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Form 990-PF Department of the Treasure

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter Social Security numbers on this form as it may be made public.
▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

2013

and ending For calendar year 2013 or tax year beginning A Employer identification number Name of foundation 27-4376898 HUNTER FAMILY FOUNDATION INC Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 4924 612-338-2799 80 SOUTH 8TH STREET City or town, state or province, country, and ZIP or foreign postal code C if exemption application is pending, check here MINNEAPOLIS, MN 55402 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign 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: E If 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 J Accounting method: X Cash F If the foundation is in a 60-month termination. (from Part II, col (c), line 16) Other (specify) under section 507(b)(1)(B), check here ▶\$ 259. (Part I, column (d) must be on cash basis) Part | Analysis of Revenue and Expenses (d) Disbursements for chantable purposes (cash basis only) (a) Revenue and (c) Adjusted net (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income income 30,000. N/A Contributions, gifts, grants, etc., received 2 Check I if the foundation is not required to attach Sch B 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a ο. 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 6 11 Other income ei 30,000. 0. 12 Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages ロリアアくびの 15 Pension plans, employee benefits 16a Legal fees **b** Accounting fees c Other professional fees 17 Interest Ω 18 Taxes 19 Depreciation and depletion 20 Occupancy OGDEN, U 21 Travel, conferences, and meetings 22 Printing and publications STMT 1 139 0. 0. 23 Other expenses Operating 24 Total operating and administrative 139. 0. expenses. Add lines 13 through 23 30,000. 30,000. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 0 30,000. 30,139 Add lines 24 and 25 27 Subtract line 26 from line 12: <139. a Excess of revenue over expenses and disbursements Ō. b Net investment income (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-)

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]	398.
2 Enter amount from Part I, line 27a	2	<139.
3 Other increases not included in line 2 (itemize)	3	0.
4 Add lines 1, 2, and 3	4	259.
5 Decreases not included in line 2 (itemize)	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	259.

