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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

2010

Open to Public Inspection

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

~	FOI LINE	2010 calendar year, or tax year beginning	and	enanig					
В	Check if applicable	C Name of organization			D Employer identi	fication number			
Г	Addre		UNDATION						
Ī	Name	David A			41-	1424522			
Ē	Initial	Number and street (or P.O box if mail is not delive	ered to street address)	Room/suite					
	Terminated	50 S SIXTH STREET		1500	612-	-340-2600			
	Amend	City or town, state or country, and ZIP + 4			G Gross receipts \$	3,247,043.			
	Applic tion pendir	HIMEHIODIO, III 33402			H(a) Is this a group				
	pendii	F Name and address of principal officer: NIM	SEVERSON		for affiliates?	Yes X No			
_		SAME AS C ABOVE			H(b) Are all affiliates in				
<u> </u>			(insert no) 4947(a)(1) c	or 527	7	a list. (see instructions)			
		e: ► N/A organization. X Corporation Trust Asso	ociation Other	I Voor	H(c) Group exempti	M State of legal domicile: MI			
	art I	Summary	ociation other P	L TEAL	or tottiation 1302	IVI State of legal dofficile. The			
-	4	Briefly describe the organization's mission or most s	ignificant activities: SUPPO	ORTING	TAX EXEMP	CHARITABLE			
Artivities & Governance	}	AND EDUCATIONAL ORGANIZATI							
5	2	Check this box if the organization discontinuous	e than 25% of its net a	assets.					
2	3	Number of voting members of the governing body (F			3				
Č	4	Number of independent voting members of the gove	4	(
ď	5 5	Total number of individuals employed in calendar year	5	(
;	6	Total number of volunteers (estimate if necessary)	6	{					
į	7a	Total unrelated business revenue from Part VIII, colu	mn (C), line 12		7a				
	Ъ.	Net unrelated business taxable income from Form 99	90-T, line 34	1					
					Prior Year 2,544,492	Current Year 3,245,429			
9	8	Contributions and grants (Part VIII, line 1h)			2,344,492	3,243,429			
Rovonio	9	Program service revenue (Part VIII, line 2g)	7 . 1	-	949	1,614			
á	10	nvestment income (Part VIII, column (A), lines 3, 4, a		-	0.				
	1	Other revenue <u>at [farty] (), Column</u> (A), lines 5, 6d, 8c, 9 Total revenue <u>add lines 8 through 1.3 (must equal P</u>		-	2,545,441				
_					2,430,481	3,495,397.			
	14	Grants and similar amounts paid (Patr X, column (A) Benefits paid to or for members (Part X, column (A),	line 4)		0.	. 0.			
ي	1	Salaries, other-compensation, employee benefits (Pa			0.	. 0 .			
	16a	Professional fundralismo fees (Part IX, column (A), line	e 11e) .		0.	0.			
E GOVE	ь.	Total-fundraising expenses (Part IX, column (D), line	25) 🕨	0.					
-	i 17 (Other expenses (Part IX, column (A), lines 11a-11d, 1	1f-24f) .		209				
∂ 	18	Total expenses. Add lines 13-17 (must equal Part IX,	column (A), line 25)	<u> </u>	2,430,690.				
5 5	19	Revenue less expenses. Subtract line 18 from line 12	2		114,751.				
Sor	= 1			Be	ginning of Current Year 613, 304.	End of Year 364,370.			
Ssel	<u>ت</u> ا	Total assets (Part X, line 16)		-	013,304.	0.			
Net Asset	- 1	otal liabilities (Part X, line 26) Net assets or <u>fund balances. Subtract line 21 from lir</u>	20	-	613,304	364,370			
	ert II	Signature Block	18 20		013,001.	301/0/0			
		ties of perjury, I declare that I have examined this return, in	cluding accompanying schedules	and statem	ents, and to the best of r	ny knowledge and belief, it is			
		, and complete Declaration of preparer (other than officer)							
		Van Livane			8/0/1				
Si	gn	Signature of officer			Date	,			
He	ere		RER & DIRECTOR			· 			
_		Type or print name and title			Date Check I	PTIN			
		Print/Type preparer's name	reparer's signature		lit i				
Pa	·				self-empto	yea			
	eparer	Firm's name			Firm's EIN ▶				
US	e Only	Firm's address >			Phone no				
	4b = 10	S discuss this return with the preparer shown above	2 (see instructions)		I r none no	Yes No			
IVI	ay ine in	o diacosa this tetutit with the blebatet shown above	, joce manuchers)						

Form **990** (2010)

032002 12-21-10

orm	990 (2010) THE DORSEY & WHITNEY FOUNDATION 41-1424	<u> 1522</u>	Р	age 3
Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3	<u></u>	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	ļ	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	Х	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
-	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
•	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
0	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
•	If "Yes," complete Schedule D, Part V	10		Х
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
•	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
•	Part VI	11a		X
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	116		Х
_	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
Ŭ	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		X
ь	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes." and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	X	<u> </u>
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	<u> </u>	X
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals		1	
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	<u> </u>	X
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	ļ	X
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	ļ	X
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		1	

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20a

20b

b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? **Note.** Some Form 990 filers that

complete Schedule G, Part III

20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H

operate one or more hospitals must attach audited financial statements (see instructions)

Par	t IV Checklist of Required Schedules (continued)			1
21	Did the example to provide the \$5,000 of example and other equipments and example and example to a		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,		-	
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		1	
	Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	ļ	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	1		
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27	ļ	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			.,
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X_
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			v
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	ļ	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	 	Λ
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation		İ	Х
	contributions? If "Yes," complete Schedule M	30	-	
31	Did the organization liquidate, terminate, or dissolve and cease operations?			Х
00	If "Yes," complete Schedule N, Part I	31	 	A
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	32		Х
22	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32	ļ	
33	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity?	33		
34	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Х
	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			-
J	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х

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Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

Note. All Form 990 filers are required to complete Schedule O

		<u> 124522</u>	Р	age 5					
Par	rt V Statements Regarding Other IRS Filings and Tax Compliance								
	Check if Schedule O contains a response to any question in this Part V								
		. [Yes	No					
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	0							
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	_ 0							
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming								
	(gambling) winnings to prize winners?	1c							
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return	0							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b							
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)								
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	_3a	<u> </u>	Х					
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b							
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a								
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	ļ	X					
b	If "Yes," enter the name of the foreign country:	_							
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			х					
5a									
b		<u>5b</u>		X					
	·	<u>5c</u>							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	I		,,					
	any contributions that were not tax deductible?	_6a		X					
þ	, , ,								
	were not tax deductible?	6b	ļ	 					
7	Organizations that may receive deductible contributions under section 170(c).			Х					
a		i	<u> </u>						
Ь		7 <u>b</u>	 						
С		7.		X					
	to file Form 8282? If "Yes." indicate the number of Forms 8282 filed during the year. 7d	7c	-	A					
	11 100, 11100000 11100000 11100000	— ₇₀		Х					
e		7e 7f	 	X					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		 	1					
9	to the state of th		 	-					
h	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	····							
8	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year	r ² 8	ŀ	Х					
0		'							
•	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	9a		Х					
a	The state of the s	9b	t	X					
ь 10	Section 501(c)(7) organizations. Enter:			- -					
a	10 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m								
b	000 D 13/10 to 40 for delivery of the facilities								
11	Section 501(c)(12) organizations. Enter:								
а	and the state of t								
b									
	amounts due or received from them.)								
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			1					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а	16 the state of th	13a							
	Note. See the instructions for additional information the organization must report on Schedule O.	["		1					
b	The second secon								
	organization is licensed to issue qualified health plans								
С			<u> </u>						
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X					
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b							

14b Form **990** (2010)

Form 990 (2010) THE DORSEY & WHITNEY FOUNDATION 41-1424522 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI **Section A. Governing Body and Management** No Yes 1a Enter the number of voting members of the governing body at the end of the tax year O 1b **b** Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X 2 officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 6 Does the organization have members or stockholders? 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the 7a governing body? X 7b b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? 8a X **b** Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Does the organization have local chapters, branches, or affiliates? 10a b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b Х 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a X 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c in Schedule O how this is done 13 13 Does the organization have a written whistleblower policy? 14 Does the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a a The organization's CEO, Executive Director, or top management official 15b **b** Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a X taxable entity during the year? b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ►MN 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Another's website X Upon request Own website 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ROSE WILSON - 612 340 2847

