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

OMB No 1545-0052

2010

F	For calendar year 2010, or tax year beginning				nning	, 2010, and ending , 20						<u>,</u> 20
G	Che	eck all that apply		Initial retur	n	Initial	return	of a former p	oublic cha	arıty		Final return
		,,,,		Amended r	eturn		Addre	ss change	ĺ	N:	ame change ¯	<del></del>
N	ame o	of foundation							<del></del>	1.	A Employer ident	tification number
		ECOLAB	FO	UNDATION	(A/K/A	ECOLAB	INDU	STRY FOU	NDATIO	N)	41-1372	157
					•							
N	umbe	r and street (or P O b	ox n	umber if mail is no	t delivered to	street address)			Room/s	uite	B Telephone numb	er (see page 10 of the instructions)
		370 WAE									651-293	
		0 · 0 · m							l	1		
C	tv or	town, state, and ZIP	code						l		C If exemption appl	ication is
	٠, ٥.	ST. PAU			)2					1.	pending, check he	<b>▶</b>
		01. 1710	) L ,	1111 3310	, _					- 1'	1. Foreign organi	
				F01/a\/	2\ avamet r		foundation				zations meeting the k here and attach	
7	_	eck type of organiza				3) exempt p		ivate founda	tion		computation	· · · · · · · · · • 🖵
1		Section 4947(a)(1) no						ash X Acc		—— ·	•	tion status was terminated
1		market value of al				ing method	$\overline{}$		Judi		under section 507	7(b)(1)(A), check here .
	-	ear (from Part II, co	) (C 11	7,549.00	(Part I col	r (specify)	et he or	cach hasis )				is in a 60-month termination
			_			umin (a) mu	31 00 01	Casii basis )		1	under section 507	(d) Dishursoments
Li	art	Analysis of Reve				(a) Revenue		(b) Net inve	estment	(c)	) Adjusted net	(d) Disbursements for charitable
		may not necessarily	y eq	ual the amounts	in	expenses pooks	per	incom	ne		ıncome	purposes
_		column (a) (see pa					0 00			<del> </del>	<del>-</del>	(cash basis only)
	1	Contributions, gifts, grants	, etc	received (attach schi dation is <b>not</b> requ	edule)	,687,00	0.00					
	2	Check ► attach	1 Sch	В	· • • • ├─					<del> </del>		<u> </u>
	3	Interest on savings and										
	4	Dividends and interes								<del> </del>		
	5a	Gross rents			· · · · ├─							
	1	Net rental income or (kg								-	· <del></del>	
ne	6a	Net gain or (loss) from Gross sales pince for all	sale	of assets not on li	ne 10							_
en	U	assets on line 6a								ļ		
Revenue	7	Capital gain net inci			ne 2)							
Ī	8	Net-short-term/capi	ia) ga	aın 📗						<b></b> -		
1	9	Income modification	16	<u> ၂လ္ကု · · · · ·</u>	• • •					ļ		
Ì	1	Gross sales less returns and allowances of goods sol	11	ŏ						-		
	84						_			-		
	Co	Gross profit or (loss									-	
	רוְין וּ	Other income (attac	hisc	hedule)		607.00	0 00					
_	12					,687,00	0.00		<u></u>	├		
	13	Compensation of office								<del> </del>	<u> </u>	
Š	14	Other employee sala							·	-		
nse	15	Pension plans, emp	-				<del></del>			-		
Expenses		Legal fees (attach se								1		<del></del>
ũ	b	Accounting fees (at							<u></u>	<del> </del>		<del></del>
and Administrative	C	Other professional f		•						-		
tra	17	Interest								-		<del>                                     </del>
nis.	18	Taxes (attach schedule		. •							<del>_</del>	
Ē	19	Depreciation (attach	n sci	hedule) and dep	letion .					-		_
Ρ	20	Occupancy						<u> </u>		1		
힏	21	Travel, conferences		-						<u> </u>		_
ā	22	Printing and publication			- 1	007.00	0 00			-		207.000.00
Operating	23	Other expenses (att				287,00	<u>0.00</u>			<u> </u>	_	287,000.00
ra	24	Total operating and		=	1	007 05	0 00					207 222
De		Add lines 13 throug				287,00				ļ	<del></del>	287,000.00
٦	25	Contributions, gifts,	-	-	· · · · <del></del>	,842,60				ļ		4,842,601.00
_	26	Total expenses and disbu			and 25 5	,129,60	1.00			<b>_</b>	_	5,129,601.00
	27	Subtract line 26 from	m lin	ne 12	_	4.40 55	1 00					
		Excess of revenue over ex			· · · —	,442,60	1.00			ļ	_	
		Net investment inc		-						-		
	C	Adjusted net incom	e (if	negative, enter	-0-)			<u></u>		<u> </u>	<del>_</del>	



Part II			Attached schedules and amounts in the description column should be for end-of-year		End o	f year
س	art ļi	Datance Sheets	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-beari	ng			
			cash investments			
	3	Accounts receivable				
		Less allowance for doul	otful accounts ▶	7,619,672.00	4,417,549.00	4,417,549.00
			otful accounts ▶			
			officers, directors, trustees, and other			·
			ich schedule) (see page 15 of the instructions)			
	7	Other notes and loans r	eceivable (attach schedule)			
		Less: allowance for doul	otful accounts ▶			
s			e			
Assets			eferred charges			
As	10 a	Investments - U.S. and state	e government obligations (attach schedule).			
	b	Investments - corporate	stock (attach schedule)			
		-	bonds (attach schedule)			
		Less accumulated deprecia (attach schedule)				
			loans	=		
	13 14	Investments - other (atta Land, buildings, and equipment basis	nch schedule)			<del></del>
	17	equipment basis	tion >			
		(attach schedule)	tion			
	15	Other assets (describe	<b></b> )			
			completed by all filers - see the	7 610 672 00	4,417,549.00	4 417 540 00
$\dashv$			age 1, item i)	7,619,672.00	4,417,549.00	4,417,549.00
			ccrued expenses	3,254,976.00	2,680,200.00	
				- 3,234,370.00	2,000,200.00	
ties	19 20 21 22					
ij	20		rs, trustees, and other disqualified persons .	369,755.00	185,009.00	
Ŀ	21		tes payable (attach schedule)	3037733.00	103,003.00	
	22	Other habilities (describe	: ▶)			
	23	Total liabilities (add line	s 17 through 22)	3,624,731.00	2,865,209.00	
$\dashv$			ow SFAS 117, check here			
			24 through 26 and lines 30 and 31.			
S		•		3,994,941.00	1,552,340.00	
2	24				, ,	
ala	25					
밁			not follow SFAS 117,			
5			plete lines 27 through 31.			
7	27		cipal, or current funds			
ţ	28	•	land, bldg , and equipment fund			
se			lated income, endowment, or other funds			
Ā	30	<b>3</b> -,	und balances (see page 17 of the			
Net				3,994,941.00	1,552,340.00	
	31		t assets/fund balances (see page 17			
		of the instructions)				
P	art III	Analysis of Cha	inges in Net Assets or Fund I	Balances		
			alances at beginning of year - Part		must agree with	
			on prior year's return)			3,994,941.00
2		r amount from Part I, I			1 4 1	-2,442,601.00
4 Add lines 1, 2, and 3						1,552,340.00
5 Decreases not included in line 2 (itemize) ▶ 5						
			llances at end of year (line 4 minus l	ine 5) - Part II, column (b		1,552,340.00
_						Form 990-PF (2010)

