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Form 990-PF

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

OMB No 1545-0052 2011

Treated as a Private Foundation 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 2011 or tax year beginning and ending Name of foundation A Employer identification number 33-1143931 WEBSTER FAMILY FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 6645 INTERLACHEN BOULEVARD 612-339-3430 City or town, state, and ZIP code C If exemption application is pending, check here 55436-1005 EDINA, MN Initial return G Check all that apply: Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return Proreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization: Ellf private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year X Cash J Accounting method: Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col (c), line 16) under section 507(b)(1)(B), check here 963,722. (Part I, column (d) must be on cash basis) ▶\$ Analysis of Revenue and Expenses Part I (d) Disbursements (b) Net investment (a) Revenue and (c) Adjusted net (The total of amounts in columns (b) (c) and (d) may not necessarily equal the amounts in column (a)) for charitable purposes expenses per books income income (cash basis only) 200,025. ``|***`**N/A` '~`* Contributions, gifts, grants, etc., received if the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments LA 245 245 STATEMENT 3 8 1,639 1,639 STATEMENT 4 Dividends and interest from securities SCANNED JUL 5a Gross rents b Net rental income or (loss) Ö 5,470. 5/1 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 38,612. b assets on line 6a 7 Capital gain net income (from Part IV, line 2) 5,470. اللاما Net short-term capital gain Income modifications Gross sales less returns Paláffraidh. (3) 10a and allowances ⁽², 343 ′ ٠٤, b Less Cost of goods sold c Gross profit or (loss) 11 Other income i is: 207.379 7,354 12 Total Add lines 1 through 11 0 0 0. 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees STMT 3 1,595 0 1,595. **b** Accounting fees STMT 4 1,369 1,369 c Other professional fees 0. and Administrative 17 Interest STMT 5 25 0 25. 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications Operating 23 Other expenses 24 Total operating and administrative

LHA For Paperwork Reduction Act Notice, see instructions.

a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)

C Adjusted net income (if negative, enter -0-)

expenses Add lines 13 through 23

25 Contributions, gifts, grants paid 26 Total expenses and disbursements

Add lines 24 and 25 27 Subtract line 26 from line 12:

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1 3 . . . 3

2,989

32,600

35,589

-P, S

10.3

790

4.5

1,369

369

985

N/A

1,620. 32,600.

34,220.

123511 12-02-11

Part, IV Capital Gains and	Losses for Tax on I	nvestmen		(h) How acquired			l age o
	he kınd(s) of property sold (e ç use, or common stock, 200 sh			(b) How acquired P - Purchase D - Donation	(c) Date : (mo., d	acquired ay, yr.)	(d) Date sold (mo., day, yr.)
1a 500 SH CEPHALON	INC			P	02/2	7/09	04/05/11
<u>b</u>							
d d							
e	·						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale		(h) Ga (e) plus	aın or (loss s (f) mınus) (g)
a 38,612.	 		33,14	2.			5,470
b c							
d							-
e							
Complete only for assets showing gain	· · · · · · · · · · · · · · · · · · ·	T	•		(I) Gains (C ol. (k), but r		
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		xcess of col. (1) r col (j), if any			(from col (
a							5,470.
<u>b</u>							
d					-		-
e						-	
	∫ If gain, also ente)			
2 Capital gain net income or (net capital	, ((),		e 7	<i>y</i> 2			5,470
3 Net short-term capital gain or (loss) as If gain, also enter in Part I, line 8, colur		nd (6):					
If (loss), enter -0- in Part I, line 8				<u>}</u> 3		N/A	·
Part V. Qualification Unde					come	-	
(For optional use by domestic private four		4940(a) tax or	n net investment in	come.)			
If section 4940(d)(2) applies, leave this pa	rt blank.						
Was the foundation liable for the section 4		, ,	•	iod?			Yes X No
If "Yes," the foundation does not qualify ur 1 Enter the appropriate amount in each							
(a) Base period years	(b)			(c)		Dietrih	(d) oution ratio
Calendar year (or tax year beginning in)				ncharitable-use asse		(col. (b) div	ided by col. (c))
2010 2009		8,720. 6,797.		683,07 572,74			.042045
2008		1,195.		543,28			.020606
2007		7,627.		322,60	6.		.023642
2006		0.		41,23	7.		.000000
2 Total of line 1, column (d)					2		.133080
3 Average distribution ratio for the 5-yea	r base period - divide the total	on line 2 by 5,	or by the number	of years	2		•133000
					3		.026616
4 Enter the net value of noncharitable-us	e assets for 2011 from Part X,	line 5			4		860,785.
5 Multiply line 4 by line 3	ndation has been in existence if less than 5 years ne net value of noncharitable-use assets for 2011 from Part X, line 5			5		22,911.	
6 Enter 1% of net investment income (19	% of Part I, line 27b)				6		60.
7 Add lines 5 and 6					7		22,971.
B Enter qualifying distributions from Part	XII, line 4				8		34,220.
If line 8 is equal to or greater than line in See the Part VI instructions	7, check the box in Part VI, line	1b, and comp	olete that part using	g a 1% tax rate.			