Fund Balances

ğ

Set

	(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) H	low acc Purch - Donat	ase tion (c) Date acquire (mo., day, yr.)		(d) Date sold (mo., day, yr.)		
1a										
	NE								-	
<u>c</u>					-					
d e										
(e) Gross sales price	(f) C	Depreciation allowed (or allowable)		t or other basis xpense of sale				(h) Gain or (e) plus (f) mi		
a	İ									
b										
C										
d										
e	L		4h - 4	10/01/00				(O-1 (b)		
Complete only for assets show								iaıns (Col. (h) (), but not les		
(i) F.M.V. as of 12/31/69	((j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any				osses (from		
<u>a</u>	ļ				\dashv					
<u>b</u>	 		ļ		}					
<u>C</u>	<u> </u>									
<u>d</u>	 									·
<u> </u>	<u>!</u>	C If any also asto	a va Daret I Juga I		7					
2 Capital gain net income or (net c	apital loss)	If gain, also ente If (loss), enter -0	r in Part I, line)- in Part I, line	<i>7</i>	}	2				
Net short-term capital gain or (lo	•		nd (6):		٦١					
If gain, also enter in Part I, line 8		c).			- -	ا ،				
Part V Qualification	Inder S	ection 4940(e) for	r Reduced	Tax on Ne	Inv	estm	ent Inco	me		
(For optional use by domestic private										
f section 4940(d)(2) applies, leave			, , , , , , , , , , , ,			,				
Was the foundation liable for the sec		tax on the distributable an	nount of any ve	ear in the base pe	rıod?					
	Nife a condess									Yes X No
			omplete this pa			r				Yes X No
1 Enter the appropriate amount in		mn for each year; see the i	omplete this pa		entries					
1 Enter the appropriate amount in (a) Base period years	each colu		omplete this pa instructions be		entries (c)		use assets	(col. ((d	on ratio
1 Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginn	each colu	mn for each year; see the i (b) Adjusted qualifying dis	omplete this pa instructions be stributions	fore making any o	entries (c)			(col. (b) divide	on ratio ed by col. (c))
1 Enter the appropriate amount in (a) Base period years	each colu	mn for each year; see the i (b) Adjusted qualifying dis 3	omplete this pa instructions be	fore making any o	entries (c)		use assets 506 • 310 •	(col. (b) divide	i) ion ratio ed by col. (c)) 59.28853
1 Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginn 2012	each colu	mn for each year; see the i (b) Adjusted qualifying dis 3	omplete this painstructions be stributions	fore making any o	entries (c)		506.	(col. (b) divide	on ratio on ratio od by col. (c)) 59.28853 04.83871
1 Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginn 2012 2011	each colu	mn for each year; see the i (b) Adjusted qualifying dis 3	omplete this painstructions be stributions 80,000.	fore making any o	entries (c)		506. 310.	(col. (b) divide	on ratio on ratio od by col. (c)) 59.28853 04.83871
1 Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginn 2012 2011 2010	each colu	mn for each year; see the i (b) Adjusted qualifying dis 3	omplete this painstructions be stributions 80,000.	fore making any o	entries (c)		506. 310.	(col. (b) divide	on ratio on ratio od by col. (c)) 59.28853 04.83871
1 Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginn 2012 2011 2010 2009 2008	each colu	mn for each year; see the i (b) Adjusted qualifying dis 3	omplete this painstructions be stributions 80,000.	fore making any o	entries (c)		506. 310.	(col. (b) divide	on ratio ed by col. (c)) 59.28853 04.83871 .00000
Base period years Calendar year (or tax year beginn 2012 2011 2010 2009 2008 Total of line 1, column (d)	each colu	mn for each year; see the i (b) Adjusted qualifying dis 3	omplete this parinstructions be stributions 80,000.82,500.00.	Net value of no	entries (c) onchai	ritable-i	506. 310.	(col. (b) divide	on ratio ed by col. (c)) 59.28853 04.83871 .00000
Base period years Calendar year (or tax year beginn 2012 2011 2010 2009 2008 Total of line 1, column (d)	each coluing in)	mn for each year; see the i (b) Adjusted qualifying dis 3 3	omplete this parinstructions be stributions 80,000.82,500.00.	Net value of no	entries (c) onchai	ritable-i	506. 310.	(col. (b) divide	on ratio on ratio od by col. (c)) 59.28853 04.83871 .00000
Base period years Calendar year (or tax year beginn 2012 2011 2010 2009 2008 Total of line 1, column (d) Average distribution ratio for the the foundation has been in existe	each coluing in)	mn for each year; see the i (b) Adjusted qualifying dis 3 3 3 see period - divide the total than 5 years	omplete this parinstructions be stributions 80,000.	Net value of no	entries (c) onchai	ritable-i	506. 310.	2	b) divide	on ratio od by col. (c)) 59.28853 04.83871 .00000 64.12724
Base period years Calendar year (or tax year beginn 2012 2011 2010 2009 2008 2 Total of line 1, column (d) A Average distribution ratio for the the foundation has been in existe	each coluing in)	mn for each year; see the i (b) Adjusted qualifying dis 3 3 3 see period - divide the total than 5 years	omplete this parinstructions be stributions 80,000.	Net value of no	entries (c) onchai	ritable-i	506. 310.	2	b) divide	on ratio od by col. (c)) 59.28853 04.83871 .00000 64.12724 54.70908
Base period years Calendar year (or tax year beginn 2012 2011 2010 2009 2008 Total of line 1, column (d) Average distribution ratio for the the foundation has been in existe Enter the net value of noncharita Multiply line 4 by line 3	s 5-year basence if less	mn for each year; see the research (b) Adjusted qualifying discovered as a see period - divide the total than 5 years	omplete this parinstructions be stributions 80,000.	Net value of no	entries (c) onchai	ritable-i	506. 310.	2 3 4	b) divide	1) 1) 1) 1) 1) 1) 2) 2) 2) 3) 2) 3) 4.83871 .00000 64.12724 54.70908 324 17,726
Base period years Calendar year (or tax year beginn 2012 2011 2010 2009 2008 Total of line 1, column (d) Average distribution ratio for the	s 5-year basence if less	mn for each year; see the research (b) Adjusted qualifying discovered as a see period - divide the total than 5 years	omplete this parinstructions be stributions 80,000.	Net value of no	entries (c) onchai	ritable-i	506. 310.	2 3 4 5	b) divide	0) 10 on ratio 20 d by col. (c)) 259.28853 04.83871 00000 64.12724 54.70908 324 17,726
Base period years Calendar year (or tax year beginn 2012 2011 2010 2009 2008 Total of line 1, column (d) Average distribution ratio for the the foundation has been in existed Henter the net value of noncharita Multiply line 4 by line 3 Enter 1% of net investment inco	each coluing in) 2 5-year basence if less ble-use as:	mn for each year; see the in the interpretation of the interpretat	omplete this parinstructions be stributions 80,000.	Net value of no	entries (c) onchai	ritable-i	506. 310.	2 3 4 5 6	b) divide	Yes X No non ratio and by col. (c)) 59.288532 04.83871 .000000 64.12724 54.70908 324 17,726 0 17,726 30,000

