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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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

benefit trust or private foundation) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements Open to Public

A ·F	or th	e 2009	cale		r year, or								1 , 20				,				20 10	
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ies	4	Numbe	er of in	dep	endent votır	ng m	embers	of the g	overni	ing bo	dy (Pa	art VI,	line 1b)					4			12
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					work Redu	_								• • •	•	<u> </u>					Form 99	

Checklist of Required Schedules

Part IV

•			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		х	
_	Is the organization required to complete Schedule B, Schedule of Contributors?	1	Λ.	
2 3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2		
	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		X
5	Sections 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		-
6	Did the organization maintain any donor advised funds or any similar funds or 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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	ŀ		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
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	۴		
•	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part N	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or	-		
. •	quasi-endowments? If" Yes," complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,	<u> </u>		
	VII, VIII, IX, or X as applicable	11		Х
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	. Ŋ. ·	70	1. 30 M.
	Schedule D, Part VI	28.3%		٠ ,
•	Did the organization report an amount for investments—other-securities in Part X, line 12 that is 5% or more	13 's 19 7		d d
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	100		
•	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more		*	. 4
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	N.		
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			n Ni G
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			· 2.000
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"		sir` neti	اما الما
	complete Schedule D, Parts XI, XII, and XIII	12	X	(45) (48)
12A	Was the organization included in consolidated, independent audited financial statement for the tax year? Yes No	kalis.		
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	2		80 MIN
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	$ Did \ the \ organization \ have \ aggregate \ revenues \ or \ expenses \ of \ more \ than \ \$10,000 \ from \ grantmaking, \ fundraising, $			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
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		X
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	<u> </u>	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			٠,,
4.5	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			v
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	-	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	40		Х
20	If "Yes," complete Schedule G, Part III	19 20		X
20	Did the organization operate one of more hospitals. If Tes, complete schedule if	- 40		(2000)

Par	Checklist of Required Schedules (continued)			
•			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	_		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K If "No," go to question 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	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		Χ
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	ļ		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part N	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
-	Part I	31		Х
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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	<u> </u>		
55	19? Note. All Form 990 filers are required to complete Schedule O	38	х	
				(2000)

Par	t V Statements Regarding Other IRS Filings and Tax Compliance	-		
	•		Yes	No
1 a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S Information Returns Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable		_	
	gaming (gambling) winnings to prize winners?	1c		
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			ال ا
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3 a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3 b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶	2367	Š.,	
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank	Y		
_	and Financial Accounts.		1,282,00	اسُرُون
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
	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	_		
C -	Prohibited Tax Shelter Transaction?	5c		
oa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	_		X
h	organization solicit any contributions that were not tax deductible?	6a		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6ь		
7	Organizations that may receive deductible contributions under section 170(c).	2005	24000	1
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	11		
-	and services provided to the payor?	7a	2000	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	400	77	被
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	440		
	benefit contract?	7 e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7 h	V Manuard No.	120 0000 14
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			23.1
_	organization, have excess business holdings at any time during the year?	8	2000000	X
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	A. PATE	The state of the state of
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			84
11	Section 501(c)(12) organizations. Enter. Gross prome from members or characteristics.			
a	Gross income from members or shareholders			
D	amounts due or received from them)			
122	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	1 1 1 1 1 1 1 1 1 1	****
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	120	Carlo C	- A
	120 The amount of the champs more of decrease during the year 120	1.468.2030	(967/K) 88	8-2-61 A

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sect	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body	J		
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			_
-	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	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		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7 a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7 b		Χ
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		X
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal			
Reve	enue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11	X	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		Х
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		
b	Other officers or key employees of the organization	15b		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	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 Forms 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 X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of inte	rest		
	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 STANLEY H. SCHWEITZER MINNEAPOLIS, MINNESOTA, 55402	ne		
	organization > STANLET H. SCHWEITZER MINNEAPOLIS, MINNESUTA, 55402			
	612-339-7811			

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

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 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's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees; highest compensated employees; and former such persons

X Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average	Posi	tion ((C		that app	nlv)	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
RICHARD SPIEGEL		,								
DIRECTOR	1.00	X					l	0.	0.	0.
LINDA FITERMAN										
DIRECTOR	1.00	X						0.	0	0.
SCOTT LIFSON										
DIRECTOR	1.00	Х						0.	0	0.
JUDGE ROSANNE NATHANSON										
DIRECTOR	1.00	X			ı			0.	О.	0.
THOMAS P. SANDERS										
DIRECTOR	1.00	X						0.	0.	0.
MICHAEL HOROVITZ										
DIRECTOR	1.00	Х						0.	0.	0.
SUSAN R. SHAPIRO										-
DIRECTOR	1.00	X					ļ	0.	0.	0.
BARRY GLASER	···		П				_	······		
DIRECTOR	1.00	X						0.	0.	
STEPHEN E. LIEBERMAN		-								
CO-PRESIDENT	1.00	X		Х				0.	0.	0.
FRANK TRESTMAN	<u> </u>									
CO-PRESIDENT	1.00	X		Х				0.	0	0.
HERMAN MARKOWITZ										
SECRETARY	1.00	X		Х				0.	0	0
STANLEY H. SCHWEITZER				-						
TREASURER	1.00	Х		Х				0.	0.	0.
						!				

