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# \* Form 990-PF

### Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545 0052

2010

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2010, or tax year beginning 2010, and ending Initial Return of a former public charity G Check all that apply. Initial return Final return Amended return Address change Name change Employer identification number TEAM FOUNDATION 06-1696861 105 PARK AVE NW В Telephone number (see the instructions) BAGLEY, MN 56621 218-694-3550 If exemption application is pending, check here D 1 Foreign organizations, check here X Section 501(c)(3) exempt private foundation other taxable private foundation Н Check type of organization 2 Foreign organizations meeting the 85% test, check here and attach computation Section 4947(a)(1) nonexempt charitable trust If private foundation status was terminated Accounting method X Cash Fair market value of all assets at end of year J under section 507(b)(1)(A), check here (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination 86,089 (Part I, column (d) must be on cash basis.) under section 507(b)(1)(B), check here Part I Analysis of Revenue and (b) Net investment (c) Adjusted net (d) Disbursements (a) Revenue and Expenses (The total of amounts in income for charitable expenses per books income columns (b), (c), and (d) may not neces-sarily equal the amounts in column (a) purposes (cash basis only) (seé the instructions).) 183,776 Contributions, gifts, grants, etc, received (att sch) if the foundn is not req to att Sch B Interest on savings and temporary 273 273 273 cash investments Dividends and interest from securities 5a Gross rents **b** Net rental income or (loss) 6a Net gain/(loss) from sale of assets not on line 10 **b** Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10 a Gross sales less returns and allowances b Less Cost of goods sold 8 8 .11 W c Gross profit/(loss) (att sch) 11 Other income (attach schedule) 12 Total, Add lines 1 through 11 184,049 273 13 Compensation of officers, directors, trustees, etc Other employee salaries and wages 15 Pension plans, employee benefits 16 a Legal fees (attach schedule) 750 750 **b** Accounting fees (attach sch) SEE ST 1 SEE ST 2 c Other prof fees (attach sch) 17 Interest Taxes (attach schedule)(see instr.) 19 Depreciation (attach sch) and depletion ķ Occupancy Travel, conferences, and meetings Printing and publications Other expenses (attach schedule) SEE STATEMENT 29,369. 1,441. Total operating and administrative expenses. Add lines 13 through 23 30,120 2,192. Contributions, gifts, grants paid PART XV 142,435 142, 435.Total expenses and disbursements. 172,555 0 0 144,627. Add lines 24 and 25 Subtract line 26 from line 12: a Excess of revenue over expenses 11,494. and disbursements 273 b Net investment income (if negative, enter -0-) 273. C Adjusted net income (if negative, enter 0)

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Page 2

| Day                                  | - N    | Balance Sheets  Attached schedules and amounts in the description column should be for end-of year amounts only                   | Beginning of year           | _ Ena c                               | of year               |
|--------------------------------------|--------|---|-----------------------------|---------------------------------------|-----------------------|
| Pari                                 |        | Balance Sheets Attached schedules and amounts in the description column should be for end-of year amounts only (See instructions) | (a) Book Value              | (b) Book Value                        | (c) Fair Market Value |
|                                      | 1      | Cash — non-interest-bearing   |                             |                                       |                       |
|                                      | 2      | Savings and temporary cash investments .  | 74,595.                     | 86,089.                               | 86,089.               |
|                                      | 3      | Accounts receivable   |                             |                                       |                       |
|                                      |        | Less. allowance for doubtful accounts ▶   |                             |                                       |                       |
|                                      | 4      | Pledges receivable  |                             |                                       |                       |
|                                      |        | Less. allowance for doubtful accounts ▶   |                             |                                       |                       |
|                                      | 5      | Grants receivable   |                             |                                       |                       |
|                                      | 6      | Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)       |                             | · · · · · · · · · · · · · · · · · · · |                       |
|                                      | 7      | Other notes and loans receivable (attach sch).  |                             |                                       |                       |
| S                                    |        | Less: allowance for doubtful accounts ▶   |                             |                                       |                       |
| Ş                                    | 8      | Inventories for sale or use   |                             |                                       | _                     |
| ASSET                                | 9      | Prepaid expenses and deferred charges   |                             |                                       |                       |
| S                                    | 10 a   | ı Investments — U.S. and state government obligations (attach schedule)   |                             |                                       |                       |
|                                      | Ŀ      | Investments — corporate stock (attach schedule)   |                             | <del> </del>                          |                       |
|                                      | •      | : Investments — corporate bonds (attach schedule)   |                             |                                       |                       |
|                                      | 11     | Investments land, buildings, and equipment basis  |                             |                                       |                       |
|                                      |        | Less' accumulated depreciation (attach schedule)  |                             |                                       |                       |
|                                      | 12     | Investments – mortgage loans  |                             |                                       |                       |
|                                      | 13     | Investments – other (attach schedule)   |                             |                                       |                       |
|                                      | 14     | Land, buildings, and equipment. basis ►   |                             |                                       |                       |
|                                      |        | Less: accumulated depreciation (attach schedule)  |                             |                                       |                       |
|                                      |        | Other assets (describe Total assets (to be completed by all filers — see instructions. Also, see page 1, item I)                  | 74,595.                     | 86,089.                               | 86,089.               |
| L                                    | 17     | Accounts payable and accrued expenses.  | , 1, 333.                   | 00,005.                               | 00,000.               |
| Ĭ                                    | 18     | Grants payable  |                             |                                       |                       |
| A<br>B                               | 19     | Deferred revenue  |                             |                                       |                       |
| L                                    | 20     | Loans from officers, directors, trustees, & other disqualified persons  |                             |                                       |                       |
| I                                    | 21     | Mortgages and other notes payable (attach schedule)   |                             |                                       |                       |
| Ţ                                    | 22     | Other liabilities (describe )   | _ [ .                       |                                       |                       |
| Ė                                    |        | T-A-I II-L-IIII (I-I I 17 Hannah 22)  | 0.                          | 0                                     |                       |
| <u>s</u>                             | 23     | Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here   | 0.1                         | 0.                                    |                       |
|                                      |        | and complete lines 24 through 26 and lines 30 and 31.   |                             |                                       |                       |
| N F<br>E U<br>T N                    | 24     | Unrestricted  |                             |                                       |                       |
|                                      | 25     | Temporarily restricted  |                             |                                       |                       |
| A D                                  | 26     | Permanently restricted  |                             |                                       |                       |
| A B S A L T A                        |        | Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.   |                             |                                       |                       |
| E L<br>T A                           | 27     | Capital stock, trust principal, or current funds  |                             |                                       |                       |
| SŅ                                   | 28     | Paid-in or capital surplus, or land, building, and equipment fund.  |                             |                                       |                       |
| OE                                   | 29     | Retained earnings, accumulated income, endowment, or other funds.   | 74,595.                     | 86,089.                               |                       |
| ŔŠ                                   | 30     | Total net assets or fund balances (see the instructions)  | 74,595.                     | 86,089.                               |                       |
| <b></b>                              | 31     | Total liabilities and net assets/fund balances (see the instructions)   | 74,595.                     | 86,089.                               |                       |
| Par                                  | t III  | Analysis of Changes in Net Assets or Fund Balanc  | es                          | <del></del>                           | <del>r</del>          |
| 1                                    | Total  | i net assets or fund balances at beginning of year – Part II, colum<br>of-year figure reported on prior year's return)            | nn (a), line 30 (must agre  | e with                                | 74,595.               |
| 2 Enter amount from Part I, line 27a |        |   |                             |                                       | 11,494.               |
| 3                                    | Other  | increases not included in line 2 (itemize)  |                             |                                       |                       |
| 4                                    | Add    | lines 1, 2, and 3   |                             | 4                                     | 86,089.               |
| 5                                    | Decrea | ases not included in line 2 (itemize)   |                             | 5                                     |                       |
| 6                                    | Total  | net assets or fund balances at end of year (line 4 minus line 5) -  | - Part II, column (b), line | 30 6                                  | 86,089.               |

