

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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

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/form990of.

OMB No 1545-0052

For	calen	dar year 2013 or tax year beginning			, and ending		
Nar	Name of foundation					A Employer identification	number
		OLSETH FOUNDATION				41-1875950	)
		nd street (or P O box number if mail is not delivered		address)	Room/surte	<b>B</b> Telephone number	
		L W MINNEHAHA PARKW				612-267-32	187
		wn, state or province, country, and ZIP or NEAPOLIS, MN 55419		ostal code		C if exemption application is p	ending, check here
<b>G</b> (	heck	all that apply: Initial return		Initial return of a fo	rmer public charity	D 1. Foreign organization:	s, check here
		Final return		Amended return			
		Address change		Name change		Foreign organizations me check here and attach co	perting the 85% test, proputation
H C	heck	type of organization: X Section 50	1(c) <u>(3)</u> e>	cempt private foundation		E If private foundation sta	tus was terminated
L		tion 4947(a)(1) nonexempt charitable tru		Other taxable private founda	tion	under section 507(b)(1	
		*		ng method: X Cash	Accrual	F If the foundation is in a	60-month termination
		Part II, col. (c), line 16)	U 01	ther (specify)		under section 507(b)(1	)(B), check here
_	>\$ 2,526,345. (Part I, column (d) must be on cash basis.)						1 (4):
Pa	irt i	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) necessarily equal the amounts in column (a))	may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
		Contributions, gifts, grants, etc., received				N/A	1
	2	Check X If the foundation is not required to attact	th Sch B		~ F = X		(m) mm)
		Interest on savings and temporary cash investments		2,570.	2,570.		STATEMENT 1
	ı	Dividends and interest from securities		45,368.	45,368.		STATEMENT 2
		Gross rents					1
	۱ ـ	Net rental income or (loss)		113,503.			,
9	<u>ا</u>	Net gain or (loss) from sale of assets not on line 1 Gross sales price for all assets on line 6a 227, 8		113,303.		The state of the s	The state of the s
Revenue	I _	assets on line 6a	, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		113,503.	# 77° 1	
జి	l	Net short-term capital gain			113,303.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	7,84
	ı	Income modifications					2014
	ı	Gross sales less returns and allowances				£	2014
		Less. Cost of goods sold					, - j
	C	Gross profit or (loss)	, ,				
	11	Other income					!
	12	Total. Add lines 1 through 11		161,441.	161,441.		}
	13	Compensation of officers, directors, trustees, etc.		0.	0.		0.
	ı	Other employee salaries and wages					
ø	l	Pension plans, employee benefits	•				
enses	l	Legal fees STMT	1 2	9,100.	0.		9 100
×pe	ı	Accounting fees STMT Other professional fees	. J <sub>.</sub>	9,100.	<u> </u>		9,100.
Щ Ш	4	Interest					
Administrative Expe	į	Taxes STMT	· 4	939.	914.		25.
istr	l .	Depreciation and depletion			,		
Ë		Occupancy	•				
Ρ	i	Travel, conferences, and meetings					
and	22	Printing and publications					
ng g	23	Other expenses STMT	. 5	12,062.	12,062.		0.
Operating	24	Total operating and administrative					
ğ	ļ	expenses. Add lines 13 through 23		22,101.	12,976.		9,125.
J		Contributions, gifts, grants paid		110,000.			110,000.
	i	Total expenses and disbursements.		400 404	40 000		440 40-
_		Add lines 24 and 25		132,101.	12,976.		119,125.
	ı	Subtract line 26 from line 12:		29,340.			
		Excess of revenue over expenses and disbursem		43,340.	148,465.		
		Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)	-,		140,400.	N/A	
	_	vielence net monité (n nedante, ente, -0-)		1			L

323501 10-10-13 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2013)



	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
뜨	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	285,636.	212,454.	212,454.
	3	Accounts receivable ►			
	l	Less; allowance for doubtful accounts			
	4	Pledges receivable ▶			
	1	Less; allowance for doubtful accounts			
	5	Grants receivable	"		
	l	Receivables due from officers, directors, trustees, and other			<del></del> -
	ľ	disqualified persons			
	,				
	7			0 000	0.000
	١.		0.	8,900.	8,900.
Assets		Inventories for sale or use			<del></del>
188		Prepaid expenses and deferred charges			
•	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock STMT 6	61,362.	24,873.	1,100,683.
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment, basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 7	934,441.	1,065,072.	1,204,308.
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation			
	15	Other assets (describe )		·- <del>-</del>	
		Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item 1)	1,281,439.	1,311,299.	2,526,345.
_	17	Accounts payable and accrued expenses			2702070201
	18	Grants payable			
	19	Deferred revenue			
Liabilities	20	•			1
░	l .	Loans from officers, directors, trustees, and other disqualified persons			
큳	21	Mortgages and other notes payable			1
	22	Other liabilities (describe )			į.
	l	T. 111 1 1111 (7.11 1.00)	.		
	23	Total liabilities (add lines 17 through 22)	0.	0.	i 1
		Foundations that follow SFAS 117, check here			
ø	١	and complete lines 24 through 26 and lines 30 and 31.			
lances		Unrestricted			<b>!</b>
		Temporarily restricted			İ
ä	26	Permanently restricted			ĺ
Ĕ		Foundations that do not follow SFAS 117, check here			t T
Ē		and complete lines 27 through 31.			T.
Net Assets or Fund Ba	27	Capital stock, trust principal, or current funds	0.	0.	,
<b>36</b>	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	· ·
¥8	29	Retained earnings, accumulated income, endowment, or other funds	1,281,439.	1,311,299.	
횾	30	Total net assets or fund balances	1,281,439.	1,311,299.	
_					
	31	Total liabilities and net assets/fund balances	1,281,439.	1,311,299.	}
<u> </u>	art	Analysis of Changes in Net Assets or Fund B			
=					
		net assets or fund balances at beginning of year - Part II, column (a), line	30		
		t agree with end-of-year figure reported on prior year's return)		1	1,281,439.
		amount from Part I, line 27a		2	29,340.
3	Othe	r increases not included in line 2 (itemize) PRIOR PERIO	D ADJUSTMENTS	3	520.
4	Add	ines 1, 2, and 3	•	4	1,311,299.
		eases not included in line 2 (itemize)		5	0.
<u>6</u>	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	1,311,299.
222	E 4 4				Form <b>990-PF</b> (2013)