_	art W Capital Gains	and Losses for Tax on Inv	vestment Income			rage
	(a) List an	d describe the kind(s) of property sold prick warehouse; or common stock, 200	(e g , real estate,	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo., day, yr.)
1 a		TICK Wateriouse, of common stock, 25	0 3113 MEO 00 /	D-Donation	(,,, ,,	
<u> </u>						
C			-			
C			-			
-						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
а					•	
t						
C			-			
C	<u> </u>					
e			<u> </u>			
	Complete only for assets	showing gain in column (h) and own			Gains (Col (h) g	
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (ı), ıf any	COI	(k), but not less Losses (from co	
a						
Ŀ						
C					*	··
		,		<del> </del>		
e		<u> </u>		<del>                                     </del>		
2	Capital gain net income or	r (not canital loce)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2		
3	Net short-term capital gair	n or (loss) as defined in sections 1	,			
	If gain, also enter in Part I,	, line 8, column (c) (see pages 13	3 and 17 of the instructions)			
		line 8		3		
E	art V Qualification	<u> Under Section 4940(e) for Re</u>	educed Tax on Net Investment I	ncome		
W			ibutable amount of any year in the b	oase period	d?	Yes X No
			ar, see page 18 of the instructions b	efore mak	ing any entries	
<u> </u>	(a)			- Inak	(d)	
,	Base penod years alendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c)  Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
_	2009				(55. (5) 555 5)	
	2008					
	2007					
	2006					
	2005					
		· ·				
2	Total of line 1, column (d)	)		2		
3	Average distribution ratio	for the 5-year base period - divid	de the total on line 2 by 5, or by the			
	number of years the foun-	dation has been in existence if les	ss than 5 years	3		
4	Enter the net value of nor	ncharitable-use assets for 2010 fr	rom Part X, line 5	4	- <u>-</u>	
5	Multiply line 4 by line 3			5		
_	F-1 40/ -5/	mt maama (40/ =£ D=:±   1 07  }				
6	Enter 1% of net investme	nt income (1% of Part I, line 27b)		6		
7	Add lines 5 and 6			7		
_		f . B. (SM)			r 4.	00 601 00
8	If line 8 is equal to or gree Part VI instructions on page	ons from Part XII, line 4 eater than line 7, check the box ge 18	ın Part VI, line 1b, and complete	that part i	using a 1% tax	rate. See the

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of t	ne ins	tructi	ons)
1a	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 ruling letter if necessary - see instructions)			
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check			
	here  and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
	Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2			——
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			
6	Credits/Payments 2010 estimated tax payments and 2009 overpayment credited to 2010 6a			
	20 To destinated tax paymonts and 2000 despayment of out to 50 to 1			
	Exempt foreign organizations-tax withheld at source			
	Backup withholding erroneously withheld 6d			
_	Total credits and payments Add lines 6a through 6d			
7 8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
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			
Par	t VII-A Statements Regarding Activities			
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 (see page 19			
	of the instructions for definition)?	1 b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			17
	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ▶\$ (2) On foundation managers ▶\$	ŀ		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	1		
	on foundation managers  \$			Х
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		
_	If "Yes," attach a detailed description of the activities			
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	3		Х
4-	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
4a	If "Yes," has it filed a tax return on Form 990-T for this year?	4 b	·	Х
ь 5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
3	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
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	instructions)   MINNESOTA			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		v	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8 b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(J)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page			Х
	27)? If "Yes," complete Part XIV	9		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	,		Х
	names and addresses	10 om 99	n.PF	

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?

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4 b

Χ

25		1011 1 1 1 1			- 11			
	rt VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requ	ired (contin	ued)			
5 a	During the year did the foundation pay or incur any amou	int to			TO T			
	(1) Carry on propaganda, or otherwise attempt to influe	nce legislation (section	4945(e))?	Yes	X No			
	(2) Influence the outcome of any specific public election	n (see section 4955); o	r to carry on,					
	directly or indirectly, any voter registration drive?			Yes	X No			
	(3) Provide a grant to an individual for travel, study, or ot				X No			
	(4) Provide a grant to an organization other than a char	itable, etc , organizatio	n described in					
	section 509(a)(1), (2), or (3), or section 4940(d)(2)?			Yes	X No			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational							
	purposes, or for the prevention of cruelty to children of			Yes	X No			
<b>h</b>	If any answer is "Yes" to 5a(1)-(5), did any of the trans							
b	Regulations section 53.4945 or in a current notice regard					5b		
	Organizations relying on a current notice regarding disas	-						
_	-							
С	If the answer is "Yes" to question 5a(4), does the foundation of the second of the sec	•		Yes	No		1	
	because it maintained expenditure responsibility for the g		• • • • • • • • •	. [ res				
	If "Yes," attach the statement required by Regulations sec							
6 a	Did the foundation, during the year, receive any funds, of				X No			
	on a personal benefit contract?				X No			
b	Did the foundation, during the year, pay premiums, direct	ctly or indirectly, on a p	ersonal benefit contrac	ot?		6b	X	
	If "Yes" to 6b, file Form 8870				TV			
	At any time during the tax year, was the foundation a pa				X No			
b	If "Yes," did the foundation receive any proceeds or have							
Pai	rt VIII Information About Officers, Directors and Contractors	, Trustees, Found	dation Managers,	Highly Paid	d Emplo	yees,		
1	List all officers, directors, trustees, foundation m	anagers and their	compensation (see	page 22 of t	he instru	ctions).		
	(a) Name and address	(b) Title, and average	(c) Compensation (If not paid, enter	(d) Contribut	ons to	(e) Expense		
		hours per week devoted to position	-0-)	employee bene and deferred con		other allov	vances	
SEE	E ATTACHED	1 HOUR AVERAGE						
			NONE		N/A		N/A	
					1			
							·····	
2	Compensation of five highest-paid employees (ot	her than those inc	uded on line 1 - se	e page 23 of	the instr	uctions).		
	Compensation of five highest-paid employees (ot If none, enter "NONE."	her than those inc	uded on line 1 - se			uctions).		
	If none, enter "NONE."	her than those inc		(d) Contribut	ions to	uctions).	account,	
		· · · · · · · · · · · · · · · · · · ·	uded on line 1 - se	(d) Contribut employee b plans and de	ions to enefit eferred			
(a	If none, enter "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contribut	ions to enefit eferred	(e) Expense		
(a	If none, enter "NONE."	(b) Title, and average hours per week		(d) Contribut employee b plans and de	ions to enefit eferred	(e) Expense		
(a	If none, enter "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contribut employee b plans and de	ions to enefit eferred	(e) Expense		
(a	If none, enter "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contribut employee b plans and de	ions to enefit eferred	(e) Expense		
(a	If none, enter "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contribut employee b plans and de	ions to enefit eferred	(e) Expense		
(a	If none, enter "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contribut employee b plans and de	ions to enefit eferred	(e) Expense		
(a	If none, enter "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contribut employee b plans and de	ions to enefit eferred	(e) Expense		
(a	If none, enter "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contribut employee b plans and de	ions to enefit eferred	(e) Expense		
(a	If none, enter "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contribut employee b plans and de	ions to enefit eferred	(e) Expense		
(a	If none, enter "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contribut employee b plans and de	ions to enefit eferred	(e) Expense		
(a	If none, enter "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contribut employee b plans and de	ions to enefit eferred	(e) Expense		

## Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see page 23 of a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
	(b) Type of Service	(c) Compensation
NOT APPLICABLE		
		<u> </u>
Total number of others receiving over \$50,000 for professional services		
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 organizations and other beneficianes served, conferences convened, research papers produced, etc.	ation such as the number of	Expenses
1 YOUTH AND EDUCATION GRANTS		
SCHOOL AND SCHOOL BASED PROGRAMS IN COMMUNITY ORGANIZATION	NS	
- COMMINITARY DAGED CDAMMC		729,300.00
2 COMMUNITY BASED GRANTS COMMUNITY GRANTS IN MAJOR PLANT LOCATIONS AROUND THE UNIT	FD STATES	
UNITED WAY GRANTS	DD STATES	467,117.00
3 CULINARY GRANTS		
GRANTS TO ORGANIZATIONS IN THE CULINARY INDUSTRY		
		372,500.00
4 HEALTHCARE GRANTS		
GRANTS TO ORGANIZATIONS IN THE HEALTHCARE INDUSTRY		
		315,000.00
Part IX-B Summary of Program-Related Investments (see page 24 of the instruct	ions)	Amount
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  1		Allount
2		
All other program-related investments See page 24 of the instructions		
3		
Total. Add lines 1 through 3		<del></del>

Pa	Minimum Investment Return (All domestic foundations must complete this part. Fore	gn foundatior	ns,
	see page 24 of the instructions.)	PERM	<del></del>
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc,	Same L	
	purposes	1 - 1	0.00
a	Average monthly fair market value of securities	1a	0.00
	Average of monthly cash balances	1b	0.00
C	· · · · · · · · · · · · · · · · · · ·	1c	0.00
d		1d	
е		115	
	1c (attach detailed explanation) 1e 0.00		
2	Acquisition indebtedness applicable to line 1 assets	2	0.00
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25 of		
	the instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0.00
6	Minimum investment return. Enter 5% of line 5	6	0.00
Pa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) priva	ate operating	
	foundations and certain foreign organizations check here  and do not complete this	T	
1	Minimum investment return from Part X, line 6	1	0.00
2 a			
b	Income tax for 2010 (This does not include the tax from Part VI) 2b 0.00	3.2	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	0.00
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see page 25 of the instructions)	6	0.00
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	0.00
Pa	art XII Qualifying Distributions (see page 25 of the instructions)		<del></del>
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
'a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26.	1a	5,129,601.00
_	Program related investments, total from Part IV P	1b	3,123,001.00
2 2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	10	
2			
•	purposes Amounts set aside for specific charitable projects that satisfy the	2	
3		the later	
a	Suitability test (prior IRS approval required)	3a	
, b		3b	E 100 C01 00
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	5,129,601.00
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	1 _ 1	
_	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	F 100 601 60
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	5,129,601.00
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca qualifies for the section 4940(e) reduction of tax in those years	iculating whet	her the foundation

Pa	Part XIII Undistributed Income (see page 26 of the instructions)									
		(a)	(b)	(c)	(d)					
1	Distributable amount for 2010 from Part XI,	Corpus	Years prior to 2009	2009	2010					
	line 7				0.00					
2	Undistributed income, if any, as of the end of 2010									
	Enter amount for 2009 only			0.00						
b	Total for prior years 20 06 20 07 20 08		0.00							
3	Excess distributions carryover, if any, to 2010									
а	From 2005 0.00									
	From 2006 0 . 0 0									
	From 2007 0.00									
	From 2008 0.00				,					
	From 2009 0 . 0 0									
	Total of lines 3a through e									
4	Qualifying distributions for 2010 from Part XII,	· · · · · · · · · · · · · · · · · · ·								
•	line 4: ▶ \$ 5,129,601.00									
а	Applied to 2009, but not more than line 2a			TT TT NO AND						
D	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)									
_					· · · · · · · · · · · · · · · · · · ·					
С	Treated as distributions out of corpus (Election required - see page 26 of the instructions)									
d	Applied to 2010 distributable amount									
	Remaining amount distributed out of corpus	5,129,601.00		1						
5	Excess distributions carryover applied to 2010									
	(If an amount appears in column (d), the same									
6	amount must be shown in column (a) ) Enter the net total of each column as									
•	indicated below:				,					
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	5,129,601.00								
	Prior years' undistributed income Subtract									
U	line 4b from line 2b									
С	Enter the amount of prior years' undistributed									
	income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has				,					
	been previously assessed				,					
А	Subtract line 6c from line 6b Taxable									
•	amount - see page 27 of the instructions									
e	Undistributed income for 2009 Subtract line									
	4a from line 2a Taxable amount - see page 27 of the instructions									
1	Undistributed income for 2010 Subtract lines 4d and 5 from line 1. This amount must be		0							
	distributed in 2011									
7	Amounts treated as distributions out of corpus									
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the									
	instructions)	5,129,601.00	<u></u>							
8	Excess distributions carryover from 2005 not applied on line 5 or line 7 (see page 27 of the									
	instructions)									
9	Excess distributions carryover to 2011.									
	Subtract lines 7 and 8 from line 6a									
	Analysis of line 9									
	Excess from 2006				•					
	Excess from 2007									
	Excess from 2008 0 . 0 0				'					
	Excess from 2009 0.00									
e	Excess from 2010 0 . 0 0									

Pa	rt XIV Private Oper	ating Foundations	(see page 27 of the	instructions and Pa	rt VII-A, question 9)	
1 a	If the foundation has	received a ruling or d	letermination letter tha	it it is a private oper	ating	
	foundation, and the ruling	g is effective for 2010, e	nter the date of the ruling		. ▶	
b	Check box to indicate wh				i i	(j)(3) or 4942(j)(5)
_		Tax year		Prior 3 years		
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
	I or the minimum investment	(4) 2010	(2)200	(0) 2000	(4) 2001	
	return from Part X for each					
	year listed					<del></del>
b	85% of line 2a		-			
С	Qualifying distributions from Part					
	XII, line 4 for each year listed .			_		
d	Amounts included in line 2c not					
	used directly for active conduct of exempt activities					
е	Qualifying distributions made			The state of the s		
_	directly for active conduct of					
	exempt activities Subtract line					
3	2d from line 2c					
	alternative test relied upon					
а	"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 minimum invest-					
	ment return shown in Part X, line 6 for each year listed					
С	"Support" alternative test - enter					
Ū	(1) Total support other than		İ			
	gross investment income					
	(interest, dividends, rents,					
	payments on secunties toans (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)					<u> </u>
	port from an exempt					
	organization					
Do	<u> </u>	ary Information (C	omplete this part	only if the found	ation had \$5 000	or more in assets
L		during the year - se			allon nau \$5,000	or more in assets
_	_	•		30 4000013.7	<del> </del>	
1	Information Regarding	-		- 41 00/ -5 41 4-4-		
а	List any managers of the before the close of any	the foundation who r	nave contributed more	e than 2% of the tota	oo section 507/d)(2)	ved by the foundation
	before the close of any	tax year (but only if the	ley have continuated i	note than \$5,000) (5	ee section 307 (u)(2)	
NO	NE					
b	List any managers of	the foundation who	own 10% or more of	f the stock of a corp	oration (or an equally	y large portion of the
	ownership of a partner					, ,
	•					
NO	NE					
2	Information Regarding	Contribution, Grant	, Gift, Loan, Scholarsh	nip, etc., Programs:	<del> </del>	<del></del>
	, in the second	_		_	table organizations r	and door not connet
	unsolicited requests fe					and does not accept
	organizations under ot				, 20 or the motidotic	ons) to marviduals of
		<del></del>				
	The name, address, a					
KR	IS TAYLOR, 370 V	WABASHA ST. N.	, ST. PAUL, MN	55102 (651)2	93-2259	
b	The form in which appl	lications should be sul	bmitted and information	on and materials they	should include	
				•		
SE	E ATTACHED GRAN	r APPLICATION				
_	Any submission deadlii					
·	, ary submission deadill					
וז ע	GUST 31,2010					
		mutations on our district	augh on his annual	anhund crees	blo fields liveds to	anakitutunan ai att
đ	Any restrictions or lif	miliations on awards,	, such as by geogra	apriicai areas, charita	ible lielus, kings of	institutions, or other
	-					