Part VII Section A. Officers, Directors, Tru	ustees, Ke	y En	plo	ye	es,	and I	Hig	hest Compensat	ed Emplo	yees (d	continued)
` (A)	(B)				C)			(D)	(E)		(F)
Name and title	Average hours per week	P or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reporta compens from rel organiza (W-2/1099	ation ated tions	Estimated amount of other compensation from the organization and related organizations
		-			L				=	-	
									-		
1b Total							>	0.		0.	0
2 Total number of individuals (including but not reportable compensation from the organization		hose I		d a	bov	e) who	o re	eceived more than	\$100,000 ı	n	
3 Did the organization list any former office employee on line 1a? If "Yes," complete Schedu											Yes No
4 For any individual listed on line 1a, is the the organization and related organizations individual	greater th	an \$	150	0,00	02	If "Y	es,"	" complete Sched	ule J for	such	4 X
5 Did any person listed on line 1a receive services rendered to the organization? If "Yes,"	e or accr	ue c	omp	ens	atio	n fro	m	any unrelated o	rganization	for	5 X
Section B. Independent Contractors						<u> ре.</u>		· · · · · · · · · · · · · · · · · · ·	<u> </u>		
1 Complete this table for your five highest compensation from the organization.	compensat	ed in	dep	end	dent	cont	rac	ctors that received	more th	an \$10	0,000 of
(A) Name and business add	ress							(B) Description of ser	vices	C	(C) compensation
NEUBERGER BERMAN 605 THIRD AVENUE	NEW YO	RK,	NY	1	015	58	A	ASSET MGMT FE	ES		104,149.
							F			- · · -	
2 Total number of independent contractors (in more than \$100,000 in compensation from th				nite	d to	thos	e I	isted above) who	received		

Pai	rt VII	Statement of Revenue			41-1448610		
				(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	Federated campaigns 1a Membership dues 1b					
ts, ç amo	С	Fundraising events 1c					4
ilar ilar	d	Related organizations 1d	-				
sim	е	Government grants (contributions) 1e	-				1 [
buti	f	All other contributions, gifts, grants,		z = 00 -	T- 2 75	2 2-7 - F PT	
a t	-	and similar amounts not included above . 1f					
a Ĉ	g h	Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f		0	,		[
ne	''	Total. Add lifes 1a-11	Business Code				
Program Service Revenue	2a			<u> </u>		An amount of the same of the s	
e Re	b						
Σ̈	С						
Se	d			-			
ıran	е						
o C	f g	All other program service revenue Total. Add lines 2a-2f		0			% X
	3	Investment income (including dividends, inter			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		<u> </u>
		other similar amounts)		507,450	507,450	1	
	4	Income from investment of tax-exempt bond p	_	0			
	5	Royalties		0.			
		(ı) Real	(II) Personal		l á . k		M. Yang
	6a	Gross Rents		is interest			
	b	Less rental expenses					
	c d	Rental income or (loss)	<u> </u>	0.	<u> </u>		
		(i) Securities	(II) Other	E. Arma	*	\$°€ 50	5 "
	7 a	Gross amount from sales of assets other than inventory 10,343,403			A. S. C. C.	1. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	b	Less cost or other basis					
		and sales expenses 8,955,421					
	С	Gain or (loss)	1			` <u></u> \$	
4.	d	Net gain or (loss)	· · · · · · · · · · · · · · · · · · ·	1,387,982	1,387,982.)	
Other Revenue	8a	Gross income from fundraising events (not including \$					l., ^ * i
×e		of contributions reported on line 1c)					g State of
ď		See Part IV, line 18 a					
her	ь	Less direct expenses b					
ŏ	С	Net income or (loss) from fundraising events .	<u></u>	0.	. , , , , , , , , , , , , , , , , , , ,	v.	
	9a	Gross income from gaming activities.					
		See Part IV, line 19 a					
	b	Less direct expenses b Net income or (loss) from gaming activities		0	₩ ?	<u> </u>	
	10a	Gross sales of inventory, less				• ;	,
	102	returns and allowances a					* *
	b	Less cost of goods sold b			<u> </u>		
	С	Net income or (loss) from sales of inventory		0.			
		Miscellaneous Revenue	Business Code		<u> </u>	my tent .	~ (g)
	11a	LITIGATION SETTLEMENT	900099	5,413.	5,413		
	b						
	ر. د	All other revenue					
	d e	Total. Add lines 11a-11d		5,413	. 3 14	4 1 78	,
	12	Total Revenue. See instructions		1,900,845.	1,900,845.	· · · · · · · · · · · · · · · · · · ·	

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 not required to complete columns (B), (C), and (D).