|   | 2009  | 90,444.   | 101,615.             |   | 0.890065  |
|---|---|---|----------------------|---|-----------|
|   | 2008 217, 959. 122, 576.  |   |                      |   | 1.778154  |
|   | 2007  | 107,204.  | 97,783.              |   | 1.096346  |
|   | 2006  | 134,671.  | 54,722.              |   | 2.461003  |
|   | 2005  | 303,826.  | 38,446.              |   | 7.902669  |
| 2 | Total of line 1, column (d)                                       |   |                      | 2 | 14.128237 |
| 3 | Average distribution ratio for the number of years the foundation | 5-year base period — divide the total on li<br>has been in existence if less than 5 years | ne 2 by 5, or by the | 3 | 2.825647  |
| 4 | Enter the net value of noncharit                                  | able-use assets for 2010 from Part X, line  | 5                    | 4 | 114,996.  |
| 5 | Multiply line 4 by line 3   |   |                      | 5 | 324,938.  |
| 6 | Enter 1% of net investment inco                                   | ome (1% of Part I, line 27b)  |                      | 6 | 3.        |
| 7 | Add lines 5 and 6   |   |                      | 7 | 324,941.  |
| 8 | Enter qualifying distributions fro                                | m Part XII, line 4  |                      | 8 | 144,627.  |

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions

| Form 990-PF (2010) TEAM FOUNDATION 06-1696  | 1986   |     | P   | age 4     |
|---|--|-----|-----|-----------|
| Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see the in  | struction  | s)  |     |           |
| 1 a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.   |  |     |     |           |
| Date of ruling or determination letter: (attach copy of letter if necessary — see instr.)   |  |     |     |           |
| <b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V,   |  |     |     | 5.        |
| check here ▶ ☐ and enter 1% of Part I, line 27b   |  |     |     |           |
| c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)  |  |     |     |           |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable   |  |     |     | _         |
| foundations only. Others enter -0-)   | <del>                                     </del> |     |     | <u>0.</u> |
| 3 Add lines 1 and 2   | <u> </u>   |     |     | 5.        |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)   | <u> </u>   |     |     | 0.        |
| 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-   | <del> </del>                                     |     |     | 5.        |
| 6 Credits/Payments.   |  |     |     |           |
| a 2010 estimated tax pmts and 2009 overpayment credited to 2010   |  |     |     |           |
| b Exempt foreign organizations — tax withheld at source 6b  |  |     |     |           |
| c Tax paid with application for extension of time to file (Form 8868)   |  |     |     |           |
| d Backup withholding erroneously withheld   |  |     |     | _         |
| 7 Total credits and payments. Add lines 6a through 6d   |  |     |     | <u>0.</u> |
| 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8  |  |     |     |           |
| 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed  |  |     |     | <u>5.</u> |
| 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  |  |     |     |           |
| 11 Enter the amount of line 10 to be Credited to 2011 estimated tax Refunded 11   |  |     |     |           |
| Part VII-A Statements Regarding Activities  | <del></del>                                      |     |     |           |
| 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it   |  |     | Yes | No        |
| participate or intervene in any political campaign?   |  | 1a  |     | X         |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes<br>(see the instructions for definition)?   |  | 1ь  |     | х         |
| If the answer is 'Yes' to <b>1a</b> or <b>1b,</b> attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.                                       |  |     |     |           |
| c Did the foundation file Form 1120-POL for this year?  |  | 1 c |     | X         |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.  |  |     |     |           |
| (1) On the foundation ►\$ 0. (2) On foundation managers ►\$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on  | 0.   |     |     |           |
| foundation managers $\Rightarrow$ \$ 0.   |  |     |     |           |
| 2 Has the foundation engaged in any activities that have not previously been reported to the IRS?   | Ì  | 2   |     | х         |
| If 'Yes,' attach a detailed description of the activities.  |  | _   |     |           |
|   |  |     |     | 1         |
| 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes                      | Ī  | 3   |     | х         |
| 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?  |  | 4a  |     | Х         |
| <b>b</b> If 'Yes,' has it filed a tax return on Form 990-T for this year?   |  | 4ь  | N   | /A        |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?  |  | 5   |     | Х         |
| If 'Yes,' attach the statement required by General Instruction T.   |  |     |     |           |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.   |  |     |     |           |
| ● By language in the governing instrument, or   |  |     |     |           |
| By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict   |  |     |     |           |
| with the state law remain in the governing instrument?  |  | 6   | X   | <u> </u>  |
| 7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV   | <u> </u>   | 7   | X   | <u> </u>  |
| 8a Enter the states to which the foundation reports or with which it is registered (see the instructions)  MN   | _  |     |     |           |
| <b>b</b> If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G? If 'No,' attach explanation</i>                       |  | 8Ь  | х   |           |
| 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If 'Yes,' complete Part X | (5)<br>X/V                                       | 9   |     | Х         |
| 10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses   | 1  | 。   |     | х         |
| BAA   |  |     | -PF | (2010)    |

| Form 990-PF (2010) TEAM FOUNDATION  | 06-169686                        | 51             | F          | age 5   |
|---|----------------------------------|----------------|------------|---------|
| Part VII-A Statements Regarding Activities (Continued)  |                                  |                |            |         |
| At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions).  |                                  | 11             |            | х       |
| 12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?  |                                  | 12             |            | х       |
| 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption Website address ► TEAM-FOUNDATION.ORG   | application?                     | 13             | Х          |         |
|   | ne no. ► <u>218-6</u><br>► 56621 | 9 <u>4</u> -3  | <u>550</u> |         |
| 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here  |                                  |                |            |         |
| and enter the amount of tax-exempt interest received or accrued during the year   | ► 15                             |                | 1          | N/A     |
| At any time during calendar year 2010, did the foundation have an interest in or a signature or other a bank, securities, or other financial account in a foreign country?  | uthority over a                  | 16             | Yes        | No<br>X |
| See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If 'Yes,' enter the national foreign country ►   | ame of the                       |                |            |         |
| Part VII-B   Statements Regarding Activities for Which Form 4720 May Be Required  |                                  | <u> </u>       |            |         |
| File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.   |                                  |                | Yes        | No      |
| 1a During the year did the foundation (either directly or indirectly).  | □, ਜ਼ਾ                           |                |            |         |
| (1) Engage in the sale or exchange, or leasing of property with a disqualified person?  | Yes X No                         |                |            |         |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a<br>disqualified person?   | Yes X No                         |                |            |         |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  | Yes X No                         |                |            |         |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  | Yes X No                         |                |            |         |
| (5) Transfer any income or assets to a disqualified person (or make any of either available<br>for the benefit or use of a disqualified person)?  | Yes X No                         |                |            |         |
| (6) Agree to pay money or property to a government official? (Exception. Check 'No' if the<br>foundation agreed to make a grant to or to employ the official for a period after termination<br>of government service, if terminating within 90 days.)   | Yes X No                         |                |            |         |
| b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instruction of the control |                                  | 1ь             | N          | /A      |
| Organizations relying on a current notice regarding disaster assistance check here  | ▶ [_]                            |                |            |         |
| c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,<br>that were not corrected before the first day of the tax year beginning in 2010?  |                                  | 1 c            |            | Х       |
| 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))   |                                  |                |            |         |
| a At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010?  If 'Yes,' list the years ► 20 , 20 , 20 , 20   | Yes X No                         |                |            |         |
| <b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942)   |                                  |                |            |         |
| all years listed, answer 'No' and attach statement – see the instructions.)   |                                  | 2b             | N          | /A      |
| c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years h  ≥ 20, 20, 20  | iere.                            |                | :          |         |
| 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?   | Yes X No                         |                |            |         |
| <b>b</b> If 'Yes,' did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approve by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2010)  |                                  | 3b             | N          | /A      |
| 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?  |                                  | 4a             |            | Х       |
| b Did the foundation make any investment in a prior year (but after December 31, 1969) that could geopardize its charitable purpose that had not been removed from jeopardy before the first day of   |                                  |                |            |         |
| the tax year beginning in 2010?   |                                  | 4b             |            | X       |
| BAA   | F                                | orm <b>9</b> 9 | 0-PF       | (2010)  |

