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Form **990-PF** Department of the Treasury Internal Revenue Service

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

OMB No 1545-0052

LOI	Cale	nual year 2011 of tax year beginning		_ , and ending		
Na	me o	f foundation			A Employer identificatio	n number
7	THE	JENNINGS FAMILY FOUND	ATION, INC.		41-176520	5
		and street (or P O box number if mail is not delivered to stre		Room/suite	B Telephone number	
2	² 52	5 LEMOND ST SW P O BO		507-444-15	543	
		town, state, and ZIP code		·	C If exemption application is	, <u> </u>
		TONNA, MN 55060-0998				
		k all that apply: Initial return	Initial return of a fo	ormer public charity	D 1 Foreign organization	s, check here
		Final return	Amended return			
		Address change	Name change		Foreign organizations m 2. check here and attach of	eeting the 85% test, omputation
H (Checl	k type of organization: X Section 501(c)(3)	exempt private foundation		E If private foundation st	atus was terminated
	_ S∈	ection 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ation	under section 507(b)(1	
I F	aır m	arket value of all assets at end of year J Accoun	tıng method: Cash	X Accrual	F If the foundation is in a	60-month termination
(f	rom		Other (specify)		under section 507(b)(1	
	▶\$	4,469,770. (Part I, col	umn (d) must be on cash i	basis)		
Pa	art 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)
	1	Contributions, gifts, grants, etc., received	340,318.	**************************************	N/A	(cash basis only)
	2	Check fit the foundation is not required to attach Sch. B	340,310.		47.63	
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	117,884.	117,884.		STATEMENT 1
	5.	Gross rents	227,70010			
€ 31	[Net rental income or (foss)				
SGANNED NOV 07 2012 Revenue	6a	Net gain or (loss) from sale of assets not on line 10	64,357.			•
	b	Gross sales price for all assets on line 6a 1,016,083.	2			
eve	7	Capital gain net income (from Part IV, line 2)		64,357.		
ڪ ۾ ڇ	8	Net short-term capital gain				
6	9	Income modifications				
<u>z</u>	10a	Gross sales less returns and allowances		•	·	
	b	Less Cost of goods sold				
2	C	Gross profit or (loss)				
图	11	Other income		· · · · · · · · · · · · · · · · · · ·		
	12	Total. Add lines 1 through 11	522,559.	182,241.		
Ŏ	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
	14	Other employee salaries and wages				
S	15	Pension plans, employee benefits				
ıses	16a	Legal fees STMT 2	90.	<u> </u>		90.
and Administrative Expens	b	Accounting fees STMT 3	4,125.	0.		4,125.
ñ	_ C	Other professional fees STMT 4	45,242.	45,242.		0.
Ě	17	Interest	2 5 4 7	26		
stra	18	Taxes STMT 5	2,547.	26.		0.
ij	19	Depreciation and depletion				
Ā	20	Occupancy				
Þ	21	Travel, conferences, and meetings				
ā	22	Printing and publications Other expenses STMT 6	122.	0.		25.
Operating	24	•	122.	<u> </u>		43.
era	"[52,126.	45,268.		4,240.
õ	25	Contributions, gifts, grants paid	424,818.	33,200.		424,818.
			424,010.			424,010.
	[Adtal expenses and disbursements.	476,944.	45,268.		429,058.
	27	Subtract line 26 from line 12:		±3,200°		225,000
	-'	Excess preventier over expenses and disbursements	45,615.			1
		Net investment income (if negative, enter -0-)	15,015.	136,973.		
		Adjusted net income (if negative, enter -0-)			N/A	
						

Fo	rm 99	00-PF (2011) THE JENNINGS FAMILY F	OU		41-	-1765206 Page 2
F	art	Balance Sheets Attached schedules and amounts in the description		Beginning of year		of year
<u>.</u>		column should be for end-of-year amounts only		(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		116,359.	275,001.	
	2	Savings and temporary cash investments		49,345.	142,109.	142,109.
	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		•		
S	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
¥	10a	Investments - U.S. and state government obligations STMT 7	,	463,018.	307,715.	313,425.
	1	Investments - corporate stock STMT 8	3	2,160,948.	1,948,849.	
		Investments - corporate bonds STMT 9		596,805.	551,116.	618,547.
	11	Investments - land, buildings, and equipment basis			· · · · · · · · · · · · · · · · · · ·	
		Less accumulated depreciation				
	12	Investments - mortgage loans				
	13	Investments - other STMT 1	.o l	717,711.	925,011.	928,559.
	14	Land, buildings, and equipment basis		· = · / · = = ·	,	
		Less accumulated depreciation			v . v	
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers)		4,104,186.	4,149,801.	4,469,770.
	17	Accounts payable and accrued expenses		675.	4,149,801. 675.	ŀ
	18	Grants payable				,
S	19	Deferred revenue			·], ,
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
abi	21	Mortgages and other notes payable				
	22	Other liabilities (describe >) [
			i			
	23	Total liabilities (add lines 17 through 22)		675.	<u>675.</u>]
		Foundations that follow SFAS 117, check here]			,
(0	ĺ	and complete lines 24 through 26 and lines 30 and 31.				
Š	24	Unrestricted	ļ	4,103,511.	4,149,126.	
ä	25	Temporarily restricted				
Ä	26	Permanently restricted	_,			
Ĕ		Foundations that do not follow SFAS 117, check here	J			1
F		and complete lines 27 through 31.	i			
ţş	27	Capital stock, trust principal, or current funds				_
SSe	28	Paid-in or capital surplus, or land, bldg., and equipment fund				_
Net Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other funds	`	4 400 544	1 110 100	-
ž	30	Total net assets or fund balances	}	4,103,511.	4,149,126.	1
		-		4 104 106	4 140 001	
_		Total liabilities and net assets/fund balances		4,104,186.	4,149,801.	
P	art	Analysis of Changes in Net Assets or Fun	d B	alances		
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	4,103,511.
2 Enter amount from Part I, line 27a					2	45,615.
		increases not included in line 2 (itemize)		3	0.	
4	Add 1	ines 1, 2, and 3			4	4,149,126.
5	Decr	eases 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, co	lumn (b), line 30	_6	4,149,126.
						Form 990-PF (2011)