	All other organizations must complet			plete columns (B), (C)	
	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 expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	950,000.	950,000.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0.			
3 _	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0.			
	Benefits paid to or for members	0.			
5	Compensation of current officers, directors,	0.			
•	trustees, and key employees	0.			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
-		0.			
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)) and section 403(b) employer contributions)	0.			
9	Other employee benefits	0.			
10	Payroll taxes	0.			
11	Fees for services (non-employees)	_			
а	Management	0.			
b	Legal	0.			
	Accounting	30,658.		30,658.	
d	Lobbying	0.			
е	Professional fundraising services See Part IV, line 17	0.		164 000	
f	Investment management fees	164,009.		164,009.	
g	Other	0.			
12	Advertising and promotion	0.			
13	Office expenses	0.			
14	Information technology	0.			
15	Royalties	0.			
16	Occupancy	0.			
17	Travel	0.			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19	Conferences, conventions, and meetings	0.			
20	Interest	0.			
21	Payments to affiliates	0.			
22	Depreciation, depletion, and amortization	0.			
23	Insurance	0.			
	Other expenses Itemize expenses not				
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below)				
а	BANK SERVICE FEES	598.		598.	·
_	FOREIGN TAXES	2,618.		2,618.	
-	MEETINGS	888.	888.	·	·
	MN REGISTRATION FEE	25.		25.	
				-	
	All other expenses				
	Total functional expenses. Add lines 1 through 24f	1,148,796.	950,888.	197,908.	
26	Joint Costs. Check here ▶ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	2,230,730.	300,000.	23.7300.	
JSA					Form 990 (20

Par ·	LA	Balance Sheet	(4)		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments	358,178.	2	314,393.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, ke	ev		*
		employees, and highest compensated employees. Complete Part II of	of		
- 1		Schedule L		5	
	6.	Receivables from other disqualified persons (as defined under section	on = = = =	-	
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complet	•]	
		Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net	' • 	7	
SS	8	Inventories for sale or use	· •	8	-
٩	9	Prepaid expenses and deferred charges	· •	9	
.	10a	Land, buildings, and equipment cost or 10a	' '	 	
		other basis Complete Part VI of Schedule D			
	b	Less accumulated depreciation		10c	
.	11	Investments - publicly traded securities ATCH . 4 .	19,477,799.		19,708,180.
	12	Investments - other securities See Part IV, line 11	` ` 	12	650,000.
	13	Investments - program-related See Part IV, line 11	' ' 	13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		L	67,242.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	' • ———————————————————————————————————		20,739,815.
$\overline{}$	17	Accounts payable and accrued expenses		17	207.0370200
- 1	18	Grants payable		18	3,857,142.
- 1	19	Deferred revenue	· • ———————————————————————————————————	19	3,001,112.
- 1	20	Tax-exempt bond liabilities		20	
Ι.	21	Escrow or custodial account liability Complete Part IV of Schedule I	· ·	21	
⊕		Payables to current and former officers, directors, trustees, ke		21	
∏⊒ 1		employees, highest compensated employees, and disqualifie	•		
Ë		persons. Complete Part II of Schedule L		22	
,	23	Secured mortgages and notes payable to unrelated third parties		23	
- 1		Unsecured notes and loans payable to unrelated third parties		24	
- 1	25	Other liabilities Complete Part X of Schedule D		25	
		Total liabilities. Add lines 17 through 25	4,332,142.		3,857,142.
		Organizations that follow SFAS 117, check here ► X and complete lines 27 through 29, and lines 33 and 34.		20	0,001,111
ğ ,	27	Unrestricted net assets	16,559,894.	27	16,882,673.
Sala	28	Temporarily restricted net assets	·	28	
P	29	Permanently restricted net assets	•	29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34.		23	
S	30	Capital stock or trust principal, or current funds		30	
se	31	Paid-in or capital surplus, or land, building, or equipment fund	'	31	
Sp.	32	Retained earnings, endowment, accumulated income, or other funds		32	
* 1.3		Total net assets or fund balances		33	16,882,673.
det.	33				

Form **990** (2009)

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form 990 (2009)