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3Ь

4a

N/A

b If "Yes," did it have excess business holdings in 2011 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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2011)

had not been removed from jeopardy before the first day of the tax year beginning in 2011?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

during the year?

Part VIII Information About Officers, Directors, Tru Paid Employees, and Contractors (continued)	d)		
3 Five highest-paid independent contractors for professional servi	ices. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,0	000 (b) Type of service		(c) Compensation
NONE			
		_	
Total number of others receiving over \$50,000 for professional services		•	<u> </u> 0
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. I	Include relevant statistical information such as the		Expenses
number of organizations and other beneficiaries served, conferences convened,	, research papers produced, etc.		Expenses
1 <u>N/A</u>		_	
		_	
2		4	
		4	
3		4	
		4	
		+	
4		-	
		-	
Part-IX B Summary of Program-Related Investments	<u> </u>		
Describe the two largest program-related investments made by the foundation of		$\overline{}$	Amount
	Juling the tax year on lines 1 and 2.	+	Amount
1 <u>N/A</u>		\dashv	
		-	
2		+	
2		\dashv	
		-	
All other program-related investments. See instructions.		1	
^			
3		┪	
		\dashv	

Total. Add lines 1 through 3

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, se	ee instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	202,462.
b	Average of monthly cash balances	1b	202,462. 671,431.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	873,893.
е	Reduction claimed for blockage or other factors reported on lines 1a and	,	
	1c (attach detailed explanation) 1e 0.	[. ·	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	873,893.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	13,108.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	860,785.
6	Minimum investment return. Enter 5% of line 5	6	43,039.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	43,039.
2a	Tax on investment income for 2011 from Part VI, line 5		
b	Income tax for 2011. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	60.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	42,979.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	42,979.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	42,979.
P	ant XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	34,220.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	13.3	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	34,220.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		·
	income. Enter 1% of Part I, line 27b	5	60.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	34,160.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for-t	
	4940(e) reduction of tax in those years.		

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Part XIII. Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI, line 7				42,979.
2 Undistributed income, if any, as of the end of 2011 a Enter amount for 2010 only			32,524.	1 3
b Total for prior years:		0	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	£0,
3 Excess distributions carryover, if any, to 2011:				`
a From 2006 b From 2007				,
c From 2008			and the state of t	
d From 2009			3 3 3	
e From 2010			\$ 14 mm 1	
f Total of lines 3a through e	0.		a	- ' '
4 Qualifying distributions for 2011 from		142 - 5290 1 142 1.2944-10. 11.	1	
Part XII, line 4: ► \$ 34,220.			# 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	·
a Applied to 2010, but not more than line 2a			32,524.	
b Applied to undistributed income of prior				32.
years (Election required - see instructions)		0.		story it
c Treated as distributions out of corpus				4
(Election required - see instructions)	0.			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
d Applied to 2011 distributable amount				1,696.
e Remaining amount distributed out of corpus	0.			Span i digi
Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b	222222	0.		\$ 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions	193899 1938999 193899 193899 194 194 194 195 195 195 195 195 195 195 195 195 195	O.		37 17 17 17 17 17 17 17 17 17 17 17 17 17
e Undistributed income for 2010. Subtract line 4a from line 2a Taxable amount - see instr.			0.	
f Undistributed income for 2011 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2012		Market State of the Control of the C	3.30	41,283.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2006	0			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2012 Subtract lines 7 and 8 from line 6a	o .			
10 Analysis of line 9:	0.			
a Excess from 2007				
b Excess from 2008				
c Excess from 2009				
d Excess from 2010			المناز المحادث يدفر في المناز	
e Excess from 2011				ر و ا ا ع
			<u> </u>	Form QQ0_DF (2011)

