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# Return of Private Foundation

## or Section 4947(a)(1) Nonexempt Charitable Trust

### Treated as a Private Foundation

2010

Department of the Treasury  
Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

For calendar year 2010, or tax year beginning

, and ending

G Check all that apply

☐ Initial return☐ Initial return of a former public charity☐ Final return☐ Amended return☐ Address change☐ Name change

Name of foundation <b>ALUMNAE ASSOCIATION OF THE COLLEGE OF ST TERESA TERESAN SCHOLARSHIP FUND</b>		A Employer identification number <b>41-1688308</b>
Number and street (or P O box number if mail is not delivered to street address) <b>357 GOULD STREET</b>	Room/suite	B Telephone number <b>507-454-2930</b>
City or town, state, and ZIP code <b>WINONA, MN 55987</b>		C If exemption application is pending, check here <input type="checkbox"/>
H Check type of organization. <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		D 1 Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) <b>\$ 1,077,942.</b>	J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)	E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
(Part I, column (d) must be on cash basis.)		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received	55,147.			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	175.	175.	175.	STATEMENT 1
	4 Dividends and interest from securities	23,787.	23,787.	23,787.	STATEMENT 2
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	11,140.			
	b Gross sales price for all assets on line 6a	142,047.			
	7 Capital gain net income (from Part IV, line 2)		11,140.		
	8 Net short-term capital gain			2,198.	
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss)					
11 Other income	480.	0.	480.	STATEMENT 3	
12 Total. Add lines 1 through 11	90,729.	35,102.	26,640.		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees				
	b Accounting fees STMT 4	1,200.	1,200.	0.	0.
	c Other professional fees STMT 5	18,368.	18,368.	0.	0.
	17 Interest				
	18 Taxes STMT 6	149.	149.	0.	0.
	19 Depreciation and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses				
	24 Total operating and administrative expenses. Add lines 13 through 23	19,717.	19,717.	0.	0.
	25 Contributions, gifts, grants paid	23,300.			23,300.
26 Total expenses and disbursements. Add lines 24 and 25	43,017.	19,717.	0.	23,300.	
27 Subtract line 26 from line 12	47,712.				
a Excess of revenue over expenses and disbursements					
b Net investment income (if negative, enter -0-)		15,385.			
c Adjusted net income (if negative, enter -0-)			26,640.		

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**Part II Balance Sheets** Attached schedules and amounts in the description column should be for end-of-year amounts only

			Beginning of year			End of year		
			(a) Book Value			(b) Book Value		
Assets	1	Cash - non-interest-bearing			1,584.			1,478.
	2	Savings and temporary cash investments			128,136.			78,123.
	3	Accounts receivable ▶						
		Less allowance for doubtful accounts ▶						
	4	Pledges receivable ▶						
		Less allowance for doubtful accounts ▶						
	5	Grants receivable						
	6	Receivables due from officers, directors, trustees, and other disqualified persons						
	7	Other notes and loans receivable ▶						
		Less allowance for doubtful accounts ▶						
	8	Inventories for sale or use						
	9	Prepaid expenses and deferred charges						
	10a	Investments - U S and state government obligations STMT 7			0.			344,241.
	b	Investments - corporate stock STMT 8			0.			170,887.
	c	Investments - corporate bonds						
Liabilities	11	Investments - land, buildings, and equipment basis ▶						
		Less accumulated depreciation ▶						
	12	Investments - mortgage loans						
	13	Investments - other STMT 9			828,393.			479,665.
	14	Land, buildings, and equipment basis ▶						
		Less accumulated depreciation ▶						
	15	Other assets (describe ▶ INTEREST RECEIVABLE)			5,668.			3,548.
	16	Total assets (to be completed by all filers)			963,781.			1,077,942.
	17	Accounts payable and accrued expenses						
	18	Grants payable						
Net Assets or Fund Balances	19	Deferred revenue						
	20	Loans from officers, directors, trustees, and other disqualified persons						
	21	Mortgages and other notes payable						
	22	Other liabilities (describe ▶ )			397.			0.
	23	Total liabilities (add lines 17 through 22)			397.			0.
Net Assets or Fund Balances	24	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. ▶ <input type="checkbox"/>						
	25	Unrestricted						
	26	Temporarily restricted						
	26	Permanently restricted						
		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ▶ <input checked="" type="checkbox"/>						
	27	Capital stock, trust principal, or current funds			963,384.			1,077,942.
	28	Paid-in or capital surplus, or land, bldg, and equipment fund			0.			0.
	29	Retained earnings, accumulated income, endowment, or other funds			0.			0.
	30	Total net assets or fund balances			963,384.			1,077,942.
	31	Total liabilities and net assets/fund balances			963,781.			1,077,942.