3b

SCHEDULE A (Form 990'or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

THE HARRY KAY CHARITABLE FOUNDATION 41-1448610 Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i), 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 4 hospital's name, city, and state 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 7 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 Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 331/3% 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 331/3% 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 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). Χ 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). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h Type II Type I c Type III - Functionally integrated 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). f 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 a Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) No Yes and (iii) below, the governing body of the supported organization? X 11g(ı) (ii) A family member of a person described in (i) above? Χ 11g(ii) 11g(iii) X (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s) h (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization (v) Did you notify (vii) Amount of (vi) Is the organization (described on lines 1-9 in col (i) listed in your the organization in organization in col support above or IRC section governing document? col (i) of your (i) organized in the (see instructions)) support? US? Yes No Yes No Yes ATTACHMENT

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-F7.

Schedule A (Form 990 or 990-EZ) 2009

950,000.

Sche	dule A (Form 990 or 990-EZ) 2009			41	-1448610		Page 2
Par	Support Schedule for Or (Complete only if you chec	ganizations D ked the box or	Described in S	Sections 170(8 of Part I)	b)(1)(A)(iv) a	nd 170(b)(1)(/	
Sec	tion A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied 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 through 3	R 37.7		*			
5	The portion of total contributions by each					1 1/ 1/2	
	person (other than a governmental unit or			* · *	wia ·		
	publicly supported organization) included		Jan Washer 2	An u			
	on line 1 that exceeds 2% of the amount						
_	shown on line 11, column (f)		^&. ·'		250 1 2 2 2 2 2 2 2 3 4 3 2 2 2 3 4 3 2 2 2 3 4 3 2 2 2 3 4 3 2 2 2 3 4 3 2 3 2		
6	Public support. Subtract line 5 from line 4 tion B. Total Support		<u>₹</u>	, , , , , ,	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	· · · · · · · · · · · · · · · · · · ·	
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	(4) 2000	(5) 2000	(0) 2007	(4) 2000	(0) 2003	(i) rotal
8	Gross income from interest, dividends,						
Ū	payments received on securities loans, rents, royalties and income from similar sources						
9	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)						
11	Total support. Add lines 7 through 10			20 1 30 B	(a) (a) (a) (b) (b) (a) (b) (b) (a) (b) (b) (b) (b) (b) (b) (b) (b) (b) (b		
12	Gross receipts from related activities, etc. (12	
13	First five years. If the Form 990 is f organization, check this box and stop here	<u> </u>		nd, third, fourth,	or fifth tax ye	ar as a section	501(c)(3) ▶
Sec	tion C. Computation of Public Sup						
14	Public support percentage for 2009 (In						<u>%</u>
15	Public support percentage from 2008						%%
16a	331/3% support test - 2009. If the c	-					e, check
	this box and stop here. The organizati			_			▶ 🗀
b	331/3% support test - 2008. If the	-					
	check this box and stop here. The org	•					
1/a	10%-facts-and-circumstances test - 2						
	or more, and if the organization me Part IV how the organization meets						
	· ·			•	•		upported
b	organization	2008. If the org	ganization did n	ot check a box	on line 13, 16	ia, 16b, or 17a,	
	15 is 10% or more, and if the organization is 10% or more is 10% or more in 10% or mor						•
	Explain in Part IV how the organization				-	•	publicly
40	supported organization						▶ 📖
18	Private foundation. If the organization						
	instructions	<u> </u>		 			
					\$	Schedule A (Form 9	90 or 990-EZ) 2009