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Part VI Excise Tax Based on Investment Income (Section 4	1940(a), 4940(b), 4940(e), or	1948	- see ii	ıstru	ctior	าร)
1a Exempt operating foundations described in section 4940(d)(2), check here a						
Date of ruling or determination letter: (attach copy of letter is	f necessary-see instructions)				_	
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	e ► X and enter 1%	1				<u>0.</u>
of Part I, line 27b						
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations ente	r 4% of Part I, line 12, col. (b). リ	ļ				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations on	ly. Others enter -0-)	2				0.
3 Add lines 1 and 2		3	ļ			0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations on	lly. Others enter -0-)	4	<u> </u>			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	<u> </u>		_	0.
6 Credits/Payments:	11	1	1			,
a 2013 estimated tax payments and 2012 overpayment credited to 2013	6a	┨				1
b Exempt foreign organizations - tax withheld at source	6b	4				Ì
c Tax paid with application for extension of time to file (Form 8868)	6c	4				Ì
d Backup withholding erroneously withheld	6d	┨				
7 Total credits and payments. Add lines 6a through 6d		7	 			0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is	s attached	8	 			0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	<u> </u>			<u> </u>
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpa	•	10	-			
11 Enter the amount of line 10 to be: Credited to 2014 estimated tax	Refunded	11	.l			
Part VII-A Statements Regarding Activities	la colletion are did it portionets or interior				Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local	registation of the it participate of interven	E III		1a	103	X
any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political pi	urnages (san instructions for the definitio	n\2		1b		X
				10		
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activitie	s and copies of any materials publish	ieu oi				
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 durin	a the year:					
(1) On the foundation. > \$ 0 • (2) On foundation mana		_				
e Enter the reimbursement (if any) paid by the foundation during the year for political exp		_				ĺ
managers. > \$ 0.	orientare ax imposes on roundation					
2 Has the foundation engaged in any activities that have not previously been reported to	the IRS?			2	1	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 govern	ning instrument, articles of incorporation,	or				
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the ch	_			3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the	-			4a		Х
b If "Yes," has it filed a tax return on Form 990-T for this year?	•	ľ	1/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the y	year?			5		X
If "Yes," attach the statement required by General Instruction T.						
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfi-	ied either:					
 By language in the governing instrument, or 						
 By state legislation that effectively amends the governing instrument so that no mand 	datory directions that conflict with the sta	te law				
remain in the governing instrument?				6	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes,"	complete Part II, col (c), and Part X	ν		7		X
8a Enter the states to which the foundation reports or with which it is registered (see instr	uctions) >					
FL						
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		1	1/A	86		<u> </u>
9 Is the foundation claiming status as a private operating foundation within the meaning		endar				
year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Ye		 -	_ ^	9		X
10 Did any nersons become substantial contributors during the tax year? if "yes - attach a s	chedule listing their names and addresses	CMTE	ւ 2	10	X	l