F	Part IV Capital Gains a	ind Losses for Tax on Ir	nvestment	Income						
	(a) List and descri 2-story brick war	be the kind(s) of property sold (e.g ehouse; or common stock, 200 sh	s. MLC Co.)		( <b>6)</b> F	low ac - Purc - Dona	quired hase ation		acquired lay, yr.)	(d) Date sold (mo., day, yr.)
	RBC FINANCIAL -						P	VARI	ous	VARIOUS
b	RBC FINANCIAL -	- PUBLICLY TRADE	D STOC	K	$\Box$		P	VARI	ous	VARIOUS
		<u> </u>			L_					
d		<del></del>		<del></del> .	<u> </u>					<u> </u>
e			T		L_,					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	1 10/	t or other basis xpense of sale					ain or (loss s (f) minus	(g)
_a		<del></del>		444 25						24,421.
b			<del></del>	114,35	2.		_			89,082.
		<del></del>								
d	<del></del>	<del></del> _								
e		g gain in column (h) and owned by	the foundation	on 12/31/60				I) Coupe (C	\al_(b) ====	
_	Complete only for assets showing	<del></del>	1	-					Col. (h) gain not less tha	
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (1), if any					(from col. (	(h)) ´
_a		· · · · · · · · · · · · · · · · · · ·								24,421.
b										89,082.
_d	<del></del>	<del></del>								
_e	<u> </u>	<del></del>	<u> </u>				<del></del>	_		
2	Capital gain net income or (net cap	oftal loss) $ \begin{cases} \text{If gain, also ente} \\ \text{If (loss), enter -C} \end{cases} $			}	2				113,503.
3	Net short-term capital gain or (loss	s) as defined in sections 1222(5) ai	nd (6):		`.					
	If gain, also enter in Part I, line 8, o	column (c).			M				/-	
_	If (loss), enter -0- in Part I, line 8 Part V   Qualification Ui	nder Section 4940(e) for	Dadward	T N-4		3			N/A	·
If s Wa	section 4940(d)(2) applies, leave th	foundations subject to the section is part blank.  Ion 4942 tax on the distributable an fy under section 4940(e). Do not co	nount of any ye	ar in the base per		· <b>.</b> )				Yes X No
		ach column for each year, see the i			ntries					
	(a) Base period years Calendar year (or tax year beginnin	q in) Adjusted qualifying dis	tributions	Net value of no	(c) nchar		use assets		Dıstrıl (col. (b) dıv	(d) oution ratio vided by col. (c))
_	2012	<del>*</del>	7,943.		_2	,11	1,807			.051114
_	2011		9,725.				3,552			.037193
_	2010	2	2,867.				4,429			.010516
_	2009		3,625.		1	, 95	6,324	1.		.006965
_	2008	11	5,862.		2	, 55	9,509			.045267
2	Total of line 1, column (d)			- -	_			2		.151055
3	Average distribution ratio for the 5	-year base period - divide the total	on line 2 by 5,	or by the number	of ye	ars				
	the foundation has been in existen	ce if less than 5 years						3		.030211
4	Enter the net value of noncharitable	e-use assets for 2013 from Part X,	line 5				•	. 4		2,357,951.
5	Multiply line 4 by line 3				••			5		71,236.
6	Enter 1% of net investment incom	e (1% of Part I, line 27b)						6		1,485.
7	Add lines 5 and 6							7		72,721.
8	Enter qualifying distributions from	· · · · · · · · · · · · · · · · · · ·						8		119,125.
_	If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, line	e 1b, and comp	lete that part usin	g a 19	% tax ı	ate.			

_			T8/2			Page 4
P	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	<del>)48</del> -	- see i	nstru	ıctio	ns)
18	a 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)					
i	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%	1			<u>1,4</u>	85.
	of Part I, line 27b					
(	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 Ines 1 and 2	3			1,4	85.
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	<u> </u>		1,4	85.
6	Credits/Payments;		İ			
	a 2013 estimated tax payments and 2012 overpayment credited to 2013 6a 8,800.					
	Exempt foreign organizations - tax withheld at source					
0	Tax paid with application for extension of time to file (Form 8868)					
(	Backup withholding erroneously withheld 6d 6		l			
7	Total credits and payments. Add lines 6a through 6d	7			<u>8,8</u>	00.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here 🔀 if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			7,3	15.
	Enter the amount of line 10 to be: Credited to 2014 estimated tax ▶ 7,315. Refunded ▶	11				0.
_	art VII-A Statements Regarding Activities					
18	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene i	n			Yes	
	any political campaign?			1a		X
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the 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	d or				
	distributed by the foundation in connection with the activities.					
	Did the foundation file Form 1120-POL for this year?			1c		X
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ▶ \$ 0 • (2) On foundation managers. ▶ \$ 0 •			i		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
_	managers. ▶ \$ 0.					
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					
4.	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	NT.	/ 3	4a		Х
	of "Yes," has it filed a tax return on Form 990-T for this year?	14	/A	4b		v
J	Was there a liquidation, termination, dissolution, or substantial contraction during the year?  If "Yes," attach the statement required by General Instruction T.		• •	5		Х
£	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
U	By language in the governing instrument, or					
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state;</li> </ul>					
	remain in the governing instrument?	aw			X	
7				6	X	
•	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV			7		
Q o	Enter the states to which the foundation reports or with which it is registered (see instructions)					
Ja	MN		—			
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
U	of each state as required by General Instruction G? If "No," attach explanation			0.	x	-
٥	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calen	dar		8b	<u> </u>	<u> </u>
	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV	udi		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	•		10		X
	See any persons seed in Substitution of the following the tax year? If "Yes," attach a schedule listing their names and addresses		Eor	m <b>990</b>	DE /	
			FOIT	11 220	-66 (	ZU 13)

	1990-PF (2013) THE OLISETH FOUNDATION 41-18	<u>/5950</u>		Page 5
P	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		Х
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 ► N/A	•		
14	The books are in care of ▶ CHERYL OLSETH  Telephone no.▶612-	<del>267-3</del>	287	
	Located at ▶ 1221 W MINNEHAHA PARKWAY, MINNEAPOLIS, MN ZIP+4 ▶			
15	Section 4947(a)(1) nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041 - Check here			Т
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2013, 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	163	X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign	10	L	-
	· · · · · · · · · · · · · · · · · · ·			
P:	country ►  art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
<u></u>			V	NI-
4.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	Yes	NO
14	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?			
	(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"			
	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.)			
ı	o 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			
	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 2013?	10		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)):	İ		
á	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			İ
	before 2013?			
	If "Yes," list the years			ĺ
ł	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			ĺ
	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		
	of the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
	b	1		
3:	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
56	during the year?  — Yes X No			İ
	of "Yes," did it have excess business holdings in 2013 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 2013)  N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	48	Щ	Х
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		.	
	had not been removed from jeopardy before the first day of the tax year beginning in 2013?	4b		X