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						_
C	alendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include						
	any "unusual grants ")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related 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	<u> </u>					
	benefit and either paid to or expended on						
	its behalf						
5	The value of services or facilities						1
	furnished by a governmental unit to the				•		
	organization without charge						
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and 3	1					
	received from disqualified persons						
Đ	received from other than disqualified	:				ļ	
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13						•
	for the year			_			
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from	1					
							L
		(-) 000F	"	() 0007	40000		1 (2 = 1.
C	· · · · · · · · · · · · · · · · · · ·	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 10a							
	payments received on securities loans,						
	rents, royalties and income from similar						
.	ſ						
ь	, ,						
	,						ļ
_			, .				
• •							
	whether or not the business is regularly						
12	_						
13	· · · · · · · · · · · · · · · · · · ·						
14			n's first second	third fourth or	fifth tax year a	s a section 501	(c)(3)
• •							
Sec							
15	Public support percentage for 2009 (line 8,	, column (f) divide	ed by line 13, colur	nn (f))		15	%
16	Public support percentage from 2008 Sche	dule A, Part III, lin	ie 15			16	%
Sec							
17	Investment income percentage for 2009 (iii	ne 10c, column (f	f) divided by line 1	3, column (f))		17	%_
18						18	%
any vurusual grants*) 2 Gross recepts from admissions, merchandes sold or servees performed, or facilities furnished in any activity that is related to the organizations have-empt purpose 3 Gross recepts from admissions, related to the organizations to be neft and either paid to or expended on its behalf. 4 Tax reverues levied for the organization's benefit and either paid to or expended on its behalf. 5 The value of services or facilities furnished by a poverimental unit to the organization without charge. 6 Total. Add lines 1 through 5. 7 A Amounts included on lines 2, 2 and 3 received from disqualified persons. 8 Amounts included on lines 2 and 3 received from disqualified gross. 9 Amounts included on lines 2 and 3 received from disqualified gross. 9 Codd lines 7 and 7 b. 8 Public support (Subtract line 7 c from line 6). 9 Amounts from line 6. 10 Gross income from interest, dividends, payments received in the contraction of the year. 10 Gross income from interest, dividends, payments received in securities loss, sources. 9 Unrelated business taxible income (less section 511 taxes) from businesses activities not included in line 10b, whether or not the business is regularly carried on . 10 Horizone from increased to secure the section of the contraction of the section of the section of the section from sentiles to form the sele of capital assets (Capital in Part IV) . 11 Net income Do not include gain or loss from the sele of capital assets (Capital in Part IV) . 12 Other income Do not include gain or loss from the sele of capital assets (Capital in Part IV) . 13 Total support (Add lines 9, 10c, 11, and 12) . 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or lifth tax year as a section 501(c)(3) organization, check his box and stop here. Section C. Computation of Public Support Percentage 17 Investment income percentage for 2009 (line 8, 10c, 10lm (f) divided by line 13, column (f)) . 15		and line					
	17 is not more than 33 1/3 %, check the	iis box and sto	p here The org	anization qualifies	s as a publicly	supported organ	ization ▶
b							
	Private foundation. If the organization	did not check a	a box on line	14, 19a, or 19b			
· · ·						chedule A (Form	200 or 200-E71 2002

Page 4

Part II, line 17a or 17b, or Part III, lin	ie 12. Provide any o	ther additiona	al informa		ee instruc HMENT 1	
SCHEDULE A, PART I - INFORMATION ABOUT SUPPORTED OF SUPPORTED ORGANIZATION	RGANIZATIONS (II) EIN	(III) TYPE OF ORGANIZATION	(IV) YES NO	(V) YES NO	(VI) YES NO	(VII) AMOUNT OF
MPLS JEWISH FEDERATION	41-0693866	07	х	х	х	525,000
UNITED JEWISH FUND & COUNCIL	41-0693887	07	X 		<u>x</u>	225,000
HERZL CAMP	41-6009136	07	х	х	х	200,000
TOTAL AMOUNT OF SUPPORT						950,000

Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10,

SCHEDULE D (Form 990)

Denartment of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public

Internal Revenue Service Inspection Name of the organization Employer identification number THE HARRY KAY CHARITABLE FOUNDATION 41-1448610 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 1 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) 4 5 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? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Part II 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 a certified historic structure Preservation of open space 2 Complete lines 2a through 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 _2b b Number of conservation easements on a certified historic structure included in (a) 2c С Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 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. 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. 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: 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:

Pai	rt III ` Organizations Maintain	ing Collections	of Art, Histor	rical Treasure	s, or Ot	her Similar /	Assets (continue	ed)
•									
3			other records,	check any of t	he follow	ing that are a	significar	nt use of i	ts
		oly)							
а	<u></u>		d	Loan or ex	kchange p	orograms			
b			e	Other					
С									
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in								
	Part XIV								
5	During the year, did the organization	on solicit or receiv	e donations of	f art, historical	treasures	, or other sımı	lar		
	assets to be sold to raise funds rat	her than to be ma	intained as pa	rt of the organi	zation's c	ollection?	[Yes	No
Par					n answe	red "Yes" to	Form 99	0, Part	
1 a									
							[Yes	U No
b	If "Yes," explain the arrangement in	Part XIV and cor	nplete the follo	owing table					
						Α	mount		
С	Beginning balance				1c				
d									
е	Distributions during the year				1e				
f									
2a	Did the organization include an am	ount on Form 99	0, Part X, line 2	21?			[Yes	No
_ b	If "Yes," explain the arrangement in	Part XIV					_		_
Par	t V Endowment Funds. Con	nplete if organiz	zation answer	red "Yes" to F	orm 990	, Part IV, line	<u>−</u> 10.		
		(a) Current Year	(b) Prior yea	r (c) Two y	ears back	(d) Three ye	ars back	(e) Four	years back
1 a	Beginning of year balance								
b	Contributions								
C	Net investment earnings, gains,				•				
	and losses								
d	Grants or scholarships								_
е	Other expenditures for facilities .								
	and programs								
f	Administrative expenses								
g	End of year balance								•
2	Provide the estimated percentage	of the year end ba	alance held as:		•	·			
а		-	%						
b	•	· -							
С		%							
		the possession o	f the organizat	tion that are he	ld and ad	iministered for	the		
		•						ſ,	res No
	•								
	• • • • • • • • • • • • • • • • • • • •								-
ь	• •								
4	, ,	•	•					<u> </u>	
Par					rt X line	10			
ı Gı								4\ D I I	
		(in		basis (other)			, (c) Book vali	
b	•						<u> </u>		
C	•						——		
d	• •	<u> </u>							
e									
3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection tems (check all that apply) a Public exhibition descriptions of the organization's collections and explain how they further the organization's exempt purpose in Part XIV A Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assests to be sold to raise funds rather than to be maintained as part of the organization's collection?									
							0-1-4	1- D /F	000\ 0000