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Form 990-PF (2013) HUNTER FAMILY FOUNDATION			<u> 27-43768</u>	98 Page 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be I	Required (continu	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?		s X No	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ectly,		
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?		s X No	
(4) Provide a grant to an organization other than a charitable, etc., organizatio				
509(a)(1), (2), or (3), or section 4940(d)(2)?	ii doddiidda iii ddallaii		es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational nurnoses, or t			
the prevention of cruelty to children or animals?	or codoational parposes, or t		es X No	'
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	for the exceptions described :	- 	:S [21] NO	
section 53.4945 or in a current notice regarding disaster assistance (see instru		in regulations	N/A	5b
Organizations relying on a current notice regarding disaster assistance (see institu-	•			30
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for			🗀 "	
expenditure responsibility for the grant?		1/A16	es L No	
If "Yes," attach the statement required by Regulations section 53 494	, ,		i	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	<u></u>]]
a personal benefit contract?		Ye	es 🗶 No 📙	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Y€	es 🗶 No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	magers, Highly	/	
Paid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their		14.20	(72)	
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	`enter -0-) '	and deterred compensation	allowances
SEE STATEMENT 3		0.	0.	0.
				I
				1
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		
	(b) Title, and average		(d) Contributions to	(e) Expense account, other
(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	account, other allowances
NONE	dovoted to position		compensation	unovanoco
110112				
				
		ļ		
		1		1
				
	:	<u> </u>		1
	<u> </u>			
		<u> </u>		
Total number of other employees paid over \$50,000			>	0

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "N	IONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produce		Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on line	0.1 and 2	Amount
1 N/A	5 I dilu 2.	Amount
2		
All abba are a lated a contract Contract and		·····
All other program-related investments. See instructions. 3		
		<u> </u>
Total. Add lines 1 through 3	>	0.

	m 990-PF (2013) HUNTER FAMILY FOUNDATION INC	27-43	376898 Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part. Forei	gn foundations, see	instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0.
ь	Average of monthly cash balances	. 1b	329.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	329.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	0.	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	329.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	5.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	324.
6	Minimum investment return. Enter 5% of line 5	6	16.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations	itions and certain	
_	foreign organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	16.
2a	Tax on investment income for 2013 from Part VI, line 5		
b	Income tax for 2013. (This does not include the tax from Part VI.)		
	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	16.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	16.
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	16.
	ort VIII		
L	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	30,000.
ь		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:		
-	Suitability test (prior IRS approval required)	3a	
	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	30,000.
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	30,000.
-	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four	ndation qualifies for the	
	4940(e) reduction of tax in those years.	• • •	

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
4. Distributable amount for 2012 from Bort VI	Corpus	16013 prior to 2012	2012	
1 Distributable amount for 2013 from Part XI, line 7				16.
2 Undistributed income, if any, as of the end of 2013				
a Enter amount for 2012 only			0.	
b Total for prior years:				
, ,		0.		
3 Excess distributions carryover, if any, to 2013:				i i
a From 2008				1
b From 2009				
c From 2010	İ			
dFrom 2011 32,484.				
eFrom 2012 29,975.	62,459.			T T T T T T T T T T T T T T T T T T T
f Total of lines 3a through e	02,433.			
4 Qualifying distributions for 2013 from Part XII, line 4: ►\$ 30,000.				
a Applied to 2012, 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.			† 1
d Applied to 2013 distributable amount				16.
e Remaining amount distributed out of corpus	29,984.			
5 Excess distributions carryover applied to 2013	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				3
6 Enter the net total of each column as			· · · · · · · · · · · · · · · · · · ·	, , , , , ,
indicated below:			, .	,
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	92,443.			* · · · ·
b Prior years' undistributed income. Subtract	**/	0		
line 4b from line 2b		0.	4	· · · · · · · · · · · · · · · · · · ·
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.		
dSubtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2012. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	,
f Undistributed income for 2013. Subtract	·			
lines 4d and 5 from line 1. This amount must				
be distributed in 2014				0.
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 2008				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2014.	02 442			
Subtract lines 7 and 8 from line 6a	92,443.			<u>.</u>
10 Analysis of line 9:				
a Excess from 2009				
b Excess from 2010 c Excess from 2011 32,484.				
dExcess from 2012 29,975.				
e Excess from 2013 29,984.				
				Form 990-PF (2013)