	JENNINGS FAMILY			<u>NC</u>	•		4	<u>1-176</u>	<u>5206 </u>	Page 3
	and Losses for Tax on Ir	-	t Income	1/63	l laur an	aurad T				
	ube the kind(s) of property sold (e.g rehouse; or common stock, 200 sh:			(B)	How ac	nast i	(c) Date	acquired lay, yr.)	(d) Dat (mo., da	
1a PUBLICLY TRADE		5. WILO GU.)		ט ד	- Dona	P	(1110., 0	, ,,		
b CAPITAL GAINS		-		\vdash		<u> </u>				
C C	<u>VIDHNDD</u>									
d										
<u>e</u>										
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale					aın or (loss) s (f) mınus (
a 1,008,629.			951,72	6.					56	,903. ,454.
b 7,454.	·····								7	<u>,454.</u>
<u>c</u>										
d										·
Complete only for assets showing	g gain in column (h) and owned by	 the foundation	on 12/31/60			70	Coupo (C	ol (b) gain		
	(j) Adjusted basis		cess of col. (i)				(k), but i	col. (h) gain i not less than	-0-) or	
(i) F.M.V. as of 12/31/69	as of 12/31/69		col. (j), if any				Losses	(from col. (h	1))	
a	· · · · · · · · · · · · · · · · · · ·								56	,903.
b									7	,903. ,454.
С										
<u>d</u>				_						
e					ı					
2 Capital gain net income or (net cap	ortal loss) { If gain, also enter If (loss), enter -0	n Part I, line In Part I, line	7 7	}	2				64	,357.
3 Net short-term capital gain or (los:	s) as defined in sections 1222(5) an	nd (6):								
If gain, also enter in Part I, line 8, o	column (c).			\downarrow				37/3		
If (loss), enter -0- in Part I, line 8 Part V Qualification Ui	nder Section 4940(e) for	Reduced	Tay on Net	Inv	3 estm	ent Inco	me	N/A		
(For optional use by domestic private										
		15 10(4) 142 011	i not invostment in		·· <i>,</i>					
If section 4940(d)(2) applies, leave th	ıs part blank.									
Was the foundation liable for the secti	on 4942 tax on the distributable am	ount of any ye	ear in the base per	od?					Yes	X No
If "Yes," the foundation does not quali										
1 Enter the appropriate amount in e		uctions before	making any entri				1		(d)	
(a) Base period years	(b) Adjusted qualifying dist	tributions	Net value of no	(c) nchar		use assets		Distribi	ition ratio	(0))
Calendar year (or tax year beginnin 2010	9 ""/	4,100.	7101 74140 01 710			1,331		(col. (b) dıvı		81565
2009		6,571.				7,327				69108
2008		3,550.				9,135		_		09753
2007		7,325.				4,829				74910
2006	40	3,055.		2	<u>, 97</u> :	3,651			.1:	35542
2 Total of line 1, column (d)							2_		• 5	<u>70878</u>
3 Average distribution ratio for the 5		on line 2 by 5,	or by the number	of ye	ars				1.	1 1 1 7 6
the foundation has been in existen	ce ii iess man o years						3		• 4.	14176
4 Enter the net value of noncharitable	e-use assets for 2011 from Part X, I	line 5					4		1,584	,722.
5 Multiply line 4 by line 3							5		523	,465.
6 Enter 1% of net investment income	e (1% of Part I, line 27b)						6		1	<u>,370.</u>
7 Add lines 5 and 6							7		524	,835.
8 Enter qualifying distributions from	Part XII. line 4						8		429	,058.
If line 8 is equal to or greater than	line 7, check the box in Part VI, line	1b, and comp	lete that part using	g a 19	% tax ra	ate.				
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 49-	18 - see	Instru	ictio	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.				
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1% ☐	1		2,7	<u> 39.</u>
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 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			0.
3 Add lines 1 and 2	3		<u>2,7</u>	39.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		2,7	39.
6 Credits/Payments:				
a 2011 estimated tax payments and 2010 overpayment credited to 2011 6a 2,200.			•	
b Exempt foreign organizations - tax withheld at source 6b				
c Tax paid with application for extension of time to file (Form 8868) 6c 4,800.				
d Backup withholding erroneously withheld 6d 6d			-	•
7 Total credits and payments. Add lines 6a through 6d	7		<u>7,0</u>	35.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			<u>35.</u>
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	_		
	10		4,2	26.
11 Enter the amount of line 10 to be: Credited to 2012 estimated tax	11			0.
Part VII-A Statements Regarding Activities				,
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in			Yes	
any political campaign?		1a	ļ.,,	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	or	ł		
distributed by the foundation in connection with the activities				
c Did the foundation file Form 1120-POL for this year?		1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		1		
(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0 .				
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
managers. ► \$ 0 .		1		_
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
If "Yes," attach a detailed description of the activities				
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		ł		
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X_
b If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
If "Yes," attach the statement required by General Instruction T.				1
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 la	ıW			
remain in the governing instrument?		6	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year?		7	X	
If "Yes," complete Part II, col. (c), and Part XV				
8a Enter the states to which the foundation reports or with which it is registered (see instructions)				
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		8Ъ		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 calend	iar			
year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV		9	L_	X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		X
	Fc	rm 99 0	-PF	(2011)

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	art 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 make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► NONE			
14	The books are in care of ► KEN KADASH Telephone no. ► 507-4	44-1	522	
	Located at ►PO BOX 998, OWATONNA, MN ZIP+4 ►5	5060	-09	98
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	$\overline{}$
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign			
	country			
Pa	art 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?	ŀ		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	1		
	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.)		,	
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 instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2011?	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 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning		'	
	before 2011? Yes X No			
	If "Yes," list the years > , , , ,			
þ	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?			,
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,			
	Form 4720, to determine if the foundation had excess business holdings in 2011.) N/A	3b	-	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	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 leopardy before the first day of the tax year beginning in 2011?	4b		X

Form **990-PF** (2011)

Form 990-PF (2011) THE JENNINGS FAMILY FOUR			<u>41-17652</u>	06	Page 6			
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be	Required (contin	nued)					
5a During the year did the foundation pay or incur any amount to:								
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	on 4945(e))?	Y	es 🗶 No					
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,								
any voter registration drive?			es X No					
(3) Provide a grant to an individual for travel, study, or other similar purposes	s?	Y	es 🗶 No					
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section							
509(a)(1), (2), or (3), or section 4940(d)(2)?			es 🗶 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?								
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	•	ın Regulations						
section 53.4945 or in a current notice regarding disaster assistance (see instructions)?								
Organizations relying on a current notice regarding disaster assistance check								
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption					.			
expenditure responsibility for the grant?		1/A Y	es L No					
If "Yes," attach the statement required by Regulations section 53.494	• •							
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	r						
a personal benefit contract?		Y	es X No		,			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			6b	<u> </u>			
If "Yes" to 6b, file Form 8870					ľ			
7a At any time during the tax year, was the foundation a party to a prohibited tax		Yo	es 🗶 No	_				
b If "Yes," did the foundation receive any proceeds or have any net income attrib				7b				
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	tees, Foundation Ma	anagers, Highly	У					
List all officers, directors, trustees, foundation managers and their	compensation							
- and an office of an octor of a actor of foundation manager of and trick	, '	(c) Compensation	(d) Contributions to	(e)	Expense			
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid.	(d) Contributions to employee benefit plans and deferred	acco	Expense ount, other			
JOEL JENNINGS	to position PRESIDENT	enter -0-)	compensation	all	owances			
P O BOX 998	- EVESIDEMI							
QWATONNA, MN 55060	0.10	0.	0.		0.			
MARY LEE JENNINGS	DIRECTOR	- 0.	<u> </u>		<u> </u>			
P O BOX 998	DIRECTOR							
QWATONNA, MN 55060	0.10	0.	0.		0.			
QWATOMIA, IM 55000	0.10	ļ	<u>.</u>	 	<u>.</u>			
	-							
	-							
	1							
2 Compensation of five highest-paid employees (other than those inc	cluded on line 1), If none,	enter "NONE."						
	(b) Title, and average		(d) Contributions to	(e)	Expense			
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	acco	ount, other owances			
NONE	do to to to position		oomponsed on	<u> </u>				
	<u></u>							
	1							
	1			!				
	1							
	1							
Total number of other employees paid over \$50,000			>		0			

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Part VIII Information About Officers, Directors, Trustees, Foundati Paid Employees, and Contractors (continued)	on Managers, Highly	
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 statistics number of organizations and other beneficiaries served, conferences convened, research papers produc	al information such as the	Expenses
ı N/A		
4772	· · · · · · · · · · · · · · · · · · ·	7
2		
	·•·	
3		1
		_
		4
		+
Part IX-B Summary of Program-Related Investments		L
Describe the two largest program-related investments made by the foundation during the tax year on lin	es 1 and 2.	Amount
N/A		
		1
		1
All other program-related investments. See instructions.		
		1
		-
* A L Add base 4 Above to O	_	0.
Total, Add lines 1 through 3	<u> </u>	Form 990-PF (2011)
		ruin 330-F F (2011)

<u>For</u>	m 990-PF (2011) THE JENNINGS FAMILY FOUNDATION, INC.	41	-1765206	Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part Foreign four	ndation	s, see 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	4,429	055.
b	Average of monthly cash balances	1b	4,429 225	485.
	Fair market value of all other assets	1c		
d	Total (add lines 1a, b, and c)	1d	4,654	540.
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	4,654	540.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4		818.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,584	
6	Minimum investment return Enter 5% of line 5	6	229	236.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certair		
	foreign organizations check here and do not complete this part.)		000	006
1	Minimum investment return from Part X, line 6	1	229	236.
	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.)	l	•	5 2 2
C	Add lines 2a and 2b	2c		739.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	226	497.
4	Recoveries of amounts treated as qualifying distributions	4		0.
5	Add lines 3 and 4	5	226	497.
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	226	497.
P	art XII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	<u> </u>		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	429	058.
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:	.		
a	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	429,	058.
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		0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	429,	058.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	ualifies f	or the section	
	4940(e) reduction of tax in those years.			

Form **990-PF** (2011)

Page 9

226,497.

0.