Form 990 (2010)

032006 12-21-10

50 S SIXTH STREET, SUITE 1500, MINNEAPOLIS,

55402-1498

MN

Form 990 (2010) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons. V Charleship have for all

X Check this box if neither the organization		orga	anıza			mpe	nsat			
(A)	(B)	(C) Position						(D)	(E)	(F)
Name and Title	Average hours per	(6)					dγΑ	Reportable compensation	Reportable	Estimated amount of
	week (describe	_	-1 -1		ck all that ap			from the	compensation from related organizations	other compensation
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
KIM SEVERSON										
CHAIR & DIRECTOR		X		Х	<u> </u>			0.	0.	0.
JAY SWANSON			1	_						
SEC/TREASURER & DIRECTOR		X		X	<u> </u>	<u> </u>	ļ	0.	0.	0.
TERRENCE DANYSH		,,		'	1					
DIRECTOR		X	_	├	 	<u> </u>		0.	0.	0.
SANDRA EDELMAN		x					ļ	0.	0.	_
DIRECTOR		^	├	⊢	 	-	-	0.	<u> </u>	0.
PETER CARTER DIRECTOR		X						0.	0.	0.
DIRECTOR										
				 	 	┢	-			
				_	_	<u> </u>				
			-							
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(A) Name and title	(B) Average			O) Posi	ition			(D) Reportable	(E) Reportable	(F) ble Estimated		
	hours per week (describe hours for related organizations in Schedule O)	week escribe burs for elated nizations ichedule		all t		Highest compensated Complexed Comple		compensation from the organization (W-2/1099-MISC)	compensatio from related organizations (W-2/1099-MIS	3	amoun othe compens from the organization	r ation he ation ated
											_	
			1									
				_								
				_							· · · · · ·	
Sub-total Total from continuation sheets to Part Total (add lines 1b and 1c)						> >		0. 0. 0.		0.		0 0 0
Total number of individuals (including but compensation from the organization		nose	e liste	ed a	bov	e) wl	no re	eceived more than \$100),000 in reportabl	e 	Yes	No
 Did the organization list any former office line 1a? If "Yes," complete Schedule J for For any individual listed on line 1a, is the 	r such individual sum of reportat	le c	omp	ensa	atioi	n and	d ot	her compensation from			3	X
and related organizations greater than \$ 5 Did any person listed on line 1a receive or rendered to the organization? If "Yes," co	or accrue compe	nsa	tion	from	an	y uni			idual for services		5	X
Section B. Independent Contractors 1 Complete this table for your five highest the organization. NONE	compensated in	dep	ende	ent c	ont	racto	ors t	hat received more than	\$100,000 of com	pens	ation from	
the organization. NONE (A) Name and busine	ess address							(B) Description of s	services	С	(C) ompensati	on
		•										
												
Total number of independent contractor		not I	ımıte	ed to		ose li	stec	d above) who received r	nore than			
\$100,000 in compensation from the orga	anization -					<u> </u>					Form 990	/2010

Page 9

Part VIII Statement of Revenue (D) Revenue (B) (C) (A) Related or Unrelated Total revenue excluded from exempt function business tax under sections 512, 513, or 514 revenue revenue 1 a Federated campaigns 1b **b** Membership dues c Fundraising events 1d d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and 1f 3,245,429 similar amounts not included above 9 Noncash contributions included in lines 1a-1f \$ 3,245,429 h Total. Add lines 1a-1f **Business Code** Program Service Revenue 2 a f All other program service revenue ▶ g Total. Add lines 2a-2f 3 Investment income (including dividends, interest, and 1,614. 1,614. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (II) Personal 6 a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities (II) Other 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue contributions reported on line 1c). See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events ▶ 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a d All other revenue e Total. Add lines 11a-11d \triangleright 3,247,043. 0. 1,614. Total revenue. See instructions Form 990 (2010)

Part IX Statement of Functional Expenses

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

	Ali other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).									
	not include amounts reported on lines 6b, 3b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to governments and									
	organizations in the U.S. See Part IV, line 21	3,493,397.	3,493,397.							
2	Grants and other assistance to individuals in									
	the U.S. See Part IV, line 22	2,000.	2,000.							
3	Grants and other assistance to governments,									
	organizations, and individuals outside the U.S.									
	See Part IV, lines 15 and 16									
4	Benefits paid to or for members									
5	Compensation of current officers, directors,		·							
	trustees, and key employees									
6	Compensation not included above, to disqualified									
	persons (as defined under section 4958(f)(1)) and									
	persons described in section 4958(c)(3)(B)									
7	Other salaries and wages				-					
8	Pension plan contributions (include section 401(k)									
•	and section 403(b) employer contributions)									
9	Other employee benefits		-							
10	Payroll taxes									
11	Fees for services (non-employees):			· · · -						
	Management									
b	Legal									
0	Accounting									
d	Lobbying									
u	Professional fundraising services See Part IV, line 17			1810111111						
•	Investment management fees									
g	Other									
12	Advertising and promotion									
13	Office expenses	·								
14	Information technology									
15	Royalties									
16	Occupancy									
17	Travel									
18	Payments of travel or entertainment expenses									
	for any federal, state, or local public officials									
19	Conferences, conventions, and meetings			····						
20	Interest									
21	Payments to affiliates		· · · · · · · · · · · · · · · · · · ·							
22	Depreciation, depletion, and amortization									
23	Insurance									
24	Other expenses Itemize expenses not covered		, , , , , , , , , , , , , , , , , , ,							
	above (List miscellaneous expenses in line 24f If line									
	24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)									
а	STATIONARY	506.	***************************************	506.						
b	STATE OF MINNESOTA FILI	30.		30.						
c	NEW CHECKS	25.		25.						
d	SERVICE CHARGE	19.		19.						
e										
f	All other expenses									
25	Total functional expenses. Add lines 1 through 24f	3,495,977.	3,495,397.	580.	0.					
26	Joint costs. Check here ▶ ☐ If following SOP									
	98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a									
	combined educational campaign and fundraising solicitation									

art X	Balance Sheet			
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing		1	
2	Savings and temporary cash investments	613,304.	2	364,370.
3	Pledges and grants receivable, net	<u></u>	3	
4	Accounts receivable, net		4	
5	Receivables from current and former officers, directors, trustees, key			
	employees, and highest compensated employees. Complete Part II			
- [of Schedule L.		5	
6	Receivables from other disqualified persons (as defined under section			
	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
	employees' beneficiary organizations (see instructions)		6	
3 7	Notes and loans receivable, net		7	
7 8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges		9	
l l	Land, buildings, and equipment: cost or other			
100	basis. Complete Part VI of Schedule D			
	Less: accumulated depreciation 10b		10c	
į.			11	
11	Investments · publicly traded securities		12	
12	Investments • other securities. See Part IV, line 11		13	· - · ·
13	Investments - program-related. See Part IV, line 11		14	
14	Intangible assets		15	
15	Other assets. See Part IV, line 11	613,304.		364,370.
16	Total assets. Add lines 1 through 15 (must equal line 34)	013,304.	16	304,370
17	Accounts payable and accrued expenses		17	
18	Grants payable		18	
19	Deferred revenue		19	·
20	Tax-exempt bond liabilities		20	
ខ្ជ 21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
21 22	Payables to current and former officers, directors, trustees, key employees,			
<u> </u>	highest compensated employees, and disqualified persons. Complete Part II		_	
-	of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities. Complete Part X of Schedule D		25	
26	Total liabilities. Add lines 17 through 25	0.	26	0.
	Organizations that follow SFAS 117, check here and complete			
g	lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets		27	·
28	Temporarily restricted net assets		28	
29	Permanently restricted net assets		29	•••
Ē	Organizations that do not follow SFAS 117, check here			
5	complete lines 30 through 34.			-
2 30	Capital stock or trust principal, or current funds	0.		0,
ğ 31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0.
27 28 29 30 31 32 32 32 32 32 32 32 32 32 32 32 32 32	Retained earnings, endowment, accumulated income, or other funds	613,304.		364,370. 364,370.
ž 33	Total net assets or fund balances	613,304.	33	364,370.
34	Total liabilities and net assets/fund balances	613,304.	34	364,370.