	FAMILY FOUN		····		376898 Page 1
Part XIV Privaté Operating F			A, question 9)	N/A	
1 a If the foundation has received a ruling of			ļ		
foundation, and the ruling is effective fo			▶		10.40(.)(5)
b Check box to indicate whether the found		ng foundation described in		4942(j)(3) or4	1942(1)(5)
2 a Enter the lesser of the adjusted net	Tax year	/F/ 0030 · ·	Prior 3 years	(d) 2010	(e) Total
income from Part I or the minimum	(a) 2013	(b) 2012	(c) 2011	(0) 20 10	(e) Iotai
investment return from Part X for					
each year listed					
b 85% of line 2a				<u></u>	
c Qualifying distributions from Part XII,					
line 4 for each year listed .					ļ
d Amounts included in line 2c not	ı				
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				<u> </u>	
alternative test relied upon:					
"Assets" alternative test - enter: (1) Value of all assets		İ			
, .					
(2) Value of assets qualifying under section 4942(j)(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)				<u> </u>	ļ
(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	1	1			
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info				n had \$5,000 or n	nore in assets
at any time during	the year-see inst	ructions.)	N/A		
1 Information Regarding Foundation	on Managers:			·	
a List any managers of the foundation wh			ributions received by the	e foundation before the c	lose of any tax
year (but only if they have contributed i	more than \$5,000). (See :	section 507(d)(2).)			
b List any managers of the foundation wh	no own 10% or more of the	ne stock of a corporation (or an equally large port	on of the ownership of a	partnership or
other entity) of which the foundation ha	as a 10% or greater intere	st			
2 Information Regarding Contribut	tion, Grant, Gift, Loan	, Scholarship, etc., Pr	ograms:		
Check here X if the foundation				not accept unsolicited rei	quests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indi	viduals or organizations u	nder other conditions, o	complete items 2a, b, c, a	nd d.
a The name, address, and telephone num	nber or e-mail address of	the person to whom appli	cations should be addre	essed:	<u></u>
b The form in which applications should	be submitted and informa	ition and materials they sh	nould include:		· · · · · · · · · · · · · · · · · · ·
c Any submission deadlines:	<u></u>				
d Any restrictions or limitations on award	ls, such as by geographic	al areas, charitable fields,	kınds of ınstitutions, or	other factors:	

Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	741100111
a Paid during the year				
JCILE PACKARD CHILDREN'S HOSPITAL	N/A	NONPROFIT	EXPANSION PROJECT	
00 HAMILTON AVE, STE 340		HOSPITAL		
ALO ALTO, CA 94301				30,000
		į		
Total		<u> </u>	▶ 3a	30,000
b Approved for future payment				
NONE				
Total		<u> </u>	▶ 3b	

	amounts unless otherwise indicated.	Unrelat	ed business income	Exch	ded by section 512, 513, or 514	(e)
		(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
Program	service revenue:	code	Amount	code	Amount	
<u> </u>				┿		
ь		_	ļ			
· —				+		
¹ —		-				
ė —				-		
	and analysis from any arrange and any arrange and any arrange and any arrange and arrange arrange and arrange arrange arrange and arrange	-				,
	and contracts from government agencies hip dues and assessments			+		
	in savings and temporary cash					
investmer		1]	
	s and interest from securities					
	Income or (loss) from real estate:			+	`	 ,
	financed property		· · · · · · · · · · · · · · · · · · ·			
	ebt-financed property			+	 	
	Income or (loss) from personal			+	-	
property	moone of (1000) from personal					
	estment income			-		
	oss) from sales of assets other			+		
than inver						
	ne or (loss) from special events					
	ofit or (loss) from sales of inventory					
Other reve	-					
a						
b						
c						···
d						
e						
	Add columns (b), (d), and (e)		0	•	0.	
Total. Ad	d line 12, columns (b), (d), and (e)				13	<u> </u>
e worksh	eet in line 13 instructions to verify calculations.)					
art XV	FB Relationship of Activities	to the Acc	omplishment of l	Exemp	ot Purposes	
						