**Part III Analysis of Changes in Net Assets or Fund Balances**

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	963,384.
2	Enter amount from Part I, line 27a	2	47,712.
3	Other increases not included in line 2 (itemize) ▶ UNREALIZED GAIN ON INVESTMENTS	3	66,846.
4	Add lines 1, 2, and 3	4	1,077,942.
5	Decreases not included in line 2 (itemize) ▶	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	1,077,942.

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**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
1a			
b SEE ATTACHED STATEMENTS			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e 142,047.		130,907.	11,140.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a			
b			
c			
d			
e			11,140.

2 Capital gain net income or (net capital loss)	<div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div>	2	11,140.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)	<div> <div>If gain, also enter in Part I, line 8, column (c)</div> <div>If (loss), enter -0- in Part I, line 8</div> </div>	3	2,198.

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2009	30,009.	881,250.	.034053
2008	36,864.	958,571.	.038457
2007			
2006			
2005			

2 Total of line 1, column (d)	2	.072510
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.036255
4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5	4	971,836.
5 Multiply line 4 by line 3	5	35,234.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	154.
7 Add lines 5 and 6	7	35,388.
8 Enter qualifying distributions from Part XII, line 4	8	23,300.

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

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**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary-see instructions)		1	308.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b			
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		2	0.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		3	308.
3 Add lines 1 and 2		4	0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		5	308.
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			
6 Credits/Payments			
a 2010 estimated tax payments and 2009 overpayment credited to 2010	6a		
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments Add lines 6a through 6d	7		0.
8 Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		308.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		
11 Enter the amount of line 10 to be Credited to 2011 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11		

**Part VII-A Statements Regarding Activities**

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 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		X
1c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ 0. (2) On foundation managers <input type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		X
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?		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	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> MN		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	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)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

N/A

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**Part VII-A Statements Regarding Activities** (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	13	X	
14	The books are in care of ► COLLEEN PEPLINSKI Located at ► 357 GOULD STREET, WINONA, MN	Telephone no ► 507-454-2930 ZIP+4 ► 55987-2411		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year ► 15 N/A			
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes," enter the name of the foreign country ►	16	Yes	No X

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

		Yes	No
1a	During the year did the foundation (either directly or indirectly):		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6)	Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days ) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here N/A ► <input type="checkbox"/>	1b	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2010?	1c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ►		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions ) N/A	2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ►		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2010.) N/A	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
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?	4b	X

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**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

N/A

5b

Organizations relying on a current notice regarding disaster assistance check here

☒

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

6b

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870.

☐ Yes ☒ No

7b

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

N/A

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 10		0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000

0

## Part VIII

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

**3 Five highest-paid independent contractors for professional services. If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

**Total number of others receiving over \$50,000 for professional services**

0

### Part IX-A

## Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

## Expenses

1	PROVIDED EDUCATIONAL SCHOLARSHIPS TO 46 STUDENTS	
		23,300.
2		
3		
4		

**Part IX-B**

### Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

Amount

1	N/A	
2		
	All other program-related investments See instructions	
3		

**Total.** Add lines 1 through 3

0.



**Part X** Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities	<b>1a</b>	882,287.
<b>b</b>	Average of monthly cash balances	<b>1b</b>	104,349.
<b>c</b>	Fair market value of all other assets	<b>1c</b>	
<b>d</b>	Total (add lines 1a, b, and c)	<b>1d</b>	986,636.
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	0.
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	0.
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	986,636.
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	<b>4</b>	14,800.
<b>5</b>	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	971,836.
<b>6</b>	Minimum investment return. Enter 5% of line 5	<b>6</b>	48,592.