Form **990** (2010)

Form 990 (2010)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

2010

Open to Public Inspection

Name of the organization

THE DORSEY & WHITNEY FOUNDATION

Employer identification number 41-1424522

Part I	Reason 1	or Public Chari	ty Status (All organiza	ations mus	st complet	e this part	.) See inst	ructions.		
he organ	ization is not a	private foundation b	pecause it is: (For lines 1	through 1	1, check o	only one b	 ox.)			
1 🗀			, or association of churc	_						
2			0(b)(1)(A)(ii). (Attach Sch							
3 🗔			al service organization of	•	n section	170/b)/1)/	A)(iii).			
4	•	•	perated in conjunction v					(b)(1)(A)(iii	i). Enter t	he hospital's name
-	city, and state		poratou iii conjunction i		pital acco	.500 50		(-)(-)(-)	.,. ב	To Hoopital o Hallio,
5 🗀	•		penefit of a college or un	werety ov	uned or on	erated by	a governn	mental unit	describe	ed in
3 <u> </u>	-	•	_	iiveisity Ov	villed of op	erated by	a governi	nema um	describe	50 111
		(b)(1)(A)(iv). (Comple	·			470/L\/4	1/A16.5			
6 🖳	•	. •	ent or governmental unit							andalia alamanda ad in
7 X	-		eives a substantial part o	ot its supp	on from a	governme	ntai unit o	r from the	generai į	public described in
. —	•	b)(1)(A)(vi). (Complet	•		5					
8			ection 170(b)(1)(A)(vi). (
9 🗀	An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from									
	activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment									
	income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975.									
	See section 509(a)(2). (Complete Part III.)									
10			perated exclusively to tes							_
11	_		perated exclusively for th							
	more publicly	supported organiza	itions described in section	on 509(a)(1	l) or sectio	n 509(a)(2). See sec	tion 509(a	a)(3). Che	eck the box that
	describes the	type of supporting	organization and comple	$\overline{}$						1
	a L Type I		• •		e III • Func	-	-		d L	Type III - Other
e 📖			t the organization is not							
	foundation m	anagers and other t	han one or more publicly	supporte	d organiza	itions desc	ribed in s	ection 509	(a)(1) or	section 509(a)(2).
f	If the organiz	ation received a writ	ten determination from t	he IRS tha	at it is a Ty	pe I, Type	II, or Type	e III		
		rganization, check th								
g			rganization accepted an							
	(i) A person	n who directly or ind	irectly controls, either al	one or tog	ether with	persons d	escribed i	ın (II) and (I	III) below,	Yes No
	the gove	erning body of the su	upported organization?							11g(i)
	(ii) A famıly	member of a persor	n described in (i) above?							11g(ii)
	(iii) A 35% d	controlled entity of a	person described in (i) of	or (II) above	∍?					11g(iii)
h	Provide the fo	ollowing information	about the supported org	ganization	(s).					
		· · · · · · · · · · · · · · · · · · ·								
(i) Name	of supported	(ii) EIN	(iii) Type of		rganization			(vi) Is organization	the	(vii) Amount of
	anization	, ,	organization (described on lines 1-9	in col (i) listed in your				(i) organiz U S	ed in the	support
			above or IRC section	governing	document?	(i) of your	support/	US	7	
			(see instructions))	Yes	No	Yes	No	Yes	No	
										·
					i					
									1	
									1 1	
								1		
Total				<u> </u>						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010

032021 12-21-10

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	Section A. Public Support										
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total				
1	Gifts, grants, contributions, and										
	membership fees received. (Do not										
	include any "unusual grants.")	1435660.	1961983.	2248414.	2544492.	3245429.	11435978.				
2	Tax revenues levied for the organ-		İ								
	ization's benefit and either paid to										
	or expended on its behalf										
3	The value of services or facilities										
	furnished by a governmental unit to										
	the organization without charge	1425660	1061000	2240414	2544402	2245420	11425070				
	Total. Add lines 1 through 3	1435660.	1961983.	2248414.	2544492.	3245429.	11435978.				
5	The portion of total contributions										
	by each person (other than a										
	governmental unit or publicly										
	supported organization) included										
	on line 1 that exceeds 2% of the										
	amount shown on line 11,						5510235.				
	column (f)		····	·····			5925743.				
	Public support. Subtract line 5 from line 4	<u> </u>					3923743.				
_	ction B. Total Support	(-) 0000	(L) 0007	(=) 0000	(-1) 2000	(-) 2010	(A Total				
	ndar year (or fiscal year beginning in)	(a) 2006 1435660.	<u>(b)</u> 2007 1961983.	(c) 2008 2248414.	(d) 2009 2544492.	(e) 2010 3245429	(f) Total 11435978.				
	Amounts from line 4	1433000.	1701703.	2240414.	234472.	3243425	11133770.				
8	Gross income from interest,										
	dividends, payments received on										
	securities loans, rents, royalties	27,473.	38,923.	22,203.	949.	1,614.	91,162.				
•	and income from similar sources Net income from unrelated business	21/1/31	30,323.	22/2000	3.13.	2,021.					
9											
	activities, whether or not the business is regularly carried on										
10	Other income. Do not include gain										
10	or loss from the sale of capital										
	assets (Explain in Part IV.)										
11	Total support. Add lines 7 through 10		····· 31				11527140.				
12		etc. (see instruction	ons)	<u> </u>	<u> </u>	12	····				
	First five years. If the Form 990 is fo	•	•	d. fourth, or fifth ta	ax year as a sectio	-					
	organization, check this box and stop	-	,	-,	,						
Se	ction C. Computation of Publ		rcentage								
	Public support percentage for 2010 (column (f))		14	51.41 %				
15	Public support percentage from 2009	Schedule A, Part	II, line 14			15	59.66 %				
16a	33 1/3% support test - 2010.If the c	organization did no	t check the box or	line 13, and line 1	14 is 33 1/3% or m	ore, check this bo					
	stop here. The organization qualifies	as a publicly supp	orted organization	ı			ightharpoons X				
t	33 1/3% support test - 2009.If the c	organization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	nis box				
	and stop here. The organization qua	lifies as a publicly s	supported organiz	ation			▶□				
17a	10% -facts-and-circumstances tes										
	and if the organization meets the "fac					rt IV how the orga	nization				
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	d organization		▶∟				
t	10% -facts-and-circumstances tes										
	more, and if the organization meets t						e				
	organization meets the *facts-and-cir										
18	Private foundation. If the organization	on did not check a	box on line 13, 16	<u>a, 16b, 17a, or 17b</u>							
					Sche	edule A (Form 990	0 or 990-EZ) 2010				

Schedule A (Form 990 or 990-EZ) 2010 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed t	o qualify	under Par	t II. If the	organization	fails to
qualify under the tests listed below, please complete Part II.)					