Part VIII -   Statements Regarding Activities for Which Form 4720 May Be Required   continued	Form 990-PF (2013) THE OLSETH FOUNDATION			41-18759	50	Page 6
(1) Carry on propagands, or otherwas attempt to influence/eposition (section 4945(p)?  (2) Influence the notions of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?  (3) Provide a grant to an organization other than a charitable, etc., organization described in section  509(a/1), (2), or (5), or section 494(0)(2)?  (4) Provide a grant to an organization other than a charitable, etc., organization described in section  509(a/1), (2), or (5), or section 494(0)(2)?  (5) Provide the star in sequence of the third provided in the prevention of crushly to chaften or animals?  (6) Provide a grant to an organization other than a charitable, etc., organization described in section  509(a/1), (2), or (5), or section 494(0)(2)?  (7) Provide a grant to an organization other than a charitable, etc., organization described in section  509(a/1), (2), or (5), or section 494(0)(2)?  (8) Provide a grant to an organization other than a charitable, etc., organization described in section  509(a/1), (2), or (5), or section 494(0)(2)?  (9) Provide a grant to an organization of the than a charitable, etc., organization described in section  509(a/1), (2), or (5), or section 494(0)(2)?  (9) Provide a grant to an organization of the than a charitable, etc., organization described in section  509(a/1), (2), or (5), or section 494(0)(2)?  (1) Provide a grant to an organization of the third provided in the section 594(b) or for the sec		Form 4720 May Be F	Required (contin	ued)		
(2) Influence the outcome of any specific public election (see section 4855); or to carry on, directly or indirectly, any other registration drive?  (3) Provide a grant to an individual for Sizel, study, or other similar purposes?  (4) Provide a grant to an individual for Sizel, study, or other similar purposes?  (5) Provide a grant to an individual for Sizel, study, or other similar purposes?  (6) Provide a grant to an individual for Sizel, study, or other similar purposes?  (7) Frovide a grant to an individual for Sizel, study, or other similar purposes?  (8) Provide a grant to an individual for Sizel, study, or other similar purposes?  (9) Frovide a grant to an individual for Sizel, study, or other similar purposes, or for the prevention of cruelty to distinct on a constitution of the provided of the sizely study of the grant of the provided of the sizely study of the si	5a During the year did the foundation pay or incur any amount to:					
any voter registration drive?  (3) Provide a grant to an individual for taxel, study, or other similar purposes?  (4) Provide a grant to an origination other than a charitable, etc., organization described in section  (5) Splay (1), (2), or (3), or section 4940(d)(2)?  (6) Provide for any purpose other than reliquius, charitable, scientific, literary, or educational purposes, or for the prevention of rulely to children or animals?  If any answers 'Ne' to 54 (1)(5), did any of the transactions fall to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding diseaster assistance (see instructions)?  Organizations relying on acurrent notice regarding diseaster assistance (see instructions)?  Organizations relying on acurrent notice regarding diseaster assistance (see instructions)?  Organizations relying on acurrent notice regarding diseaster assistance (see instructions)?  Organizations relying on acurrent notice regarding diseaster assistance (see instructions)?  Organizations relying on acurrent notice regarding diseaster assistance (see instructions)?  Organizations relying on acurrent notice regarding diseaster assistance (see instructions)?  If was to do, this erom 857.  If was to do, this erom 857	(1) Carry on propaganda, or otherwise attempt to influence degislation (section	n 4945(e))?	Y	es X No	ŀ	
(3) Provide a grant to an individual for taxel, study, or other smilar purposes?  (4) Provide grant to an organization other than a charibale, etc., organization described in section  509(a)(1), (2), or (3), or section 4940(d)(2)?  (5) Provide for any purpose other than relapous, charibale, scientific, literary, or educational purposes, or for the prevention of cruelty to chiefer as a smaller of the provide of the charibal scientific, literary, or educational purposes, or for the prevention of cruelty to chiefer as a season scientific, literary, or educational purposes, or for the prevention of cruelty to chiefer as a season scientific, literary, or educational purposes, or for the prevention of the chiefer as a season of the chiefer as a s	(2) Influence the outcome of any specific public election (see section 4955); o	or to carry on, directly or indire	ectly,			
(4) Provide a grant to an organization other than a charitable, etc., organization described in section  S989(3), (1), (2), or (3), or section 4940((3)(2)  (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruely to children or animals?  If any answer is "Yes" to \$4(1), old any of the transactions fall to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  Organization selving on a current notice regarding disaster assistance check here  of if the answer is "Yes" to question 54(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53.4945-5(d)  6a Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes" to 56, the Form 867.  If "Yes" to 56, the Form 867.  If "Yes" to 56, the Form 867.  If "Yes "So, the Form 867.  If "Yes "So, the Form 867.  If "Yes "So, the Form 867.  If "Yes "So, the Form 867.  If "Yes "So, the Form 867.  If "Yes "So, the Form 867.  If "Yes "So, the Form 867.  If "Yes "So, the Form 867.  If "Yes "So, the Form 867.  If "Yes "So, the Form 867.  If "Yes "So, the Son 867.  If "Yes "So, the Form 867.  If "Yes "	any voter registration drive?		🗀 Y	es X No		1
SORJA(1), (2), or (3), or section 494(0)(2)?  (5) Provide for any purpose other than relegous, charitable, scientific, iterary, or educational purposes, or for the prevention of cruely to children or animals?  b I arry answer is Yes' to Set (1)-(5), did any of the transactions fall to qualify under the exceptions described in Regulations section Scientific, 150 Section (1)-(5), did any of the transactions?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance the knee?  If the answer is Yes' to Question Sd4, does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If Yes, at attain the statement required by Regulations section 53.4845-5(d)  8a bid the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  If Yes's to 6b, file Form 8670.  If Yes's to 6b, file Form 8670.  If Yes's to 6b, file Form 8670.  If Yes's to 6b, file Form 8670.  If Yes's to 6b, file Form 8670.  It is all officers, directly or indirectly, on a personal benefit contract?  If Yes's to 6b, file Form 8670.  I	(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	es X No	ŀ	
(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 anxwer is "Yes" to Sql (1)-t3), did any of the transactions fail to qualify under the exceptions described in Regulations section 53,4945 or in a current notice regarding disaster assistance check here c if the answer is "Yes" to Sql (3) does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53,4945-5(d)  8a Bid the foundation, during the year, reverse any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes "Sol, fine Form 8870.  7a At any time during the bax year, was the foundation a party to a prohibited tax shelter transaction?  Part Viti.  Information About Officers, Directors, Trustees, Foundation Managers, Highly  1 List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (b) Tide, and average house previous descriptions and their compensation.  (c) Compensation (d) Cerebisages (e) Expense activation of the paid, eliterated on the paid, eliterated on the paid, eliterated on the paid, eliterated on the paid	(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section				
the prevention of cruelty to children or animals?  bit any answer is Yes' to Sai (1)+(5), did any of the transactions fall to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance check here  If the answer is Yes' to question Sai(4), does the foundation claim semplemon from the tax because it maintained expenditure responsibly for the grant?  If Yes and the statement required by Regulations section 53.4945-5(d)  Sa Did the foundation, duming the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If Yes's to St., the Form 8570.  If Yes's to St., the Form 8570.  If Yes's to St., the Form 8570.  If Yes's to St., the Form 8570.  If Yes's to St., the Form 8570.  It stail officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (b) Name and address  (c) Compensation (d) C	509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No		
the prevention of cruelty to children or animals?  bit any answer is Yes' to Sai (1)+(5), did any of the transactions fall to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance check here  If the answer is Yes' to question Sai(4), does the foundation claim semplemon from the tax because it maintained expenditure responsibly for the grant?  If Yes and the statement required by Regulations section 53.4945-5(d)  Sa Did the foundation, duming the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If Yes's to St., the Form 8570.  If Yes's to St., the Form 8570.  If Yes's to St., the Form 8570.  If Yes's to St., the Form 8570.  If Yes's to St., the Form 8570.  It stail officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (b) Name and address  (c) Compensation (d) C	(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or		- 1	
b If any answer is "set to Sa(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance check here  of If the answer is Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If Yes, **ratach the statement required by Regulations section 53.4945-5(d)  8 Did the foundation, during the year, exerve any fundation, directly or indirectly, on a personal benefit contract?  If Yes's to 50, the Form 870  1 If Yes's to 50, the Form 870  2 If Yes's to 50, the Form 870  1 If Yes's to 50, the Form 870  2 If Yes's to 50, the Form 870  2 If Yes's to 50, the Form 870  2 If Yes's to 50, the Form 870  2 If Yes's to 50, the Form 870  2 If Yes's to 50, the Form 870  2 If Yes's to 50, the Form 870  2 If Yes's 50, the Form 870  2 If Yes's 50, the Form 870  2 If Yes's 50, the Form				es X No	ŀ	
section S3.4945 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance check here  c if the answer is Yes' to question S3(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If Yes' are tractic the statement required by Regulations section 53.4945-5(d)  5a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If Yes' to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  If Yes' to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  If Yes' to 6b, file Form 8870.  7b Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation.  1 List all officers, directors, trustees, foundation managers and their compensation.  CHERYL A. OLSETH  PRESIDENT/TREASURER  CHERYL A. OLSETH  PRESIDENT/TREASURER  HINDERPORTED AND SEASON  I LOO O. O. O. O. O. O. O. O. O. O. O. O. O	b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit	der the exceptions described i			ŀ	-
Cryanizations relying on a current notice regarding disaster assistance check here c if the answer is 'Yes' to question Sa(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If 'Yes', 'attach the statement required by Regulations section 53.4945-5(d) But the foundation, during the year, regave any funds, directly or indirectly, to pay premiums on a personal benefit contract? If 'Yes' to 6b, the Form 8670.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  7a At any time during the tax year, was the foundation and party to a prohibited tax shelter transaction?  8b If 'Yes' to 6b, the Form 8670.  7a At any time during the tax year, was the foundation and party to a prohibited tax shelter transaction?  9a Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  1 List all officers, Directors, trustees, foundation managers and their compensation.  (b) Tite, and average to the form several account, other allowances.  CHERYL A. OLSE'TH  PRESIDENT/TREASURER  1 201 WINNEHABLA PARKWAY  MINNEAPOLIS, MN 55419  1 .00  0 .0.  0 .0.  0 .0.  0 .0.  CARREN L. SOLOMON  VICE PRESIDENT  864 SW 42ND AVE.  PORTIAND, OR 97219  1 .00  0 .0.  0 .0.  0 .0.  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee pad more than \$50,000  (b) Tite, and average to the foundation employee subjects to the transaction of the highest-paid employees (other than those included on line 1). If none, enter "NONE."  (b) Tite, and average to the foundation of the highest-paid employees (other than those included on line 1). If none, enter "NONE."  (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (d) Expanse-  1				N/A	5b	