JSA 0E1490 1 000

Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation status of recipient Purpose of grant or contribution Amount Name and address (home or business) a Paid during the year SEE ATTACHED NONE COMMUNITY RELATIONS 3,834,877.00 3,834,877.00 **b** Approved for future payment GRANTS UNCONDITIONALLY PLEDGED NONE 1,007,724.00 COMMUNITY RELATIONS <u>..........</u> 3b Total 1,007,724.00

Part XVI-A Analysis of Income-Produ					(e)
Enter gross amounts unless otherwise indicated	(a) Business code	(b) Amount	(c)	y section 512, 513, or 514 (d)	Related or exempt function income (See page 28 of
1 Program service revenue	Business code	Amount	Exclusion code	Amount	the instructions )
a				<u> </u>	NOT APPLICABLE
b					
c					
d	<del></del>	<u></u>	<del> </del>		
e					
g Fees and contracts from government agencies					
2 Membership dues and assessments					-
3 Interest on savings and temporary cash investments				···· y <del>======</del>	
4 Dividends and interest from securities				<del></del>	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
<b>b</b> Not debt-financed property					· · · · · · · · · · · · · · · · · · ·
6 Net rental income or (loss) from personal property .				-	
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory		<del></del>			
9 Net income or (loss) from special events					
0 Gross profit or (loss) from sales of inventory					
1 Other revenue a					
b					
С					
d					
e					
2 Subtotal Add columns (b), (d), and (e)   3 Total. Add line 12, columns (b), (d), and (e)				<del></del>	
Part XVI-B Relationship of Activities  Line No. Explain below how each activit accomplishment of the foundation	y for which	n income is reported	ın column (e	e) of Part XVI-A contrib	uted importantly to thes) (See page 29 of the
instructions )					
NOT APPLICABLE			<del>-</del>		
		· · - <u></u>		<del></del>	
				<del></del>	
				· · · · · · · · · · · · · · · · · · ·	<del></del>
		· <u></u>	<del>-</del>	· <del></del>	
		· · · · · · · · · · · · · · · · · · ·			
	·				
				· · · · · · · · · · · · · · · · · · ·	
	<del></del> -			<del></del>	
	· <del></del> ·				
	<del></del>			<del></del>	·-
<del></del>					
	<u>-</u> -	<u>.</u>		·	
	<del></del>				
	<del></del>				<u> </u>

Part				ransfers To a	and Transa	actio	ns and Relat	ionships With	Nonc	hari	table
ır o	n sect rganiza		ode (other than	section 501(c)(3	) organization	s) or	= -			Yes	No
		rs from the reporting f									
		h									$\frac{X}{X}$
•	•	er assets			• • • • • •				. 1a(2)	1	<del>  ^`</del>
		ansactions es of assets to a nonch	naritable exempt o	roanization					1b(1)	,	X
_	-	chases of assets from									Х
	-	ital of facilities, equipm									X
		mbursement arrangeme								)	X
		ns or loan guarantees								1	X
•	•	formance of services of							- 1	<b> </b>	X
	_	of facilities, equipmer	_	· ·						<u> </u>	X
		answer to any of									
		of the goods, other on any transaction of									
(a) Line		(b) Amount involved	1.	oncharitable exempt				fers, transactions, and sh			
(4) 2	-	(5) / 111100111 11110100	(0,112111			1					
		-									
								· · · · · · · · · · · · · · · · · · ·			
						-					
						<del> </del>					
						<del> </del> -					
	+					-					
					"			<del></del>			
		foundation directly ed in section 501(c) of		•	•				Y	es 🗅	No
<u>b</u> If	"Yes,	complete the following	******	(b) Top o				(a) Description of relation			
		(a) Name of organization	1	(b) Type	of organization			(c) Description of relatio	пэнір		
		<del></del>						- t. <u>-</u>			
Sign Here	Unde belief	r penalties of perjury, I d , it is true, correct, and cor	eclare that I have enplete Declaration of	examined this return, of preparer (other than	n taxpayer or fidu	ipanying ciary) is / ႍ	schedules and state based on all informat	ements, and to the best tion of which preparer ha	of my k as any kn	nowled owledg	ige and je
11016	S	gnature of officer or truste	<u> </u>	<del></del>	Date	• • • •	- <del>'</del> •	tle			·
	1	Print/Type preparer's		Preparer's sign	nature		Date	Check	PTIN		
Paid								self-employed			
Prepa	arer	Firm's name					1	Firm's EIN ▶			
Use (	Only	Firm's address ▶									
								Phone no			

#### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

## Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

ECOLAB FOUNDATION (A/K/A ECOLAB INDUSTRY FOUNDATION) 41-1372157 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990. 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Page	of	of	Part I
•			

Name of organization

ECOLAB FOUNDATION (A/K/A ECOLAB INDUSTRY FOUNDATION)

Employer identification number 41-1372157

## Part I Contributors (see instructions)

(2)	(b)	(c)	(d)
(a) <u>No.</u>	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
	ECOLAB INC.  370 WABASHA ST. N.  ST. PAUL, MN 55102	\$2,687,000.00	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
+		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

age

of \_

of Part II

Name of organization

ECOLAB FOUNDATION (A/K/A ECOLAB INDUSTRY FOUNDATION)

Employer identification number

41-1372157

Part	Noncash Property (see instructions)		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<b>\$</b>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>	

Employer identification number

41-1372157

Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry.

For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) >\$

	ributions of \$1,000 or less for the	year. (Enter this information	once. See instructions.) ▶\$				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
_							
_							
		(e) Transfer of gift					
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e) Transfer of gift					
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee				
_							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
-							
		(e) Transfer of gift					
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee				
-							
(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
_							
		(e) Transfer of gift					
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee				
_							

















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Entities & People Compliance Reporting Documents

Tasks Ooverdue 0) C Due Today [0] O Upcoming [0] A Search Wizards

Calendar

Admin

As Of Reload
07/26/201.
Profiles
ধী General Information
& Board of Directors
ತಿ• <u>Officers</u>
& <u>Authorized Summary</u>
Stockholder/Shareholder
Summary
Foreign Qualifications
Business Activities

Additional Links
Automated Voting Interest
<u>- Parents</u>
<u>Automated Voling Interest</u>

[기 Display All profiles

Key Dates

Subsidiaries Associated Tasks

#### **Ecolab Foundation**

医急性

General Information\*\*\*

State File #: Reference ID:

EIN: 41-1372157

Formation Jurisdiction: Minnesota Formation Date: 01/30/1980

Status: Non-Profit (Open)

Status Effective From: 03/19/2009 Entity Type: Non-Profit

Fiscal Year End:

Date Last Edited: 07/26/2011

Address: Ecolab Foundation

370 Wabasha Street North

Saint Paul MN 55102 United States

#### Board of Directors\*\*

3 returned

Status	Appointed Entity	Date First Elected	Date Last Elected	Non Executive	
Director	Baker Jr., Douglas M	04/25/2011	04/25/2011	False	83
Director	<u>Monahan, Michael 1</u>			False	$F \supset \mathbb{R}$
Director	Taylor, Kris J.			False	73