Sec	ction A. Public Support	slow, please comp	olete Part II.]				
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Gifts, grants, contributions, and	(a) 2000	(b) 2007	(6) 2008	(d) 2009	(e) 2010	- ty rotai
•	membership fees received. (Do not		l			1	
	Include any "unusual grants.")						
2	Gross receipts from admissions,						
2	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the					İ	
^	organization's tax-exempt purpose				 		
3	Gross receipts from activities that	ļ					
	are not an unrelated trade or bus-						
_	Iness under section 513					<u> </u>	
4	Tax revenues levied for the organ-	ľ		}	}		
	ization's benefit and either paid to	ĺ					
	or expended on its behalf						
5	The value of services or facilities	1					
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5					ļ	
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received					1	
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the		1	Į.			
	amount on line 13 for the year				_		
C	Add lines 7a and 7b				<u> </u>		
8_	Public support (Subtract line 7c from line 6)						<u> </u>
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975	ļ					
	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included in line 10b,	I					
	whether or not the business is regularly carried on						
12	Other income Do not include gain						
	or loss from the sale of capital	1					
13	assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12)				†		
	First five years. If the Form 990 is for	the organization'	e first second thi	rd fourth or fifth t	lax vear as a section	on 501(c)(3) organ	ization
	check this box and stop here	the organization	3 11131, 3000110, 1111	14, 1041111, 01 111111	ian your as a soone	5// 00 / (0/(0/ 0/ ga/)	▶
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2010 (I			column (fl)	· ·	15	
16	Public support percentage from 2009			30.0 (1)/		16	<u>%</u>
	ction D. Computation of Inves			·		1	
17	Investment income percentage for 20					17	%
18	Investment income percentage from 2			(//		18	%
	33 1/3% support tests - 2010. If the			on line 14, and lin	e 15 is more than :		
	more than 33 1/3%, check this box a						▶□
	33 1/3% support tests - 2009. If the						 , and
•	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						▶□
	i invote roundation. If the organizatio	ii ald not offect a	CON OIT III O 1-11 TO	, <u>,</u>		badula A /Farm 0	20 - 200 FT 0010

(Form 990)

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions. OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

THE DORSEV & WHITNEY FOUNDATION

Employer identification number 41-1424522

Par	Organizations Maintaining Donor Advise		r Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		a cood days of the confidence in the
	organization anomologi (an in incorp.) are in incorp.	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	2	
2	Aggregate contributions to (during year)	2,176,544.	
3	Aggregate grants from (during year)	2,300,169.	
4	Aggregate value at end of year	0.	
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised	funds
•	are the organization's property, subject to the organization's		X Yes No
6	Did the organization inform all grantees, donors, and donor a		
•	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?	of define devices, or for any extres purpose eer	X Yes No
Par		panization answered "Yes" to Form 990. Part	
1	Purpose(s) of conservation easements held by the organizat		
•	Preservation of land for public use (e.g., recreation or e		ically important land area
	Protection of natural habitat	Preservation of a certified	
	Preservation of open space		- ,,,
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a	conservation easement on the last
_	day of the tax year.		
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic sti	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired		
Ū	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the or	ganization during the tax
•	year▶	, , , , , , , , , , , , , , , , , , , ,	-
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe		
	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting	, and enforcing conservation easements durir	ng the year
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) abo		
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservat	tion easements in its revenue and expense st	atement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describes the	organization's accounting for
	conservation easements.		
Pa	TIII Organizations Maintaining Collections		er Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (A		
	historical treasures, or other similar assets held for public ex		e of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that descri		
b	If the organization elected, as permitted under SFAS 116 (A		
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of public	service, provide the following amounts
	relating to these items:		_
	(i) Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre		ain, provide
	the following amounts required to be reported under SFAS:	116 (ASC 958) relating to these items	
а	Revenues included in Form 990, Part VIII, line 1		\$
b	Assets included in Form 990, Part X		> \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 032051 12-20-10

Schedule D (Form 990) 2010

(Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990,

Part IV, line 14b, 15, or 16.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Department of the Treasury Internal Revenue Service

Employer identification number

	or the organization						
тнг	E DORSEY & WH	ITNEY FO	UNDATION			41-14245	22
Pai				side the United States. Compl	ete if the organ		
	to Form 990, Par	t IV, line 14b.					
1	-	-		ds to substantiate the amount of the gi			٦., ٢٦.,
	grantees' eligibility for th	e grants or assis	stance, and the	selection criteria used to award the gra	ants or assistar	nce? L∆	Yes No
2	For grantmakers. Desc	ribe in Part V the	organization's p	procedures for monitoring the use of g	rant funds outs	side the United St	ates.
3	Activities per Region. (Th	ne following Part	I, line 3 table ca	an be duplicated if additional space is i	needed.)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	is a prod describe	vity listed in (d) gram service, e specific type ce(s) in region	(f) Total expenditures for and investments in region
	,						
				TINDRA TATIVA AND ADAM	GRANT		220
CANA	ADA	0	0	FUNDRAISING AND GRANT	GRANT		330.
			1				
							İ
			!				
						····	
	Out Assal	 					330.
	Sub-total Total from continuation		0		 		330.
	sheets to Part I	0	0				0.
c	Totals (add lines 3a						
	and 3b)				1	<u> </u>	330.
LHA	For Paperwork Reduct	tion Act Notice,	see the Instruc	tions for Form 990.		Schedule	F (Form 990) 2010

032071 12-20-10

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000 Check this box if no one recipient received more than \$5,000 Part II can be duplicated if additional space is needed Schedule F (Form 990) 2010

X	
•	

1	(b) IRS code section	acioa (a)	(d) Purpose of	(e) Amount		(g) Amount of	(h) Description of non-cash	(i) Method of valuation (book, FMV
(a) Name of organization	and EIN (if applicable)	ioifiau (2)	grant	of cash grant	cash disbursement	assistance		appraisal, other)
aranna manan manan anan anan anan anan a								

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							i	
+ 1								
2 Enter total number of the IRS, or for which t	f recipient organization the grantee or counse	ns listed above that are el has provided a section	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	e foreign country,	recognized as tax-e	xempt by ▶		
3 Enter total number of other organizations or entities	fother organizations of	or entities				•		

Schedule F (Form 990) 2010

Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions

Schedule F (Form 990) 2010

Yes X No

6

for Form 5713)

SCHEDULE								OMB No 1545-0047	45-0047
(Form 990)			Grants and Governments	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States	e to Organizations in the United Star	s, les		201	<u> </u>
Department of the Treasury nternal Revenue Service		Comple	Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.	n answered "Yes" to Fo ► Attach to Form 990.	' to Form 990, Par m 990.	t IV, line 21 or 22.		Open to Public Inspection	² ublic fion
Name of the organization	tion THE DORSEY	Z & WHITNEY	EY FOUNDATION	NO				Employer identification number $41-1424522$	4522
Part f General Ir	General Information on Grants and Assistance	d Assistance							
1 Does the organiz	Does the organization maintain records to substantiate the amount of	substantiate the	amount of the grants	or assistance, the	grantees' eligibility	/ for the grants or ass	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection		[
	criteria used to award the grants or assistance?	lance?	,	1 - 4 - 1 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3	111111111111111111111111111111111111111			X Yes	2
낋	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	sedures for monitor	oring the use of grant	runds in the United	States				
Part II Grants an	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any received more than \$5,000. Check this box if no one recipient received more than \$5,000. Dart II can be duplicated if additional space is needed.	iovernments and	Organizations in the	• United States. C	omplete if the organism \$5,000.	anization answered "Y	'es" to Form 990, Part l' idditional space is need	V, line 21, for any led	
1 (a) Name and ac	1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	art
SEE ATTACHED				3,181,286.	0				
						ļ			ı
2 Enter total numb	Enter total number of section 501(c)(3) and government organizations	d government org	janizations					•	63.
	Enter total number of other organizations							•	0.
LHA For Paperwork	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instructi	ons for Form 990.					Schedule I (Form 990) (2010)	90) (2010)

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. ACCORDINGLY, THE FOUNDATION DOES NOT FORMALLY \$5,000 ARE MADE TO ESTABLISHED, PUBLICLY SUPPORTED CHARITIES FOR GENERAL SCHEDULE I, PART I, LINE 2: ALL OF THE FOUNDATION'S GRANTS IN EXCESS OF (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients MONITOR THE USE OF THE GRANTS. SUPPORT OR MAJOR PROGRAMS. (a) Type of grant or assistance

Page 2

41-1424522

THE DORSEY & WHITNEY FOUNDATION

Schedule I (Form 990) (2010)

Schedule I (Form 990) (2010)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

THE DORSEY & WHITNEY FOUNDATION

Employer identification number 41-1424522

FORM 990, PART VI, SECTION A, LINE 6: THE MEMBERS OF THE FOUNDATION ARE

THE VOTING MEMBERS, FROM TIME TO TIME, OF THE POLICY COMMITTEE OF DORSEY &
WHITNEY LLP.