**Part XI** Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☒ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6	<b>1</b>	
<b>2a</b>	Tax on investment income for 2010 from Part VI, line 5	<b>2a</b>	
<b>b</b>	Income tax for 2010 (This does not include the tax from Part VI)	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1	<b>3</b>	
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	
<b>5</b>	Add lines 3 and 4	<b>5</b>	
<b>6</b>	Deduction from distributable amount (see instructions)	<b>6</b>	
<b>7</b>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	

**Part XII** Qualifying Distributions (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	<b>1a</b>	23,300.
<b>b</b>	Program-related investments - total from Part IX-B	<b>1b</b>	0.
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required)	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule)	<b>3b</b>	
<b>4</b>	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	23,300.
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	<b>5</b>	0.
<b>6</b>	Adjusted qualifying distributions. Subtract line 5 from line 4	<b>6</b>	23,300.

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

**Part XIII** Undistributed Income (see instructions)

N/A

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only				
b Total for prior years				
3 Excess distributions carryover, if any, to 2010				
a From 2005				
b From 2006				
c From 2007				
d From 2008				
e From 2009				
f Total of lines 3a through e				
4 Qualifying distributions for 2010 from Part XII, line 4 ▶ \$				
a Applied to 2009, but not more than line 2a				
b Applied to undistributed income of prior years (Election required - see instructions)				
c Treated as distributions out of corpus (Election required - see instructions)				
d Applied to 2010 distributable amount				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b				
c 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				
d Subtract line 6c from line 6b Taxable amount - see instructions				
e Undistributed income for 2009 Subtract line 4a from line 2a Taxable amount - see instr				
f Undistributed income for 2010 Subtract lines 4d and 5 from line 1 This amount must be 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)				
8 Excess distributions carryover from 2005 not applied on line 5 or line 7				
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2006				
b Excess from 2007				
c Excess from 2008				
d Excess from 2009				
e Excess from 2010				

**ALUMNAE ASSOCIATION OF THE COLLEGE OF  
ST TERESA TERESAN SCHOLARSHIP FUND**

Form 990-PF (2010)

41-1688308 Page 10

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2010, enter the date of the ruling ▶

b Check box to indicate whether the foundation is a private operating foundation described in section ☒ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2010	(b) 2009	(c) 2008	(d) 2007	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	26,640.	29,723.	33,473.	0.	89,836.
b 85% of line 2a	22,644.	25,265.	28,452.	0.	76,361.
c Qualifying distributions from Part XII, line 4 for each year listed	23,300.	30,009.	36,864.	0.	90,173.
d Amounts included in line 2c not used directly for active conduct of exempt activities	0.	0.	0.	0.	0.
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	23,300.	30,009.	36,864.	0.	90,173.
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter					
(1) Value of all assets					0.
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0.
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	32,395.	29,375.	31,953.	0.	93,723.
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					0.
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					0.
(3) Largest amount of support from an exempt organization					0.
(4) Gross investment income					0.

**Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see the instructions.)**

**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

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

SEE STATEMENT 11

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

c Any submission deadlines

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

<b>Part XV</b>	<b>Supplementary Information</b> (continued)
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### **3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
SEE STATEMENT 12				
Total				23,300.
b Approved for future payment				
NONE				
Total				0.



## Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		Yes	No
<b>1</b>	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		
<b>a</b>	Transfers from the reporting foundation to a noncharitable exempt organization of		
	(1) Cash		X
	(2) Other assets		X
<b>b</b>	Other transactions		
	(1) Sales of assets to a noncharitable exempt organization		X
	(2) Purchases of assets from a noncharitable exempt organization		X
	(3) Rental of facilities, equipment, or other assets		X
	(4) Reimbursement arrangements		X
	(5) Loans or loan guarantees		X
	(6) Performance of services or membership or fundraising solicitations	X	
<b>c</b>	Sharing of facilities, equipment, mailing lists, other assets, or paid employees		X
<b>d</b>	If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.		