#### Officers\*\*

4 returned

Status	Туре	Appointed Entity	Date First Elected	Date Last Elected	Ranking Order	
Officer	President	Monahan, Michael J				$\sim 2$
Officer	Secretary	Duvick, David F				1 3
Ofricer	Treasurer	Chew, Ching-Meng	04/25/2011	04/25/2011		<u>ب</u> عر
Officer	Vice President	Taylor, Kris J.				K J

### Authorized Summary +>

Stockholder/Shareholder Summary\*\*

Foreign Qualifications++

**Business Activities** 42

#### Key Dates\*\*

**Financial Statement Summary** 

**Reference Day** 

Reference Month

Start Fiscal Period

**End Fiscal Period** Last Extended Period End

**Taxation Summary** 

**Tax Reference Day** 

Tax Reference Month Start Taxation Period

# **Ecolab Foundation Grant Application Form Cover Sheet**

Organization	. Nan	ne	,	ı	,	?	•					,	,		•			
Address	-	•		-		7			•				,					
Cıţy		÷'	2 mag 2		٠.	,	,	-,7	•	•	٤.	•		'n	•	•		
State <none></none>						•				,	•		-		,* t			
Postal Code										!	٠.		•			,5	;	
E-mail Addre	ss					•						`				-		
Phone										,			•	-				
Fax						ı						•	•	<b>;</b> ,				,
WWW Addres	SS <sup>-</sup>		-		•				•			~						,
Prefix (Mr , Mrs , Ms.)				,			•											•
First Name		ī	4			•	٠											

Title
Organization Classification
Tax Status 1: Please send a copy of your organization's 501c3 IRS determination letter to: Ecolab Foundation, 370 N Wabasha St. N, EUC/11, St. Paul, MN 55102. 501(c)(3)
Funds are being requested for (please select one)
Have you received a grant from Ecolab in the past? (If "yes", check the box. If a "no", no action is required in this field).
Request Type
Request Amount
Organization Annual Budget
Project Budget (for support other than general operating)
Project Description Please give a 2-3 sentence summary of the request:
Geographical Area Served

Age Group	٠,		:	  -	, - <del>-</del>	,	i	,	.*	,	٠.	Î	A.,	<b>3</b> .		
(If serving more	than	one age	grou	pleas	e indic	ate m	ultipl	e sel	ection	s belo	w)					
(0, 20,)							•				·					

## **Proposal Narrative**

## Header

Organizational Information

Organization History

Brief summary of organization history

Mission and Goals

Brief summary of organization mission and goals.

(If serving more than one, please indicate multiple selections below)

Current Programs

Description of current programs, activities, service statistics, and strengths/accomplishments.

#### Collaborations

Your organization's relationship with other organizations working to meet the same needs or providing similar services. Please explain how you differ from these other agencies. NOTE: IF YOU ARE REQUESTING FUNDING FOR A PROGRAM IN COLLABORATION WITH SAINT PAUL PUBLIC SCHOOLS/A SAINT PAUL PUBLIC SCHOOL (ISD 625), YOU ARE REQUIRED TO SUBMIT A LETTER FROM THE OFFICE OF THE SUPERINTENDENT VERIFYING THE COLLABORATION.

## Support Structure:

Number of board members, full time paid staff, part-time paid staff, and volunteers. Please send a list of the organization's current board of directors to: Ecolab Foundation, 370 N Wabasha St. N, St. Paul, MN 55102.

#### **Purpose of Grant**

#### Situation

Briefly explain the opportunity, issue, need, and the community that your proposal addresses. How was this focus determined? And by whom?

### Specific activities

List specific activites, your overall goals, objectives to meeting these goals

#### Actions

Briefly describe how you will accomplish your goals and objectives, who will implement activities and the timeframe for implementation

#### Ìmpact

How the proposed activities will benefit the community in which they will occur, being as clear as you can about the impact you expect to have

## Long-Term Strategies

Long-term strategies (if applicable) for sustaining this effort.

#### **Evaluation**

#### Measurement and Outcomes

What criteria you use to measure the effectiveness of your activities? Please note results expected by end of funding period. Who will be involved in the evaluation process?

## **Financial Information**

### **Budget**

Fill in fields below. ALL organizations: please send a list of donors and donor amounts/levels related to the project for which you are seeking funding and/or an annual report that includes this information. For organizations with an annual budget of greater than \$750,000, IT IS ALSO REQUIRED TO MAIL YOUR MOST RECENT AUDITED FINANCIAL STATEMENT TO. Ecolab Foundation, 370 Wabasha Street N, EUC/11, St Paul, MN 55102. If the organization's budget is less than \$750,000, please send unaudited financials

#### **INCOME**

Total\_Income

Earned\_Revenue

#### **EXPENSE**

Salaries\_and\_wages

Totali-Expenses

#### **DIFFERENCE**

Income less Expense

Income Less Expense

## **Project Budget**

## Project Budget (if applicable)

Fill in fields below IT IS ALSO REQUIRED TO MAIL YOUR PROPOSED PROJECT BUDGET TO: Ecolab Foundation, 370 Wabasha Street N, EUC/11, St. Paul, MN 55102

#### **INCOME**

Support\_from\_all\_sources ( ) in the second of the second o

Earned\_Revenue\_for\_Project

Total\_Projecti\_Income; The content of the content o

#### **PROJECT EXPENSES**

Project\_Budget\_Difference: Income less Expense

Summery

01 02 03 04 YTD	Grosa  Diabbus ser rents 795 6-40 00 1 400 206 44 795 525 31 1577 256 79 4 586 830 51	Voided / Stopped 15 969 00 2 700 00 4 837 00 5 448 00 28 954 00	Cleared 928 125 50 1 316 689 20 717 951 05 1 563 857 28 4 544 623 01
Q1 Q2 Q3 Q4 YTD	Net  Disbursements 778 671 00 1 477 506 44 720 686 31 1 571 806 75 4 559 876 51		