FORM 990, PART VI, SECTION A, LINE 7A: THE MEMBERS OF THE FOUNDATION ARE

THE VOTING MEMBERS, FROM TIME TO TIME, OF THE POLICY COMMITTEE OF DORSEY &

WHITNEY LLP. SUCH MEMBERS ELECT, AND MAY REMOVE WITHOUT CAUSE, THE

DIRECTORS OF THE FOUNDATION.

FORM 990, PART VI, SECTION A, LINE 7B: THE APPROVAL OF THE MEMBERS IS

REQUIRED FOR AMENDMENTS TO THE FOUNDATION'S ARTICLES OF INCORPORATION AND

BYLAWS, AS WELL AS THE MERGER, CONSOLIDATION, TRANSFER OF SUBSTANTIALLY ALL

OF THE ASSETS, OR DISSOLUTION OF THE FOUNDATION.

FORM 990, PART VI, SECTION B, LINE 11: 11A - THE FOUNDATION'S FORM 990
INITIALLY IS PREPARED BY DORSEY & WHITNEY LLP'S FINANCIAL REPORTING AND
COMPLIANCE CONTROLLER AND THEN IS REVIEWED BY LEGAL COUNSEL TO THE
FOUNDATION. AFTER ANY NEEDED CHANGES ARE MADE, THE COMPLETED FORM 990 IS
PROVIDED TO EACH DIRECTOR. AFTER ANY ADDITIONAL REQUIRED CHANGES ARE MADE,
THE FINAL FORM 990 IS SIGNED BY EITHER THE FOUNDATION'S CHAIR OR THE
FOUNDATION'S TREASURER, WHO REVIEWS THE FORM 990 BEFORE SIGNING IT.

FORM 990, PART VI, SECTION C, LINE 19: THE FOUNDATION'S GOVERNING

DOCUMENTS, CONFLICTS OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE

AVAILABLE TO THE PUBLIC AT THE TIMES AND IN THE MANNER PRESCRIBED BY

SECTION 6104(D) OF THE INTERNAL REVENUE CODE.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2010)

Schedule O (Form 990 or 990-EZ) (2010) Name of the organization	Page 2 Employer identification number
THE DORSEY & WHITNEY FOUNDATION	41-1424522
FORM 990, PART VI.A, LINE 2	
THE FOUNDATION'S DIRECTORS DO NOT HAVE A BUSINESS RELATIO	NSHIP AS
DEFINED IN THE INSTRUCTIONS, BUT ALL ARE PARTNERS OF DORS	EY & WHITNEY
LLP.	
	<u> </u>
FORM 990, PART VI.B, LINES 12B, 12C, 15A AND 15B	
THE FOUNDATION DOES NOT ENGAGE IN TRANSACTIONS WITH ITS C	FFICERS AND
DIRECTORS, WHO ARE NOT COMPENSATED BY THE FOUNDATION, AND	THE
FOUNDATION HAS NO EMPLOYEES.	

(g) Section 512(b)(13) controlled Schedule R (Form 990) 2010 Employer identification number $4\,1\!-\!14\,2\,4\,5\,2\,2$ Open to Public Inspection ž OMB No 1545-0047 entity? Direct controlling Yes entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) Direct controlling entity End-of-year assets Public charity status (if section **e** 501(c)(3)) Land opposition and inclination answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

▶ Complete if the organization answered "Yes" to Form 990.

▶ Attach to Form 990. Total income Exempt Code চ section Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Legal domicile (state or Legal domicile (state or foreign country) foreign country) & WHITNEY FOUNDATION Primary activity Primary activity For Paperwork Reduction Act Notice, see the Instructions for Form 990. THE DORSEY Name, address, and EIN of related organization Name, address, and EIN of disregarded entity Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990) Part # Part

41-1424522

Page 2

Schedule R (Form 990) 2010 THE DORSEY & WHITNEY FOUNDATION

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(i) (k) General or Percentage managing ownership partner? Yes No	\$00.		re related	(h) Percentage ownership				Schedule R (Form 990) 2010
General or managing partner?	×		or mo	of ear s				(Forn
Code V-UBI canount in box record Schedule F.1 (Form 1065)	N/A		ause it had one	(g) Share of end-of-year assets				Schedule R
(h) Disproportion- ate allocations? Yes No K			IV, line 34 bed	(f) Share of total income				
(g) Share of Dend-of-year at assets	0		to Form 990, Part	(e) Type of entity (C corp, S corp, or trust)				
(f) Share of total income	.0		on answered "Yes"	(d) Direct controlling entity				
(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)			lete if the organizati	(c) Legal domicile (state or foreign country)				34
(d) Direct controlling Perentity	N/A		oration or Trust (Comp	(b) Primary activity				
(c) Legal domicile (state or foreign			as a Corpo					
(b) Primary activity	LAW FIRM		ganizations Taxable poration or trust during	<u>z</u> c				
(a) Name, address, and EIN of related organization	DORSEY & WHITNEY LLP - 41-022337, 50 S 6TH ST., STE 1500 MINNEAPOLIS, MN 55402 L		Part ty Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	(a) Name, address, and EIN of related organization				032162 12-21-10

Page 3

THE DORSEY & WHITNEY FOUNDATION Schedule R (Form 990) 2010

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Note Complete line 1 if any entity is listed in Dads II III or IV of this schedule					Yes	ž
1) During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	is with one or more re	lated organizations listed	ın Parts II·IV?			
a Receipt of (i) interest (ii) annutties (iii) royalties or (iv) rent from a controlled entity				19		×
h Giff grant or capital contribution to other organization(s)				45		×
				10	×	
				7		×
				2 4		¦×
 Loans of loan guarantees by other organization(s) 				2		
				÷	Τ	×
 Sale of assets to other organization(s) 				=	Ī	: :
g Purchase of assets from other organization(s)				19		×
h Exchange of assets				1h		×
				1;		×

i Lease of facilities, equipment, or other assets from other organization(s)				1j		×
k Performance of services or membership or fundraising solicitations for other organization(s)	ization(s)			1		×
	ization(s)			=	X	
m Sharing of facilities, equipment, mailing lists, or other assets				13	×	
n Sharing of paid employees				1n		×

Reimbursement paid to other organization for expenses			•	10		×
				1p		×

a Other transfer of cash or property to other organization(s)				19		×
				11		×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	who must complete th	ils line, including covered	relationships and transaction thresholds.			
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved			
(1) N/A		0.				
(2)						
(6)						
(4)						:
(5)						
(9)						
032163 12-21-10	35		Schedule R (Form 990) 2010	R (Form	(066 י	2010

41-1424522

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Schedule R (Form 990) 2010 THE DORSEY & WHITNEY FOUNDATION

Part Vi Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(h) General or managing partner? Yes No) 2010
1 1 1	 			 	ь в в в н
(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)					Schedule R (Form 990) 2010
Disproportionate allocations?					
(e) Share of end-of- year assets					
(d) Are all partners section 501(c)(3) organizations? Yes No					
(c) Legal domicile (state or foreign country)					
(b) Primary activity					
(a) Name, address, and EIN of entity					

The Dorsey & Whitney Foundation U.S. Organizations Receiving More Than \$5,000 in Grants January through December 2010