| Form 990-PF (2010) TEAM FOUNDATION  |  |   | 06-16  |                          | Page <b>6</b> |
|---|--|---|--|--------------------------|---------------|
| Part VII-B   Statements Regarding Activit   | ies for Which Forr   | n 4720 May Be Red                               | uired (continued)  |                          |               |
| 5a During the year did the foundation pay or incur  | -  |   |  |                          |               |
| (1) Carry on propaganda, or otherwise attemp  | t to influence legislation                                     | n (section 4945(e))?                            | ∐ Yes X  | No                       |               |
| (2) Influence the outcome of any specific publ<br>on, directly or indirectly, any voter registra  | tion drive?  |   | <u> </u>   | No                       |               |
| (3) Provide a grant to an individual for travel,  | study, or other similar p                                      | ourposes?                                       | ∐ Yes <u>X</u>   | No                       |               |
| (4) Provide a grant to an organization other th in section 509(a)(1), (2), or (3), or section   | an a charitable, etc, or<br>4940(d)(2)? (see instruc           | ganization described<br>ctions)                 | Yes X  | No                       |               |
| (5) Provide for any purpose other than religious<br>educational purposes, or for the prevention   | us, charitable, scientific<br>n of cruelty to children o       | , literary, or or animals?                      | Yes X  | No                       |               |
| b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in (see instructions)?                                      |  |   | ons  | 5ь                       | N/A           |
| Organizations relying on a current notice regar   | ding disaster assistance                                       | e check here                                    | ▶ [  |                          |               |
| c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsing the 'Yes,' attach the statement required by Regulation. | sibility for the grant?  |   | N/A Yes  | ] No                     |               |
| 6a Did the foundation, during the year, receive an<br>on a personal benefit contract?   | y funds, directly or indi                                      | rectly, to pay premiums                         | ☐Yes X   | ]No                      |               |
| <b>b</b> Did the foundation, during the year, pay premi   | ums, directly or indirect                                      | ly, on a personal benefi                        | t contract?  | 6Ь                       | X             |
| If 'Yes' to 6b, file Form 8870.   |  | talla de la |  | ,, [ ]                   |               |
| 7a At any time during the tax year, was the found   | • •  |   |  | No 7b                    |               |
| b If yes, did the foundation receive any proceeds Part VIII Information About Officers, D   |  |   |  |                          |               |
| and Contractors   | incctors, riustees   | , i oundation mane                              | igers, riigiliy r ald  | Lilipioye                | ;s,           |
| 1 List all officers, directors, trustees, foundation  | managers and their co  | mpensation (see instru                          | ctions).   | <u> </u>                 |               |
| (a) Name and address  | (b) Title and average<br>hours per week<br>devoted to position | (c) Compensation<br>(If not paid, enter -0-)    | (d) Contributions to<br>employee benefit<br>plans and deferred<br>compensation | (e) Expens<br>other allo |               |
| SEE STATEMENT 4   |  |   |  |                          |               |
|   |  |   |  |                          |               |
|   |  | 0   | 0.   |                          | 0.            |
|   |  |   |  |                          |               |
|   |  |   |  | <u> </u>                 |               |
|   |  |   |  |                          |               |
|   |  |   |  |                          | <del></del> - |
|   |  |   |  |                          |               |
|   |  |   |  |                          |               |
| 2 Compensation of five highest-paid employees   | (other than those incl   | uded on line 1– see inst                        | tructions). If none, ente  | r 'NONE.'                |               |
| (a) Name and address of each employee paid more than \$50,000   | (b) Title and average hours per week devoted to position       | (c) Compensation                                | (d) Contributions to<br>employee benefit<br>plans and deferred<br>compensation | (e) Expens<br>other allo |               |
| NONE  |  |   | compensation   |                          |               |
|   |  |   |  |                          |               |
|   |  |   |  |                          |               |
|   |  |   |  |                          |               |
|   |  |   |  |                          |               |
|   |  |   |  |                          |               |
| Total number of other employees paid over \$50,000  |  |   | <u> </u>   |                          | 0             |

| Form 990-PF (2010) TEAM FOUNDATION 06-16 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid  |                           |
|---|---------------------------|
| and Contractors (continued)   |                           |
| 3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.   |                           |
| (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  | 0                         |
| Part IX-A Summary of Direct Charitable Activities   |                           |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc | Expenses                  |
| 1 N/A   |                           |
|   | -                         |
| 2   |                           |
|   | -                         |
| 3   | -                         |
|   | -                         |
| 4   | -                         |
|   |                           |
| Part IX-B Summary of Program-Related Investments (see instructions)   |                           |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.   | Amount                    |
| 1 <u>N/A</u>  |                           |
| 2   | -                         |
|   | -                         |
| All other program-related investments. See instructions.  3   | -                         |
|   |                           |
| Total. Add lines 1 through 3  |                           |
| BAA   | Form <b>990-PF</b> (2010) |

Form 990-PF (2010) TEAM FOUNDATION 06-1696861 Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, Part X see instructions.) 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes. a Average monthly fair market value of securities b Average of monthly cash balances 1 b 116,747. c Fair market value of all other assets (see instructions) 1 c 116, 747. 1 d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c 0 1 e (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets 2 116,747. 3 3 Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1-1/2% of line 3 1,751. (for greater amount, see instructions) 4 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 114,996. 5,750. 6 Minimum investment return. Enter 5% of line 5 6 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations Part XI and certain foreign organizations check here and do not complete this part.) 5,750. 1 Minimum investment return from Part X, line 6 5 2a Tax on investment income for 2010 from Part VI, line 5 2a **2b** b Income tax for 2010. (This does not include the tax from Part VI) 20 c Add lines 2a and 2b 745 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 5, 4 4 Recoveries of amounts treated as qualifying distributions 5 5,745 Add lines 3 and 4 6 Deduction from distributable amount (see instructions) 7 5,745. Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a 144,627. 1ь b Program-related investments - total from Part IX-B 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes 2 Amounts set aside for specific charitable projects that satisfy the. a Suitability test (prior IRS approval required) 3a b Cash distribution test (attach the required schedule) 3b Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 144,627. Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions) 5

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

BAA

Adjusted qualifying distributions. Subtract line 5 from line 4

Form 990-PF (2010)