		YTD	4 559 876 51						
		Disbursement Data			Void / Stop Data		Cleared Data	Checks Outstaning	
Date	Number	Payee	Amount		ate Amount	De		Amount	
04/11/06 03/28/08	11702 13738	Corn Rel council Gerrardstown Elementary School	200 00 34 00	Q1 Q1	200 00 S 34 00 S				
06/30/08	14065	Carver High School	1 850 00	Q1	1 850 00 5	,			
09/17/08 09/17/08	14294 14298	Henry County Middle School North Mulberry Elementary School	1 150 00 485 00	Q1 Q1	1 150 00 S 485 00 S				
3/25/2009	14821	Badger Elementary School	100 00	Q1	100 00 8	3			
05/14/09	15144	Northview Elementary	1 400 00 500 00	Q1 Q1	1 400 00 S 500 00 S				2009 Huntington Visions for Learning Q2 09 Comm Leadership
6/25/2009 8/25/2009	15194 15220	Mahtomedi Youth Baseball Hightand Park Montessori School Inc	50.00	Q1	50 00 S				Q2 09 Educ
6/25/2009	15240	Roch Courreges Elementary School	200 00	Q1					Q2 09 Educ
11/23/2009 11/20/2009	15636 15622	Dallas Arboratum MHA of ND - Mountainbrooks	10 000 00 1 625 00	Q1	10 000 00 8	Q1	1 625 00	•	2009 Gartend CRC 2009 Grand Forks Community Relations Council
11/9/2009	15494	Math & Science Academy	1 000 00			Q1	1 000 00	-	Q3 09 Educ
11/16/2009	15531	Circle of Change	3 000 00			Q1	3 000 00 1 200 00		2009 Beloit CRC 2009 Beloit CRC
11/16/2009	15536 15540	Kingdom Academy Project A H E.A.D	1 200 00 1 045 00			Q1	1 045 00	•	2009 Baloit CRC
11/20/2009	15603	International Dysleids Association	1 000 00			Q1	1 000 00	-	2009 Elk Grove Village Community Relations Council
11/20/2009	15614 15626	Girl Scouts-Dekota Horizons PATH ND (no	1 000 00 2 500 00			Q1 Q1	1 000 00 2 500 00	•	2009 Grand Forks Community Relations Council 2009 Grand Forks Community Relations Council
11/20/2009	15629	Red River Valley Habitat for Humanity	5 000 00			91	5 000 00		2009 Grand Forks Community Relations Council
12/1/2009	15682	East Lake Elementary	3 000 00 1 500 00			Q1 Q1	3 000 00 1 500 00		Attents/McDonough Visions for Learning Attents/McDonough Visions for Learning
12/1/2009	15664 15666	Jordan Hill Elementary Mainstay Academy	3 800 00			Q1	3 800 00		Atlanta/McDonough Visions for Learning Atlanta/McDonough Visions for Learning
12/1/2009	15667	Moore Elementary	12 750 00			Q1	12 750 00	-	Atlante/McDonough Visions for Learning
12/1/2009 12/1/2009	15668 15670	New Hope Elementary Pleasant Grove Elementary	700 00 5 250 00			Q1 Q1	700 00 5 250 00		Attents/McDonough Visions for Learning Attents/McDonough Visions for Learning
12/1/2009	15671	Red Oak Elementary	3 000 00		Q3 \$3 000 00 S	s	L	-	Atlanta/McDonough Visions for Learning
12/15/2009	15676 15681	University of Chicago Booth School of Business Guildford Child Development	10 000 00 5 000 00			Q1 Q1	10 000 00 5 000 00	-	Leadership Chellenge - charged against 2008 budget/no new funding in 09 09 Greensboro CRC
12/15/2009	15682	HandyCapable Network Inc	5 000 00			Q1	5 000 00		09 Greensboro CRC
12/15/2009	15687	Kids Voting - Guildford County	3 550 00			Q1	3 550 00		09 Greensboro CRC
12/15/2009 12/15/2009	15690 15691	Project Linus Guifford County Chapter Senior Resources for Guifford	5 000 00 3 000 00			Q1 Q1	5 000 00 3 000 00		09 Greensbore CRC 09 Greensbore CRC
12/15/2009	15693	Save Haven Child Advocacy Center	2 200 00			Q1	2 200 00		99 Martinaburg CRC - resease of VOID d check \$ 15566
12/17/2009 12/17/2009	15705 15707	KFAI Fresh Air Inc Window to the World Communications. Inc	100 00 100 00			Q1	100 00 100 00		Q4 09 Pub Broad Q4 09 Pub Broad
12/17/2009	15708	Criswell College	100 00			01	100 00		Q4 09 Pub Broad
12/17/2009	15709	ksds-fm/jazz 88	100 00			Q1	100 00		Q4 09 Pub Broad
12/17/2009 12/17/2009	15710 15714	Woodbury Royals Band Boosters Inc Minnesota Chinese Cultural Association	500 00 500 00			Q1 Q1	500 00 500 00	_	Q4 09 Leedership Q4 09 Leedership
12/17/2009	15715	Milestone Growth Fund	500 00			Q1	500 00	•	Q4 09 Leedership
12/17/2009	15720 15721	Autusm Society of Forsyth County Admission Possible	500 00 500 00			Q1	500 00 500 00	-	Q4 09 Leedership Q4 09 Leedership
12/17/2009 12/17/2009	15723	Surge	500.00			Q1	500 00		Q4 09 Leedership
12/17/2009	15724	Recine County TRIAD	500 00			Q1	500 00	-	Q4 09 Leedership
12/17/2009 12/17/2009	15727 15729	Deep Portage Corporate Volunteerism Council	500 00 500 00			Q1 Q1	500 00 500 00	•	Q4 09 Leadership Q4 09 Leadership
12/17/2009	15731	Empire Arts Center	500 00			Q1	500 00		Q4 09 Leadership
12/17/2009 12/17/2009	15734 15736	Minnesota International Center Saint Benedict High School	1 000 00 500 00			Q1 Q1	1 000 00 500 00		Q4 09 Leadership Q4 09 Leadership
12/17/2009	15737	Habitat for Humanity Red River Valley	500 00			Q1	500 00	-	Q4 09 Leadership
12/17/2009	15736	Trust for Public Land	500 00 500 00			Q1 Q1	500 00 500 00		Q4 09 Leedership Q4 09 Leedership
12/17/2009 12/17/2009	15742 15743	Metro State University Saint Paul Chamber Orchestra	500 00			Q1	500 00		Q4 09 Leedership
12/17/2009	15748	History Theatre	500 00			Q1	500 00		Q4 09 Leedership
12/17/2009 12/17/2009	15758 15757	Boys and Girls Club of the Twen Cities Springboard for the Arts	500 00 500 00			Q1 Q1	500 00 500 00		Q4 09 Leedership Q4 09 Leedership
12/17/2009	15758	YWCA of St. Paul	500 00			Q1	500 00		Q4 09 Leedership
12/17/2009	15759	YMCA of Greater Saint Paul	500 00 500 00			Q1 Q1			Q4 09 Leedership Q4 09 Leedership
12/17/2009 12/17/2009	15761 15762	William Mitchell College of Law University Enterprise Laboratories	500 00			91			Q4 09 Leedership
12/17/2009	15763	YouthCARE	500 00					500 00	Q4 09 Leadarship
12/17/2009 12/17/2009	15767 15768	Boy Scout Troop 444 SURGE	200 00 200 00			Q1 Q1	200 00 200 00		Q4 09 Vol Bonus Q4 09 Vol Bonus
12/17/2009	15772	Humboldt Schools	200 00			Q1	200 00		Q4 09 Val Banua
12/17/2009	15774	Empire Arts Ctr	200 00			Q1			Q4 09 Val Bonus Q4 09 Val Bonus
12/17/2009 12/17/2009	15775 15778	Child & Family Resources Inc Boy Scouts Troop 269	200 00 200 00			Q1 Q1	200 00 200 00		Q4 09 Vol Bonus
12/17/2009	15777	Corporate Volunteerism Council Twin Cities	200 00			Q1			Q4 09 Vol Benus
12/17/2009 12/17/2009	15780 15781	Girl Scouts of the Minnesota and Wisconsin River Valleys A Friend's House	200 00 17 200 00			Q1 Q1			Q4 09 Vel Bonus McDonough 2009 CRC
12/17/2009	15782	Henry County Council on Aging	5 000 00			Q1			McDonough 2009 CRC
12/17/2009	15783 15784	Moving the Spirit Nosh's Ark	5 000 00 5 000 00			`01		5 000 00	McDanaugh 2009 CRC McDanaugh 2009 CRC
12/17/2009 12/17/2009	15785	YMCA	4 500 00			Q1	4 500 00		McDanaugh 2009 CRC
12/18/2009	15788	Andover High School	75 00			Q1			Q4 09 Educ
12/18/2009 12/18/2009	15789 15790	Association of Former Students of Texas ASM Benedictine University	370 00 25 00			Q1	370 00 25 00	•	Q4 09 Educ Q4 09 Educ
12/18/2009	15791	Bethel University	920 00			Q1	920 00	•	Q4 09 Educ
12/18/2009 12/18/2009	15793 15794	Carnarillo Academy of Progressive Education PTO Chippews Middle School Advisory Council	200 00 30 00			Q1 Q1		•	Q4 09 Educ Q4 09 Educ
12/18/2009	15795	College of Saint Benedict	50 00			Q1	50 00		Q4 09 Educ
12/16/2009	15797	Convent of the Visitation	750 00			Q1			Q4 09 Educ
12/18/2009	15799 15801	Cretin-Derham Hall High School Epiphamy Catholic Schol	530 00 125 00			Q1	530 00 125 00		Q4 09 Educ Q4 09 Educ
12/18/2009	15802	Faithful Shepherd Catholic School	1 187 50			Q1	1 187 50		Q1 09 Educ
12/18/2009 12/18/2009	15803	Georgia Tech Foundation High Point University	250 00 50 00			Q1			Q4 09 Educ Q4 09 Educ
12/18/2009	15807	Jesuit High School	250 00 250 00			Q1			Q4 09 Educ
12/18/2009	15808	Kenilworth Junior High	100 00			Q1	100 00		Q4 09 Educ
12/18/2009	15809 15810	Knox College Lake Elmo Elementary	500 00 25 00			Q1			Q4 09 Educ Q4 09 Educ
12/18/2009	15812	Maple Grove Schools	2 148 00			Q1	2 148 00		Q4 09 Educ
12/18/2009	15813	Massachusetts institute of Technology	1 500 00			01			Q4 09 Educ Q4 09 Educ
12/18/2009	15814 15815	Metrolina Christian Academy Minnesota Landecape Arboretum Foundation	250 00 150 00			Q1			Q4 09 Educ Q4 09 Educ
12/18/2009	15816	Monmouth University	250 00			01	250 00		Q4 09 Educ
12/18/2009	15817 15818	North Pitt High School Northern (Briois University Foundation	450 00 250 00			Q1			Q4 09 Educ Q4 09 Educ
12/18/2009	15820	Onandaga Community College Foundation Inc	1 000 00			Q1	1 000 00		Q4 09 Educ
12/18/2009	15821	Pennsylvania State University	135 00			Q1	135 00		04 09 Educ
12/18/2009 12/18/2009	15822 15823	Presentation High School Presentation of the Blassed Virgin Mary School	1 000 00			Q1		•	Q4 09 Educ Q4 09 Educ
12/18/2009	15824	Purdue Foundation	200 00			Q1	200 00	•	Q4 09 Educ
12/18/2009 12/18/2009	15825 15829	Sairs John Vianney College Seminary Schola Foundation	100 00 1 000 00			Q1 Q1		•	Q4 09 Educ Q4 09 Educ
12/18/2009	19829	OFFICER LORUSTICAL	1 000 00			uı	100000	-	WY VF EUCC