c If the answer is Yes to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If Yes, "attach the statement required by Regulations section 53.4945-5(d)  8a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If Yes to 6b, the Form 8670.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  If Yes to 6b, the Form 8670.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  If Yes to 6b, the Form 8670.  7b If Yes to 6b, the Form 8670.  1c At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (b) Title, and average hours go position of the paid, selection of the paid, selection of the paid of	·		•	<b>▶</b> (	-	
expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53.4945-5(d)  8a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes," attach the statement required by Regulations section 53.4945-5(d)  8b Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes," It is all officers, Directors, a personal benefit contract?  If "Yes," It is all officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (b) Tide, and average (c) Compensation (fill not paid, entire).  (b) Tide, and average (c) Compensation (fill not paid, entire).  (b) Tide, and average (c) Compensation (fill not paid, entire).  (b) Tide, and average (c) Compensation (fill not paid, entire).  (b) Tide, and average (c) Compensation (fill not paid, entire).  (c) Compensation (fill not paid, entire).  (d) Compensation (fill not paid, entire).  (d) Compensation (fill not paid, entire).  (d) Compensation (fill not paid, entire).  (d) Compensation (fill not paid, entire).  (d) Compensation (fill not paid, entire).  (d) Compensation (fill not paid, entire).  (d) Compensation (fill not paid, entire).  (e) Expense (c) Compensation (fill not paid, entire).  (d) Compensation (fill not paid, entire).  (d) Compensation (fill not paid, entire).  (e) Expense (c) Compensation (fill not paid, entire).  (d) Compensation (fill not paid, entire).  (d) Compensation (fill not paid, entire).  (d) Compensation (fill not paid, entire).  (d) Compensation (fill not paid, entire).  (d) Compensation (fill not paid, entire).  (d) Compensation (fill not paid, entire).  (d) Compensation (fill not paid, entire).  (d) Compensation (fill not paid, entire).  (d) Compensation (fill not paid, entire).  (d) Compensation (fill not paid, entire).			ined			
## Vies, "attach the statement required by Regulations section \$3.4945-5(d)  5a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  b Did the foundation, during the year, year premiums, directly or indirectly, on a personal benefit contract?  ## Vies ** 16 bb, ## Form 8870*  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  ## I Vies ** 16 bb, ## Form 8870*  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  ## Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  ## Paid Employees, and Contractors    List all officers, directors, trustees, foundation managers and their compensation.    (a) Name and address   (b) Title, and average hours per week devoted to position   (c) Compensation   (d) Compe				e Die	]	
Ba Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  # Yes \ X No	• • •	•	./	58 140	- 1	
a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  if 'Yes' to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  b If 'Yes', did the foundation receive any proceeds or have any net income attributable to the transaction?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (b) Title, and average hours protected worked for a party to a prohibited tax shelter transaction?  (b) Title, and average hours protected to the transaction of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (c) Compensation (d) Consequency (c) Expense expenses (destinate compensation.  (d) Compensation (d) Consequency (d) Expense expenses (e) Expense expenses (e) Expense (e) Compensation (d) Consequency (e) Expense (e) Expense (e) Compensation (d) Consequency (e) Expense (e) Expense (e) Compensation (d) Consequency (e) Expense (e) Compensation (d) Consequency (e) Compensation (d) Consequency (e) Expense (e) Compensation (d) Consequency (e) Expense (e) Compensation (d) Consequency (e) Expense (e) Compensation (d) Consequency (e) Expense (e) Compensation (d) Consequency (e) Expense (e) Compensation (d) Consequency (e) Expense (e) Compensation (d) Consequency (e) Expense (e) Compensation (d) Consequency (e) Expense (e) Compensation (e	• • •	• •			-	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If 'Yes' to 6b, the Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  At all time during the tax year, was the foundation aparty to a prohibited tax shelter transaction?  It is all officers of the foundation About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, Trustees, foundation managers and their compensation.  (a) Name and address  (b) Tide, and average hours per week devoted to fine the first of the first o	•	pay premiums on		[ <del>V</del> ]	1	
If 'Yes' to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  If Yes', did the foundation receive any proceeds or have any net income attributable to the transaction?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (b) Tide, and average hours per week devoted to position femter -0-1 more properties.  (c) Compensation (d) Commodutions to employee steer grains for the first of the fi	·	oronnal hanafit contract?	T(			_
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  b if Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (b) Title, and average hours prevent week devoted to position of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (e) Expense account, other allowances of the position of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (g) Name and address of each employee paid more than \$50,000 (e) Others and average hours per week devoted to position (e) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000 (e) Others per week devoted to position (e) Compensation	• • • • • • • • • • • • • • • • • • • •	ersonal benefit contract?		_	DD	<u> </u>
b If Yes, did the foundation receive any proceeds or have any net income attributable to the transaction?    Part VIII	•	. b. a basa da a a a a a a a a		<b>□</b>		
Part VIII			. L Y0			
Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation.  (b) Title, and average hours per week devoted to position (if into paid, enter-in-); both position (if into paid, enter-in-); compensation (if into paid, enter-in-);					7b	
1 List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address (b) Tide, and average hours per week devoted to position (if not paid, enter -0-)  (c) Compensation (if not paid, enter -0-)  (d) Combutation to (if not paid, enter -0-)  (e) Expense the position of if not paid, enter -0-)  (e) Expense the position of if not paid, enter -0-)  (find paid, enter -0-)  (e) Compensation of if not paid, enter -0-)  (find paid, enter -0-)  (e) Expense the provided scound, other allowances  (e) Expense allowances  (e) Expense allowances  (e) Expense allowances  (find paid, enter -0-)  (find paid, enter -0-)  (if not paid, enter		ees, Foundation Ma	inagers, Highly	<b>/</b>		
(a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (t) through, enter 40-1, enter		compensation.				
CHERYL A. OLSETH PRESIDENT/TREASURER  1221 W MINNEHAHA PARKWAY MINNEAPOLIS, MN 55419  1.00 0.0.0.0.0.  KAREN L. SOLOMON S644 SW 42ND AVE. PORTLAND, OR 97219 1.00 0.0.0.0.  JON P. OLSETH SECRETARY 230 MAPLERIDGE DR. MANKATO, MN 56001 1.00 0.0.0.0.0.0.0.0.  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours prevek devoted to position  (c) Compensation  (d) Computables to employee benefit plans account, other allowances  (e) Compensation  (d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (e) Compensation  (d) Compensation employee benefit plans account, other allowances  (e) Compensation  (e) Compensation  (f) Compensat		<del> </del>	(c) Compensation	(d) Contributions to	(e) F	xpense
CHERYL A. OLSETH PRESIDENT/TREASURER  1221 W MINNEHAHA PARKWAY MINNEAPOLIS, MN 55419  1.00 0.0.0.0.0.0.  8644 SW 42ND AVE. PORTLAND, OR 97219 1.00 0.0.0.0.0.0.  JON P. OLSETH SECRETARY 230 MAPLERIDGE DR. MANKATO, MN 56001 1.00 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0	(a) Name and address	hours per week devoted	(If not paid,	employee benefit plans and deferred	accou	nt, other
1.00	CHERVI. A. OLSETH			compensation	allov	vances
MINNEAPOLIS, MN 55419  RAREN L. SOLOMON  8644 SW 42ND AVE.  PORTLAND, OR 97219  1.00  0.0.0.0.  O.JON P. OLSETH  230 MAPLERIDGE DR.  MANKATO, MN 56001  1.00  0.0.0.0.  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) hours per week devoted to position  (c) Compensation  Important of the properties o		LVESIDEMI\IVE	ASUKEK			
KAREN L. SOLOMON 8644 SW 42ND AVE. PORTLAND, OR 97219 1.00 0.0.0.  JON P. OLSETH 230 MAPLERIDGE DR. MANKATO, MN 56001 1.00 0.0.0.0.  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE (b) Title, and average hours per week devoted to position (c) Compensation (c) Compensation (d) Contributions to subject to position (d) Contributions to subject to position (e) Expense additional and deferred compensation (e) Expense additional and address of each employee paid more than \$50,000 to a subject to position of the		1 00	۱ ^	^		0
8644 SW 42ND AVE. PORTLAND, OR 97219  1.00 0.0.0.0.0.  JON P. OLSETH SECRETARY 230 MAPLERIDGE DR. MANKATO, MN 56001  1.00 0.0.0.0.0.0.  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  NONE  (c) Compensation  (d) Compensation employees (content on the position allowances)  (e) Expense account, other allowances			1	0.	_	<u> </u>
PORTLAND, OR 97219  JON P. OLSETH  SECRETARY  230 MAPLERIDGE DR.  MANKATO, MN 56001  1.00  0.0.0.0.0.0.0.0.0.0.0.0.0.0.0		ATCE LEGIDEN	T.			
JON P. OLSETH  230 MAPLERIDGE DR.  MANKATO, MN 56001  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Combutions to employee benefit plans and address of each employee benefit plans allowances		1 00				_
2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation employee benefit plans and others and others and others allowances.			0.	0.		<u> </u>
MANKATO, MN 56001  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation employee benefit plans and deferred compensation employee benefit plans and deferred compensation employees and deferred compensation employees.		SECKETARI				
2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Combutions to employee benefit plans account, other allowances  NONE  (e) Expense account, other allowances		1 00				•
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Tritle, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Expense account, other allowances	MANKATO, MIN 30001	1.00	0.	0.		<u> </u>
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Tritle, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Expense account, other allowances						
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Tritle, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Expense account, other allowances						
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Tritle, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Expense account, other allowances	2 Companyation of five highest soid and and and a state of the state o	India P. 40 M			<u> </u>	
NONE  Compensation converted to the conv	2 Compensation of live nignest-paid employees (other than those inc		enter "NONE."	(d)		
NONE	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred compensation	accou	nt, other
Total number of other employees paid over \$50,000	NONE				<u> </u>	
Total number of other employees paid over \$50,000					ŀ	
Total number of other employees paid over \$50,000		·····			<del></del>	
Total number of other employees paid over \$50,000						
Total number of other employees paid over \$50,000						
Total number of other employees paid over \$50,000						
Total number of other employees paid over \$50,000					1	
Total number of other employees paid over \$50,000						
Total number of other employees paid over \$50,000						
Total number of other employees paid over \$50,000						
	Total number of other employees paid over \$50,000	<u> </u>		<b></b>	<u> </u>	0