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

☐ Yes ☒ No

**b If "Yes," complete the following schedule**

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

**Sign  
Here**

Signature of officer or trustee Colleen M. Suplinski

Date 5/13/11

~~PRESIDENT~~ EXECUTIVE DIRECTOR  
Title

**Paid  
Preparer  
Use Only**

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
LYNDA S. RICKOFF	LYNDA S. RICKOFF	05/06/11		
Firm's name ► RUSSELL & ASSOCIATES, LLC 111 RIVERFRONT, SUITE 401			Firm's EIN ►	
Firm's address ► WINONA, MN 55987			Phone no 507-452-3100	

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

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

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

OMB No 1545-0047

**2010**

Name of the organization

ALUMNAE ASSOCIATION OF THE COLLEGE OF  
ST TERESA TERESAN SCHOLARSHIP FUND

Employer identification number

41-1688308

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

Form 990-PF

☒ 501(c)(3) exempt private foundation

☐ 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 33 1/3% 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 during the year. ▶ \$ \_\_\_\_\_

**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).

**LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)**

## Name of organization

ALUMNAE ASSOCIATION OF THE COLLEGE OF  
ST TERESA TERESAN SCHOLARSHIP FUND

## Employer identification number

41-1688308

**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ESTATE OF REGINA STELLPGFLUG RARING C/O PETER STELLPFLUG, EASTWOD BANK, PO BOX 178  EYOTA, MN 55934	\$ 52,427.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)



Name of organization

ALUMNAE ASSOCIATION OF THE COLLEGE OF  
ST TERESA TERESAN SCHOLARSHIP FUND

Employer identification number

41-1688308

**Part II Noncash Property** (see instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____

Name of organization

Employer identification number

ALUMNAE ASSOCIATION OF THE COLLEGE OF  
ST TERESA TERESAN SCHOLARSHIP FUND

41-1688308

**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.) ▶ \$

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
1	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>
	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>
	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>
	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>
	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>
2	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>
	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>
	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>
	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>
	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>
3	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>
	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>
	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>
	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>
	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>
4	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>
	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>
	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>
	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>
	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px;"></div>

**Part IV** Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	100 SH ISHARES S&P 500 GROWTH	P	07/21/04	01/26/10
b	130 SH ISHARES S&P VALUE INDEX	P	07/21/04	01/26/10
c	20 SH ISHARES TRUST S&P MIDCAP	P	07/21/04	01/26/10
d	41 SH ISHARES TRUST S&P MIDCAP VALUE	P	07/21/04	07/08/10
e	40 SH ISHARES TRUST S&P MIDCAP VALUE	P	07/21/04	01/26/10
f	34 ISHARES TRUST S&P MIDCAP VALUE	P	07/21/04	07/08/10
g	35 SH ISHARES TRUST S&P SMALLCAP	P	07/21/04	01/26/10
h	14 SH ISHARES TRUST S&P SMALLCAP	P	07/21/04	07/08/10
i	35 SH ISHARES TRUST S&P SMALLCAP	P	07/21/04	01/26/10
j	5 SH ISHARES TRUST S&P SMALLCAP	P	07/21/04	07/08/10
k	6000 SH AFFILIATED MANAGERS GROUP INC	P		05/05/10
l	1000 SH ALLERGAN INC GLOBAL	P	12/16/09	05/06/10
m	30 SH ALTERA CORP	P	05/14/10	07/19/10
n	39 SH ALTERA CORP	P	05/14/10	11/10/10
o	31 SH ALTERA CORP	P	05/14/10	11/15/10

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 5,643.		5,507.	136.
b 6,823.		7,341.	<518.>
c 1,532.		1,211.	321.
d 3,222.		2,483.	739.
e 2,636.		2,283.	353.
f 2,224.		1,940.	284.
g 2,023.		1,864.	159.
h 806.		745.	61.
i 1,956.		1,629.	327.
j 288.		233.	55.
k 6,060.		5,851.	209.
l 1,118.		1,145.	<27.>
m 840.		696.	144.
n 1,303.		905.	398.
o 1,017.		719.	298.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Losses (from col (h)) Gains (excess of col (h) gain over col (k), but not less than "-0-")
a			136.
b			<518.>
c			321.
d			739.
e			353.
f			284.
g			159.
h			61.
i			327.
j			55.
k			** 209.
l			** <27.>
m			** 144.
n			** 398.
o			** 298.