ine No.	Explain below how each activity for which inc			-A contri	buted importantly to the accom	plishment of
	the foundation's exempt purposes (other tha	n by providing it	unds for such purposes).	_		
\longrightarrow						
\longrightarrow						
The state of the s						
		 -	 			
			····-		······································	
						

		ER FAMILY				27-43			age 13
Part	Information R Exempt Organ		sfers To a	and Transactions a	nd Relations	hips With Noncl	haritable	В	
1 Di	d the organization directly or inc		of the following	g with any other organizatio	n described in sect	on 501(c) of		Yes	No
	e Code (other than section 501(
a Tr	ansfers from the reporting foun	dation to a noncharitat	ole exempt org	ganization of:					İ
(1) Cash						1a(1)	I	X
(2) Other assets						1a(2)		X
b Ot	her transactions:								
(1) Sales of assets to a noncharit	able exempt organizat	ion				16(1)		X
(2) Purchases of assets from a n	oncharitable exempt o	rganization				1b(2)		X
•) Rental of facilities, equipment						1b(3)		X
(4) Reimbursement arrangement	s					1b(4)		X
(5) Loans or loan guarantees						1b(5)		Х
(6) Performance of services or m	nembership or fundrais	sing solicitation	ns			1b(6)		X
c St	naring of facilities, equipment, m	aılıng lısts, other asse	ts, or paid emp	ployees			1c		X
d If	the answer to any of the above i	s "Yes," complete the f	ollowing sche	dule. Column (b) should alv	vays show the fair i	market value of the good	ds, other as	sets,	
or	services given by the reporting	foundation. If the four	idation receive	ed less than fair market valu	ie in any transaction	n or sharing arrangemer	nt, show in		
CO	lumn (d) the value of the goods	, other assets, or serv	ices received.						
(a)Line	no (b) Amount involved	(c) Name of	noncharitable	exempt organization	(d) Description	n of transfers, transactions,	and sharing a	тапдет	ents
			N/A						
					<u> </u>				
		_				<u></u>			
						 _			
					<u> </u>				
	the foundation directly or indire	-			zations described			Tu	7.
	section 501(c) of the Code (oth		(3)) or in sect	ion 52/7			Yes	L	∑ No
<u> b II</u>	"Yes," complete the following so			(h) Tuno of organization		(c) Description of relati	onchin		
	(a) Name of o	ryanization		(b) Type of organization		(c) Description of relati	Uliship		
	N/A								
					<u></u>				
			-						
	.								
	Under penalties of perjury, I declar	e that I have examined this	s return, includin	l ng accompanying schedules and	statements, and to the	best of my knowledge			
Sign	and belief it in the correct and c						May the IHS return with the	ne prepa	rer
Here	- Arm		-	Hanlar	\ \ -		shown below		str)? No
	Signature of encer or truste	e		Date 19114	Title	who —	re:	· L.	140
	Print/Type preparer's		Preparer's si	ignature	Date	Check if PT	IN -		
	, , po p. sparor o			• • •		self- employed			
Paid									

Form **990-PF** (2013)

Firm's EIN

Phone no.