144,627

6

# Part XIII Undistributed Income (see instructions)

|  | <b>(a)</b><br>Corpus | (b)<br>Years prior to 2009 | <b>(c)</b><br>2009 | <b>(d)</b><br>2010 |
|--|----------------------|----------------------------|--------------------|--------------------|
| Distributable amount for 2010 from Part XI,  |                      |                            |                    | 5 745              |
| line 7  2 Undistributed income, if any, as of the end of 2010                                  |                      |                            |                    | 5,745.             |
| a Enter amount for 2009 only   |                      |                            | 0.                 |                    |
| <b>b</b> Total for prior years: 20 , 20 , 20   |                      | 0.                         |                    |                    |
| 3 Excess distributions carryover, if any, to 2010:   |                      | Ŭ.                         |                    |                    |
| a From 2005 301, 930.  |                      |                            |                    |                    |
| <b>b</b> From 2006 131, 965.   |                      |                            |                    |                    |
| c From 2007 102, 348.  |                      |                            |                    |                    |
| d From 2008 211, 864.  |                      |                            |                    |                    |
| e From 2009 85, 374.   |                      |                            |                    |                    |
| f Total of lines 3a through e  | 833,481.             |                            |                    |                    |
| 4 Qualifying distributions for 2010 from Part  |                      |                            |                    |                    |
| XII, line 4. ► \$ 144, 627.  |                      |                            |                    |                    |
| a Applied to 2009, but not more than line 2a   |                      |                            | 0.                 |                    |
| <b>b</b> Applied to undistributed income of prior years (Election required – see instructions) |                      | 0.                         |                    |                    |
| · · · · · · · · · · · · · · · · · · ·  |                      |                            |                    |                    |
| c Treated as distributions out of corpus (Election required — see instructions)                | 0.                   |                            |                    |                    |
| d Applied to 2010 distributable amount   |                      |                            |                    | 5,745.             |
| e Remaining amount distributed out of corpus   | 138,882.             |                            |                    |                    |
| 5 Excess distributions carryover applied to 2010   | 0.                   |                            |                    | 0.                 |
| (If an amount appears in column (d), the same amount must be shown in column (a).)             |                      |                            |                    |                    |
| same amount must be shown in column (a).)  |                      |                            |                    |                    |
| 6 Enter the net total of each column as  |                      |                            |                    |                    |
| indicated below:   |                      |                            |                    |                    |
| a Corpus. Add lines 3f, 4c, and 4e Subtract line 5   | 972,363.             |                            |                    |                    |
| <b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b                      |                      | 0.                         |                    |                    |
| c Enter the amount of prior years' undistribut-  |                      |                            |                    |                    |
| ed income for which a notice of deficiency has been issued, or on which the section            |                      |                            |                    |                    |
| 4942(a) tax has been previously assessed   |                      | 0.                         |                    |                    |
| d Subtract line 6c from line 6b Taxable  |                      |                            |                    |                    |
| amount - see instructions  |                      | 0.                         |                    |                    |
| e Undistributed income for 2009 Subtract line 4a from  |                      |                            |                    |                    |
| line 2a Taxable amount — see instructions  |                      |                            | 0.                 |                    |
| f Hadistributed income for 2010. Subtract lines  |                      |                            |                    |                    |
| f Undistributed income for 2010. Subtract lines 4d and 5 from line 1. This amount must be      |                      |                            |                    |                    |
| distributed in 2011  |                      |                            |                    | 0.                 |
| 7 Amounts treated as distributions out of corpus to satisfy requirements imposed               |                      |                            |                    |                    |
| by section 170(b)(1)(F) or 4942(g)(3)  | _                    |                            |                    |                    |
| (see instructions)   | 0.                   |                            |                    |                    |
| 8 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions)  | 301,930.             |                            |                    |                    |
| 9 Excess distributions carryover to 2011.<br>Subtract lines 7 and 8 from line 6a               | 670,433.             |                            |                    |                    |
| 10 Analysis of line 9.   | 070,433.             |                            |                    |                    |
| a Excess from 2006 131, 965.   |                      |                            |                    |                    |
| <b>b</b> Excess from 2007 102, 348.  |                      |                            |                    |                    |
| c Excess from 2008 211, 864.   |                      |                            |                    |                    |
| d Excess from 2009 85, 374.  |                      |                            |                    |                    |
| e Excess from 2010 138, 882.   |                      |                            |                    |                    |
| DAA  |                      | <del></del>                | <del></del> +      |                    |

| Form 990-PF (2010) TEAM FOUNDATION  | <del></del>                |                       |  | 06-169686                |                 |
|---|----------------------------|-----------------------|--|--------------------------|-----------------|
| Part XIV Private Operating Foundati   |                            |                       |  |                          | N/A             |
| 1a If the foundation has received a ruling or d<br>is effective for 2010, enter the date of the   | ruling                     | •                     |  | , and the ruling         |                 |
| <b>b</b> Check box to indicate whether the foundat  |                            | rating foundation de  |  | 4942(j)(3) or            | 4942(j)(5)      |
| 2a Enter the lesser of the adjusted net income from Part I or the minimum   | Tax year                   |                       | Prior 3 years                                | ·                        |                 |
| investment return from Part X for each year listed  | (a) 2010                   | <b>(b)</b> 2009       | (c) 2008                                     | (d) 2007                 | (e) Total       |
| <b>b</b> 85% of line 2a   |                            |                       |  |                          |                 |
| c Qualifying distributions from Part XII,<br>line 4 for each year listed  |                            |                       |  |                          | <u> </u>        |
| d Amounts included in line 2c not used directly<br>for active conduct of exempt activities  |                            |                       |  |                          |                 |
| <ul> <li>Qualifying distributions made directly<br/>for active conduct of exempt activities.<br/>Subtract line 2d from line 2c</li> </ul>         |                            |                       |  |                          |                 |
| 3 Complete 3a, b, or c for the<br>alternative test relied upon.   |                            |                       |  |                          |                 |
| a 'Assets' alternative test — enter.  |                            |                       |  |                          |                 |
| (1) Value of all assets   |                            |                       |  |                          |                 |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i)   |                            |                       |  |                          |                 |
| b 'Endowment' alternative test — enter 2/3 of<br>minimum investment return shown in Part X,<br>line 6 for each year listed                        |                            |                       |  |                          |                 |
| c 'Support' alternative test — enter.   |                            |                       |  |                          |                 |
| (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) |                            |                       |  |                          |                 |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)                                      |                            |                       |  |                          |                 |
| (3) Largest amount of support from<br>an exempt organization  |                            |                       |  |                          |                 |
| (4) Gross investment income   |                            | <u>]</u>              |  |                          |                 |
| Part XV Supplementary Information assets at any time during the   |                            |                       | e organization l                             | had \$5,000 or mo        | ore in          |
| Information Regarding Foundation Manag     List any managers of the foundation who holds to be close of any tax year (but only if they have NONE  | ers:<br>ave contributed mo | ore than 2% of the t  | otal contributions re<br>section 507(d)(2).) | eceived by the founda    | tion before the |
| <b>b</b> List any managers of the foundation who ca partnership or other entity) of which the NONE  |                            |                       |  | lly large portion of the | e ownership of  |
| 2 Information Regarding Contribution, Gran  | t, Gift, Loan, Schol       | arship, etc, Progran  | ns:  |                          |                 |
| Check here \( \sum \) If the foundation only n requests for funds. If the foundation makes complete items 2a, b, c, and d                         |                            | •                     | •  | ,                        |                 |
| a The name, address, and telephone number   | r of the person to         | whom applications s   | should be addressed                          | i.                       |                 |
|   |                            |                       |  |                          |                 |
| SEE STATEMENT 5   |                            |                       |  |                          |                 |
| <b>b</b> The form in which applications should be s   | ubmitted and infor         | mation and material   | ls they should includ                        | de.                      |                 |
| SEE STATEMENT FOR LINE 2A   |                            |                       |  |                          |                 |
| c Any submission deadlines.   | · · · · · ·                |                       |  |                          |                 |
| SEE STATEMENT FOR LINE 2A   |                            |                       | <u>.                                    </u> | <del></del>              |                 |
| d Any restrictions or limitations on awards, s  | uch as by geograp          | hical areas, charital | ble fields, kinds of i                       | nstitutions, or other fa | actors.         |
| SEE STATEMENT FOR LINE 2A   |                            |                       |  |                          |                 |