Undistributed Income (see instructions) Part XIII (a) (b) (c) (d) Corpus Years prior to 2010 2010 2011 1 Distributable amount for 2011 from Part XI. line 7 226,497. 2 Undistributed income, if any, as of the end of 2011 0 a Enter amount for 2010 only **b** Total for prior years: 0. 3 Excess distributions carryover, if any, to 2011: 261,185 a From 2006 390,395 **b** From 2007 c From 2008 231,700. d From 2009 74,961. 139,198. e From 2010 1,097,439 f Total of lines 3a through e 4 Qualifying distributions for 2011 from 429 058. Part XII line 4: > \$

a Applied to 2010, but not more than line 2a			0
b Applied to undistributed income of prior years (Election required - see instructions)		0.	
c Treated as distributions out of corpus (Election required - see instructions)	0.		
d Applied to 2011 distributable amount			
e Remaining amount distributed out of corpus	202,561.		

	e Remaining amount distributed out of corpus	202,561.	i	
5	Excess distributions carryover applied to 2011	0.		
	(If an amount appears in column (d), the same amount must be shown in column (a))			
	must be shown in column (a))		1	
6	Entar the not total of each column on		1	

	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	1,300,000.		
	b Prior years' undistributed income. Subtract			

0

261,185

1,038,815

0.

0

0.

0

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 2010. Subtract line 4a from line 2a. Taxable amount - see instr.
- f Undistributed income for 2011. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2012
- 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)
- Excess distributions carryover from 2006 not applied on line 5 or line 7
- Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a

Cabilact inics i and c	nom me oa
10 Analysis of line 9:	
a Excess from 2007	390,395
b Excess from 2008	231,700
c Excess from 2009	74.961

O Analysis of line 9:	
a Excess from 2007	390,395.
b Excess from 2008	231,700.
c Excess from 2009	74,961.
d Excess from 2010	139,198.

Form	990-	.PF	/201	1

e Excess from 2011

Part XIV Private Operating Fo		LY FOUNDATION			65206 Page 1
				N/A	· · · · · · · · · · · · · · · · · · ·
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for a b Check box to indicate whether the foundation.		=	Lin coction	4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	Ing louridation described	Prior 3 years	1942(J)(3) UI L 14	342())(3)
income from Part I or the minimum	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
Investment return from Part X for	(u) 2011	(8) 2010	(0) 2000	(4) 2000	(6) 10441
each year listed b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not		 	-	 	-
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly		 			
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter: (1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(¡)(3)(B)(i) b "Endowment" alternative test - enter		-	:	+	
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Inform	mation (Comple	ete this part only	if the foundation	n had \$5,000 or m	ore in assets
at any time during th	e year-see inst	ructions.)			
1 Information Regarding Foundation	Managers:				
a List any managers of the foundation who			tributions received by the	e foundation before the clo	se of any tax
year (but only if they have contributed mo	re than \$5,000). (See	section 50/(d)(2).)			
SEE STATEMENT 11				·	
b List any managers of the foundation who other entity) of which the foundation has a			(or an equally large port	ion of the ownership of a p	artnership or
NONE					
2 Information Regarding Contribution	n, Grant, Gift, Loan	, Scholarship, etc., P	rograms:		
	•	•	_	not accept unsolicited requ	
the foundation makes gifts, grants, etc. (s				omplete items 2a, b, c, and	d d.
a The name, address, and telephone number		m applications should be	addressed:		
KEN KADASH, 507-444-1					
PO BOX 998, OWATONNA,					
b The form in which applications should be NO SET FORM; PLEASE P					
c Any submission deadlines: NONE					· · ·
d Any restrictions or limitations on awards,	such as hy gengraphic	al areas, charitable fields	kinds of institutions or	other factors:	<u>. </u>
NONE	oson as by goograpine	ar areas, enarmante nellas	, milao or maututona, U	5 or 140 to to to	

Total						<u>0</u> 990-PF (2011
		l	<u>_</u>			
· · · · · · · · · · · · · · · · · · ·		<u>-</u> 1				
						<u></u>
NONE		-				
b Approved for future payment						
Total	SEE CON	TINUATION	SHEET(S)		▶ 3a	424,818
LOOMINGTON MN 55437						5,000
516 w. 96TH STREET						
ВМС		NONE	PUBLIC	CHARITY	ALLAN SMITH MINISTRY	
						-
WATONNA, MN 55120						1,600
58 AGNES STREET		NONE	POBLIC		& CHRISTMAS CONCERT	
EDS FOR KIDS		NONE	DUBL TO	CUNDIMY	ANNUAL SILENT AUCTION	
			Ì			
INDOIN INDIGNIE, IN 33120						
ENDOTA HEIGHTS MN 55120						9,000
520 PILOT KNOB ROAD						

Form 990-PF (2011)

a Paid during the year

ADVOCATES FOR DEVELOPMENTAL

Recipient

Part XV

131 OAKDALE

OWATONNA, MN 55060

ALZHEIMERS ASSOCIATION

AMERICAN CANCER SOCIETY

455 WEST 77TH STREET

EDINA, MN 55435

Form 990-PF (2011) THE JENNINGS FAMILY FOUNDATION, INC. 41-1765206 Page 12

Lintor gross a	imounts unless otherwise indicated.	Unrelated I	ousiness income	Exclud	ded by section 512, 513, or 514	(e)
1 Drogram		(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
	service revenue:	code		COGE		
				 		
	· · · · · · · · · · · · · · · · · · ·			+-+		
		1		┼┼		
				+		
: —		- - -		 		··
- Food o	nd contracts from government agencies	_		+		
	nd contracts from government agencies hip dues and assessments			 	 	
	nip dues and assessments n savings and temporary cash			 		
investmer						
	and interest from securities			14	117,884.	· -
				14	117,004.	
	income or (loss) from real estate:	 		1		
	nanced property					
	bt-financed property					
	income or (loss) from personal					
property						
	estment income		·	╁┼		
	oss) from sales of assets other			10	64 257	
than inver	•		· · · · · · · ·	18	64,357.	
	e or (loss) from special events			+		
	fit or (loss) from sales of inventory			+-+		
1 Other reve						
				+		
						<u> </u>
				├		<u>_</u>
d		_	<u> </u>	 		
	Add columns (b), (d), and (e)	-	0.		182,241.	0
2 Subtotal	Aud Columns (v), (u), amu (e)	L	<u></u>	1 1	13	
	t line 12 columns (h) (d) and (e)				10	102,241
3 Total. Add	d line 12, columns (b), (d), and (e)	١				
3 Total. Add See workshe	eet in line 13 instructions to verify calculations.		inlishment of Fi	remnt	Purnoses	
3 Total. Add See workshe Part XVI	et in line 13 instructions to verify calculations. -B Relationship of Activities	to the Accom				
3 Total. Add See workshe Part XVI Line No.	et in line 13 instructions to verify calculations. -B Relationship of Activities Explain below how each activity for which in	to the Accorr	olumn (e) of Part XVI-A			lishment of
3 Total. Add See workshe Part XVI	et in line 13 instructions to verify calculations. -B Relationship of Activities	to the Accorr	olumn (e) of Part XVI-A			lishment of
3 Total. Add See workshe Part XVI Line No.	et in line 13 instructions to verify calculations. -B Relationship of Activities Explain below how each activity for which in	to the Accorr	olumn (e) of Part XVI-A			lishment of
3 Total. Add See workshe Part XVI Line No.	et in line 13 instructions to verify calculations. -B Relationship of Activities Explain below how each activity for which in	to the Accorr	olumn (e) of Part XVI-A			lishment of
3 Total. Add See workshe Part XVI Line No.	et in line 13 instructions to verify calculations. -B Relationship of Activities Explain below how each activity for which in	to the Accorr	olumn (e) of Part XVI-A			lishment of
3 Total. Add See workshe Part XVI Line No.	et in line 13 instructions to verify calculations. -B Relationship of Activities Explain below how each activity for which in	to the Accorr	olumn (e) of Part XVI-A			lishment of
3 Total. Add See workshe Part XVI Line No.	et in line 13 instructions to verify calculations. -B Relationship of Activities Explain below how each activity for which in	to the Accorr	olumn (e) of Part XVI-A			lishment of
3 Total. Add See workshe Part XVI Line No.	et in line 13 instructions to verify calculations. -B Relationship of Activities Explain below how each activity for which in	to the Accorr	olumn (e) of Part XVI-A			lishment of
3 Total. Add See workshe Part XVI Line No.	et in line 13 instructions to verify calculations. -B Relationship of Activities Explain below how each activity for which in	to the Accorr	olumn (e) of Part XVI-A			lishment of
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3 Total. Add See workshe Part XVI Line No.	et in line 13 instructions to verify calculations. -B Relationship of Activities Explain below how each activity for which in	to the Accorr	olumn (e) of Part XVI-A			lishment of
3 Total. Add See workshe Part XVI Line No.	et in line 13 instructions to verify calculations. -B Relationship of Activities Explain below how each activity for which in	to the Accorr	olumn (e) of Part XVI-A			lishment of
3 Total. Add See workshe Part XVI Line No.	et in line 13 instructions to verify calculations. -B Relationship of Activities Explain below how each activity for which in	to the Accorr	olumn (e) of Part XVI-A			lishment of
3 Total. Add See workshe Part XVI Line No.	et in line 13 instructions to verify calculations. -B Relationship of Activities Explain below how each activity for which in	to the Accorr	olumn (e) of Part XVI-A			lishment of
3 Total. Add See workshe Part XVI Line No.	et in line 13 instructions to verify calculations. -B Relationship of Activities Explain below how each activity for which in	to the Accorr	olumn (e) of Part XVI-A			lishment of