Part VII Investments - Other Securities. See	Form 990, Part X, Iir	ne 12.	9-
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
Financial derivatives			
Closely-held equity interests			
Other	-		
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
	-		
	· <del>-   </del>		
	· <del> </del>		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	<b>&gt;</b>		
Part VIII Investments - Program Related. See	Form 990, Part X, li	ne 13.	
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
	***		
	<b>&gt;</b>		
Part IX Other Assets. See Form 990, Part X,			
	a) Description	(b) Book valu	1e
		1.200,000	
****			
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)		<u></u> ▶	
Part X Other Liabilities. See Form 990, Part	· · · · · · · · · · · · · · · · · · ·		
1. (a) Description of liability	(b) Amount		1. T
Federal income taxes	<del> </del>		San A
	<del>-</del>		8
			3444
			*·*
			, ,
	<del>- </del>		
<del></del>			
	<del> </del>		
	<del>-</del>		,
		· 在 注 、 数 注 · 《 数 注 · * * * * * * * * * * * * * * * * * *	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>	the state of the second of the	
		The second secon	

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Page 5

SCH. D, PART X, LINE 2

IN JANUARY 1, 2010, THE FINANCIAL ACCOUNTING STANDARDS BOARD ("FASB") MODIFIED FASB ASC 820-10, FAIR VALUE MEASUREMENTS AND DISCLOSURE, WITH ACCOUNTING STANDARDS UPDATE NO. 2010-06 ("ASC UPDATE 2010-06"). ASC UPDATE 2010-06 PROVIDES AMENDMENTS TO REQUIRE NEW DISCLOSUSRES AND CLARIFY EXISTING DISCLOSURES FOR FAIR VALUE MEASUREMENTS. ASC UPDATE 2010-06 WAS EFFECTIVE FOR REPORTING PERIODS BEGINNING AFTER DECEMBER 15, 2009, HOWEVER THE FOUNDATION ADOPTED THE GUIDANCE EARLY. THE EARLY ADOPTION OF THE GUIDANCE DID NOT HAVE AN IMPACT ON THE FOUNDATION'S FINANCIAL STATEMENTS.

# SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

OMB No 1545-0047	2009
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Employer identification number 41-1448610 Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990. Part I General Information on Grants and Assistance THE HARRY KAY CHARITABLE FOUNDATION

-	the selection criteria used to award the grants or assistance?
7	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States
Д,	Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to
	Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use
	Part IV and Schedule I-1 (Form 990) if additional space is needed · · · · · · · · · · · · · · · · ·

rait iv allu schedule I-1 (rollii 990) il additioliai space is needed	aan) II audille	Juai space is r	needed				•
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant (e) Amount of non-cash assistance	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MINNEAPOLIS FEDERATION FOR JEWISH SERVICE							
MINNEAPOLIS, MINNESOTA	41-0693866	501(C)(3)	525,000			-	CAPITAL CAMPAIGN
UNITED JEWISH FUND AND COUNCIL							
ST PAUL, MINNESOTA	41-0693887	501(C)(3)	225,000.				CAPITAL CAMPAIGN
HERZL CAMP						:	
SI LOUIS PARK, MN	41-6009136	501(C)(3)	200,000				CAPITAL CAMPAIGN
						_ •—	
						_	
2 Enter total number of section 501(c)(3) and government organizations	and governmer	nt organizations					3
3 Enter total number of other organizations	•						 

JSA

9E1288 2 000

Schedule I (Form 990) 2009

Schedule I (Form 990) 2009 PAGE 23 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 (f) Description of non-cash assistance Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information (e) Method of valuation (book, FMV, appraisal, other) ADDITION, THE ORGANIZATION IS IN CONTACT WITH THE DONEES YEARLY PROGRESS THE ORGANIZATION REVIEWS THE ANNUAL FINANCIAL REPORTS OF THE DONEES. IN SKA37940.0 (d) Amount of non-cash assistance Use Part IV and Schedule I-1 (Form 990) if additional space is needed (c) Amount of cash grant (b) Number of recipients ON THEIR CAPITAL CAMPAIGN. (a) Type of grant or assistance PART 1, LINE 2 9E1289 1 000 Part III λSΑ

Page 2

41-1448610

Schedule 1 (Form 990) 2009

#### SCHEDULE O (Form 990)

#### Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990.