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Analysis of Income-Producing Activities Part XVI-A

Catan areas areas and suplementations and sected	Unrelated	business income	Excluded	by section 512, 513, or 514	
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	(e) Related or exempt function income
1 Program service revenue.	code		Code		
a b	_				·· ·· ··
b	_				
d					
е	l l		1		
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	245. 1,639.	
4 Dividends and interest from securities			14	1,639.	
5 Net rental income or (loss) from real estate:	13. 45	ð			
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					· · · · · · · · · · · · · · · · · · ·
8 Gain or (loss) from sales of assets other			1.0	F 470	
than inventory			18	5,470.	
9 Net income or (loss) from special events			 		
10 Gross profit or (loss) from sales of inventory 11 Other revenue:					
ab	_	_ .	+ +-		
С	1		+		
d					
e					_
12 Subtotal. Add columns (b), (d), and (e)		0		7,354.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	7,354.
(See worksheet in line 13 instructions to verify calculations.)				
Part:XVI-B Relationship of Activities		<u>-</u>		<u> </u>	
Line No. Explain below how each activity for which in the foundation's exempt purposes (other than			A contribute	d importantly to the accomp	lishment of
					
					_
				···	
		·			
122521					

01111 000 1 1 (E0	Nabbian Haller Toombilition		
Part XVII	Information Regarding Transfers To and Transactions and Relationships	With No	ncharitable
	Exempt Organizations		

1 Did	the organization directly or indir	rectly engage in any of th	e followii	ng with any other organizati	on described in sect	ion 501(c) of		Yes	No
the (Code (other than section 501(c))(3) organizations) or in s	section 5	27, relating to political orgai	nizations?				
a Tran	sfers from the reporting found	ation to a noncharitable e	exempt or	ganization of					
(1)	Cash						1a(1)		_X_
(2)	Other assets						1a(2)		<u>X</u>
b Othe	er transactions:								
(1)	Sales of assets to a noncharital	ble exempt organization					1b(1)		_X_
(2)	Purchases of assets from a nor	ncharitable exempt orgar	nization				1b(2)		_X_
(3)	Rental of facilities, equipment,	or other assets					1b(3)		<u>X</u>
٠,	Reimbursement arrangements						1b(4)		<u>X</u>
(5)	Loans or loan guarantees						1b(5)		<u>X</u>
(6)	Performance of services or me	mbership or fundraising	solicitatio	ons			1b(6)		_X_
	ring of facilities, equipment, mai		-	• •			1c		<u>X</u>
	e answer to any of the above is		_	· · · · · · · · · · · · · · · · · · ·		_		ets,	
	ervices given by the reporting fo				ue in any transactior	or sharing arrangement, she	W IN		
	mn (d) the value of the goods, o	,			1				
a) Line no	(b) Amount involved	· · · · · · · · · · · · · · · · · · ·		e exempt organization	(0) Description	of transfers, transactions, and sh	aring an	angeme	nts ———
			N/A						
							_		
			`				-		
									