3 NONE

Total. Add lines 1 through 3

All other program-related investments. See instructions.

Page 8

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out chantable, etc., purposes: 2,103,665. a Average monthly fair market value of securities 290,194. 1b b Average of monthly cash balances c Fair market value of all other assets 1c 2,393,859. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 0 1c (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets 2 Subtract line 2 from line 1d 3 35,908. Cash deemed held for chantable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 2,357,951. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 117,898. Minimum investment return. Enter 5% of line 5 Part XI: Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here | and do not complete this part.) 117,898. Minimum investment return from Part X, line 6 1,485 Tax on investment income for 2013 from Part VI, line 5 2a Income tax for 2013. (This does not include the tax from Part VI.) 2b 1,485. Add lines 2a and 2b 20 116.413. Distributable amount before adjustments. Subtract line 2c from line 1 3 3 Recoveries of amounts treated as qualifying distributions 5 Add lines 3 and 4 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 116, Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 119,125. Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a b Program-related investments - total from Part IX-B 1b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 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 119,125.Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 1,485. 5 income. Enter 1% of Part I, line 27b Adjusted qualifying distributions. Subtract line 5 from line 4 6 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Form **990-PF** (2013)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI,				116 413
line 7				116,413.
2 Undistributed income, if any, as of the end of 2013			-66 605	
a Enter amount for 2012 only			66,625.	
b Total for prior years:		0.		ł
3 Excess distributions carryover, if any, to 2013:		U.		
• **				•
a From 2008				1
bFrom 2009				ĺ
c From 2010				
dFrom 2011 eFrom 2012				,
	0.			ı
f Total of lines 3a through e				
4 Qualifying distributions for 2013 from Part XII, line 4: ▶\$ 119,125.				+
a Applied to 2012, but not more than line 2a			66,625.	,
b Applied to undistributed income of prior			00,023.	
years (Election required - see instructions)		0.		,
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2013 distributable amount				52,500.
e Remaining amount distributed out of corpus	0.			32,300.
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) )				
6 Enter the net total of each column as indicated below:				ļ
& Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
b Prior years' undistributed income. Subtract		_		1
line 4b from line 2b	<del></del>	0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously		_		
assessed		0.		······
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2012. Subtract line				!
4a from line 2a. Taxable amount - see instr.	<del></del>		0.	······································
f Undistributed income for 2013. Subtract				
lines 4d and 5 from line 1. This amount must				C2 012
be distributed in 2014				63,913.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	0.			
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2008	0.			
not applied on line 5 or line 7				
9 Excess distributions carryover to 2014.	0.			
Subtract lines 7 and 8 from line 6a	- 0.	<u> </u>		
10 Analysis of line 9:				
a Excess from 2009				
b Excess from 2010 c Excess from 2011				
d Excess from 2012			}	
e Excess from 2013				
GLAUGSS HUIII 2013	····	<u> </u>		Form 000 DE (2012)

Form 990-PF (2013) THE OLS Part XIV Private Operating F	ETH FOUNDAT		LA question 9)	41-18 N/A	75950 Page 10
1 a If the foundation has received a ruling o			1-7. question 9)	N/A	<del></del>
· ·					
foundation, and the ruling is effective for				140404740) 1 140	140/1/51
b Check box to indicate whether the found		ng touridation described		4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2013	(b) 2012	Prior 3 years (c) 2011	(4) 2010	(a) Tatal
income from Part I or the minimum	(4)2013	(0)2012	(6)2011	(d) 2010	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed		<u></u>	<u>_</u>		
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 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(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)					
(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 Info	rmation (Comple	ete this part only	if the foundation	n had \$5,000 or mo	ore in assets
at any time during t					
1 Information Regarding Foundatio				<del></del>	<del></del>
a List any managers of the foundation who year (but only if they have contributed m	have contributed more	than 2% of the total cont section 507(d)(2).)	ributions received by th	e foundation before the clos	se of any tax
NONE					
b List any managers of the foundation who other entity) of which the foundation has	o own 10% or more of the a 10% or greater intere	ne stock of a corporation st.	(or an equally large port	ion of the ownership of a pa	artnership or
NONE	<del>-</del>				
2 Information Regarding Contributi	on Grant Gift Loon	Cabalarahin eta D			
Check here ► X if the foundation o the foundation makes gifts, grants, etc. (	nly makes contributions	to preselected charitable	organizations and does	not accept unsolicited requi	ests for funds. If
					<u>u.</u>
a The name, address, and telephone numb	Der or e-mail address of 1	the person to whom appl	cations should be addre	essed:	
b The form in which applications should b	e submitted and informa	tion and materials they sl	nould include:		<del> </del>
c Any submission deadlines:					
d Any restrictions or limitations on awards	, such as by geographic	al areas, charitable fields,	kınds of institutions, or	other factors:	··· <del>-</del>