	90-PF				Y FOUNDATIO				1765206	Page 13
Par	XVII			ansfers T	o and Transaction	ons an	nd Relations	ships With No	oncharitable	
	ud the c	Exempt Organ								Yes No
		organization directly or ind						tion 501(c) of		res No
		e (other than section 501(o				ıı organız	auons?			
	1) Cas	s from the reporting found	Janon to a nonchai	паріє ехептр	t organization of.				10(1)	_ v
-	-	er assets							1a(1)	X
		insactions:		•					1a(2)	^A
		es of assets to a noncharit	ahla ayamnt organ	ization					15/1	x
		chases of assets from a no			n				1b(1) 1b(2)	X
-	-	tal of facilities, equipment,	-	pi organizatio	11				1b(3)	X
-	-	nbursement arrangements	•						1b(4)	X
-	-	ns or loan guarantees	,						1b(5)	X
-		formance of services or m	emhershin or fund	Iraisinn solicit	ations				1b(6)	X
		of facilities, equipment, m							1c	X
		swer to any of the above is				nuld alwa	avs show the fair	market value of the		
		es given by the reporting		-	• • •		•		-	,
		d) the value of the goods,					,		,	
(a) Line		(b) Amount involved			able exempt organization	1	(d) Description	on of transfers, transacti	ons, and sharing arra	ingements
			1	N/A	A					,
					_					
		·m·								
				· —						
		<u>_</u>	1					·		
										
		<u></u>								
		 				-				
2a Is	the fou	indation directly or indirec	tly affiliated with, o	or related to, o	one or more tax-exempt	organizai	tions described			
III	section	n 501(c) of the Code (othe	r than section 501	(c)(3)) or in s	ection 527?				Yes	X No
b If	"Yes," c	omplete the following sch	iedule.							
		(a) Name of org	ganization		(b) Type of organiz	ation		(c) Description of r	elationship	
		N/A								
			- -							
		···	 							
									· · · · · · · · · · · · · · · · · · ·	
								 		
	and h	r penalties of perjury, I declare relief, it is true, correct, and coi							May the IHS di	
Sign		Sinsi, it is also, contest, and con		100000			To-	NO -	return with the shown below (s	
Here	7 _			Anny.	$\mathcal{O} \perp \mathcal{O} / \mathcal{O}$	2	P/C&	7 ACO	X Yes	☐ No
	Sig	nature of officer or trustee	- 1		Date / '	1	Title	<u> </u>	Town.	
		Print/Type preparer's na	ame\ (Přeparèr,	s signature	10	Date	Check if	PTIN	

(612)253-6500 Form **990-PF** (2011)

P00484560

Firm's EIN ► 45-0250958

Phone no.

Paid

Preparer

Use Only

Firm's name ► EIDE BAILLY LLP

Firm's address ► 800 NICOLLET MALL, STE. 1300 MINNEAPOLIS, MN 55402-7033

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** 41-1765206 THE JENNINGS FAMILY FOUNDATION, INC. Organization type (check one): Filers of: Section: ___ 501(c)(Form 990 or 990-EZ) (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 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 X 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, total 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 total 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 Part I, line 2 of its Form 990-PF, to

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)

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

THE JENNINGS FAMILY FOUNDATION, INC.

41-1765206

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	THE PROPHET CORPORATION 2525 LEMOND ST SW OWATONNA, MN 55060	\$340,318.	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 Oncash 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

THE JENNINGS FAMILY FOUNDATION, INC.

41-1765206

Part II	Noncash Property (see instructions) Use duplicate copies of F	Part II if additional space is needed	
(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
—			
		\$	990, 990-EZ, or 990-PF) (

Name of orga	anization		Employer identification number			
THE JE Part III	NNINGS FAMILY FOUNDATI Exclusively religious, charitable, etc., indiverse. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc.	vidual contributions to section 501(c)	41-1765206 (7), (8), or (10) organizations that total more than \$1,000 for the scompleting Part III, enter the year. (Enter this information once)			
(a) No.	Use duplicate copies of Part III if addition		(d) Proprietion of house of in hold			
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gift				
	Transferee's name, address, 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			
		(e) Transfer of gift				
	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			
-	Transferee's name, address, and 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, ar	(e) Transfer of gift	Relationship of transferor to transferee			

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual. Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient EXCHANGE CLUB FOR FAMILY UNITY NONE PUBLIC CHARITY GOLF TO PREVENT CHILD 209 E MAIN STREET SUITE 1 ABUSE 1,200. OWATONNA, MN 55060 FELLOWSHIP OF CHRISTIAN ATHLETES NONE PUBLIC CHARITY GIFTS AND SPONSORSHIPS 8701 LEEDS ROAD KANSAS CITY, MO 64129 126,518. FRIENDSHIP VENTURES NONE PUBLIC CHARITY COMMUNITY NEEDS JOHN DUMONT-MAJOR GIFT OFFICER 1,500. ANNANDALE MN 55302 CITIREACH INTERNATIONAL (GOOD CITIES) NONE PUBLIC CHARITY PROGRAM GIFT 7340 HUNTERS RUN 7,000. EDEN PRAIRIE, MN 55346 HESHIMA ASSOCIATION PUBLIC CHARITY GOLF CHARITY EVENT FOR NONE 4111 103RD AVE NORTH PROGRAM SUPPORT BROOKLYN PARK, MN 55443 5,000. HILL CITIES NONE PUBLIC CHARITY PROGRAM SUPPORT 5615 NORTH DANUBE ROAD MINNEAPOLIS, MN 55432 2,000. PUBLIC CHARITY MINISTRY VALUES INTERNATIONAL JUSTICE MINISTRY NONE PO BOX 58147 WASHINGTON DC 70037 10,000. LUIS PALAU ASSOCIATION PUBLIC CHARITY FAMILY MINISTRIES NONE PO BOX 50 PORTLAND, OR 97201 5,000. MINNESOTA FAMILY INSTITUTE NONE PUBLIC CHARITY FAMILY VALUES ADVOCACY 2855 SOUTH ANTHONY LANE ST. ANTHONY MN 55418 30,000. NATIONAL CENTER FOR FATHERING NONE PUBLIC CHARITY PROGRAM GIFT 10200 W. 75TH STREET SHAWNEE MISSION, KS 66204 75,000. Total from continuation sheets 400 218.