									
				· · · · · · · · · · · · · · · · · · ·					
				, , , _ , , 					
					-				
				_					
	-					·	_		
					-				
2a Isth	e foundation directly or indirect	ly affiliated with, or relate	ed to one	or more tay-evennt organi	rations described		_		
	ection 501(c) of the Code (other				izations described		Yes	T] No
	es," complete the following sche		01 111 300	1011 327		L	163	L43.	JINU
<u>.</u>	(a) Name of org			(b) Type of organization	T	(c) Description of relationship			
	N/A			(-) ,,,	_	(-/			
					1			_	
			_						
	Under penalties of parjury, I declare t						e IRS d	scuss t	his
Sign	and belief, it is true correct, and com	iplete Declaration of preparer	r (other tha	n taxpayer) is based on all inform	k //.	return shown	with the	prepare see inst	я
Here	o www.m	Z. WVV KS		7/18/1	PRESIN		Yes		No
	Signature of officer or trustee			Date /	Title				
	Print/Type preparer's na	me P	parer's s	ignature	Date	Check if PTIN			
		[/]		a three coa	11121	self- employed			
Paid	NICHOLAS H		<i>M</i>	74	いいつりン	P01			
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				TREET, SUITE	300	`			
	MI	NNEAPOLIS,	<u>MN 5</u>	5402		Phone no. 612-3			
						Form	990	-PF (2	2011)

123622 12-02-11

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2011

Name of the organization Employer identification number

WEBSTER FAMILY FOUNDATION 33-1143931

Organization type (check one)

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	X 501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
	ly a section 501(c)(7	covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions				
	For an organization contributor Comple	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one ete Parts I and II				
Special I	Rules					
	509(a)(1) and 170(b	(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II				
	total contributions o	ol(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or uelty to children or animals Complete Parts I, II, and III				
	contributions for us If this box is checke purpose Do not co	p(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, e exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000 ed, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., implete any of the parts unless the General Rule applies to this organization because it received nonexclusively, 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 Part I, 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) (2011)

Name of organization

Employer identification number

WEBSTER FAMILY FOUNDATION

33-1143931

Part I	Contributors (see instructions) Use duplicate copies of Part I if	additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CHARLES AND NANCY WEBSTER 6645 INTERLACHEN BOULEVARD EDINA, MN 55436	\$\$.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

WEBSTER FAMILY FOUNDATION

33-1143931

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

Name of organ	ization	Employer identification number	
WEBSTER Part III	FAMILY FOUNDATION Exclusively religious, charitable, etc., indiverse Complete columns (2) through (4) and in the columns (2) through (4) and in the columns (3) through (4) and in the columns (4) through (4	vidual contributions to section 501(c	33-1143931 (7), (8), or (10) organizations that total more than \$1,000 for the
	the total of <i>exclusively</i> religious, charitable, e	tc., contributions of \$1,000 or less foi	the year. (Enter this information once) \$
(a) No. from Part I	Use duplicate copies of Part III if addition (b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	t
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	Transferee's name, address, a	(e) Transfer of gif	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	
	Transferee's name, address, a		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	
_	Transferee's name, address, a	nd ∠IP + 4	Relationship of transferor to transferee

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CA	SH II	NVESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
WELLS FARGO					24	5.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A			24	5.
FORM 990-PF DIVIDEND	S AND INTER	EST FROM S	SECU	RITIES	STATEMENT	2
SOURCE	GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A) AMOUNT	
WELLS FARGO		1,639.		0.	1,63	9.
TOTAL TO FM 990-PF, PART I, L	N 4	1,639.		0.	1,63	9 . —
FORM 990-PF	ACCOUNTI	NG FEES			STATEMENT	3
DESCRIPTION			5T-	(C) ADJUSTED NET INCOM	(D) CHARITABI E PURPOSES	
ACCOUNTING FEES	1,595.		0.	-	1,595	
TO FORM 990-PF, PG 1, LN 16B	1,595.	-	0.		1,59	5 .
FORM 990-PF O	THER PROFES	SIONAL FE	ES		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOM		
INVESTMENT MGMT FEES	1,369.	1,3	369.	-	(0.
TO FORM 990-PF, PG 1, LN 16C	1,369.	1,3	369.	·		0.