THE HARRY KAY CHARITABLE FOUNDATION

Employer identification number

41-1448610

ATTACHMENT 2

PART VI, SECTION A, LINE 11

THE 990 IS REVIEWED IN DETAIL BY THE TREASURER. THE FINAL DRAFT OF THE 990 IS PRESENTED TO THE BOARD OF DIRECTORS AT ONE OF THEIR QUARTERLY MEETINGS FOR APPROVAL PRIOR TO THE FORM BEING FILED WITH THE IRS.

PART VI, SECTION C, LINE 19

THE FINANCIAL STATEMENTS AND ALL OTHER GOVERNING DOCUMENTS ARE AVAILABLE UPON REOUST IN EITHER PAPER OR DIGITAL FORMAT.

ATTACHMENT 3

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE FOUNDATIOPN STARTED IN 1985 WITH 20 MILLION DOLLARS AND A PURPOSE OF FUNDING MEDICAL ORGANZIATIONS, JEWISH ORGANZIATIONS AND OTHER WORTHWHILE ORGANZIATIONS. SINCE INCEPTION, THE HARRY KAY FOUNDATION HAS PROVIDED OVER 50 MILLION DOLLARS TO VARIOUS ORGANIZATIONS IN THE MPLS- ST. PAUL AREA.

ATTACHMENT 4

PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

DESCRIPTION

BEGINNING BOOK VALUE

**ENDING** BOOK VALUE

COST OR FMV

SANFORD C. BERNSTEIN & CO.

5,598,674.

5,028,255.

**FMV** 

Name of the organization	-	Employer identification	n number
THE HARRY KAY CHARITABLE FOUNDATION		41-144861	0
		ATTACHMENT 4 (CO	NT'D)
FORM 990, PART X - INVESTMENTS - PUBL	ICLY TRADED SECURITIES	=	
	BEGINNING	ENDING	COST
DESCRIPTION	BOOK VALUE	BOOK VALUE	OR FMV
NEUBERGER BERMAN, LLC	9,588,966.	10,129,111.	FMV
FAF ADVISORS CAPITAL MGMT	4,290,159.	4,550,814.	FMV
TOTALS	19,477,799.	19,708,180.	

#### Form 8868

(Rev January 2011)