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7  
If (loss), enter "-0-" in Part I, line 7 }

2

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)

If gain, also enter in Part I, line 8, column (c)

If (loss), enter "-0-" in Part I, line 8

3

**Part IV** Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	10 SH ANIXTER INTERNATIONAL	P	05/14/10	12/16/10
b	2000 SH BEST BUY	P	10/06/09	05/05/10
c	2000 SH CARNIVAL CORP	P	10/12/09	05/06/10
d	10 SH CIMAREX ENERGY	P	05/14/10	06/09/10
e	30 SH COMCAST	P	05/14/10	10/18/10
f	15 SH INTUIT		05/14/10	07/20/10
g	16 SH INTUIT		05/14/10	09/03/10
h	21 SH INTUIT		05/14/10	09/14/10
i	19 SH INTUIT		05/14/10	12/08/10
j	13 SH INTUIT		05/14/10	12/16/10
k	3000 SH INVITROGEN CORP	P		05/05/10
l	6 SH NEWFIELD EXP	P	05/14/10	10/20/10
m	10 SH NOVO-NORDISK	P	05/14/10	07/07/10
n	11 SH NOVO-NORDISK	P	05/14/10	07/20/10
o	6 SH NOVO-NORDISK	P	05/14/10	08/03/10

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 592.		518.	74.
b 2,200.		2,087.	113.
c 2,220.		2,122.	98.
d 771.		704.	67.
e 536.		504.	32.
f 554.		533.	21.
g 699.		569.	130.
h 923.		746.	177.
i 902.		675.	227.
j 638.		462.	176.
k 3,518.		3,452.	66.
l 349.		323.	26.
m 837.		777.	60.
n 947.		855.	92.
o 541.		466.	75.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Losses (from col (h)) Gains (excess of col (h) gain over col (k), but not less than "-0-")
a			** 74.
b			** 113.
c			** 98.
d			** 67.
e			** 32.
f			** 21.
g			** 130.
h			** 177.
i			** 227.
j			** 176.
k			** 66.
l			** 26.
m			** 60.
n			** 92.
o			** 75.

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7  
If (loss), enter "-0-" in Part I, line 7 }

2

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)

If gain, also enter in Part I, line 8, column (c)

If (loss), enter "-0-" in Part I, line 8

3

**Part IV** Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
1a	6 SH NOVO-NORDISK	P	05/14/10	10/20/10
b	25 SH REINSURANCE GRP	P	05/19/09	05/14/10
c	2000 SH SCHLUMBERGER LTD	P		05/05/10
d	.4586 SH SCHLUMBERGER LTD	P	05/14/10	08/27/10
e	49 SH SCHLUMBERGER LTD	P	05/14/10	08/31/10
f	13 SH SCRIPPS NETWORK	P	05/14/10	06/09/10
g	10 SH SCRIPPS NETWORK		05/14/10	10/18/10
h	4000 SH TCH DATA		02/04/10	05/05/10
i	6000 SH TRANSOCEAN INC			05/05/10
j	2 SH WASHINGTON POST		05/14/10	08/10/10
k	6 SH WASHINGTON POST	P	05/14/10	08/16/10
l	6 SH WELLS FARGO	P		05/14/10
m	21 SH YAHOO	P	05/14/10	10/18/10
n	4000 SH ALLERGAN	P		05/06/10
o	1000 SH APOGENT TECH		12/15/08	05/25/10

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 602.		466.	136.
b 1,541.		1,192.	349.
c 3,340.		3,001.	339.
d 25.		28.	<3.>
e 2,602.		3,037.	<435.>
f 566.		600.	<34.>
g 482.		462.	20.
h 4,120.		4,113.	7.
i 5,625.		5,390.	235.
j 760.		998.	<238.>
k 1,895.		2,994.	<1,099.>
l 5,731.		5,256.	475.
m 333.		343.	<10.>
n 4,470.		4,179.	291.
o 1,772.		1,100.	672.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Losses (from col (h)) Gains (excess of col (h) gain over col (k), but not less than "-0-")
a			** 136.
b			** 349.
c			** 339.
d			** <3.>
e			** <435.>
f			** <34.>
g			** 20.
h			** 7.
i			** 235.
j			** <238.>
k			** <1,099.>
l			** 475.
m			** <10.>
n			** 291.
o			** 672.

