0	0.
FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT, DIRECTOR - AS REQ'D	VP, TREASURER, DIRECTOR-AS REQ'D	GRAND TOTALS
FORM 990PF, PART VIII - LIST OF	NAME AND ADDRESS	MICHAEL G. RAUENHORST C/O TAX DEPARTMENT 10350 BREN ROAD WEST MINNETONKA, MN 55343	MARGARET M. GREEN-RAUENHORST C/O TAX DEPARTMENT 10350 BREN ROAD WEST MINNETONKA, MN 55343	

41-19398262

MGR FOUNDATION

ATTACHMENT 8

MGR Foundation

A Statement Attached to and Made Part of Form 990-PF, For the Year Ending 12/31/09

Part XV, Grants and Contributions Paid During the Year 2009

San Jose, CA 95125

Total

·	J		
Recipient Name & Address	Foundation Status of Recipient	Purpose of Grant or Contribution	Amount
Recipient Name & Address	Recipient	Contribution	Amount
Archdiocese of Kasama St Charles, PO Box 410143 Kasama Zambia, Central Africa	Foreign Entity - See Expenditure Responsibility Report	Scholarships	\$5,500
Calvert Social Investment Foundation Inc 7315 Wisconsin Avenue, Suite 1100 W Bethesda, MD 20814	Public Charity	Microcredit Fund	\$65,000
Foundations and Donors Interested in Catholic Activities, Inc 1350 Connecticut Avenue, NW Suite 825 Washington, DC 20036	Public Charity	General Operations	\$7,500
International Rescue Committee Inc Women's Commission for Refugee Women and Children 122 East 42nd Street New York, NY 10168-1289	Public Chanty	General Operations	\$5,000
Microlumbia Social Enterprise Program Columbia Business School 3022 Broadway Uns Hall, Room 203 New York, NY 10027	Public Charity	Microcredit Fund	\$10,000
New York University 25 West 4th Street Fourth Floor New York, NY 10012	Public Chanty	School of Law Annual Fund	\$2,000
The Bank Street College of Education 610 West 112th Street New York, NY 10025-1120	Public Chanty	School for Children	\$7,500
University of Notre Dame Scholarship Fund PO Box 519 Notre Dame, IN 46556	Public Chanty	Rauenhorst Fund	\$2,500
University of Wisconsin Paul P Carbone Comprehensive Cancer Center UW-Hospital Pediatric Hematology/Oncology Family Care 600 Highland Avenue Madison, WI 53792-6164	Public Chanty	Family Care Fund	\$2,000
US Friends of the Archdiocese of Bombay Mumbai Educational Programs 2097 Jonathan Ave	Public Chanty	General Operations	\$5,000

Attachment 9

\$112,000

MGR Foundation FEIN # 41-1939826

A Statement Attached To and Made Part of Form 990-PF For the year ended December 31, 2009

Part VII-B, Statements Regarding Activities
Questions 5c Expenditure Responsibility Reporting

Name and Address of Grantee:

Archdiocese of Kasama St. Charles, PO Box 410143 Kasama Zambia, Central Africa

Date and Amount of Grant:

7/13/2009 \$5,500

Purpose of Grant:

Student scholarships

Total amounts expended as of December 31, 2009 since grant was awarded:

\$5,500

Has the grantee diverted any portion of the funds from the purpose of the grant (to the knowledge of the Foundation)?

The Foundation is not aware the grantee has diverted any portion of the funds from the purpose of the grant.

Report Received from Grantee on:

4/23/2010

Date and Results of any Verification of Grantee's Reports:

Not applicable

$\mathsf{Form}~8868$

(Rev. April 2009)