	12/18/2009	15830	Simpson College	350 00		Q1	350 00		Q4 09 Educ
	12/18/2009	15833	St. Anthony Park School Association	100 00		Q1	100 00		Q4 09 Educ
	12/18/2009	15834	St Benedict High School	500 00		Q1	500 00		Q4 09 Educ
	12/18/2009	15838	St Catherine University	250 00		Q1	250 00		Q4 09 Educ
	12/18/2009	15838	St Croix Lutheran High School	150 00		Q1	150 00		Q4 09 Educ
	12/18/200 <del>9</del>	15839	St. Ignetius High School	50 00		Q1	50 00		Q4 09 Educ
	12/18/2009	15840	St John Lutheran School	1 000 00		Q1	1 000 00		Q4 09 Educ
	12/18/2009	15841	St. John the Baptist School	200 00		Q1	200 00	-	Q4 09 Educ
	12/18/2009	15842	St John Vinnney School	105 00		Q1	105 00		Q4 09 Educ
	12/18/2009	15843	St Joseph & School	450 00		Q1	450 00		Q4 09 Educ
	12/18/2009	15844	Stanford University	1 000 00		Q1	1 000 00		Q4 09 Educ
	12/18/2009	15645	Tesseract School	350 00		Q1	350 00		Q4 09 Educ
	12/18/2009	15847	The University of Texas at Austin	50 00		Q1	50 00		Q4 09 Educ
	12/18/2009	15849	Trinity Christian Academy	150 00		Q1	150 00	-	Q4 09 Educ
	12/18/2009	15851	University of Delaware	200 00		Q1	200 00	-	Q4 09 Educ
	12/18/2009	15853	University of Northern lows Foundation	500 00		Q1	500 00		Q4 09 Educ
	12/18/2009	15855	University of Rochester	100 00		Q1	100 00		Q4 09 Educ
	12/18/2009	15858	UW River Falls Foundation	50 00		Q1	50 00	•	Q4 09 Educ
	12/18/2009	15859	UW-Whitewater Foundation Inc	50 00		Q1	50 00	-	Q4 09 Educ
	12/18/2009	15860	West Virginia Wesieyan College	100 00		Q1	100 00	-	Q4 09 Educ
	12/18/2009	15881	White Bear Area High School	125 00		Q1	125 00		Q4 09 Educ
	12/18/2009	15863	White Bear Lake Montesson School	200 00		Q1	200 00		Q4 09 Educ
	12/18/2009	15864	William Mitchell College of Law	100 00		Q1	100 00		Q4 09 Educ
	12/31/09	15865	Kidpower	1 500 00		Q1	1 500 00		relaue of #15577 for San Jese CRC
	XXXXXXXX	XXXX	Unknown Checks cleared May 1969	(100 00)		Q1	(100 00)	•	
								6,600 00	
Q2	5/18/2010	16117	Bianford Elementary School	3 000 00	04	\$3 000 00 V			COI Visions for Learning
03	9/30/2010	18445	Lake Country School	100000	04	100000			Q3 10 Educ
94	11/4/2010	16538	United Way of Central Indians	1 448 00	Q4	1,448 00		-	
•	11/42010	10330	Cinded 11thy or Certain alleaning	14000	4	1,770 00		•	
								179,508 00	

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185 008 00

#### Industry Q4 2010 Check Reconciliation

Summery

	Gross	Volded /	
	Disbursements	Stopped	Cleared
Q1	60 000 00	<del></del>	60 000 00
Q2	127 500 00	•	127 500 00
Q3	200 000 00	200 000 00	200 000 00
Q4	870 000 00		670 000 00
YTO	1 057 500 00	200 000 00	1 057 500 00
	Net		
	Disbursements		
Q1	60 000 00		
02	127 500 00		
Q3			
Q4	670 000 00		
YTD	857 500 00		

	Disbursement Data					Void / Stop Data		ared Data	Checks	
	Date	Number	Payee	Amount	Date	Amount	Date	Amount	Outstanding	
	11/9/09	1032	Johnson & Weles University	200 000 00	Q3	200000 8				
							Q4 Outstandie	ng Checks		
Q1	2/23/2010	1036	Culture incorporated	\$80 000 00			Q1	\$60 000 00		
02	5/8/2010	1039	Purdue University	\$87,500 00			Q2	\$87 500 00		
QZ	5/8/2010	1040	Minnesota State Fair Foundation	\$25 000 00			Q2	\$25 000 00		
02	5/24/10	1041	AORN Foundation	\$15 000 00			Q2	\$15 000 00		
Q3	8/12/10	1042	Johnson & Wales University	\$200 000 00			Q3	\$200 000 00	•	
Q4	11/4/2010	1043	APIC	\$75 000 00			Q4	\$75 000 00	-	
04	11/4/2010	1044	Johnson & Wales University	\$200 000 00			Q4	\$200 000 00		
Q4	11/4/2010	1045	The Joint Commission Center for Transforming Healthcare	\$200 000 00			Q4	\$200 000 00		
Q4	11/4/2010	1048	Michigan State University-The School of Hospitality Business	\$50 000 00			Q4	\$50 000 00	-	
Q4	11/4/2010	1047	Project HOPE	\$25 000 00			Q4	\$25 000 00		
Q4	11/4/2010	1048	Ryerson University	\$ 5 000 00			04	\$ 5 000 00	•	
Q4	11/4/2010	1049	Southwest Minnesota State University	\$30 000 00			Q4	\$30 000 00		
04	11/4/2010	1050	Unbergity of Minnesota Foundation	\$85,000,00			04	\$45,000,00	_	