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7  
If (loss), enter "-0-" in Part I, line 7 }

2

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)

If gain, also enter in Part I, line 8, column (c)

If (loss), enter "-0-" in Part I, line 8

3

**Part IV** Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
1a	5000 SH BECHMAN COULTER	P		05/05/10
b	3000 SH BEST BUY	P	10/17/08	05/05/10
c	4000 SH COOPER CAMERON	P		05/06/10
d	3000 SH CARNIVAL	P	10/26/01	05/06/10
e	115 SH CENTERPOINT			05/14/10
f	3000 SH FISCHER SCIENTIFIC	P	11/27/06	05/06/10
g	92 SH HASBRO	P		05/14/10
h	5000 SH HEALTH CARE REIT	P		05/06/10
i	6000 SH INTEL	P		05/06/10
j	3000 SH NEWMONT MINIG			05/ /10
k	3000 SH OMNICOM GROUP	P		05/05/10
l	55 SH REINSURANCE GRP	P		05/14/10
m	27 SH TEVA PHARMACEUTICAL	P	08/25/06	05/14/10
n	3000 SH TEVA PHARMACEUTICAL	P		05/05/10
o				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 5,475.		5,442.	33.
b 3,300.		2,292.	1,008.
c 4,940.		4,222.	718.
d 3,330.		2,798.	532.
e 2,760.		4,246.	<1,486.>
f 4,110.		3,659.	451.
g 3,679.		2,468.	1,211.
h 5,425.		4,942.	483.
i 5,955.		5,540.	415.
j 3,930.		2,889.	1,041.
k 2,985.		3,218.	<233.>
l 3,391.		2,494.	897.
m 1,525.		1,077.	448.
n 3,660.		3,116.	544.
o			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Losses (from col (h)) Gains (excess of col (h) gain over col (k), but not less than "-0-")
a			33.
b			1,008.
c			718.
d			532.
e			<1,486.>
f			451.
g			1,211.
h			483.
i			415.
j			1,041.
k			<233.>
l			897.
m			448.
n			544.
o			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 }	2	11,140.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) If (loss), enter "-0-" in Part I, line 8 }	3	2,198.

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FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

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SOURCE	AMOUNT
BANK	175.
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A	175.

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FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

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SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
INVESTMENTS	23,787.	0.	23,787.
TOTAL TO FM 990-PF, PART I, LN 4	23,787.	0.	23,787.

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FORM 990-PF OTHER INCOME STATEMENT 3

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DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
MISCELLANEOUS	480.	0.	480.
TOTAL TO FORM 990-PF, PART I, LINE 11	480.	0.	480.

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FORM 990-PF ACCOUNTING FEES STATEMENT 4

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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	1,200.	1,200.	0.	0.
TO FORM 990-PF, PG 1, LN 16B	1,200.	1,200.	0.	0.

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FORM 990-PF	OTHER PROFESSIONAL FEES	STATEMENT	5
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT FEES	8,368.	8,368.	0.	0.
CONSULTING FEES	10,000.	10,000.	0.	0.
TO FORM 990-PF, PG 1, LN 16C	18,368.	18,368.	0.	0.

FORM 990-PF	TAXES	STATEMENT	6
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL EXCISE TAXES	149.	149.	0.	0.
TO FORM 990-PF, PG 1, LN 18	149.	149.	0.	0.

FORM 990-PF	U.S. AND STATE/CITY GOVERNMENT OBLIGATIONS	STATEMENT	7
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DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE
BONDS	X		344,241.	344,241.
TOTAL U.S. GOVERNMENT OBLIGATIONS			344,241.	344,241.
TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS				
TOTAL TO FORM 990-PF, PART II, LINE 10A			344,241.	344,241.