|       | Dupplementary information                          | (continued)   |                      |                                  |          |
|-------|--|---|----------------------|----------------------------------|----------|
| 3     | <b>Grants and Contributions Paid During the Yo</b> | ear or Approved for Futu  | re Payment           |                                  |          |
|       | Recipient  | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of | Purpose of grant or contribution | Amount   |
|       | Name and address (home or business)                | substantial contributor   | recipient            | Contribution                     |          |
| a     | Paid during the year                               |   |                      |                                  |          |
| 272   | STATEMENT 6  |   |                      |                                  |          |
| تاتان | STATEMENT O  |   |                      |                                  |          |
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|       |  |   |                      |                                  |          |
|       | Total  |   | <u> </u>             | ► 3a                             | 142,435. |
|       | Approved for future payment                        |   | T                    |                                  | 142,433. |
| D     | Approved for fature payment                        |   |                      |                                  |          |
|       |  |   |                      |                                  |          |
|       |  |   |                      |                                  |          |
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|       |  | L   | <u> </u>             |                                  |          |
|       | Total  |   |                      | ► 3b                             |          |

| Part XVI-A          | Analysis of | f Income-Producing | Activities |
|---------------------|-------------|--------------------|------------|
| 3 357 % 7 % B 7 T A | ,a.,        |                    | ,          |

| inter gross amounts unless otherwise indicated.   | Unrelated business income                        |   | Excluded by                                      | section 512, 513, or 514                     | (e)   |
|---|--|---|--|--|---|
|   | (a)<br>Business<br>code                          | <b>(b)</b><br>Amount                        | (c)<br>Exclu-<br>sion                            | <b>(d)</b><br>Amount                         | Related or exempt function income (see the instructions |
| 1 Program service revenue:  |  |   | code   |  |   |
| a   | <del> </del>                                     |   | <b></b>  |  |   |
| b   | + -  |   | + +  |  |   |
| c   |  |   | + +  |  |   |
| d   | <del></del>                                      |   | -  |  | <u> </u>  |
| e   | <del>- </del>                                    |   | + +  |  |   |
| g Fees and contracts from government agencies   |  |   | <del> </del>                                     |  |   |
| 2 Membership dues and assessments   | <del>                                     </del> |   | +  |  |   |
| 3 Interest on savings and temporary cash investments  | -  |   | 14   | 273.   |   |
| 4 Dividends and interest from securities .  |  |   | <del>                                     </del> | 2,3.   |   |
| 5 Net rental income or (loss) from real estate:   |  |   |  |  |   |
| a Debt-financed property  |  |   | <del></del>                                      | ·····  |   |
| <b>b</b> Not debt-financed property   |  |   | 1 -1-  |  |   |
| 6 Net rental income or (loss) from personal property  |  |   |  |  | _   |
| 7 Other investment income   |  |   |  |  |   |
| 8 Gain or (loss) from sales of assets other than inventory  |  |   |  |  |   |
| 9 Net income or (loss) from special events  |  |   |  |  |   |
| 10 Gross profit or (loss) from sales of inventory   |  |   |  |  |   |
| 11 Other revenue:   |  |   |  |  |   |
| a   |  |   |  |  |   |
| b   |  |   |  |  |   |
| С   |  |   |  |  |   |
| d   |  |   |  |  |   |
| e   |  |   |  |  |   |
| 12 Subtotal. Add columns (b), (d), and (e)  |  |   |  | 273.   |   |
| 13 Total. Add line 12, columns (b), (d), and (e)  |  |   |  | 13   | 273   |
| See worksheet in line 13 instructions to verify calculation   | ons.)  |   |  |  |   |
| See worksheet in line 13 instructions to verify calculations and part XVI-B Relationship of Activities to the | •  | ment of Exem                                | pt Purpose                                       | <br>!S                                       |   |
| - · · · · · · · · · · · · · · · · · · ·   | ·  |   |  |  |   |
| Line No. Explain below how each activity for which is accomplishment of the foundation's exemp                | ncome is reported<br>it purposes (other          | in column (e) of Pa<br>than by providing fu | art XVI-A cont<br>unds for such                  | ributed importantly t<br>purposes). (See the | o the<br>instructions.)                                 |
| N/A   |  |   |  |  |   |
|   |  |   |  |  |   |

| Line No.<br>▼ | accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See the instructions.) |
|---------------|---|
| N/A           |   |
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# 2010) TEAM FOUNDATION 06-1696861 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Form 990-PF (2010) Part.XVII Info

|              |   |   |   |  |                        |   |                          | <del></del>   |              |          |
|--------------|---|---|---|--|------------------------|---|--------------------------|---------------|--------------|----------|
| des          | the organization directly of cribed in section 501(c) of ting to political organization     | f the Code (oth                             | igage in any of the<br>ner than section 50              | following with<br>11(c)(3) organiz           | any othe<br>ations)    | er organization<br>or in section 52       | 7,                       |               | Yes          | No       |
| a Tra        | nsfers from the reporting t   | foundation to a                             | a noncharitable exe                                     | empt organizat                               | ion of.                |   |                          |               |              |          |
| (1)          | Cash  |   |   |  |                        |   |                          | 1 a (1)       |              | X        |
| (2)          | Other assets  |   |   |  |                        |   |                          | 1a (2)        |              | X        |
| <b>b</b> Oth | er transactions.  |   |   |  |                        |   |                          |               |              |          |
| (1)          | Sales of assets to a nonc   | charitable exer                             | npt organization  |  |                        |   |                          | 1 b (1)       |              | <u>X</u> |
| (2)          | Purchases of assets from  | n a noncharital                             | ble exempt organiz                                      | zation                                       |                        |   |                          | 1 b (2)       |              | Χ_       |
| (3)          | Rental of facilities, equipi  | ment, or other                              | assets  |  |                        |   |                          | 1 b (3)       |              | X        |
| (4)          | Reimbursement arranger  | ments                                       |   |  |                        |   |                          | 1 b (4)       |              | X        |
| (5)          | Loans or loan guarantees  | s   |   |  |                        |   |                          | 1 b (5)       |              | X        |
| (6)          | Performance of services   | or membershi                                | p or fundraising so                                     | olicitations                                 |                        |   |                          | 1b (6)        |              | X        |
| <b>c</b> Sha | aring of facilities, equipme  | ent, mailing list                           | s, other assets, or                                     | paid employed                                | 25                     |   |                          | 1c            |              | X        |
| the          | ne answer to any of the ab<br>goods, other assets, or so<br>transaction or sharing ari      | ervices given l                             | by the reporting foi                                    | undation. If the                             | foundat                | tion received le:                         | ss than fair market      | value in      | e of         |          |
| (a) Line n   |   |   | f noncharitable exempt                                  |  |                        |   | sfers, transactions, and |               | ngement      | <u></u>  |
| N/A          | <u>, , , , , , , , , , , , , , , , , , , </u>   | 3-7   |   | •  |                        | '   |                          |               |              |          |
|              |   |   |   |  |                        |   |                          |               |              |          |
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|              |   |   |   |  |                        | **  |                          |               |              |          |
|              |   |   |   |  |                        |   |                          |               |              |          |
|              |   |   |   |  | <u> </u>               |   |                          |               |              |          |
| des          | he foundation directly or is<br>scribed in section 501(c) o<br>Yes,' complete the following | of the Code (ot                             | ited with, or related<br>her than section 50            | d to, one or mo<br>01(c)(3)) or in s         | ire tax-e<br>section 5 | xempt organiza<br>27?                     | itions                   | Yes           | s X          | No       |
|              | (a) Name of organization  |   | <b>(b)</b> Type o                                       | of organization                              |                        | (0  | ) Description of rel     | ationship     |              |          |
| N/A          |   |   |   |  |                        |   |                          |               |              |          |
|              |   |   |   |  |                        |   |                          |               |              |          |
|              |   |   |   |  |                        |   |                          |               |              |          |
|              |   |   |   |  |                        |   |                          |               |              |          |
|              |   |   |   |  |                        |   |                          |               |              |          |
| Sign         | Under penalties of perjury, I declar<br>correct, and complete Declaration                   | re that I have exam<br>n of preparer (other | nined this return, includir<br>than taxpayer or fiducia | ng accompanying so<br>iry) is based on all i | hedules as             | nd statements, and to of which preparer h |                          |               | f, it is tru | ıe,      |
| Here         | Mac   | #t 41                                       |   |  |                        | <i>  14/1</i> (                           | PRESIDENT                | <u>'</u>      |              |          |
|              | Signature of officer or trustee   |   |   | <del>,,,</del> ↑                             | Pate                   | 15.4                                      | Title                    | Lores         |              |          |
|              | Print/Type preparer's nar   |   | Preparent sig   | en Metry                                     | WJ.                    | Date   31/11                              | Check if if              | PTIN          |              |          |
| Paid         | SCOTT WALLAC  |   | SCOTT   | WALLACE                                      |                        | JPIII!                                    | self-employed            | P00368        | 89 <u>55</u> |          |
| Prepar       | CI  |   | VALLACE LTD.  |  |                        |   | Firm's EIN ► 41-1        | <u>628544</u> |              |          |
| Use Oı       | nlv   Euro's address   1  | 119 ADAMS                                   |   | 600  |                        |   | ,                        | N 600         | 065          | ı        |
|              | C   | AMBRIDGE,                                   | MN 55008-1  | 620  |                        |   | Phone no (763            | 8) 689-       |              |          |
| BAA          |   |   |   |  |                        |   |                          | Form 99       | 90-PF        | (2010)   |

### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

► Attach to Form 990, 990-EZ, or 990-PF

OMB No 1545 0047

2010

| Name of the organization  |  | Employer Identification number  |
|---|--|---|
| TEAM FOUNDATION   |  | 06-1696861  |
| Organization type (check one).  |  |   |
| Filers of:  | Section:   |   |
| Form 990 or 990-EZ  | 501(c)() (enter number) organization  4947(a)(1) nonexempt charitable trust <b>not</b> 527 political organization  |   |
| Form 990-PF   | X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treation 501(c)(3) taxable private foundation  | ated as a private foundation  |
| Check if your organization is cover Note. Only a section 501(c)(7), (8),                        | red by the <b>General Rule</b> or a <b>Special Rule</b> .<br>, or (10) organization can check boxes for both the General   | Rule and a Special Rule. See instructions.  |
| General Rule  X For an organization filing Form contributor (Complete Parts I a                 | 990, 990-EZ, or 990-PF that received, during the year, \$5,0 and II.)  | 000 or more (in money or property) from any one   |
| Special Rules   |  |   |
| $509(a)(1)$ and $170(b)(1)(A)(v_i)$ .   | ation filing Form 990 or 990-EZ, that met the 33-1/3% support<br>and received from any one contributor, during the year, a c<br>rm 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Comple   | contribution of the greater of (1) \$5,000 or   |
| aggregate contributions of mor  | (10) organization filing Form 990 or 990-EZ, that received fre than \$1,000 for use <i>exclusively</i> for religious, charitable, soldren or animals. Complete Parts I, II, and III.   | rom any one contributor, during the year, cientific, literary, or educational purposes, or              |
| contributions for use exclusively if this box is checked, enter he purpose. Do not complete any | (10) organization filing Form 990 or 990-EZ, that received fr by for religious, charitable, etc, purposes, but these contributere the total contributions that were received during the year of the parts unless the <b>General Rule</b> applies to this organization. | itions did not aggregate to more than \$1,000.  r for an <i>exclusively</i> religious, charitable, etc. |
| religious, charitable, etc, contri  | ibutions of \$5,000 or more during the year  | - \$  |
| 990-PF) but it must answer 'No' or  | ot covered by the General Rule and/or the Special Rules doe<br>n Part IV, line 2 of their Form 990, or check the box on line I<br>meet the filing requirements of Schedule B (Form 990, 990-E  | H of its Form 990-EZ, or on line 2 of its Form  |
| BAA For Paperwork Reduction A 990EZ, or 990-PF.   | ct Notice, see the Instructions for Form 990,  | Schedule B (Form 990, 990-EZ, or 990-PF) (2010)   |

| Schedule<br>Name of org | <b>B</b> (Form 990, 990-EZ, or 990-PF) (2010) | Page 1                            | of 1 of Part I   |
|-------------------------|---|-----------------------------------|--|
| , ,                     | FOUNDATION                                    | 1 ' '                             | 696861   |
| Part I                  | Contributors (see instructions.)              |                                   |  |
| (a)<br>Number           | (b)<br>Name, address, and ZIP + 4             | (c)<br>Aggregate<br>contributions | (d) Type of contribution   |
| 1                       | TEAM INDUSTRIES, INC                          |                                   | Person X Payroll   |
|                         | 105 PARK AVE NW                               | \$12,000                          |  |
|                         | BAGLEY, MN_56621                              |                                   | (Complete Part II if there is a noncash contribution.)                         |
| (a)<br>Number           | (b)<br>Name, address, and ZIP + 4             | (c)<br>Aggregate<br>contributions | (d)<br>Type of contribution  |
| 2                       | TOYODA MACHINERY USA                          |                                   | Person X   |
|                         | 316 W. UNIVERSITY DRIVE                       | \$5,500                           | Payroll Noncash  |
|                         | ARLINGTON HEIGHTS, IL 60004                   |                                   | (Complete Part II if there is a noncash contribution.)                         |
| (a)<br>Number           | (b)<br>Name, address, and ZIP + 4             | (c)<br>Aggregate<br>contributions | (d)<br>Type of contribution  |
| 3                       | CH_ROBINSON_COMPANY                           |                                   | Person X   |
|                         | 14701_CHARLSON_ROAD                           | \$5,000                           | Payroll Noncash  |
|                         | EDEN PRAIRIE, MN 55347                        |                                   | (Complete Part II if there is a noncash contribution.)                         |
| (a)<br>Number           | (b)<br>Name, address, and ZIP + 4             | (c)<br>Aggregate<br>contributions | (d)<br>Type of contribution  |
|                         |   | \$                                | Person Payroll Noncash  (Complete Part II if there is a noncash contribution)  |
| (a)<br>Number           | (b)<br>Name, address, and ZIP + 4             | (c) Aggregate contributions       | (d)<br>Type of contribution  |
|                         |   | \$                                | Person Payroll Noncash  (Complete Part II if there is a noncash contribution)  |
| (a)<br>Number           | (b)<br>Name, address, and ZIP + 4             | (c)<br>Aggregate<br>contributions | (d) Type of contribution   |
| <del></del>             |   | \$                                | Person Payroll Noncash  (Complete Part II if there is a noncash contribution.) |
| BAA                     | TEEA0702L 10/26/10                            | Schedule <b>B</b> (Form 9         | 90, 990-EZ, or 990-PF) (2010)  |