Department of the Treasury Internal Revenue Service

## Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

<ul><li>If you are</li></ul>	filing for an Automatic 3-Month Extension, of filing for an Additional (Not Automatic) 3-Molete Part II unless you have already been gra	onth Exten	i <mark>sion, complete only Part II</mark> (on page	2 of this form).		
a corporation 8868 to req Return for instructions)	ling (e-file). You can electronically file Form n required to file Form 990-T), or an addition uest an extension of time to file any of the Transfers Associated With Certain Personal. For more details on the electronic filing of the	nal (not au forms liste Il Benefit nis form, vi	tomatic) 3-month extension of time.  ed in Part I or Part II with the excep  Contracts, which must be sent to  sit www.irs gov/efile and click on e-fil	You can electronically tion of Form 8870, li the IRS in paper for	y file Form nformation ormat (see	
Part I Au	tomatic 3-Month Extension of Time. Or	nly submit	original (no copies needed).			
A corporatio	n required to file Form 990-T and requesting	an automa	atic 6-month extension - check this b	ox and complete		
All other cor	porations (ıncludıng 1120-C fılers), partnersh	ips, REMIC	Cs, and trusts must use Form 7004 to i	equest an extension o	f time	
to file incom	Name of exempt organization		<del></del>	Employer identification	numbor	
Type or			7	41-1448610	number	
print	Number street and room or suite no. If a P.O. hove see instructions					
File by the	1		CUOIIS.			
due date for filing your	222 S 9TH STREET, SUITE #100		drana and materiations			
return See	City, town or post office, state, and ZIP code For	a foreign ad	dress, see instructions			
instructions	MINNEAPOLIS, MN 55402					
Enter the Re	eturn code for the return that this application	is for (file a	a separate application for each return)		0 1	
Application		Return	Application		Return	
ls For		Code	Is For		Code	
Form 990		01	Form 990-T (corporation)		07	
Form 990-BL		02	Form 1041-A		08	
Form 990-E2		03	Form 4720		09	
Form 990-PF		04	Form 5227		10	
	(sec 401(a) or 408(a) trust)	05	Form 6069	=1.77.11	11	
	(trust other than above)	06	Form 8870	· · · · · ·	12	
Telephone  If the orga	s are in the care of ► STANLEY H. SC No ► 612 339-7811 anization does not have an office or place of the arrangement of a Group Return, enter the organization's for	lbusiness ir	FAX No. ▶  n the United States, check this box			
	e group, check this box					
	e names and EINs of all members the extens		art of the group, check this box	and all	1011	
	st an automatic 3-month (6 months for a cor	poration re	equired to file Form 990-T) extension ganization return for the organization		dension is	
for the	organization's return for calendar year 20 or	onompt or;	gaza	That above the ox		
	tax year beginning 12/	01, 200	9, and ending	11/30, 20 10		
	ax year entered in line 1 is for less than 12 m hange in accounting period	onths, che	ck reason. Initial return I	Final return		
	application is for Form 990-BL, 990-PF, 99 undable credits. See instructions.	90-T, 4720	), or 6069, enter the tentative tax,	less any 3a \$	0.	
	application is for Form 990-PF, 990-T, ted tax payments made Include any prior year			edits and 3b \$	0.	
c Balanc	e Due. Subtract line 3b from line 3a Include	your paym		ng EFTPS		
	onic Federal Tax Payment System) See instru		with this Farm 0000 and Fire 0	3c \$	0.	
	you are going to make an electronic fund v	witnarawal	with this form 8868, see form 84	+53-EO and Form 88	19-EU for	
payment inst	ructions			- 6000		

Form 8868 (F	Rev 1-2011)					Page 2	
		onth Exter	sion, complete only Part II and check	this box	<del></del> _	► X	
						·	
•	re filing for an Automatic 3-Month Extension,			ioly fillod i of	5555		
Part II				nies needs	<u></u>	_	
	Name of exempt organization						
Type or	THE HARRY KAY CHARITABLE FOU	אר די די מי ואו	J	41-14			
print	Number, street, and room or suite no. If a P.O. bo			31 13	40010		
File by the extended			CHOIS				
due date for	222 S 9TH STREET, SUITE #100		Idrana and Instructions				
filing your return See	City, town or post office, state, and ZIP code For	r a toreign ad	dress, see instructions				
instructions	MINNEAPOLIS, MN 55402		Employer  ON 41-  Application Is For  Form 1041-A  Form 4720  Form 5227  Form 6069  Form 8870  an automatic 3-month extension on a previous CR  FAX No ▶  in the United States, check this box  roup Exemption Number (GEN)  Doart of the group, check this box  10/15, 20 11  12/01, 20 09 , and ending	<del></del>			
Enter the F	Return code for the return that this application	is for (file a	a separate application for each return)		[	0 1	
Application	n	Return	Application		F	Return	
Is For	•	Code				Code	
Form 990		01	13.0.				
Form 990-I	DI	02	Form 1041-A			08	
		03				09	
Form 990-6	<del></del>	04	· · · · · · · · · · · · · · · · · · ·			10	
Form 990-F			<del></del>	<del></del>		11	
	T (sec 401(a) or 408(a) trust)	05					
	T (trust other than above)	06			lad Farm O	12	
If this is for the who list with the I requ For Control If the	for a Group Return, enter the organization's fo	ur digit Gro f it is for pa n is for ntil ing	art of the group, check this box	<b>▶</b> □	If this is and attach	a	
8a if this	s application is for Form 990-BL 990-PF 99	90-T 4720	or 6069, enter the tentative tax le	ss anv	<del>-</del> -		
	efundable credits. See instructions	JJ 1, 7120	, s. coco, chief the terrange tax, ie	8a	<b> </b> \$	0.	
		4720 or	6069 enter any refundable credit		¥		
	int paid previously with Form 8868.	ioi youi c	verpayment anowed as a creat an	8b	e	0 .	
		VOUE DOVE	pent with this form of required by using		-		
		•	ient with this form, if required, by using	(	  -	0.	
(	tronic Federal Tax Payment System) See instru		d Varification	<u> </u> 8c	<u> </u>		
-	•	including acc		e best of my	knowledge a	and belief	
Signature >	ann M. Sidni		Title <b>DA</b>	Duto F	7-15-		
	CBÍZ MHM, LLC 222 S 9TH ST, #1000			For	n <b>8868</b> (Re	v 1-2011	

MINNEAPOLIS, MN 55402