Мате	Stroat	Street - Continued	Спу	State	Zip Code	S.	IRC Sect.	Amount	Purpose of Grant
Advocates for Human Rights Advocates for Human Rights Advocates for Human Rights Advocates for Human Rights	650 Third Avenue South 650 Third Avenue South 650 Third Avenue South	Surte 550 Surte 550 Surte 550	Minneapolis Minneapolis • Minneapolis	W W W	55402-1940 55402-1940 55402-1940	36-3292374	501(c)(3)	50 00 10,000 00 460 00	Match General Support Match
American Refugeo Committee International American Refugeo Committee International American Refugeo Committee International American Refugeo Committee International American Refugeo Committee International American Refuge	430 Cak Grove SI 430 Cak Grove SI	Suite 204 Suite 204 Suite 204 Suite 204 Suite 204	Minneapolis Minneapolis Minneapolis Minneapolis Minneapolis	N N N N N N N N N N N N N N N N N N N	55403 55403 55403 55403 55403	36-3241033	SD1(c)(3)	10,000 00 150 00 500 00 190 00 2,000 00 400 00	Han Earthquake Rehef Effort Match Match Match General Support Match
AMIT AMIT AMIT AMIT	817 Broadway 817 Broadway		New York New York	žž	10003	36-3749777	501(c)(3)	6,000 00 7,500 00	General Support General Support
	205 North 400 West 205 North 400 West 205 North 400 West 205 North 400 West		Saft Lake City Saft Lake City Saft Lake City Saft Lake City	5555	84103 84103 84103	87-0659915	501(c)(3)	5 000 00 2,500 00 125 00 125 00	General Support General Support Match Match
ARTSFUND ARTSFUND ARTSFUND ARSFUND ASME	P O Box 19780 P O Box 19780 Three Park Avenue 23N5		Seatte Seatte New York	W W Y	98109 98109 10016-5990	91-1866831	501(c)(3) 501(c)(3)	7,500 00	General Support Match General Support
Big Brothers Big Sisters of Orange County Big Brothers Big Sisters of Grange County Catholic Charites, Archdiocese of NY Catholic Charites, Archdiocese of NY	14131 Yorba Street 1011 First Avenue	Surfe 200	Tusbn New York	5 ≥	92780	95-1992702	501(c)(3) 501(c)(3)	5,000 00	General Support
Children's Braun Tumor Foundation, Inc Children's Brain Tumor Foundation, Inc Children's FirstUtah Children's FirstUtah	274 Madison Avenue 455 East South Temple	Surte 1004	New York Saft Lake City	½ 5	10016	13-3512123	501(c)(3) 501(c)(3)	90 000 s	General Support General Support
Children's Home Society Children's Home Society Children's Home Society Children's Home Society	1605 Eusta Street 1605 Eusta Street 1605 Eusta Street		St Paul St Paul	N N N	55108-1219 55108-1219 55108-1219	41-0693906	501(c,K3)	10,000 00 100 00 920 00	General Support Match Match
Children's Law Center Children's Law Center Children's Law Center	450 North Syndicate Street 450 North Syndicate Street	Sune 315 Sune 315	St Paul St Paul	W W	55104 55104	41-1761589	501(c,X3)	7,000 00	General Support Match
City of Seatthe City of Seattle (Prostituted Children Rescue Fund) City of Seattle (Prostituted Children Rescue Fund) College Success Foundation College Success Foundation	Human Services Dept Human Services Dept 1605 NW Sammamish Road	700 Fifth Avenue, Surte 5800 700 Fifth Avenue, Surte 5800 Surte 200	Seattle Seattle Issaquah	WA WA	98104-5017 98104-5017 98027	91-6001275 91-6001275 91-2036088	170(c)(1) 170(c)(1) 501(c)(3)	10,000 00 10 000 00 10 000 00 10 000 00	General Support General Support General Support
Community Legal Services of East Palo Ait Community Legal Services of East Palo Ait	2117 University Avenue	Surte B	East Palo Atto	\$	94303	22-3866910	\$01(c)(3)	2,000 00	General Support

The Dorsey & Whitney Foundation U.S. Organizations Receiving More Than \$5,000 in Grants January through December 2010

132 132	175 Televanida Dima Salar 170 Washington NY 10115 15,3500011 51(41) 510000 500000 50000 50000 50000 50000 50000 50000 50000 50000 50000 50000 50000 50000 50000 500000 500000 500000 500000 500000 500000 500000 500000 500000 500000 5000000 50000000 500000000	Name Name Tourishment	Street	Street - Continued	City	State	Zip Code	Ë	IRC Sect.	Amount	Purpose of Grant
Soute 110 Dennet Co E2003-3722 S0-5651911 S01 (s)(3) 7500 (s)	State 10 Westington DC 2000-3722 20-561911 501 (-07) 7500 00		475 Riverside Drive 475 Riverside Drive	Surte 730 Surte 730	New York New York	žŽ	21101 3115	13-3396691	501(c)(3)	00 006 00 006	General Support Match
Sude 2A Pale Atta NY 10024 13-326-005 501 (4)7) 500 00	Separation		1220 12th Street S.E.	Surte 110	Washington	8	20003-3722	20-5561911	501(c)(3)	7 500 00	General Support
Suize 2A Puio Atto NY 10024 13.284605 501 (pl) 6,000 to 1,000	17 West 65th Street 17 West 65th Street 17 West 65th Street 17 West 65th Street 17 West 65th Street 17 West 65th Street 17 West 65th Street 17 West 65th Street 17 West 65th Street 17 West 65th Street 17 West 65th Street 17 West 65th Street 17 West 65th Street 17 West 65th Street 17 West 65th Street 17 West 65th Street 17 West 65th Street 17 West 65th Street 17 Str		1330 Fox Street		Denver	8	80204	84-1244211	501(c)(3)	9,000 00	General Support
Suite 2A Paie Atio NY 10024 1,125 00 1,125	Sum 200 New York NY 10024 1,1250 1,1		171 Weet 85th Street		New York	ž	10024	13-3264005	501(c)(3)	90000	General Support
1,750 1,75	1,750 1,75		171 West 85th Street		New York	È	10024			1,020 00	Match
Supplement Sup	State Stat		171 West 85th Street		New York	È	10024			1,750 00	General Support
State Stat	Substitute Suite 300 Manusapoles MA Setol 1780 41-1413855 SOI (c)(3) Soi one one interesting MA Setol 1780 41-167442 SOI (c)(3) SO SO SO SO SO SO SO S		480 Lytton Avenue	Surte 2A	Palo Ato	ర	94301	20-5242330	501(c)(3)	8,600 00	General Support
No. Suite 500 Minneapoles MN SS401-1780 SS401	Figure State Sta		:		•	•	0000 00000	2300.77	15/2 2403	00 000 15	General Support
State Stat	Size Size		430 First Avenue North	Sure 300	Minneapoils	2 3	55401-1780		(c)(c) 1, cc	987.50	Match
No. No.	Solid State Solid State		430 First Avenue North	Suite 300	Minneapolis	2 2	55401-1780			30000	Match
State Stat	Numerapole NM SS402-0549 41-197342 S01(-0)2) 100,000 0		430 First Avenue North	Surte 300	Minneapolis	×	55401-1780			450 00	Match
Numerapole Num	Minneapola NN S5402-0549 11-197341 S01(-)(-) 10,000 D										
Numerapoles NN S5402-9849 100,000 10	Minneapole		P O Box 2949		Minneapolts	WW	55402-0949	41-1973442	501(c)(3)	100,000 00	General Support
Name appois Name appois	Secondary Namespois Ni		P O Box 2949		Minneapolis	Ž	55402-0949			10,000 00	General Support
Minneapole Min	Second Minneapolis MN SS462-0849 SO1 (c)(3) SO10 00		P O Box 2949		Minneapolis	Z	55402-0949			100,000 00	General Support
P.O. Box 86 Minneapoles M.N. 55486-0086 41-0854160 501(-0/3) 10000 to the vork N.Y. 10017 13-2700687 501(-0/3) 1750 to the vork N.Y. 10017 13-2700687 501(-0/3) 1750 to the vork N.Y. 10017 13-2700687 501(-0/3) 1750 to the vork N.Y. 10017 13-2700687 501(-0/3) 1750 to the vork N.Y. 11024 11024 501(-0/3) 5000 to the vork N.Y. 11024 11024 501(-0/3) 5500 to the vork N.Y. 11024 11024 501(-0/3) 5500 to the vork N.Y. 11024 52-0799246 501(-0/3) 10,000 to the vork C.O. 80203 74-2182277 501(-0/3) 10,000 to the vork C.O. 80203 74-2182277 501(-0/3) 125 to the vork C.O. 80203 52-0799246 501(-0/3) 125 to the vork C.O. 80203 125 to the vo	P.O. Bors 86 Mammespoils MN S5486-0086 41-0854160 \$51(C)(3) \$20,000 \$2		P O Box 2949		Minneapolis	N :	55402-0949			20 00	Match General Support
P.O. Box 86 Minneapolis MN 55486-0086 41-0854160 501 (c)(3) 20,000 00 New York NY 10017 13-2700687 501 (c)(3) 10000 00 New York NY 10017 13-2700687 501 (c)(3) 1750 00 Placataway NJ 08854 23-7310664 501 (c)(3) 5000 00 Percataway NJ 11024 01-0651843 501 (c)(3) 5000 00 Suite 5P Great Neck NY 11024 01-0651843 501 (c)(3) 5,500 00 Suite 5P Great Neck NY 11024 01-0651843 501 (c)(3) 5,500 00 Suite 112 Denver CO 80203 74-2182277 501 (c)(3) 10,000 00 Suite 1112 Denver CO 80203 74-2182277 501 (c)(3) 10,000 00 Suite 1112 Denver CO 80203 74-2182277 501 (c)(3) 10,000 00 Suite 1112 Denver CO 80203 74-2182277 501 (c)(3) <	P.O. Box 86 Munreapolis M.N. 10017 13-2700687 501(c)(3) 10000 1750 10000 1750 1750 10000 1750		P O Box 2949		Minneapolis	Z S	5040Z-0848			00 000'81	
New York NY 10017 13-2700687 501 (c)(3) 10000 00	152 West 122nd Specit 152 West 122nd Specit 152 West 122nd Specit 152 West 122nd Specit 152 West 122nd Specit 152 West 122nd Specid 152 West 122nd Specid 152 West 122nd Specid 153 West 122nd Specid 153 West 122nd Specid 1545 Hoes Lane 145 Hoes Lane 145 Hoes Lane 145 Hoes Lane 145 Hoes Lane 145 Hoes Lane 145 Hoes Lane 145 Hoes Lane 145 Hoes Lane 145 Hoes Lane 145 Hoes Lane 145 Hoes Lane 146 Hoes Lane 150 Octant Specid 150 Great Meck 170 Middle Neck Road 150 Great Neck 170 Middle Neck Road 150 Great Neck 170 Middle Neck Road 150 Great Neck 150 Great Neck 170 Middle Neck Road 150 Great Neck 150 Great N		SDS 12-1075	P O Box 86	Minneapolis	N N	55486-0086	41-0854160	501(c)(3)	20,000 00	General Support
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Sulte 1112 Denver CO 80203 125 00 125 00 Sulte 1112 Denver CO 80203 125 00 126	Sulte 1112 Denver CO 80203 125 00 125		1900 Grant Street	Suite 1112	Denver	8	80203			200 00	Match
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	Suite 380 Minneapolis MN 55402-1605 41-1694745 501(c)(3) 5,000 00 Suite 380 Minneapolis MN 55402-1605 25402-16		1900 Grant Street	Surte 1112	Denver	8	80203			125 00	Match
			600 Nicollet Mail 600 Nicollet Mail	Surte 380 Surte 380	Minneapolis Minneapolis	Z Z	55402-1605 55402-1605	41-1684/45	501(c)(3)	250 00	Match