| Name of organ<br>TEAM FO  | OUNDATION                                  |            | 06-169                                       | dentification number |
|---------------------------|--|------------|--|----------------------|
| Part II                   | Noncash Property (see instructions.)       |            |  |                      |
| (a)<br>No. from<br>Part I | (b)  Description of noncash property given | F<br>(;    | (c)<br>MV (or estimate)<br>see instructions) | (d)<br>Date received |
|                           | N/A  |            |  |                      |
|                           |  | <br> \$    |  |                      |
| (a)<br>No. from<br>Part I | (b)  Description of noncash property given | F<br>(     | (c)<br>MV (or estimate)<br>see instructions) | (d)<br>Date received |
|                           |  | \$         |  |                      |
| (a)<br>No. from<br>Part I | (b)  Description of noncash property given | F<br>(:    | (c)<br>MV (or estimate)<br>see instructions) | (d)<br>Date received |
|                           |  | \$         |  |                      |
| (a)<br>No. from<br>Part I | (b)  Description of noncash property given |            | (c)<br>MV (or estimate)<br>see instructions) | (d)<br>Date received |
|                           |  | \$         |  |                      |
|                           |  | <b>'</b> — |  |                      |
| (a)<br>No. from<br>Part I | (b)  Description of noncash property given | F<br>(     | (c)<br>MV (or estimate)<br>see instructions) | (d)<br>Date received |
|                           |  |            |  |                      |
|                           |  | \$         |  |                      |
| (a)<br>No. from<br>Part I | (b)  Description of noncash property given | F (        | (c)<br>MV (or estimate)<br>see instructions) | (d)<br>Date received |
|                           |  |            |  |                      |
|                           |  | \$         |  |                      |
|                           |  |            |  |                      |

of Part II

. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

BAA

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Employer identification number

| TEAM FO                   | DUNDATION  |  |                                | 06-169686  | <u>1</u>              |  |  |
|---------------------------|--|--|--------------------------------|--|-----------------------|--|--|
| Part III                  | Exclusively religious, charitable, e organizations aggregating more t                                    | han \$1,000 for the year.Co                | omplete cols (a                | ion 501(c)(7), (8), or (1<br>a) through (e) and the follow | 0)<br>ing line entry. |  |  |
|                           | For organizations completing Part III, enter contributions of \$1,000 or less for the year.              | total of <i>exclusively</i> religious, cha | aritable, etc,                 | .). ▶\$  | N/A                   |  |  |
| (a)                       | (b)  | (c)  | e manactions.                  | ( <b>d</b> )   | N/A                   |  |  |
| No. from<br>Part I        | Purpose of gift  | Use of gift                                |                                | Description of how gi                                      | ift is held           |  |  |
|                           | N/A  |  |                                |  |                       |  |  |
|                           | Transferee's name, addres  | Rela                                       | tionship of transferor to tran | nsferee  |                       |  |  |
| (a)                       | (b)  | (c)  |                                | (d)  |                       |  |  |
| No. from<br>Part I        | Purpose of gift  | Use of gift                                |                                | Description of how gi                                      | ift is held           |  |  |
|                           |  |  |                                |  |                       |  |  |
|                           | (e)  Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transferor to transferee |  |                                |  |                       |  |  |
|                           |  |  |                                |  | <del></del> .         |  |  |
|                           |  |  |                                |  |                       |  |  |
| (a)<br>No. from<br>Part I | (b)<br>Purpose of gift   | (c)<br>Use of gift                         |                                | (d)<br>Description of how g                                | ift is held           |  |  |
|                           |  |  |                                |  |                       |  |  |
|                           |  |  |                                | · · · · · · · · · · · · · · · · · · ·                      |                       |  |  |
|                           |  |  |                                |  |                       |  |  |
|                           | (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee    |  |                                |  |                       |  |  |
|                           |  |  |                                | <del></del>  |                       |  |  |
|                           |  |  |                                |  |                       |  |  |
|                           |  |  |                                |  |                       |  |  |
| (a)<br>No. from<br>Part I | (b)<br>Purpose of gift   | (c)<br>Use of gift                         |                                | (d)<br>Description of how g                                | ift is held           |  |  |
|                           |  |  |                                |  |                       |  |  |
|                           |  |  |                                | <u> </u>   | <u> </u>              |  |  |
|                           |  |  |                                |  |                       |  |  |
|                           | Transferee's name, addres  | (e) Transfer of gift ss, and ZIP + 4       | Rela                           | ationship of transferor to tran                            | nsferee               |  |  |
|                           |  |  |                                |  |                       |  |  |
|                           |  |  |                                |  |                       |  |  |
|                           |  |  |                                |  |                       |  |  |

# (Rev January 2011)

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

Department of the Treasury Internal Revenue Service

File a separate application for each return.

OMB No. 1545 1709

 If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box. If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonprofits. Part | Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension -- check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns. Name of exempt organization Employer identification number Type or print TEAM FOUNDATION 06-1696861 File by the due date for Number, street, and room or suite number. If a P.O. box, see instructions filing your return See instructions 105 PARK AVE NW City, town or post office, state, and ZIP code. For a foreign address, see instructions BAGLEY, MN 56621 Enter the Return code for the return that this application is for (file a separate application for each return) 04 Application Is For Application Is For Return Return Code Code Form 990 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08 Form 990-EZ Form 4720 03 09 Form 990-PF 04 Form 5227 10 Form 990-T (section 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) Form 8870 12 The books are in the care of ► TEAM INDUSTRIES, INC. Telephone No ► 218-694-3550 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) check this box F I If it is for part of the group, check this box F and attach a list with the names and EINs of all members the extension is for. 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 8/15 , 20 11 , to file the exempt organization return for the organization named above. The extension is for the organization's return for |X| calendar year 20 10 or tax year beginning \_\_\_\_, 20 \_\_\_, and ending 2 If the tax year entered in line 1 is for less than 12 months, check reason Initial return Final return Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions 3a|\$ 0. b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit 0. 3Ы\$ c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions 3c \$ 0.

BAA For Paperwork Reduction Act Notice, see Instructions.

payment instructions.

Form 8868 (Rev 1-2011)

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for

| 2010  | FEDERAL STATEMENTS   | PAGE  |
|---|--|---|
| CLIENT 865  | TEAM FOUNDATION  | 06-169686   |
| STATEMENT 1<br>FORM 990-PF, PART I, LINE 16B<br>ACCOUNTING FEES         |  | 09.27A  |
|   | (A) (B) NET (C EXPENSES INVESTMENT ADJUS PER BOOKS INCOME NET IN  \$ 750.  TOTAL \$ 750. \$ 0. \$  | STED CHARITABLE                                     |
| STATEMENT 2<br>FORM 990-PF, PART I, LINE 16C<br>OTHER PROFESSIONAL FEES |  |   |
|   | (A) (B) NET (C EXPENSES INVESTMENT ADJUS PER BOOKS INCOME NET IN  * 1.  * 1.  * 1.  * 0.  * 1.   | STED CHARITABLE                                     |
| STATEMENT 3<br>FORM 990-PF, PART I, LINE 23<br>OTHER EXPENSES           |  |   |
| BANK FEE<br>GOLF TOURNAMENT EXPENSE<br>OFFICE EXPENSE                   | (A) (B) NET ADJU NET INVESTMENT ADJU NET IN STATE ADJU NET IN STAT | (C) (D) CHARITABLE PURPOSES \$ 1,388.  0. \$ 1,441. |
| STATEMENT 4 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, | TRUSTEES, AND KEY EMPLOYEES  |   |
| NAME AND ADDRESS  | AVERAGE HOURS COMPEN- BU   | CONTRI- EXPENSE UTION TO ACCOUNT/ BP & DC OTHER     |
| DEBRA MATTHEWS<br>21451 OLD PAVILLION CIRCLE                            | PRESIDENT \$ 0.\$  | 0. \$ 0   |
| MAHNOMEN, MN 56557  |  |   |