Industry 2010 Lowertown revitalization

Final payment of two Second of the payments industry Foudsbo Second of the payments Third of thur payments Payment two of bea payment four of the final payment three of three Second of tour payments

Total C/3

(Rev January 2011)

Department of the Treasury

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

OMB No 1545-1709

Internal Revenue Service File a separate application for each return.									
• 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.									
				u need a 3-month automatic extens					
				tomatic) 3-month extension of time					
				ed in Part I or Part II with the exce					
				Contracts, which must be sent to					
				sit www.irs gov/efile and click on e-fi	ile for Chantles & Non	oronis			
		Month Extension of Time. On			<del></del>				
	-			tic 6-month extension - check this b	ox and complete	. —			
Part I only .						▶∟			
•	•		s, REMICs,	, and trusts must use Form 7004 to i	request an extension o	of time			
to file income				<del></del>	Employer identification				
Type or		empt organization			' -	number			
print		FOUNDATION (A/K/A ECC			41-1372157				
File by the	Number, Str	eet, and room or suite no. If a P.O. box	, see instruc	ctions					
due date for filing your		ABASHA ST							
return See	City, town o	r post office, state, and ZIP code. For a	a foreign add	dress, see instructions					
instructions	ST. PA	AUL, MN 55102	<del></del>						
Enter the Re	turn code fo	or the return that this application is	for (file a	separate application for each return	)	. 0 4			
Application			Return	Application	·	Return			
is For			Code	Is For		Code			
Form 990			01	Form 990-T (corporation)	·	07			
Form 990-BL			02	Form 1041-A		08			
Form 990-EZ			03	Form 4720		09			
Form 990-PF			04 ,	Form 5227		10			
		or 408(a) trust)	05	Form 6069		11			
Form 990-T			06	Form 8870		12			
Telephone If the orga If this is fo	e No. ► 65 anization do or a Group F e group, che	Return, enter the organization's fou	usiness in r digit Grou tit is for pa	FAX No ► 651-293-4023 the United States, check this box up Exemption Number (GEN) urt of the group, check this box	If thi	s is			
				quired to file Form 990-T) extension	of time				
						tension is			
until AUGUST 15TH , 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								
		ginning	20	, and ending	20				
	iax your bo	gg	,		,				
2 If the ta	x vear ente	red in line 1 is for less than 12 mg	onths, chec	k reason Initial return	Final return				
	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	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 \$ 0.00								
	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  3b \$ 0.00								
				ent with this form, if required, by us		0.00			
		Tax Payment System) See instru		one with this form, it required, by us	3c \$				
				with this Form 8868, see Form 8		379-EO for			
payment inst		ing in the section of							

■ If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box	Form 8868 (Re	ev. 1-2011)					Page <b>2</b>	
e If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)  Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed). Type or print firety the attended of the power of the property of the prop	• If you are	e filing for an Additional (Not Automatic) 3-Mo	onth Exten	sion, complete only Part II and che	ck this box		▶	
Type or print rile by the did to a did tional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).  Name of exempt opagarazion   Sempte of the print of t	Note. Only	complete Part II if you have already been grain	nted an aut	tomatic 3-month extension on a prev	nously filed	Forn	n 8868.	
Type or Print Expose of COLAB FOUNDATION (A/K/A PCOLAB INDUSTRY FOUNDATION)  COCAR FOUNDATION (A/K/A PCOLAB INDUSTRY FOUNDATION)  AND FOUNDATION (A/K/A PCOLAB INDUSTRY FOUNDATION)  APPLICATION (A/K/A PCOLAB INDUSTRY FOUND	• If you are	e filing for an Automatic 3-Month Extension, o	complete o	nly Part I (on page 1).				
Type or Print Expose of COLAB FOUNDATION (A/K/A PCOLAB INDUSTRY FOUNDATION)  COCAR FOUNDATION (A/K/A PCOLAB INDUSTRY FOUNDATION)  AND FOUNDATION (A/K/A PCOLAB INDUSTRY FOUNDATION)  APPLICATION (A/K/A PCOLAB INDUSTRY FOUND	Part II	Additional (Not Automatic) 3-Month Ex	ctension c	of Time. Only file the original (no	copies nee	edec	<u>d).</u>	
Print   ECOLAB FOUNDATION (A/K/A ECOLAB INDUSTRY FOUNDATION)   41-1372157   Finish the extension of the policy of								
Number, street, and room or sulte no. If a P.O. box, see instructions		ECOLAR FOUNDATION (A/K/A ECOL	AB IND	USTRY FOUNDATION)	41-1372	2157		
stretunds as the return or post office, state, and ZIP code For a foreign address, see instructions stretunds. Set ST. PAUL, MN 55102  Enter the Return code for the return that this application is for (file a separate application for each return). □□  Application   Return   Application   Return   Application   Return   Set For   Code   Set For   Set For   Code   Set For								
Enter the Return code for the return that this application is for (flie a separate application for each return).  Application Is For Code Form 990 0 101 Form 990-BL Code Form 990-BC Form 990-BC Code Form 990-BC Form 990-BC Code Form 990-BC Code Form 990-BC Form 990-BC Code Form 990-BC Code Form 990-BC Code Form 990-BC Form 990-BC Code Form 990-BC Form 990-BC Code Form 990-BC Form	extended 270 MADACUA CIT							
Enter the Return code for the return that this application is for (file a separate application for each return)	filing your  City, town or post office, state, and ZIP code For a foreign address, see instructions							
Application   Return   Application   Return   Code   Section   Return   Section   Return   Return   Section   Return   Return   Section   Return   Return   Return   Section   Return   Return   Section   Return   Return   Return   Return   Section   Return   Retur	return. See							
Return   Application   Return   Application   Return   Sport   Sport   Code   Sport   Sport   Code   Sport   Sport   Code   Sport   Sport   Sport   Code   Sport   Sp	Mistractions	51. 17.0B/ TW 33102						
Is For   Code   Is For   Code   Sept   Sept   Sept   Code   Sept   Code   Sept   Code   Sept   Code   Sept   Code   Sept   Sept   Sept   Sept   Code   Sept   Code   Sept   Code   Sept   Sept   Sept   Sept   Sept   Code   Code   Sept   Code   Sept   Sept   Sept   Sept   Sept   Code    Enter the R	eturn code for the return that this application i	s for (file a	separate application for each return	)				
Is For Code   September   Code    Application		Return	Application			Return		
Form 990-BL 0.2 Form 1041-A 0.8 Form 990-EZ 0.3 Form 4720 0.9 Form 990-EZ 0.4 Form 5227 10 Form 990-F 0.4 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 0.5 Form 6069 11 Form 990-T (trust other than above) 0.6 Form 8870 12 STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.  The books are in the care of ► Telephone No. ► If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box	1.2		Code				Code	
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