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FORM 990-PF	CORPORATE STOCK	STATEMENT	8
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DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
STOCKS	170,887.	170,887.
TOTAL TO FORM 990-PF, PART II, LINE 10B	170,887.	170,887.

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FORM 990-PF	OTHER INVESTMENTS	STATEMENT	9
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DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
MUTUAL FUNDS	FMV	382,394.	382,394.
CERTIFICATE OF DEPOSIT	FMV	97,271.	97,271.
TOTAL TO FORM 990-PF, PART II, LINE 13		479,665.	479,665.

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FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS  
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 10

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
CARMELLA ZAGONE FOSTER 19150 PARK AVE WAYZATA, MN 55987	PAST PRESIDENT 4.00	0.	0.	0.
MARY FORESTELL DOUCETTE 2431 VIKING SOUT NW ROCHESTER, MN 55901	PRESIDENT 4.00	0.	0.	0.
JO SUILMAN STEJSKAL 28793 WILDBERRY DR WINONA, MN 55987	SECRETARY 4.00	0.	0.	0.
DIANA KITTELSON 4941 THOMAS AVE SOUTH MINNEAPOLIS, MN 55410	TREASURER 4.00	0.	0.	0.
JOANN CHEVALIER 2382 EAGLE TRACE LANE WOODBURY, MN 55129	DIRECTOR 4.00	0.	0.	0.
BRIDGET DOYLE 4508 S MALLARD TRAIL EAGEN, MN 55122	DIRECTOR 4.00	0.	0.	0.
MAUREEN SPELTZ 169 MAIN ST ROLLINGSTONE, MN 55969	DIRECTOR 4.00	0.	0.	0.
SISTER MARY LONAN REILLY 1001 14TH ST NW STE 100 ROCHESTER, MN 55901	DIRECTOR 4.00	0.	0.	0.
JANE KREIDERMACHER BOX 113 207 1ST ST NE KASSON, MN 55944	DIRECTOR 4.00	0.	0.	0.
MARY KAY STEPANIK MCDERMOTT 3328 N HARMONY TOWN HALL RD JANESVILLE, WI 53546	VICE PRESIDENT 4.00	0.	0.	0.
CONNIE CAINE N3496 WELLMAN RD LOWELL, WI 53557	DIRECTOR 4.00	0.	0.	0.

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SR LALONDE RYAN 2302 CRYSTAL BAY COURT SW ROCHESTER, MN 55902	DIRECTOR 4.00	0.	0.	0.
SR BRIANA MCCARTHY 2302 CRYSTAL BAY COURT SW ROCHESTER, MN 55902	DIRECTOR 4.00	0.	0.	0.
PEGGY MURPHY 904 4TH ST GALENA, IL 61036	DIRECTOR 4.00	0.	0.	0.
COLLEEN KOCER PEPLINSKI 357 GOULD ST WINONA, MN 55987	EXECUTIVE DIRECTOR 4.00	0.	0.	0.
ROSINE HERMODSON-OLSEN PO BOX 178 BROWNTON, MN 55312	DIRECTOR 4.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		<u>0.</u>	<u>0.</u>	<u>0.</u>

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION  
PART XV, LINES 2A THROUGH 2D

STATEMENT 11

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTEDCOLLEEN KOCER PEPLINSKI  
357 GOULD STREET  
WINONA, MN 55987TELEPHONE NUMBERNAME OF GRANT PROGRAM

507.454.2930

SCHOLARSHIPS

FORM AND CONTENT OF APPLICATIONSAPPLICATION PACKETS SHOULD BE SENT IN 1 MAILING PRIOR TO OR ON THE DEADLINE  
DATE.ANY SUBMISSION DEADLINES

UNDERGRADUATE AND GRADUATE APPLICATIONS ARE JULY 1 AND NOVEMBER 1

RESTRICTIONS AND LIMITATIONS ON AWARDSPAID MEMBERS OF THE ALUMNAE ASSOCIATION OF THE COLLEGE OF ST TERESA MAY  
SPONSOR THEMSELVES OR ANYONE ELSE WHO HAS MET THE APPLICATION CRITERIA FOR  
A TERESAN SCHOLARSHIP.