Preparer

Use Only

Firm's name ▶

Fırm's address 🕨

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.
 ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Name of the organization

Employer identification number

]	HUNTER FAMILY FOUNDATION INC	27-4376898					
Organization type (chec	k 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 chantable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
	on is covered by the General Rule or a Special Rule. I (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Spec	cial Rule. See instructions					
General Rule							
-	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more mplete Parts I and II.	(in money or property) from any one					
Special Rules							
509(a)(1) and 1	01(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of tl 70(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II						
total contribution	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.						
contributions for If this box is chi purpose Do no	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one or use exclusively for religious, charitable, etc., purposes, but these contributions did necked, enter here the total contributions that were received during the year for an excit complete any of the parts unless the General Rule applies to this organization becauble, etc., contributions of \$5,000 or more during the year	not total to more than \$1,000 clusively religious, chantable, etc ,					
but it must answer "No"	n that is not covered by the General Rule and/or the Special Rules does not file Sche on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990·EZ or or eet 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) (2013)

Name of organization '

Employer identification number

HUNTER FAMILY FOUNDATION INC

27-4376898

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	ANDREW M HUNTER III 4924 IDS CENTER, 80 S 8TH ST MINNEAPOLIS, MN 55402	s15,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
2	ASHLEY H RILEY 4924 IDS CENTER, 80 S 8TH ST MINNEAPOLIS, MN 55402	\$\$, 5,000.	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
3	LACEY H WISMER 4924 IDS CENTER, 80 S 8TH ST MINNEAPOLIS, MN 55402	\$\$,000.	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
4	JOCELYN H HORNBLOWER 4924 IDS CENTER, 80 S 8TH ST MINNEAPOLIS, MN 55402	sss	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
323452 10-2		\$Schedule B /Form	Person Payroll Noncash (Complete Part II for noncash contributions) 990, 990-EZ, or 990-PF) (2013)			

Employer identification number

HUNTER FAMILY FOUNDATION INC

27-4376898

Part II	Noncash Property (see instructions). Use duplicate copies of P	art 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
		<u> </u>	
(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) (

Schedule B (Form 990, 990-EZ, or 990-PF) (2013) Page 4 Name of organization Employer identification number HUNTER FAMILY FOUNDATION INC 27-4376898 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once) Part III Use duplicate copies of Part III if additional space is needed. (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, 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 (e) Transfer of gift 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 (e) Transfer of gift 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 (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF	OTHER EXPENSES		S	STATEMENT		
DESCRIPTION	EXPENSES	(B) NET INVEST- MENT INCOME	ADJUSTED	CHARITA		
STATE FILING FEES	139.	0.			0.	
TO FORM 990-PF, PG 1, LN 23	139.	0.			0.	
NAME OF CONTRIBUTOR	ADDR	ESS				
I	PART VII-A,	LINE 10				
ANDREW M HUNTER III		IDS CENTER, (
ASHLEY H RILEY		MINNEAPOLIS, MN 55402 4924 IDS CENTER, 80 S 8TH ST MINNEAPOLIS, MN 55402				
LACEY H WISMER		IDS CENTER, EAPOLIS, MN 59				
JOCELYN H HORNBLOWER		IDS CENTER, EAPOLIS, MN 5				

	PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS			STATEMENT 3	
NAME AND ADDRESS	TITLE AND C AVRG HRS/WK S		EMPLOYEE BEN PLAN CONTRIB	EXPENSE	
ANDREW M HUNTER III 4924 IDS CENTER, 80 S 8TH ST MINNEAPOLIS, MN 55402	PRESIDENT & DIRECT	CTOR 0.	0.	0.	
CAROLE T HUNTER 4924 IDS CENTER, 80 S 8TH ST MINNEAPOLIS, MN 55402	VICE PRESIDENT & 1.00	DIRECTOR 0.	0.	0.	
ROBERT W HORSTMAN 4924 IDS CENTER, 80 S 8TH ST MINNEAPOLIS, MN 55402	SECRETARY & TREAS	SURER 0.	0.	0.	
ASHLEY H RILEY 4924 IDS CENTER, 80 S 8TH ST MINNEAPOLIS, MN 55402	DIRECTOR 1.00	0.	0.	0.	
LACEY H WISMER 4924 IDS CENTER, 80 S 8TH ST MINNEAPOLIS, MN 55402	DIRECTOR 1.00	0.	0.	0.	
JOCELYN H HORNBLOWER 4924 IDS CENTER, 80 S 8TH ST MINNEAPOLIS, MN 55402	DIRECTOR 1.00	0.	0.	0.	
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	0.	0.	0.	