Department of the Treasury
Internal Revenue Service

App ation for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

 If you are fi 	ling for an Automatic 3-	Month Extension, com	plete only Part I and check	this box			► X
 If you are find the properties of t	ling for an Additional (N te Part II unless you have	lot Automatic) 3-Montle already been granted	n Extension, complete only an automatic 3-month exter	Part II (on pagnsion on a pre	je 2 of this form viously filed Fo	n) rm 8868	
Part Auto	matic 3-Month Exten	sion of Time. Only s	ubmit original (no copies n	needed)			
A corporation i	required to file Form 990	0-T and requesting an	automatic 6-month extensior	n - check this t	oox and comple	te	
•							.▶ 📙
time to file inco	ome tax returns		s, REMICs, and trusts must		·		
one of the ref electronically returns, or a co	turns noted below (6 r f (1) you want the add omposite or consolidate	months for a corporat litional (not automatic) ed From 990-T Instead	e Form 8868 if you want a non required to file Form 9 3-month extension or (2) y , you must submit the fully o it www irs gov/efile and click	90-T) Howev ou file Forms completed and	er, you canno 990-BL, 6069 d signed page	ot file Fo 9, or 887 2 (Part II)	rm 8868 0. group
Type or	Name of Exempt Organiz				Employer ide	ntification	number
print	MGR FOUNDATI				41-193	9826	
File by the due date for	Number, street, and roor 10350 BREN F	m or suite no If a P O box, ROAD WEST	see instructions C/O TA	X DEPARTM	IENT		
filing your return See	City, town or post office,	state, and ZIP code For a	foreign address, see instructions				
instructions	MINNETONKA,	MN 55343					
Check type o	f return to be filed (file						
Form 990		Form 990-T (corpo	•	Fo.	rm 4720		
Form 990	-BL	· · ·	101(a) or 408(a) trust)	Fo	rm 5227		
				rm 6069			
X Form 990	-PF	Form 1041-A		Fo	rm 8870		
Telephone	are in the care of \blacktriangleright MANO \blacktriangleright 952 656-46	501	FAX No ►	neck this box		_	▶ □
			ligit Group Exemption Number			lf the	
for the whole g	group, check this box. Ns of all members the e	► ☐ If it is for part	of the group, check this box	· 	nd attach a lis		
			a corporation required	to file For	m 990-T) e	xtension	of time
uiiii	08/15 201 ganization's return for	to file the exem	pt organization return for th	ne organizatio	n named abov	e The ex	tension is
	_						
► X	tax year beginning		, and ending				
2 If this tax	year is for less than 12	2 months, check reason	Initial return F	inal return	Change in a	accountin	g period
•	oplication is for Form 9 dable credits. See instru		4720, or 6069, enter the	tentative tax	· · · · · · · · · · · · · · · · · · ·	a \$	2,825.
b If this ap	plication is for Form 99	90-PF or 990-T, enter a	any refundable credits and e	stimated tax			
made In	clude any prior year ove	rpayment allowed as a	credit		3	3b \$	825.
			our payment with this form,	•	d, deposit		
with FT	D coupon or, if requi	ired, by using EFTPS	(Electronic Federal Tax F	Payment Syst	em)See		
instructio						sc \$	2,000.
•		electronic fund withdra	wal with this Form 8868, see	Form 8453-E	O and Form 8	879-EO	
for payment in				 -			
For Privacy A	ct and Paperwork Red	uction Act Notice, see	Instructions.		For	m 8868 (F	Rev 4-2009)

Form 88	168 (Rev 4-2009)			Page 2
	ou-are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box			► X
	Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed			8
	ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)	•		
	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no cor	oies	need	led).
	Name of Exempt Organization MGR FOUNDATION	Employer identification number		
Type	C/O TAX DEPARTMENT 41-19398:	26		
File by	Number, street, and room or suite no. If a P.O. box, see instructions For IRS use only	For IRS use only		
extende	□ 10350 BREN ROAD WEST			
due da filing th	e City, town or post office, state, and ZIP code. For a foreign address, see instructions.		65°53 4	DEFASTE
return :			() () () () () () () () () ()	
Chec	k type of return to be filed (File a separate application for each return)		<u> </u>	
	Form 990 X Form 990-PF Form 1041-A	Г	Fo	rm 6069
	Form 990-BL Form 990-T (sec 401(a) or 408(a) trust) Form 4720			rm 8870
-	Form 990-EZ Form 990-T (trust other than above) Form 5227	_		
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.				
The books are in the care of ► MARY VANDELAC				
	ephone No ► 952 656-4601 FAX No ►		-	
• If the organization does not have an office or place of business in the United States, check this box				
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is				
	e whole group, check this box If it is for part of the group, check this box If it is for part of the group, check this box			
list with the names and EINs of all members the extension is for				
-	I request an additional 3-month extension of time until 11/15/2010			
	For calendar year 2009, or other tax year beginning and ending			
	f this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period			
-	State in detail why you need the extension			
	ADDITIONAL TIME IS REQUIRED TO GATHER THE INFORMATION NECESSARY			
	FOR A COMPLETE AND ACCURATE RETURN.			
				
82	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	ТТ		
	nonrefundable credits. See instructions	8a	\$	2,825.
	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated	100	<u>*</u>	
	tax payments made. Include any prior year overpayment allowed as a credit and any amount paid.	47.55		
	previously with Form 8868	8b	\$	2,825.
	Balance Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit	 • • 	*	
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c	ŧ	
	Signature and Verification	JUC 1	Ψ	0.
Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief.				
It is true, correct, and complete, and that I am authorized to prepare this form				
			1	1
Signatu	re Nil Date	9	YIN.	1110
Signatu	Date	Form	8868	(Rev 4-2009)
				1.101 4-5000)