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient OWATONNA CHAMBER FOUNDATION NONE PUBLIC CHARITY SPONSOR GIFT 320 HOFFMAN DRIVE 5,000. OWATONNA, MN 55060 PILGRIM CENTER FOR RECONCILIATION NONE PUBLIC CHARITY FOUNDATION 7001 CHAILL ROAD EDINA MN 55439 7,000. ROTARY INTERNATIONAL FOUNDATION NONE PUBLIC CHARITY ANNUAL GIFT 5418 CREEK VIEW LANE EDINA, MN_55439 10,000. SEARCH MINISTRIES NONE PUBLIC CHARITY ANNUAL GIFT 4010 WEST 65TH STREET 5,000. EDINA, MN 55435 PUBLIC CHARITY COMMUNITY NEEDS STEELE COUNTY FOOD SHELF NONE 155 OAKDALE STREET 10,000. OWATONNA, MN 55060 URBAN VENTURES LEADERSHIP FOUNDATION NONE PUBLIC CHARITY ANNUAL GIFT 3041 4TH AVE SOUTH MINNEAPOLIS, MN 55408 10,000. WORLD VISION PUBLIC CHARITY GENERAL MINISTRY NONE 4325 UPTON AVE. S. 55,000. MINNEAPOLIS MN 55410 NONE PUBLIC CHARITY MINISTRY GIFT YOUNG LIFE 739 SOUTH 14TH STREET MINNEAPOLIS MN 55404 33,000. WINONA STATE UNIVERSITY - CAILYN NONE PUBLIC STATE SCHOLARSHIP MCCAULEY UNIVERSITY 175 WEST MARK STREET WINONA, MN 55987 1,000. BENEDICTINE COLLEGE - TYLER SUPALLA NONE всноот SCHOLARSHIP 1020 NORTH 2ND STREET 170(B)(1)(A)(II 1,000. ATCHISON, KS 66002 Total from continuation sheets

FORM 990-PF DIVIDENT	OS AND	INTER	EST FROM	SECUI	RITIES	STATEMENT 1
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A) AMOUNT
DIVIDEND INCOME INTEREST EARNED	-		71,706. 53,632.		7,454.	64,252. 53,632.
TOTAL TO FM 990-PF, PART I, I	LN 4 =		125,338.		7,454.	117,884.
FORM 990-PF		LEGAL	FEES			STATEMENT 2
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL EXPENSE		90.		0.		90.
TO FM 990-PF, PG 1, LN 16A =		90.		0.		90.
FORM 990-PF	ACC	COUNTI	NG FEES	-		STATEMENT 3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	4	4,125.		0.		4,125.
TO FORM 990-PF, PG 1, LN 16B	4	4,125.		0.		4,125.
FORM 990-PF C	THER I	PROFES	SIONAL FE	EES		STATEMENT 4
	(/ EXPEN	A)	(B) NET INVE	 EST-	(C) ADJUSTED	(D) CHARITABLE
DESCRIPTION	PER I		MENT INC	COME	NET INCOME	PURPOSES
DESCRIPTION	PER I		MENT INC	242.	NET INCOME	PURPOSES 0.

FORM 990-PF	TAX	ES	STATEMENT			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
EXCISE TAX FOREIGN TAXES	2,521. 26.		0. 26.			0.
TO FORM 990-PF, PG 1, LN 18	2,547.		26.			0.
FORM 990-PF	OTHER E	XPENSES			STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC				
MN FILING FEE	25.		0.		2	25.
TO FORM 990-PF, PG 1, LN 23	122.		0.		2	25.
FORM 990-PF U.S. AND S	STATE/CITY G	OVERNMENT	OBL	GATIONS	STATEMENT	7
DESCRIPTION	U.S GOV''		вос	OK VALUE	FAIR MARKET VALUE	
WF PB GOVT BONDS - SEE STATEM	MENT X			307,715.	313,42	25.
TOTAL U.S. GOVERNMENT OBLIGAT	TIONS	-		307,715.	313,42	25.
TOTAL STATE AND MUNICIPAL GOV	VERNMENT OBL	IGATIONS				
TOTAL TO FORM 990-PF, PART II	, LINE 10A	-		307,715.	313,42	25.

FORM 990-PF C	ORPORATE STOCK		STATEMENT	8
DESCRIPTION		BOOK VALUE	FAIR MARKET	Г
WF PB CORPORATE EQUITIES - SEE ST	ATEMENT	1,948,849.	2,192,1	29.
TOTAL TO FORM 990-PF, PART II, LI	NE 10B	1,948,849.	2,192,12	29.
FORM 990-PF C	ORPORATE BONDS		STATEMENT	9
DESCRIPTION		BOOK VALUE	FAIR MARKET	r
WF PB CORPORATE BONDS - SEE STATE	MENT	551,116.	618,54	47.
TOTAL TO FORM 990-PF, PART II, LI	NE 10C	551,116.	618,54	47.
FORM 990-PF OT	HER INVESTMENTS		STATEMENT	10
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET	r
ALTERNATIVE INVESTMENTS - SEE STATEMENT REITS - SEE STATEMENT	COST	482,805. 442,206.	466,76 461,79	
TOTAL TO FORM 990-PF, PART II, LI	NE 13	925,011.	928,55	59.
	XV - LINE 1A OUNDATION MANAGE	n.a.	STATEMENT	11

NAME OF MANAGER

JOEL JENNINGS
MARY LEE JENNINGS

FORM 990-PF DIVIDENT	DS AND	INTER	EST FROM	SECU	RITIES	STATEMENT
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A) AMOUNT
DIVIDEND INCOME INTEREST EARNED	-		71,706. 53,632.		7,454.	64,252 53,632
TOTAL TO FM 990-PF, PART I, I	LN 4		125,338.		7,454.	117,884
FORM 990-PF		LEGAL	FEES			STATEMENT 2
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM	
LEGAL EXPENSE		90.		0.		90.
TO FM 990-PF, PG 1, LN 16A =		90.		0.		90.
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT 3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM	
ACCOUNTING FEES		4,125.		0.		4,125.
TO FORM 990-PF, PG 1, LN 16B	4	4,125.		0.		4,125.
FORM 990-PF C	THER I	PROFES	SIONAL FE	EES		STATEMENT 4
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
					· · · · · · · · · · · · · · · · · · ·	
INVESTMENT MANAGEMENT FEES	4.5	5,242.	45,	242.		0.

FORM 990-PF	TAX	ES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTEI NET INCOM		
EXCISE TAX FOREIGN TAXES	2,521. 26.		0. 26.			0.
TO FORM 990-PF, PG 1, LN 18	2,547.		26.			0.
FORM 990-PF	OTHER E	XPENSES			STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTEI NET INCOM		
MN FILING FEE PENALTY	25. 97.		0.			5.
TO FORM 990-PF, PG 1, LN 23	122.		0.		2	5.
FORM 990-PF U.S. AND S	STATE/CITY G	OVERNMENT	OBL	GATIONS	STATEMENT	7
DESCRIPTION	U.S GOV'	-	вос	OK VALUE	FAIR MARKET VALUE	i
WF PB GOVT BONDS - SEE STATEM	MENT X	 -		307,715.	313,42	5.
TOTAL U.S. GOVERNMENT OBLIGAT	TIONS	-	•	307,715.	313,42	5.
TOTAL STATE AND MUNICIPAL GOV	VERNMENT OBL	IGATIONS			•	
TOTAL TO FORM 990-PF, PART I	I, LINE 10A	-		307,715.	313,42	5.

FORM 990-PF C	ORPORATE STOCK		STATEMENT
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
WF PB CORPORATE EQUITIES - SEE ST	ATEMENT	1,948,849.	2,192,129
TOTAL TO FORM 990-PF, PART II, LI	NE 10B	1,948,849.	2,192,129
FORM 990-PF C	ORPORATE BONDS		STATEMENT
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
WF PB CORPORATE BONDS - SEE STATE	MENT	551,116.	618,547
TOTAL TO FORM 990-PF, PART II, LI	NE 10C	551,116.	618,547
FORM 990-PF OT	HER INVESTMENTS		STATEMENT 1
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
ALTERNATIVE INVESTMENTS - SEE STATEMENT	COST	402 005	466,767
REITS - SEE STATEMENT	COST	482,805. 442,206.	461,792
TOTAL TO FORM 990-PF, PART II, LI	NE 13	925,011.	928,559
	XV - LINE 1A OUNDATION MANAGE	D.C.	STATEMENT 1

NAME OF MANAGER

JOEL JENNINGS MARY LEE JENNINGS

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Period Covered December 1, 2011 - December 31, 2011