FORM 990-PF

GRANTS AND CONTRIBUTIONS  
PAID DURING THE YEAR

STATEMENT 12

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
SR BRIANA MCCARTHY 357 GOULD ST WINONA, MN 55987	SCHOLARSHIP		350.
DIANE JUNGBAUER 357 GOULD ST WINONA, MN 55987	SCHOLARSHIP		600.
PATRICK SCHNEIDER 357 GOULD ST WINONA, MN 55987	SCHOLARSHIP		475.
TIMOTHY SHAFFER 357 GOULD ST WINONA, MN 55987	SCHOLARSHIP		600.
SARAH SHAFFER 357 GOULD ST WINONA, MN 55987	SCHOLARSHIP		425.
ALEXIS MINGIONE 357 GOULD ST WINONA, MN 55987	SCHOLARSHIP		450.
MARGARET ALEX 357 GOULD ST WINONA, MN 55987	SCHOLARSHIP		450.
MICHAEL BERGSTROM 357 GOULD ST WINONA, MN 55987	SCHOLARSHIP		525.

ALUMNAE ASSOCIATION OF THE COLLEGE OF ST

41-1688308

ROSA EDHOLM			600.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	
RACHEL FISHER			500.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	
ANTHONY GAZICH			600.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	
ROUBY GROSS			525.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	
STEPHANIE HEFEL			500.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	
JOSEPH JOHNSON			500.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	
MARISSA JOHNSON			600.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	
ELIZABETH KILKUS			475.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	
ELIZABETH LARSON			450.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	
EMILY LARSON			500.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	

ALUMNAE ASSOCIATION OF THE COLLEGE OF ST

41-1688308

OLIVIA MEYER			800.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	
MATTHEW PETERSON			400.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	
LAURA PETROCCI			425.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	
ELIZABETH RODRIQUEZ			500.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	
MADISON SIENKO			1,000.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	
ANTHONY SPELTZ			425.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	
CLARISSA THOMPSON			550.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	
MARGARET ZAGONE			475.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	
ANDREA ANDERSON			500.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	
BARBARA BRUNER			450.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	

ALUMNAE ASSOCIATION OF THE COLLEGE OF ST

41-1688308

CAROLINE DEVANE			450.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	
EMILY EASTMAN			450.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	
COLLEEN FORAN			450.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	
VALERIE HAAS			450.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	
ELLEN HAMEL			550.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	
ANATASIA HANSEN			500.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	
MEGAN JOHNSON			500.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	
BRIDGET KELLY			500.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	
LINDA ASCHE			500.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	
SEAN LISCHKE			400.
357 GOULD ST	WINONA, MN 55987	SCHOLARSHIP	



ALUMNAE ASSOCIATION OF THE COLLEGE OF ST

41-1688308

MICHAEL MARSZOWSKI  
357 GOULD ST WINONA, MN 55987 SCHOLARSHIP

500.

KAITLYN MICKELSON  
357 GOULD ST WINONA, MN 55987 SCHOLARSHIP

400.

NATALIE VAIANA  
357 GOULD ST WINONA, MN 55987 SCHOLARSHIP

400.

THEODORE WEIERS  
357 GOULD ST WINONA, MN 55987 SCHOLARSHIP

400.

RHONDA EICKHOLT  
357 GOULD ST WINONA, MN 55987 SCHOLARSHIP

550.

KATHLEEN GRAHAM  
357 GOULD ST WINONA, MN 55987 SCHOLARSHIP

500.

KAREN HORWATH  
357 GOULD ST WINONA, MN 55987 SCHOLARSHIP

550.

SR LALONDE RYAN  
357 GOULD ST WINONA, MN 55987 SCHOLARSHIP

600.

TOTAL TO FORM 990-PF, PART XV, LINE 3A

23,300.

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990-PF	INVOLVEMENT WITH NONCHARITABLE ORGANIZATIONS	STATEMENT	13
	PART XVII, LINE 1, COLUMN (D)		

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NAME OF NONCHARITABLE EXEMPT ORGANIZATION

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ALUMNAE ASSOCIATION OF THE COLLEGE OF SAINT TERESA

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DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

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COMMON CONTROL