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation status of recipient Purpose of grant or contribution show any relationship to **Amount** any foundation manager Name and address (home or business) or substantial contributor a Paid during the year ALZHEIMER'S ASSOCIATION OF MINNESOTA N/A PC OPERATING 7900 WEST 78TH ST. SUITE 100 MINNEAPOLIS, MN 55435 10,000. BEYOND BALLROOM DANCE COMPANY N/A ÞС OPERATING 5315 OLIVER AVENUE SOUTH MINNEAPOLIS, MN 55419 1,000. CADA HOUSE - COMMITTEE AGAINST N/A РC OPERATING DOMESTIC ABUSE 100 STADIUM COURT MANKATO, MN 56001 2,500. CEASEFIRE OREGON EDUCATION FOUNDATION N/A ÞС OPERATING 7327 SW BARNES ROAD, #316 PORTLAND, OR 97225 1,000. ECHO FOOD SHELF N/A PC OPERATING 1014 SOUTH FRONT STREET MANKATO, MN 56001 2,500. SEE CONTINUATION SHEET(S) **▶** 3a Total 110,000. **b** Approved for future payment NONE Total 0.

## Part XVI-A Analysis of Income-Producing Activities

Enter gros	s amounts uniess otherwise indicated.	Onicial	od business income		ued by section 512, 513, or 514	(e)
1 Progra	m service revenue;	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a						
b						
C		-				
d						
e —			<u> </u>			
, —						
a Fee	s and contracts from government agencies					
	ership dues and assessments		<u>,                                    </u>		····	
	t on savings and temporary cash				- 10	
investr				14	2 570	
	ds and interest from securities			14		
	tal income or (loss) from real estate:		Targettal and Amilia		45,500.	Secretary to the second
		3 , 5	A TOTAL OF THE STATE OF THE STA		and the state of the state of the state of the	10 COMP 16 K BATAN 1
	t-financed property	ļ		-	•	
	debt-financed property	-		ļ		
	tal income or (loss) from personal	1				
proper	~					
	vestment income			L		
	(loss) from sales of assets other					
than in	-			18	113,503.	
	ome or (loss) from special events			<u> </u>		
10 Gross p	profit or (loss) from sales of inventory					
11 Other r	evenue:	1				
a						
b						
C _			-			
d			-			
е	<del></del>					<del></del>
12 Subtota	al. Add columns (b), (d), and (e)	, =	0.	3.	161,441.	0.
	Add line 12, columns (b), (d), and (e)		·		13	161,441.
	sheet in line 13 instructions to verify calculations.)	•	•		··-	
_	<u> </u>	- 11 A			. 5	
Part X	VI-B Relationship of Activities to	o tne Acc	omplishment of Ex	kemp	t Purposes	
Line No.	Explain below how each activity for which incor	ne is renorted	in column (e) of Part XVI-A	contrib	uited importantly to the accord	nnishment of
▼	the foundation's exempt purposes (other than t	ov providina fi	nds for such purposes).		old importantly to the accor	inpromisint of
	N/A	-,,,				<del></del>
			<u>_</u>			
			-			
						<del></del> -
<del></del> -					-	
			<del></del>			
						<del></del>
			7-20.			•
			.,			
	-		· · ·			
	<del></del>					

Part XVII			fers To a	nd Transactions	and P	elations	hips With No	ncharitab		ige is
4 0 4 4 5	Exempt Organ					<del></del>	504()		W	Al-
	organization directly or indirectly or indirectly						ion 501(c) of		Yes	NO
	e (other than section 501(c) s from the reporting founda				mizauon	; <i>*</i>				
(1) Casi		ilion to a noncharitati	e exempt or a	atiization oi.				10/1	, <del> </del>	X
• •	er assets	•	•					. 1a(1		X
b Other tra					-	•		1a(2	<del>' </del>	<del></del>
	es of assets to a noncharital	hle evemnt organizati	on.					1b(1	·	Х
	chases of assets from a noi							1b(2	_	X
	tal of facilities, equipment,	<u>.</u>	gumzanom .				•	1b(3	<del>'</del>	X
	mbursement arrangements	or other associa				•	•	1b(4	_	X
	ns or loan guarantees						-	1b(5	_	X
	formance of services or me	mbership or fundraisi	ına solicitatior	· . ns		• •	•	1b(6	_	X
	of facilities, equipment, ma	•	-		•	-		10	1	X
-	swer to any of the above is	<u> </u>		•	lwavs sh	ow the fair i	market value of the o	noods, other as	sets.	
	es given by the reporting fo								,	
	(d) the value of the goods,					•				
(a)Line no	(b) Amount involved	(c) Name of	noncharitable	exempt organization		d) Description	n of transfers, transaction	ons, and sharing a	rrangeme	ents
			N/A							
						-				
					ļ		·			
		· · · · · · · · · · · · · · · · · · ·			_					
	<del></del>	· .								
		·		<del></del> .						
								<del></del>		
			_		_		<del></del>			
			<del></del>	<del></del>	ļ					
	undation directly or indirect	=			nizations	described		П.,	TV	٦.,
	n 501(c) of the Code (other		(3)) or in secti	on 52/?	-			Yes		No
b It Yes,	complete the following sche (a) Name of org			(b) Type of organization	_		(c) Description of re	lahanahin		
	N/A	ankauon		(b) Type of organization	+		(c) Description of re	Haudiship		
	N/A				+					
					+					
				<del></del>	+	<del></del>	<u> </u>			
	<del>_</del> -	• •			+					
Unde	er penalties of perjury, I declare	that I have examined this	retum, including	accompanying schedules an	d stateme	nts, and to the	best of my knowledge			
	belief, in the true, correct, and con				rmation of		r has any knowledge.	May the IRS return with the shown below	he prepar w (se <u>e ins</u>	er
<u>                                   </u>	gnature of officer or trustee			Date		tle	<del></del>	-[	<u> </u>	_ 140
	Print/Type preparer's na	me I	Preparer's sign		Date	1	Check if	PTIN		
	CHRISTOPHE		11	1 11/		14/14	self- employed			
Paid	SCHAEFER		(Mustan	hu Dehanh	3/	14/14		P0044	5938	
Preparer Use Only	Firm's name ►DEL	OITTE TAX	LLP				Firm's EIN			
USG OIIIY	Firm's address ▶ 50			REET, SUITE	280	0	<del> </del>			
	IM	NNEAPOLIS	, MN 5	5402-1844			Phone no. 61	2-397-	4000	