Account Number

ASSET DETAIL							
Asset Description Cash & Equivalents	QUANTITY	Price	MARKET VALUE AS OF 12/31/11	Cost Basis	UNREALIZED GAIN/LOSS	ESTIMATED ANNUAL INCOME	CURRENT YIELD
CASH INCOME Total Cash MONEY MARKET			\$60 00 \$ 60.00	\$60 00 \$60.00	\$0.00 \$0.00		
FEDERATED TREAS OBL FD 68 Asset held in Invested Income Portfolio	113,479320		\$113,47932	\$113,47932	\$0.00	\$11.3	001%
FEDERATED TREAS OBL FD 68 Total Money Market	28,570140		28,570 14 \$142,049.46	28,570 14 \$142,049.46	00:00	285 \$14.16	0.01%
Total Cash & Equivalents			\$142,109.46	\$142,109.46	\$0.00	\$14.16	0.01%
Asset Description	PAR VALUE	PRICE	MARKET VALUE AS OF 12/31/11	Cost Basis	UNREALIZED GAIN/LOSS	ESTIMATED YIELD TO ANNUAL INCOME MATURITY	YIELD TO
GOVERNMENT OBLIGATIONS FED HOME LN BK DID 05/08/06 5 375 06/14/2013 CUSIP: 31337ELF1	20,000 000	\$107.244	\$53,622 00	\$51,62930	\$1,992 70	\$2,687 50	0.38%
MOODY'S KALING AAA STANDARD & POOR'S RATING AA+ FED HOME LN BK DTD 09/07/06 S 125 08/14/2013 CUSIP-3133XGVFB	20,000 000	107 691	53,845 50	51,281 10	2,564.40	2,562 50	0.37
STANDARD & POOR'S RATING. AA+ FED HOME LN BK DTD 10/05/07 4 625 10/10/2012 CUSIP: 3133XML66	20,000 000	103 408	51,704 00	50,623 04	1,080.96	2,312,50	0.24
MUCUT'S KATING AAA STANDARD & POOR'S RATING: AA+							,

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Period Covered December 1, 2011 - December 31, 2011

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ASSET DETAIL (continued)							
Asset Description	PARVALUE	Price	MARKET VALUE AS OF 12/31/11	Cost Basis	Unrealized Gain/Loss	ESTIMATED ANNUAL INCOME	YIELD TO MATURITY
Fixed Income (continued)							
GOVERNMENT OBLIGATIONS (continued)							
FED HOME LN MTG CORP DTD 07/16/02 5 125 07/15/2012 CUSIP: 3134A4QD9 MOODY'S RATING AAA STANDARD & POOR'S RATING AA+	50,000 000	102 698	51,349 00	51,585.60	- 236 60	2,562 50	0.14
FED NATL MTG ASSN DTD 02/15/07 5 000 02/16/2012 CUSIP-31359M5H2 MOODY'S RATING AAA STANDARD & POOR'S RATING. AA+	20,000 000	100 581	50,290 50	51,837 65	- 1,547.15	2,500 00	4 9 7
FED NATL MTG ASSN DTD 05/28/08 4 050 05/28/2013 CUSIP: 3136F9PZ0 MOODY'S RATING. AAA STANDARD & POOR'S RATING AA+	50,000.000	105 228	52,614 00	50,758 50	1,855 50	2,025 00	033
Total Government Obligations			\$313,425.00	\$307,715.19	\$5,709.81	\$14,650.00	
CORPORATE OBLIGATIONS							
ABBOTT LABORATORIES DTD 05/12/06 5 875 05/15/2016 CUSIP: 002824AT7 MOODY'S RATING A1 STANDARD & POOR'S RATING AA	20,000 000	\$117.311	\$58,655 50	\$50,020 50	\$8,635 00	\$2,937 50	1 75%
COLGATE-PALMOLIVE CO MED TERM NOTE DTD 11/06/06 5 200 11/07/2016 CUSIP. 19416QDH0 MOODY'S RATING AA3 STANDARD & POOR'S RATING. AA-	50,000 000	117.276	58,638 00	50,672 00	7,966 00	2,600 00	150
E I DU PONT DE NEMOURS DTD 07/28/08 6 000 07/15/2018 CUSIP: 263534BT5 MOODY'S RATING A2 STANDARD & POOR'S RATING. A	50,000.000	122 228	61,114 00	47,915 50	13,198.50	3,000.0	232
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Account Statement For:

Period Covered December 1, 2011 - December 31, 2011

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WELLS FARGO		C		Account Number	;			
ASSET DETA	ASSET DETAIL (continued)							
Asset Description		PARVALUE	PRICE	MARKET VALUE AS OF 12/31/11	Cost Basis	UNREALIZED GAIN/LOSS	ESTIMATED YIELD TO ANNUAL INCOME MATURITY	YIELD TO TATURITY
Fixed Income (continued)	ne (continued)							
CORPORATE OB	CORPORATE OBLIGATIONS (continued)							
GENERAL DYNAMICS CORP DTD 08/14/03 5.375 08/15/2015 CUSIP. 369550AM0 MOODY'S RATING [,] A2 STANDARD & POOR'S RATING A	CS CORP 5 08/15/2015 A2 RYS RATING A	50,000 000	114.309	57,154 50	50,086.50	7,068 00	2,687.50	1.32
GENERAL ELEC CAP CORP DTD 06/28/10 3 500 06/29/2015 CUSIP: 36962G4L5 MOODY'S RATING. AA2	P CORP 0 06/29/2015 AA2	50,000 000	104 855	52,427 50	52,395 84	3166	1,750 00	2.05
STANDARD & POO	R'S RATING: AA+							
JOHNSON & JOHNSON DTD 08/16/2007 5 550 08/15/2017 CUSIP: 478160AQ7 MOODYS RATING AAA	550 08/15/2017 AAA	50,000 000	120719	60,359 50	52,041 00	8,31850	2,775 00	1 68
LOWE'S COMPANIES INC	ES INC	20,000 000	112 078	56,039 00	46,820 00	9,21900	2,500 00	170
DID 10/05/05 5 000 10/13/2015 CUSIP: 548661CH8 MOODY'S RATING A3 STANDARD & POOR'S RATING. A-	0 10/15/2015 A3 R'S RATING. A-							
MEDTRONIC INC DTD 03/16/10 3 000 03/15/2015 CUSIP: 585055AR7 MOODY'S RATING A1	0 03/15/2015 A1	20,000 000	105 602	52,801 00	50,080 50	2,720 50	1,500 00	121
STANDARD & POO	R'S RATING· AA-							

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ASSET DETAIL (continued)						- radia	
Asset Description	PAR VALUE	PRICE	MARKET VALUE AS OF 12/31/11	Cost Basis	UNREALIZED GAIN/LOSS	; Estimated Yield to Annual Income Maturity	YIELD TO MATURITY
Fixed Income (continued)							
CORPORATE OBLIGATIONS (continued)							
SOUTHERN CAL EDISON DTD 10/15/08 5 750 03/15/2014 CUSIP-842400FK4 MOODY'S RATING. A1 STANDARD & POOPS BATING. A	20,000 000	110.153	55,076 50	50,191 50	4,885 00	2,875 00	1 08
C. 52 CC 0 CO C M DECONTO							
WALT DISNEY CO MED TERM NOTE TRANCHE # TR 00049 DTD 06/20/02 6 200 06/20/2014 CUSIP: 25468PCA2	50,000 000	113 262	56,631 00	50,892.50	5,738 50	3,100 00	077
MOODY'S RATING A2 STANDARD & POOR'S RATING A							
Total Corporate Obligations			\$568,896.50	\$501,115.84	\$67,780.66	\$25,725.00	
						-	
A FEET DE COMMETON	, in the second	9	MARKET VALUE	0	UNREALIZED	ESTIMATED	CURRENT
Fixed Income	,	ר אורב	AS OF 12/31/11	COSI DASIS	GAIN/ LUSS	ANNOAL INCOME	I IEFO
DOMESTIC MUTUAL FUNDS							
PUTNAM FLOATING RATE INC FUND #1857 CUSIP: 746763226	5,820 722	\$8 530	\$49,650 76	\$50,000.00	- \$34924	\$2,73574	551%
Total Domestic Mutual Funds			\$49,650.76	\$50,000.00	- \$349.24	\$2,735.74	5.51%
Total Fixed Income			\$931,972.26	\$858,831.03	\$73,141.23	\$43,110.74	