2010

5/31/11

### FEDERAL STATEMENTS

PAGE 2

**CLIENT 865** 

### **TEAM FOUNDATION**

06-1696861

09.27AM

STATEMENT 4 (CONTINUED) FORM 990-PF, PART VIII, LINE 1

LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

| NAME AND ADDRESS   | TITLE AND<br>AVERAGE HOURS<br>PER WEEK DEVOTED | COMPEN-<br>SATION | CONTRI-<br>BUTION TO<br>EBP & DC | EXPENSE<br>ACCOUNT/<br>OTHER |
|--|--|-------------------|----------------------------------|------------------------------|
| TRICIA YOUNG<br>17495 310TH STREET<br>BAGLEY, MN 56621             | TREASURER<br>8.00                              | \$ 0.             | \$ 0.                            | \$ 0.                        |
| STEVE KAST<br>32070 JACKSON COURT<br>CAMBRIDGE, MN 55008           | VICE PRESIDENT<br>1.25                         | 0.                | 0.                               | 0.                           |
| BEATRICE RICKE<br>21370 OLD PAVILLION CIRCLE<br>MAHNOMEN, MN 56557 | DIRECTOR<br>0.25                               | 0.                | 0.                               | 0.                           |
|  | TOTAL  | \$ 0.             | \$ 0.                            | <u>\$ 0.</u>                 |

### STATEMENT 5 FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:

NAME:

CARE OF:

STREET ADDRESS:

CITY, STATE, ZIP CODE:

TELEPHONE:

FORM AND CONTENT:

TRICIA YOUNG

105 PARK AVE NW BAGLEY, MN 56621

218-694-3550

COPY OF APPLICATION FORM ON FILE: INFORMATION TO BE

INCLUDED ON FORM LISTED BELOW NAME OF ORGANIZATION REQUESTING ADDRESS, CITY, STATE, ZĨP CODE EMPLOYER IDENTIFICATION NUMBER

CONTACT NAME, TITLE, PHONE, FAX, EMAIL 2-3 SENTENCE SUMMARY OF REQUEST AMOUNT OF REQUEST AND DATE NEED BY

CATEGORIZATION OF FUNDS TO BE USED FOR W/OPTIONS SHOWN: 1) OPERATING SUPPORT, 2) PROJECT/PROGRAM SUPPORT, 3)

TECHNOLOGY, 4) ADMINISTRATIVE COSTS, 5) CAPITAL, 6) OTHER

(LIST)

PRIOR TO FILLING OUT APPLICATION FORM, ADDITIONAL

INFORMATION MUST BE SUBMITTED: REPORT NARRATIVE INCLUDING:

A) ORGANIZATION INFORMATION COMPRISED OF 1) HISTORY, 2) MISSION AND GOALS, 3) CURRENT PROGRAMS OR ACTIVITIES, AND

4) POPULATION SERVED AND GEOGRAPHIC AREA SERVED

B) PURPOSE OF GRANT INFORMATION COMPRISED OF 1) SPECIFIC OBJECTIVE FOR SEEKING FUNDING, 2) TOTAL DOLLAR AMOUNT REQUIRED TO MEET OBJECTIVE, AND 3) FUNDING STRATEGIES AND

CURRENT STATUS IN MEETING FUNDING NEEDS

ATTACHMENTS:

A) FINANCES INCLUDING 1) MOST RECENT FINANCIAL STATEMENT,

2) PROJECT BUDGET, AND 3) ADDITIONAL FUNDERS
B) COPY OF CURRENT IRS DETERMINATION LETTER INDICATING

TAX-EXEMPT 501(C)(3) STATUS

2010

### **FEDERAL STATEMENTS**

PAGE 3

**CLIENT 865** 

### **TEAM FOUNDATION**

06-1696861

5/31/11

09.27AM

STATEMENT 5 (CONTINUED) FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

SUBMISSION DEADLINES:

NONE

RESTRICTIONS ON AWARDS:

ORGANIZATIONS RECEIVING GRANTS MUST BE 501(C)(3)

NON-PROFIT

### STATEMENT 6 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

| NAME AND ADDRESS  | DONEE<br>RELATIONSHIP | FOUND-<br>ATION<br>STATUS | PURPOSE OF<br>GRANT   | AMOUNT     |
|---|-----------------------|---------------------------|---|------------|
| ST. JOSEPH'S AREA HEALTH<br>SERV.<br>600 PLEASANT AVE.<br>PARK RAPIDS, MN 56470 | NONE                  | PUBLIC                    | HOSPITAL/CLINIC<br>RENOVATION FUND                                  | \$ 15,000. |
| CLEARBROOK GONVICK SCHOOL<br>16770 CLEARWATER LAKE RD<br>GONVICK, MN 56634      | NONE                  | PUBLIC                    | 5TH AND 6TH<br>GRADE FOOTBALL<br>PROGRAM & SCHOOL<br>READINESS      | 8,651.     |
| BAGLEY ELEMENTARY STU. ACT.<br>AC<br>202 BAGLEY AVE. NW<br>BAGLEY, MN 56621     | NONE                  | PUBLIC                    | SCHOOL<br>PLAYGROUND FUND   | 9,900.     |
| BAGLEY HIGH SCHOOL<br>1130 MAIN AVE. NO.<br>BAGLEY, MN 56621                    | NONE                  | PUBLIC                    | TECHNOLOGY PROGRAM - COMPUTERS & CLASSROOM SUPPLIES, TORNADO RELIEF | 12,000.    |
| LSS SENIOR NUTRITION<br>PROGRAM<br>2485 COMO AVE<br>ST PAUL, MN 55108           | NONE                  | HUBBARD C                 | HUBBARD COUNTY<br>LSS SENIOR<br>NUTRITION                           | 13,000.    |
| LI'L FARM CHILDREN'S HOME<br>34075 JEFFERSON NE<br>CAMBRIDGE, MN 55008          | NONE                  | PUBLIC                    | CHILDREN'S HOME<br>GENERAL FUND                                     | 5,000.     |
| NORTHWEST MN FOUNDATION<br>4225 TECHNOLOGY DRIVE<br>BEMIDJI, MN 56601           | NONE                  | PUBLIC                    | CLEARWATER<br>COUNTY HOSPICE  | 6,000.     |
| LAKE PARK - AUDUBON SCHOOL<br>429 LAKE STREET PO BOX 479<br>LAKE PARK, MN 56554 | NONE                  | PUBLIC                    | PURCHASE OF<br>ASSIGNMENT BOOKS<br>& PRESCHOOL<br>PROGRAM SUPPORT   | 11,634.    |

| 2010   | FEDERAL STATEMENTS                      | PAGE 4     |
|--|---|------------|
| CLIENT 865   | TEAM FOUNDATION                         | 06-1696861 |
| 5/31/11  |   | 09 27AM    |
| STATEMENT 6 (CONT<br>FORM 990-PF, PART<br>RECIPIENT PAID DUF | TINUED)<br>XV, LINE 3A<br>RING THE YEAR |            |

| NAME AND ADDRESS   | DONEE<br>RELATIONSHIP | FOUND-<br>ATION<br>STATUS | PURPOSE OF<br>GRANT  | AMOUNT     |
|--|-----------------------|---------------------------|--|------------|
| MENAHGA PUBLIC SCHOOLS<br>216 ASPEN AVE<br>MENAHGA, MN 56564         | NONE                  | PUBLIC                    | HOCKEY BOARDS & EQUIPMENT                                      | \$<br>750. |
| BAGLEY YOUTH HOCKEY<br>PO BOX 54<br>BAGLEY, MN 56621                 | NONE                  | PUBLIC                    | GENERAL BUILDING<br>FUND                                       | 10,000.    |
| WEE-CARE CHILDREN'S CENTER<br>79 SPENCER AVE SW<br>BAGLEY, MN 56621  | NONE                  | PUBLIC                    | CHILDREN'S<br>PROGRAM  | 5,500.     |
| SANFORD HEALTH FOUNDATION<br>736 N BROADWAY DRIVE<br>FARGO, ND 58122 | NONE                  | PUBLIC                    | DIGITAL RADIOGRAPHY TECHNOLOGY & PEDIATRIC INTENSIVE CARE BLDG | 45,000.    |

TOTAL \$ 142,435.