THE OLSETH FOUNDATION

Part XV | Supplementary Information

Part XV Supplementary Information Grants and Contributions Paid During the			<del></del>	т
Recipient	If recipient is an individual,	<del></del>	<del></del>	<del> </del>
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	Of Substantial Contributor	rooipiant		
CORREGIES FOREVER TWO	7.7		2222	
FORESTS FOREVER INC. P.O. BOX 1320	N/A	PC	OPERATING	
OREGON CITY, OR 97045				1,000
<del></del>			<del> </del>	,
PRIENDS OF THE HENNEPIN COUNTY	N/A	PC	OPERATING	
LIBRARY				
300 NICOLLET MALL, SUITE N-290				
MINNEAPOLIS, MN 55401		<del> </del>	<del></del>	1,000
GIANNA HOMES	N/A	PC	OPERATING	1
4605 FAIRHILLS ROAD				
MINNETONKA, MN 55435		<del> </del>		2,000
GREATER MANKATO AREA UNITED WAY	N/A	PC	OPERATING	
101 N. 2ND STREET #100				
MANKATO, MN 56001				2,500
HISTORY THEATRE	N/A	₽C	OPERATING	
30 10TH STREET	,	<b>[</b>	DI BRATTING	
ST. PAUL, MN 55101				1,000
	L			
KLAMATH SISKIYOU P.O. BOX 102	N/A	₽C	OPERATING	
ASHLAND, OR 97250				1,500
<del></del>	<del></del>	<del></del>	<del></del>	
MACPHAIL CENTER FOR MUSIC	N/A	PC	OPERATING	
501 SOUTH SECOND STREET MINNEAPOLIS, MN 55401				500
AIMMENFOLIS, MY 33401		<del> </del> -		300
MANKATO AREA FOUNDATION	N/A	PC	OPERATING	
1560 ADAMS STREET, STE 2				
MANKATO, MN 56001		<u> </u>		3,500
MEALS ON WHEELS PEOPLE	N/A	₽C	OPERATING	1
7710 SW 31ST AVE.				
PORTLAND, OR 97219		<del> </del>		1,000
METRO MEALS ON WHEELS	N/A	₽C	OPERATING	
1200 WASHINGTON AVE. S. SUITE 380				
MINNEAPOLIS, MN 55415				1,000
Total from continuation sheets				93,000

THE OLSETH FOUNDATION

Part XV | Supplementary Information

Part XV Supplementary Information			<del> </del>	
3 Grants and Contributions Paid During t	<del></del>		×	
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Maine and address (nome of business)	or substantial contributor	recipient		<del></del>
MN ORCHESTRA ASSOCIATION	N/A	₽C	OPERATING	
1111 NICOLLET MALL				
MINNEAPOLIS, MN 55403		-		10,000.
OREGON FOOD BANK	N/A	₽C	OPERATING	
PO BOX 55370				
PORTLAND, OR 972385370		<u> </u>		5,000.
		1		
PARENT CONNECTION	N/A	PC	OPERATING	
3701 W 49TH ST., SUITE 102	17-5			
SIOUX FALLS, SD 57106				1,000.
	-			
DI MATER DARRIMIZACO	7/2		ODED A STANCE	
PLANNED PARENTHOOD 671 VANDALIA STREET SUITE 323	N/A	₽C	OPERATING	
ST. PAUL, MN 55114				5,000.
<u> </u>	<del>-  </del>			<del>                                     </del>
RIVERLAND COMMUNITY COLLEGE	N/A	PC	OPERATING	
1900 8TH AVENUE NW AUSTIN, MN 55912				2,500.
ROBITA, MA 33312			<del>                                     </del>	2,300.
SECOND HARVEST HEARTLAND	N/A	₽C	OPERATING	
1140 GERVAIS AVENUE				2 200
ST PAUL, MN 551092020		+		3,000.
SHEPHERD OF THE HILLS	N/A	₽C	OPERATING	
500 BLAKE ROAD SOUTH				
HOPKINS, MN 55343				20,000.
SHRINERS INTERNATIONAL	N/A	₽C	OPERATING	
2900 ROCKY POINT DRIVE				
TAMPA, FL 33607		ļ		1,000.
SOUTHWEST NEIGHBORHOODS	N/A	₽C	OPERATING	
7688 SW CAPITOL HWY				
PORTLAND, OR 97219		<u> </u>		3,500.
		1		
THE LIBRARY FOUNDATION	N/A	₽C	OPERATING	
620 SW 5TH AVENUE, STE 1025	N/ 63		Or mich the	
PORTLAND, OR 97204		1		3,000.
Total from continuation sheets				

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y				
Recipient Name and address (home as business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		<del>_</del>
WORLD WILDLIFE FUND	N/A	PC	OPERATING	
1250 TWENTY-FOURTH STREET NW			İ	
WASHINGTON, DC 200907180	<del> </del>	<u> </u>	+	3,000
CHILDREN'S MUSEUM OF MINNESOTA	N/A	PC	OPERATING	
PO BOX 3103				
MANKATO, MN 56002				1,500
MINNEAPOLIS INSTITUTE OF ARTS	N/A	₽C	OPERATING	
2400 THIRD AVENUE SOUTH	N/A		DPERATING	
MINNEAPOLIS, MN 55404				1,000
MINNESOTA STATE UNIVERSITY MANKATO	N/A	₽C	OPERATING	
FOUNDATION				
224 ALUMNI FOUNDATION CENTER				1 50
MANKATO, MN 56001	· · · · · · · · · · · · · · · · · · ·			1,500
OREGON WILD	N/A	PC	OPERATING	
5825 NORTH GREELEY				
PORTLAND, OR 97217				5,000
PLANNED PARENTHOOD COLUMBIA	N/A	PC	OPERATING	
WILLAMETTE 3727 NE MARTIN LUTHER KING JR. BLVD.				
PORTLAND, OR 97212				3,00
RIVERDALE DISTRICT SCHOOL FOUNDATION	N/A	₽C	OPERATING	
PO BOX 69015 PORTLAND, OR 97239				2,000
MANKATO AREA PUBLIC SCHOOLS	N/A	PC	OPERATING	
PO BOX 8741				
MANKATO, MN 56002				7,000
<u> </u>			<del> </del>	
Total from continuation sheets	<u>.l.</u>	<u> </u>		<del> </del>

FORM 990-PF INTEREST ON SAVINGS		AND TEMPORAR	Y CASH	INVESTMENTS	STATEMENT	1	
SOURCE		(A) REVENUE PER BOOKS	NET	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME		
RBC CAPITAL MARKETS, L	-	2,570	2,570. 2,570.				
TOTAL TO PART I, LINE	3	2,570	2,570. 2,570.				

FORM 990-PF	DIVIDENDS	AND INTEREST	FROM SECUR	ITIES S	TATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	
RBC CAPITAL MARKETS, LLC	45,368.	0.	45,368.	45,368.	
TO PART I, LINE 4	45,368.	0.	45,368.	45,368.	

FORM 990-PF	ACCOUNTI	NG FEES	S'	TATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	9,100.	0.		9,100.
TO FORM 990-PF, PG 1, LN 16B	9,100.	0.		9,100.

FORM 990-PF	TAX	ES	S'	FATEMENT 4
DESCRIPTION	(A)	(B)	(C)	(D)
	EXPENSES	NET INVEST-	ADJUSTED	CHARITABLE
	PER BOOKS	MENT INCOME	NET INCOME	PURPOSES
MN ATTORNEY GENERAL FEE	25.	0.		25.
FOREIGN TAX PAID	914.	914.		0.
TO FORM 990-PF, PG 1, LN 18	939. 914			25.

FORM 990-PF	OTHER E	XPENSES	S	PATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
RBC MANAGEMENT FEES	12,062.	12,062.		0.
TO FORM 990-PF, PG 1, LN 23	12,062.	12,062.		0.

FORM 990-PF CORPORATE STOCK		STATEMENT 6
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
MEDTRONIC	24,873.	1,100,683.
TOTAL TO FORM 990-PF, PART II, LINE 10B	24,873.	1,100,683.

FORM 990-PF OTHER	INVESTMENTS		STATEMENT 7
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
OTHER INVESTMENTS - SEE STATEMENT A	COST	1,065,072.	1,204,308.
TOTAL TO FORM 990-PF, PART II, LINE	13	1,065,072.	1,204,308.