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Asser Description Equities	QUANTITY	PRICE	MARKET VALUE AS OF 12/31/11	Cost Basis	UNREALIZED GAIN/LOSS	ESTIMATED ANNUAL INCOME	CURRENT YIELD
CONSUMER DISCRETIONARY MCDONALDS CORP SYMBOL: MCD CUSIP: 580135101	400 000	\$100330	\$40,132.00	\$22,14800	\$17,984 00	\$1,12000	2 79%
TARGET CORP SYMBOL: TGT CUSIP. 87612E106	700 000	51.220	35,854 00	27,48650	8,367 50	840.00	234
YUM BRANDS INC COM	500:000	59010	29,505 00	17,763 20	11,741 80	570 do	1 93
SYMBOL. YUM CUSIP: 988498101 Total Consumer Discretionary			\$105,491.00	\$67,397.70	\$38,093.30	\$2,530.00	2.40%
CONSUMER STAPLES CVS/CAREMARK CORPORATION SYMBOL: CVS CUSIP: 126550100	200 000	\$40 780	\$20,39000	\$15,25820	\$5,131.80	\$325.00	1 59%
KRAFT FOODS INC CL A	800 000	37360	29,888 00	27,751 84	2,136.16	928 00	3.10
STMBOL: NFT CUSIF: 500/5N 104 PEPSICO INC SYMBOL: PEP CUSIP: 713448108	500 000	66 350	33,17500	30,086 00	3,089 00	1,030 00	310
Total Consumer Staples			\$83,453.00	\$73,096.04	\$10,356.96	\$2,283.00	2.74%
CONOCOPHILLIPS SYMBOL, COP CUSIP: 20825C104	700 000	\$72 870	\$51,009.00	\$30,590.48	\$20,418.52	\$1,848.00	3 62%
Total Energy			\$51,009.00	\$30,590.48	\$20,418.52	\$1,848.00	3.62%

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ASSET DETAIL (continued)

Account Statement For: JENNINGS FAMILY FDN - IMA

Period Covered December 1, 2011 - December 31, 2011

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Asset Description Equities (continued) FINANCIALS	QUANTITY	PRICE	Market Value as of 12/31/11	Cost Basis	Unreauzed Gain/Loss	ESTIMATED ANNUAL INCOME	CURRENT
AFLAC INC SYMBOL: AFL CUSIP: 001055102	600.000	\$43 260	\$25,95600	\$33,124.02	- \$7,168.02	\$792.00	3 05%
BERKSHIRE HATHAWAY INC SYMBOL: BRK.B CUSIP· 084670702	350.000	76300	26,705.00	29,090 01	- 2,385 01	000	000
JPMORGAN CHASE & CO SYMBOL: JPM CUSIP: 46625H100	1,000 000	33.250	33,250 00	34,594 10	- 1,344 10	1,000 00	3.01
US BANCORP DEL NEW SYMBOL: USB CUSIP: 902973304	1,500 000	27 050	40,575 00	33,392 75	7,182.25	75000	1.85
Total Financials			\$126,486.00	\$130,200.88	- \$3,714.88	\$2,542.00	2.01%
JOHNSON & JOHNSON SYMBOL, JNJ. CUSIP: 478160104	400 000	\$65.580	\$26,232.00	\$27,487 80	- \$1,255 80	\$91200	3 48%
THERMO FISHER SCIENTIFIC INC SYMBOL: TMO CUSIP: 883556102	400.000	44 970	17,988 00	18,803 80	- 815 80	000	000
Total Health Care			\$44,220.00	\$46,291.60	- \$2,071.60	\$912.00	2.06%
INDUSTRIALS CATERPILLAR INC SYMBOL: CAT CUSIP. 149123101	400 000	009 06\$	\$36,240 00	\$24,59136	\$11,64864	\$73600	2 03%
UNION PACIFIC CORP SYMBOL: UNP CUSIP, 907818108	400 000	105.940	42,37600	28,653.84	13,722 16	960 096	2 26
UNITED TECHNOLOGIES CORP SYMBOL, UTX CUSIP. 913017109	200 000	73 090	36,545 00	24,970 00	11,575 00	00 096	2 63
SM CO COM	300 000	81 730	24,519 00	27,47073	- 2,951 73	90 099	2 69
Total Industrials			\$139,680.00	\$105,685.93	\$33,994.07	\$3,316.00	2.37%

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ASSET DETAIL (continued)							
ASSET DESCRIPTION	QUANTITY	PRICE	MARKET VALUE AS OF 12/31/11	Cost Basis	UNREALIZED GAIN/LOSS	ESTIMATED ANNUAL INCOME	CURRENT YIELD
Equities (continued)							
INFORMATION TECHNOLOGY							
APPLE INC SYMBOL·AAPL CUSIP: 037833100	100 000	\$405.000	\$40,500 00	\$9,685 00	\$30,815.00	\$0.00	%00.0
CISCO SYSTEMS INC SYMBOL: CSCO CUSIP: 17275R102	1,000 000	18 080	18,080.00	23,080 00	- 5,000.00	240 00	133
E M C CORP MASS SYMBOL: EMC CUSIP· 268648102	1,500 000	21 540	32,310.00	23,69880	8,61120	0.00	0.00
INTEL CORP COMM SYMBOL: INTC CLISIP 458140100	1,175 000	24.250	28,493 75	23,417.75	5,076 00	987 00	3 46
INTERNATIONAL BUSINESS MACHS CORP	250 000	183 880	45,970 00	29,079.30	16,890.70	75000	163
SYMBOL: IBM CUSIP: 459200101							
VISA INC-CLASS A SHRS SYMBOL· V CUSIP: 92826C839	300 000	101.530	30,459 00	20,166 00	10,293 00	264.00	0.87
Total Information Technology			\$195,812.75	\$129,126.85	\$66,685,90	\$2,241.00	1.14%
MATERIALS							
ECOLAB INC SYMBOL: ECL CUSIP. 278865100	200 000	\$57.810	\$28,905 00	\$21,07230	\$7,832.70	\$400.00	1.38%
Total Materials			\$28,905.00	\$21,072.30	\$7,832.70	\$400.00	1.38%
UTILITIES		,	,				
AMEX UTILITIES SPDR SYMBOL: XLU CUSIP: 81369Y886	500 000	\$35 980	\$17,990.00	\$16,999 90	\$990 10	\$61050	3 39%
Total Utilities			\$17,990.00	\$16,999.90	\$990.10	\$610.50	3.39%
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THE PRIVATE BANK



Period Covered: December 1, 2011 - December 31, 2011

Account Number

ASSET DETAIL (continued)							
Asset Description Folities (Continued)	QUANTITY	PRICE	MARKET VALUE AS OF 12/31/11	Cost Basis	Unrealized Gain/Loss	ESTIMATED ANNUAL INCOME	CURRENT
INTERNATIONAL EQUITIES							
BHP BILLITON LIMITED - ADR SPONSORED ADR CUSIP. 088606108	300 000	\$70630	\$21,18900	\$28,05999	- \$6,870.99	\$606 00	2 86%
DIAGEO PLC - ADR SPONSORED ADR CUSIP. 25243Q205	300 000	87 420	26,22600	18,822 00	7,404 00	77850	2 97
NOVARTIS AG - ADR SPONSORED ADR CUSIP: 66987V109	275 000	57.170	15,721 75	15,336.70	385.05	55138	351
SCHLUMBERGER LTD CUSIP: 806857108	200.000	68310	34,15500	30,182 94	3,972 06	200 00	1.46
VODAFONE GROUP PLC NEW CUSIP: 92857W209	500.000	28 030	14,015 00	13,239 90	775.10	721.50	5.15
Total International Equities			\$111,306.75	\$105,641.53	\$5,665.22	\$3,157.38	2.84%
DOMESTIC MUTUAL FUNDS							
ISHARES RUSSELL 2000 SYMBOL: IWM CUSIP: 464287655	2,800 000	\$73.750	\$206,500 00	\$170,803.04	\$35,696 96	\$2,884.00	1.40%
SPDR S&P MIDCAP 400 ETF TRUST SYMBOL: MDY CUSIP: 78467Y107	1,400.000	159 490	223,286 00	172,743 99	50,542 01	2,398 20	1 0 7
Total Domestic Mutual Funds			\$429,786.00	\$343,547.03	\$86,238.97	\$5,282.20	1.23%

BANK THE PRIVATE

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Period Covered December 1, 2011 - December 31, 2011

Account Number

ASSET DETAIL (continued)