The Dorsey & Whitney Foundation U.S. Organizations Receiving More Than \$5,000 in Grants January through December 2010

Purpose of Grant	General Support	General Support	General Support Match	General Support Match	General Support General Support	General Support General Support	General Support	General Support General Support	General Support General Support Match	Match General Support	General Support General Support	General Support General Support Match	General Support	General Support	General Support	General Support
Amount	S, 00 000,2	50,000 00 G	5,000 00 G	5,000 00 G 250 00 M	5,000 00 G 25,000 00 G	5,000 00 G	S 000 000 G	6,750 00 G 2,000 00 G	10,000 00 G 2 500 00 G 900 00 M	1,380 00 M 5 000 00 G	8,000 00 G	5 000 00 2 000 00 570 00 M	S 000 000 S	11,656 00 G	5.000 00 G	5,000 to
IRC Sect.	501(c)(3)	501(c)(3)	501(cX3)	501(c)(3)	501(cX3)	501(cX3)	501(c)(3)	501(cX3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)
EIN	84-0404235	41-1607453	41-0713907	41-1447537	51-0147653	13-2913176	31-1436217	13-5562308	33-0047994	41-1428998	13-3907579	51-0172421	91-1342397	36-3412619	26-3234237	94-3034862
Zip Code	80211	55404	55102-1906 55102-1906	55455 55455	55124 55124	10018	45202	10009-9984	92614 92614 92614	\$5102-1495 55102-1495	10027	98109 98109 98109	98188	55405	95015	98105
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Crty	Denver	Minneapolis	Saint Paul Saint Paul	Minneapolis Minneapolis	Apple Valley Apple Valley	New York New York	Сілсіппав	New York New York	Irvine Irvine Irvine	St Paul St Paul	New York New York	Seattle Seattle Seattle	Tukwla	Minneapolis	Cupertino	Seattle
Street - Continued													9102			
Street	2505 18th Strett	2501 Stevens Avenue	345 Kellogg Boulevard West 345 Kellogg Boulevard West	229 19th Avenue South 229 19th Avenue South	13000 Zoo Boulevard 13000 Zoo Boulevard	505 8th Avenue 505 8th Avenue	50 East Freedom Way	P O Box 637 P O Box 637	18012 Mitchell Avenue South 18012 Mitchell Avenue South 18012 Mitchell Avenue South	345 Washington Street 345 Washington Street	144 West 125th Street 4th Floor 144 West 125th Street 4th Floor	201 Thomas Street 201 Thomas Street 201 Thomas Street	15439 53rd Ave South	525 North 7th Street	P O Box 2190	4740 B University Way NE
Name	Mile High United Way Mile High United Way	Minnoapolis College of Art and Design Minneapolis College of Art and Design	Minnesola Historical Society Minnesola Historical Society Minnesola Historical Society	Minnesota Justice Foundation Minnesota Justice Foundation Minnesota Justice Foundation	Minnesota Zoo Foundation Minnesota Zoo Foundation Minnesota Zoo Foundation	National Corporate Theatre Fund National Corporate Theatre Fund National Corporate Theatre Fund	National Underground Railroad Freedom Ctr National Underground Railroad Freedom Ctr	New York University New York University New York University	Orange Courty United Way Grange Courty United Way Orange Courty United Way Orange Courty United Way	Ordway Center for Performing Arts Ordway Center for Performing Arts Ordway Center for Performing Arts	Project Enterprise Project Enterprise Project Enterprise	Seartie Children s Theatre Seatte Children's Theatre Seatte Children's Theatre Seatte Children's Theatre	Seattle/So King Co Habitat for Humanity Seattle/So King Co Habitat for Humanity	Sharing & Carrug Hands Sharing & Cerrug Hands	Silicon Valley Jewish Film Festival Silicon Valley Jawish Film Festival	Teen Feed Teen Feed

The Children's Theatre Company

The Dorsey & Whitney Foundation U.S. Organizations Receiving More Than \$5,000 in Grants January through December 2010