FORM 990-PF	TAX	ES		STATEMENT 5			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM					
STATE REGISTRATION FEES	25.		0.	25.			
TO FORM 990-PF, PG 1, LN 18	25.		0.	25.			
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 6			
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE			
ST JUDE MED INC - 800 SHARES MOSAIC CO - 500 SHARES CEPHALON INC - 500 SHARES FASTENAL CO - 2000 SHARES POLYONE CORP - 4000 SHARES ECOLAB INC - 1000 SHARES FISERV INC - 1000 SHARES			29,972. 7,036. 0. 66,058. 59,224. 51,354. 58,693.	27,440. 25,215. 0. 87,220. 46,200. 57,810. 58,740.			
TOTAL TO FORM 990-PF, PART I	I, LINE 10B	_	272,337.	302,625.			
FORM 990-PF	PART XV - L	INE 1A		STATEMENT 7			

LIST OF FOUNDATION MANAGERS

NAME OF MANAGER

CHARLES WEBSTER NANCY WEBSTER

Form **8868**

(Rev January 2012)

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

	7 2 3 3 5	ai ato app	HOUSE TO COUNTY COUNTY				
If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box						$\triangleright X$	
	re filing for an Additional (Not Automatic) 3-Month Ex						
Do not co	implete Part II unless you have already been granted	an automa	atic 3-month extension on a previous	sly filed Fo	rm 8868		
	c filing (e-file). You can electronically file Form 8868 if	-					
	o file Form 990-T), or an additional (not automatic) 3-mo		•		-		
	file any of the forms listed in Part I or Part II with the ex	•					
	Benefit Contracts, which must be sent to the IRS in par		(see instructions) For more details	on the ele	ctronic filing	of this form,	
	irs gov/efile and click on e-file for Charities & Nonprofits					· · ·	
Part I	Automatic 3-Month Extension of Time						
	tion required to file Form 990-T and requesting an auto	matic 6-mo	onth extension - check this box and	complete		. \square	
Part I only						▶ ∟	
	orporations (including 1120-C filers), partnerships, REN Ime tax returns	1ICs, and t	rusts must use Form 7004 to reques	st an exter	ision of time	•	
Type or						on number (EIN) or	
print							
File by the	WEBSTER FAMILY FOUNDATION				X 33-1143931		
due date for filing your	ue date for Number, street, and room or suite no. If a PO box, see instructions			Social se	Social security number (SSN)		
return See instructions	City, town or post office, state, and ZIP code For a fe	oreign add	tress see instructions				
	EDINA, MN 55436-1005						
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4	
Application		Dotum	Application			Datum	
Applications Is For	ni	Return	Is For			Return	
		Code				Code	
Form 990	orm 990 01 Form 990-T (corporation)					07	
Form 990-		02	Form 4720		·	08 09	
Form 990-		04	Form 5227			10	
	T (sec 401(a) or 408(a) trust)	05	Form 6069	11			
	T (trust other than above)	06	Form 8870			12	
01111 000	CHARLES M. WEB		1 01111 887 0			1 12	
• The ho	oks are in the care of 6645 INTERLACH		III.EVARD – EDINA M	N 55/	36-100	5	
	one No ► 612-339-3430	<u> </u>	FAX No ▶ 612-752-18		30 100		
•	rganization does not have an office or place of business	e in the l lr		00			
	s for-a-Group Return; enter the organization's four digit			If this is fo	r the whole	group check this	
oox ▶ [If it is for part of the group, check this box	7					
	juest an automatic 3-month (6 months for a corporation				CIS THE EXTE	TISION IS IOI	
			tion return for the organization name		The extensi	on	
	r the organization's return for	t organiza	normetarn for the organization harm	ed above.	THE EXTERIS	OH	
_	X calendar year 2011 or						
	tax year beginning	an	d onding				
	tax year beginning	, all	a enaing				
2 If the	e tax year entered in line 1 is for less than 12 months, c	hack rase	on Initial return	Fınal retur	n		
	Change in accounting period	ilieck reasi	on mida return	i ii iai ietui	11		
L	Onlinge in accounting period						
3a If the	s application is for Form 990-BL 990-PF 990-T 4720	or 6069, e	nter the tentative tax less any				
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.				За	\$	0.	
					. *		
	estimated tax payments made Include any prior year overpayment allowed as a credit				\$	507.	
	Balance due. Subtract line 3b from line 3a Include your payment with this form, if required,						
	sing EFTPS (Electronic Federal Tax Payment System)			3c	\$	0.	
	f you are going to make an electronic fund withdrawal v			orm 8879-			
_HA Fo	or Privacy Act and Paperwork Reduction Act Notice,	see Instru	uctions.		Form 8	3868 (Rev 1-2012)	

123841 01-04-1