Asset Description Equities (continued)	QUANTITY	PRICE	MARKET VALUE AS OF 12/31/11	Cost Basis	Unrealized Gain/Loss	ESTIMATED ANNUAL INCOME	CURRENT YIELD
INTERNATIONAL MUTUAL FUNDS							
ISHARES MSCI AUSTRALIA INDEX SYMBOL: EWA CUSIP. 464286103	2,000 000	\$21 440	\$42,880.00	\$46,674 60	- \$3,794 60	\$2,17400	5 0 7 %
SHARES MSCI BRIC INDEX FUND SYMBOL: BKF CUSIP. 464286657	1,500.000	36 270	54,405.00	54,51000	- 105 00	1,225 50	2 25
ISHARES MSCI CANADA INDEX FUND SYMBOL: EWC CUSIP. 464286509	2,000,000	26 600	53,200 00	52,180.00	1,020 00	1,11800	2 10
ISHARES TRFTSE XINHAU HK CHINA 25 SYMBOL: FXI CUSIP: 464287184	1,200.000	34870	41,844 00	51,41988	- 9,575 88	918.00	2.19
VANGUARD MSCI EAFE ETF SYMBOL: VEA CUSIP. 921943858	13,000 000	30 630	398,190 00	423,883 78	- 25,693 78	13,598 00	3.41
VANGUARD MSCI EMERGING MARKETS ETF SYMBOL: VWO CUSIP: 922042858	2,000 000	38210	267,470 00	250,53082	16,939 18	6,342.00	237
Total International Mutual Funds			\$857,989.00	\$879,199.08	- \$21,210.08	\$25,375.50	2.96%
			\$2,192,128.50	\$1,948,849.32	\$243,279.18	\$50,497.58	2.30%

THE PRIVATE BANK



Period Covered. December 1, 2011 - December 31, 2011

Account Number

ASSET DETAIL (continued)		
Asset Description	OUANTITY	G F
Complementary Strategies	,	
OTHER		
DRIEHAUS ACTIVE INCOME FUND CUSIP: 262028855	9,541 985	\$10010
EATON VANCE GLOBAL MACRO ABSOLUTE RETURN FUND CLASS I #0088 SYMBOL: EIGMX CUSIP: 277923728	17,817 294	9.820
GATEWAY FUND - Y #1986 SYMBOL: GTEYX CUSIP: 367829884	3,769397	26.390
MERGER FD SH BEN INT SYMBOL: MERFX CUSIP: 589509108	6,209 847	15.590
Total Other		
Total Complementary Strategies		
ASSET DESCRIPTION	QUANTITY	PRICE

4.28%

\$4,083.97

- \$4,484.73

\$100,000.00

\$95,515.27

430

7,51890

- 7,83961

182,805.44

174,96583

CURRENT YIELD

ESTIMATED ANNUAL INCOME

UNREALIZED GAIN/LOSS

Cost Basis

MARKET VALUE AS OF 12/31/11

2.99% 2.99%

\$13,976.60 \$13,976.60

-\$16,038.44 -\$16,038.44

\$482,805.44 \$482,805.44

\$466,767.00 \$466,767.00

053

515 42

- 3,188 49

100,000 00

96,81151

187

1,85831

- 525 61

100,000 00

99,47439

Asset Description Real Assets	QUANTITY	Prace	Мавкет Value as of 12/31/11	Cost Basis	UNREALIZED GAIN/LOSS	ESTIMATED ANNUAL INCOME	CURRENT YIELD
REAL ESTATE INVESTMENT TRUSTS (REITS)							
HCP INC SYMBOL. HCP CUSIP. 40414L109	3,000 000	\$41 430	\$124,290.00	\$110,70807	\$13,581,93	\$5,76000	4.63%
PLUM CREEK TIMBER CO INC COM	4,000 000	36.560	146,240 00	132,356 40	13,883 60	6,720 00	4 59
SYMBOL: PCL CUSIP 729251108							
Total Real Estate Investment Trusts (Reits)			\$270,530.00	\$243,064.47	\$27,465.53	\$12,480.00	4.61%



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Period Covered December 1, 2011 - December 31, 2011

Account Number :

ASSET DETAIL (continued)							
ASSET DESCRIPTION	QUANTITY	PRICE	MARKET VALUE AS OF 12/31/11	Cost Basis	UNREALIZED GAIN/LOSS	ESTIMATED ANNUAL INCOME	CURRENT
Real Assets (continued) REAL ASSET FUNDS							
ELEMENTS ROGERS TOTAL RETURN DTD 10/18/07 10/24/2022 SYMROI : RII CIISID: R70307801	22,475.000	\$8510	\$191,262.25	\$199,141.98	- \$7,87973	00 0\$	%000
Total Real Asset Funds			\$191,262.25	\$199,141.98	- \$7,879.73	\$0.00	0.00%
Total Real Assets			\$461,792.25	\$442,206.45	\$19,585.80	\$12,480.00	2.70%
			ACCOUNT VALUE AS OF 12/31/11	Cost Basis	UNREALIZED GAIN/LOSS	ESTIMATED ANNUAL INCOME	
TOTAL ASSETS			\$4,194,769.47	\$3,874,801.70	\$319,967.77	\$120,079.08	

THE PRIVATE BANK

Form 886	88 (Rev_1·2012)					Page 2
	are filing for an Additional (Not Automatic) 3-Month Ex	tension,	complete only Part II and check this	box		► X
	ly complete Part II if you have already been granted an a				8868	
	are filing for an Automatic 3-Month Extension, comple					
Part II	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no c	opies neede	d).
			Enter filer's	identifyir	ng number, see	instructions
Type or	Name of exempt organization or other filer, see instru	ctions		Employe	r identification n	umber (EIN) or
print						
File by the	THE JENNINGS FAMILY FOUNDAT:	ION,	INC.	X	41-1765	206
due date for filing your	Number, street, and room or suite no. If a P O box, s	ee instruc	tions.	Social se	curity number (SSN)
etum See	2525 LEMOND ST SW P O BOX	998				
nstructions	City, town or post office, state, and ZIP code For a for	oreign add	fress, see instructions.			
	OWATONNA, MN 55060-0998					
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4
			_			
Applicati	on	Return	Application			Return
s For		Code	Is For			Code
orm 990		01				
orm 990	-BL	02	Form 1041-A			08
orm 990	·EZ	01	Form 4720			09
orm 990	-PF	04	Form 5227			10
orm 990	-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
orm 990	-T (trust other than above)	06	Form 8870			12
STOP! De	not complete Part II if you were not already granted	l an auton	natic 3-month extension on a previ	ously file	d Form 8868.	
	KEN KADASH					
	ooks are in the care of ▶ PO BOX 998 - O	MOTAN				
Teleph	one No ► 507-444-1522		FAX No ▶			
	organization does not have an office or place of business				•	▶
lf this i	s for a Group Return, enter the organization's four digit					
oox 🕨 L	. If it is for part of the group, check this box			all memb	ers the extension	n is for.
	·	NOVEM	BER 15, 2012			
	calendar year 2011 , or other tax year beginning $_$, and ending	<u> </u>		·
6 If th	e tax year entered in line 5 is for less than 12 months, c	heck reas	on Initial return	Final r	eturn	
	☐ Change in accounting period					
	te in detail why you need the extension					
	X PAYOR REQUIRES ADDITIONAL	TIME	TO FILE A COMPLETE	E AND	ACCURAT	<u>E</u>
RE	TURN.		<u> </u>			
						
	is application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, e	nter the tentative tax, less any		_	0 000
	refundable credits. See instructions			8a	\$	2,200.
	is application is for Form 990-PF, 990-T, 4720, or 6069,					
	payments made. Include any prior year overpayment all	owed as a	credit and any amount paid			4 400
	viously with Form 8868			8b	\$	4,400.
	ance due. Subtract line 8b from line 8a. Include your pa	•	n this form, if required, by using		•	^
EFT	PS (Electronic Federal Tax Payment System) See instru		the completed for Dert II a	8c	\$	0.
Indo	_		st be completed for Part II o	-	5 1 - J -	ad balas
maer pena Is true, co	ilties of perjury, I declare that I have examined this form, includi prect, and complete, and that I am authorized to prepare this fo	ing accomp rm.	anying schedules and statements, and to	the dest of	r my knowledge ai	ia dellet,
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ignature	Title ▶ C	.PA		Date	<u> </u>	

Form 8868 (Rev. 1-2012)