Name	Street	Street - Continued	Cuł	State	Zıp Code	EIN	IRC Sect.	Amount	Purpose of Grant
The Children's Theatte Company	2400 Third Avenue South		Minneapolis	 §	55404	41-1254553	501(c)(3)	15,000 00	General Support
The Children Theate Company	2400 Third Avenue South		Minneanolis	ž	55404			2 000 00	General Support
The Children's Theate Company	2400 Third Avenue South		Minneapolis	W.	55404			100 00	Match
The Hope Hearl Foundation The Hope Hearl Foundation	1380 112th Avenue N E		Bellevue	WA	98004	91-1138000	501(c)(3)	90 000'9	General Support
The Mayo Clinic The Mayo Clinic	Office of Development	Davis 160W	Jacksonville	7	32224	41-6011702	501(c)(3)	1 696,513 00	General Support
The Muneapolis Institute of Arts									
The Minneapolis Institute of Arts	2400 Third Avenue South		Minneapolis	W	55404	41-0693915	501(c)(3)	15 000 00	General Support
The Minneapolis Institute of Arts	2400 Third Avenue South		Minneapolis	Z.	55404			250 000 00	General Support
The Minneapolis Instructe of Arts	2400 Third Avenue South		Minneapolis	Z.	55404			20 000 00	General Support
The Minneapolis Institute of Arts	2400 Third Avenue South		Minneapolis	Z :	55404			20 000 02	Bullaing construction
The Minneapolis Institute of Arts	2400 Third Avenue South		Minneapolis	Z X	55404			720 00	Match
The Minnes ota Opera									
The Munesota Opera	620 North First Street		Minneapolis	W	55401	41-0946789	501(c)(3)	10 000 00	General Support
The Minnesota Opera	620 North First Street		Minneapolis	W	55401			00 066	Match
The Minnesota Orchostral Association									
The Minnesota Orchestral Association	1111 Nicollet Mail		Minneapolis	N W	55403	41-0693875	501(c)(3)	15,000 00	General Support
The Saint Paul Chamber Orchestra The Saint Paul Chamber Orchestra	408 St Peter Street	Surte 300	St Paul	N N	55102	36-3339359	501(e)(3)	15,000 00	General Support
TUBMAN									
TUBMAN	3111 South 1st Avenue 3111 South 1st Avenue		Minneapolis Minneapolis	Z Z	55408-9998 55408-9998	41-1240048	501(c)(3)	15,000 00	General Support
United Way of King County	720 Second Avenue		e tra	W	98104	91-0565555	501(c)(3)	25 000 00	General Support
United Way of King County	720 Second Avenue		Seattle	WA	98104			160 00	Match
United Way of King County	720 Second Avenue		Seattle	WA	98104			1,620 00	Match
University of California, Irvine Foundati University of California, Irvine Foundati	401 East Pettason Drive	Surte 1000	Ivine	క	92697	95-2540117	501(c)(3)	10,000 00	General Support
(missing of Missing) (Frederick P. Weisman & Missing)	A4 Missem)								
Fredenck R Weisman Art Museum	333 East River Road		Minneapolis	N N	55455	41-6007513	Governmental Entity	2,000 00	General Support
University of Minnesota Foundation									
University of Minnesata Foundation	CM - 3854	P O Box 7080	St Paul	N	55170	41-6042488	501(c)(3)	2 000 00	Facilities Expansion
University of Minnesota Foundation	CM - 3854	P O Box 7080	St Paul	Ψ	55170			20 000 00	Building construction
University of Minnesota Foundation	CM - 3854	P O Box 7080	St Paul	Z	55170			2,000 00	Facilities Expansion
University of Minnesota Foundation	CM 3854	P O Box 7080	St Paul	Z Z	55170			2,000 00	Fellowship Support
University of Minnesota Foundation	CM - 3854	P O Box 7080	St Paul	Z :	55170			25,000 00	Building construction
University of Minnesota Foundation University of Minnesota Foundation	CM - 3854	P O Box 7080	St Paul	Z Z	55170			375 00	Match
University of St. Thomas									
University of St. Thomas	2115 Summt Avenue		St Paul	MN	55105	41-0693970	501(c)(3)	100,000 00	General Support
University of St. Thomas School of Law			č	3	9200 9039	07000070	1000	90	Property leading
University of St. Thomas School of Law University of St. Thomas School of Law	Low - Attn Thomas Menger, Esq.	Mail #TMH 440	St Paul	Z Z	55105-1078	21070714	201(5)(3)	1,750 00	General Support
University of St. Thomas School of Law	Law - Attn Thomas Mengler, Esq	Mail #TMH 440	St Paul	W	55105-1078			250 00	Match
Utah Symphony & Opera									

Utah Symphony & Opera

The Dorsey & Whitney Foundation U.S. Organizations Receiving More Than \$5,000 in Grants January through December 2010

750 Hennepin Avenue Minneapolis MN 55403 41-0893929 501(c)(3) 15,000 00 General Support 1750 Hennepin Avenue STS Summit Avenue SI Paul MN 55105 41-0518750 501(c)(3) 10,000 00 Scholarship 575 Summit Avenue SI Paul MN 55105 41-0518750 501(c)(3) 10,000 00 Scholarship	Stroet 123 West South Temple 123 West South Temple	Street - Continued Temple Temple	Grty Saft Lake Grty Saft Lake Grty	State UT	Zip Code 84101-1403 84101-1403	EIN 51-0145980	IRC Sect. 501(c)(3)	Amount 3,949 00 1 170 00	Purpose of Grant General Support Match
St Paul MN 55105 41-0518750 501(0\(\frac{7}{3}\) 10,000 00 St Paul MN 55105 250 00	750 Hennepin Ave 750 Hennepin Ave	мерше мерше	Minneapolis Minneapolis	W K	55403 55403	41-0693929	501(c)(3)	15,000 00	General Support General Support
	875 Summt Avenue 875 Summt Avenue	ue nue	St Paul St Paul	X X	55105 55105	41-0518750	501(c)(3)	10,000 00	Scholarship Match

Form **8868**

(Rev January 2011)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

Form 8868 (Rev. 1-2011)

● If you Do no Electr require of time Person visit w Part	ou are filing for an Automatic 3-Month Extension, complete ou are filing for an Additional (Not Automatic) 3-Month Extension to complete Part II unless you have already been granted a onic filing (e-file). You can electronically file Form 8868 if yeld to file Form 990-T), or an additional (not automatic) 3-more to file any of the forms listed in Part I or Part II with the except all Benefit Contracts, which must be sent to the IRS in papawwirs govlefile and click on e-file for Charities & Nonprofits I Automatic 3-Month Extension of Time progration required to file Form 990-T and requesting an automaticn.	tension, con automation need a other extension of the formation of the control of	complete only Part II (on page 2 of this tic 3-month extension on a previously fil a 3-month automatic extension of time to sion of time. You can electronically file Form 8870, Information Return for Tran (see instructions). For more details on the bmit original (no copies needed).	ed For of file (6 orm 88 sfers A	rm 8868 6 months for a corpo 368 to request an ex Associated With Ce	xtension rtain			
	only er corporations (including 1120-C filers), partnerships, REM income tax returns.	ICs, and t	rusts must use Form 7004 to request an	exten	sion of time				
Туре	Name of exempt organization			Empl	oyer identification	number			
print	THE DORSEY & WHITNEY FOUNDA	יתר∩אז		1	1-1424522				
File by ti due date filing you return S instructi	by the date for payour mr See ructions Number, street, and room or suite no. If a P.O. box, see instructions. 50 S SIXTH STREET, NO. 1500 City, town or post office, state, and ZIP code. For a foreign address, see instructions.								
Enter (MINNEAPOLIS, MN 55402-1498 the Return code for the return that this application is for (file		te application for each return)			01			
Applic	cation	Return	Application			Return			
ls For		Code	Is For			Code			
Form 990 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08									
	Form 990-EZ 03 Form 4720 09 Form 990-PF 04 Form 5227 10								
	990-T (sec 401(a) or 408(a) trust)	05	Form 6069			11			
	990-T (trust other than above)	06	Form 8870		,	12			
Tel ● Ifti	books are in the care of \blacktriangleright MINNEAPOLIS, Minephone No \blacktriangleright 612 340 2847 The organization does not have an office or place of business is for a Group Return, enter the organization's four digital organization.	554 s in the Ur Group Exe	FAX No. ► nited States, check this box emption Number (GEN) If thi	s is fo	r the whole group, c				
	I request an automatic 3-month (6 months for a corporation AUGUST 15, 2011 , to file the exemple is for the organization's return for X calendar year 2010 or tax year beginning	t organiza	to file Form 990-T) extension of time unt tion return for the organization named a		The extension				
2	If the tax year entered in line 1 is for less than 12 months, c Change in accounting period	heck reas	on: Initial return Fina	l retur	n 				
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, on nonrefundable credits. See instructions If this application is for Form 990-PF, 990-T, 4720, or 6069,			3a	\$	0.			
	estimated tax payments made. Include any prior year overp			3b	\$	0.			
	Balance due. Subtract line 3b from line 3a. Include your pa by using EFTPS (Electronic Federal Tax Payment System)	See ınstru	ctions	3c	\$	0.			
∪auti	on. If you are going to make an electronic fund withdrawal v	vitn this F	onn dood, see Form 6453-EU and Form	00/9-	EO for payment inst	TUCTIONS			

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For Paperwork Reduction Act Notice, see Instructions.