LORD ABBETT ALPHA STRATEGY FD CL F		FIDELITY ADVISOR NEW INSIGHTS FD CL I	LNE	MID CAP VALUE FD INV SHS	HARTISAN FDS INC	Opescription	US EQUITIES	
ALFFX		FINSX			ARTQX	SYMBOL/CUSIP		
2,108.712		3,750.018			2,475.313	QUANTITY		
\$32.140		\$26.760			\$27.000	MARKET PRICE		
\$67,774.00		\$100,350 48			\$66,833.45	MARKET VALUE		
Purchase	Reinvest	Purchase	Reinvest	Purchase		:		
\$51,477.81 \$44,500.00	\$12,337.99	\$84,337.99 \$72,000.00	\$6,965.46	\$44,500.00	\$51,465.46	NET COST •		
\$16,296.19 \$15,505.82	\$520 67	\$16,012.49 \$15,491.82	\$1,473.06	\$13,894 92	<b>\$</b> 15,367.99	UNREALIZED GAIN/LOSS * AN		
\$2,813.02		\$78.952	957 857	.18. 10∖	\$579.\$25	UNREALIZED ESTIMATED	тэго эн	т





## INVESTMENT ACCESS ACCOUNT STATEMENT WITH RBC ADVISOR 2013 ANNUAL STATEMENT

A division of RBC Capital Markets, LLC, Member NYSE/FINRA/SIPC

US EQUITIES (continued)			MARKET	MARKET			UNREALIZED	UNREALIZED ESTIMATED
DESCRIPTION	STMBOL/COSIF	GUANILLA	YKICE.	VALUE	Reinvest	\$6,977.81	\$790 36	UALIZED INCOME
TORTOISE MLP FUND INC	NTG	1,500.000	\$27.350	\$41,025.00		\$36,331.25	\$4,693.75	\$2,512.50
VANGUARD INDEX FUNDS VANGUARD MID-CAP ETF	00	150 000	\$110.020	\$16,503.00		\$11,311 50	\$5,191 50	\$191.10
VANGUARD INDEX FUNDS VANGUARD SMALL-CAP ETF	8A	200.000	\$109.950	\$21,990 00		\$14,691.49	\$7,298.51	\$284.40
VANGUARD SPECIALIZED FUNDS VANGUARD DIVIDEND APPRECIATION ETF	אוט	375.000	\$75 240	\$28,215.00		\$20,815.53	\$7,399 47	\$520.50
TOTAL US EQUITIES			į.	\$342,690.93		\$270,431 03	\$72,259.90	\$6,979 49
INTERNATIONAL EQUITIES								
DESCRIPTION	SYMBOL/CUSIP	QUANTITY	MARKET PRICE	MARKET VALUE		NET COST •	UNREALIZED GAIN/LOSS * ANI	ESTIMATED ANNUALIZED INCOME
MFS SER TR X INTERNATIONAL DIVERSIFICATION FUND CL I	MDIJX	6,383.113	\$16.580	\$105,832.01	Purchase	\$85,044.58 \$82,500.00 \$2,544.58	\$20,787.43 \$20,479.39	\$1,117.04
TOTAL INTERNATIONAL EQUITIES				\$105,832.01		\$85,044.58	\$20,787.43	\$1,117.04
TAXABLE FIXED INCOME	GENERAL CHIEF	Y TEN	MARKET	MARKET VALUE/		FOC	UNREALIZED	ESTIMATED
DWS PORTFOLIO TR	DFRPX	6,125.125	\$9 460	\$57.943.68		\$57.181.27		\$2.499.05
FLTG RATE FD CL S					Purchase Reinvest	\$52,347.80	\$693.93	THE
HARTFORD MUT FDS INC WORLD BD FD CL I	HWDIX	2,343.319	\$10.590	\$24,815.75	Purchase	\$25,257.89 \$25,000.00	-\$442.14 -\$440.63	\$283.54T
9					Reinvest	\$257.89	-\$1.50	Ή
DOWS ULTRA-SHORT DURATION TFD CL S	SDUSX	8,019.542	\$9.040	\$72,496.66	Purchase	\$71,857.45 \$71,483.10	\$639.21 \$638.24	\$1,924,69d NN NN 1,924,69d
MENT A					Keinvest	3374 33	36.36	0ATION 875950



70.	A TO	≅ ∃ ≣M∋TAT	0.	N I	등	\$	무공	DES	M	70	SUB MO	₩CCT	DES	(cor
TOTAL OTHER ASSETS	ZLOCORR INVT TR >MANAGED FUTURES STRATEGY FD I	OTHER ASSETS	TOTAL MIXED ASSETS	THORNBURG INVT TR INVT INCOME BUILDER FD CL I	CLOBAL FD INSTL CL	IVY ASSET STRATEGY I	FIRST EAGLE GLOBAL FUND	DESCRIPTION	MIXED ASSETS	TOTAL TAXABLE FIXED INCOME ESTIMATED ACCRUED BON	BANK AMERICA CORP SUB NOTES MOODY BAA3 S&P B	CITIGROUP INC GLOBAL SUB NOTE MOODY BAA3 S&P BBB+	DESCRIPTION	TAXABLE FIXED INCOME (continued)
ER ASSE	TURES ST	25	D ASSET	BUILDER	ASTL CL	RATEGY I	GLOBAL F	!	Z	AL TAXABLE FIXED INCOME ESTIMATED ACCRUED BOND INTEREST	ZA CORP 3 S&P BBB+	IC NOTE S&P BB		XED INC
2	RATEGY		S	FD CL I			ÜND			CRUED B	<b>88</b> +	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		OME
	FD -									OND INT				
										EREST	060 CPN: 5.250% DUE 12/01/2015 DTD. 11/18/2003 BOOK ENTRY ONLY	1729 CPN 4.875% DUE 05/07/2015 DTD 05/07/2003 BOOK ENTRY ONLY		
		SYMB						SYMB			060 50% 1/2015 18/2003 TRY ONLY	172 75% 7/2015 07/2003 TRY ONLY	SYMB	
	LFMIX	SYMBOL/CUSIP		TIBIX	GLBIX	IVAEX	SGIIX	SYMBOL/CUSIP			060505BC8 15 003	729678W0 15 003 NLY	SYMBOL/CUSIP	
	8,0	۵		11,5	7,3	6	2,5	۵		66,4	25,0	25,0	٥	
	8,021.501	QUANTITY		11,562.096	7,343 439	606.322	2,527.236	QUANTITY		66,487.986	25,000.000	25,000.000	QUANTITY	
	~	3		\$2	\$1.	\$3.	\$5	z			<b>\$</b> 10:	\$10	3	
	\$8.340	MARKET PRICE		\$21 040	\$11.130	\$32.280	\$53.820	MARKET PRICE			\$107.266	\$104.907	MARKET PRICE	
\$66,	\$66		\$480,	\$243	\$81	\$19	\$136			\$208,; \$	\$26 1	\$26 \$	MARKET VALUE/ ACCRUED INTEREST	
\$66,899.32	\$66,899.32	MARKET VALUE	\$480,586.89	\$243,266.50	\$81,732 48	\$19,572.07	\$136,015.84	WARKET VALUE		\$208,299.34 \$292.19	\$26,816.50 \$109.38	\$26,226.75 \$182.81	T VALUE/	
	Purchase Reinvest			Purchase Reinvest	Purchase Reinvest	Purchase Reinvest	Purchase Reinvest							
	hase vest			hase vest	hase vest	hase vest	hase vest							
\$72,5	\$72, \$72,	NE	\$431,626.63	\$218, \$195, \$23,	\$76. \$67, \$9,	\$15, \$15,	\$121, \$110, \$11,	NE		\$205,	\$25,	\$25,	Z,	
\$72,515.96	\$72,515.96 \$72,500.00 \$15.96	NET COST •	526,63	\$218,090.03 \$195,000.00 \$23,090.03	\$76,198.40 \$67,000.00 \$9,198.40	\$15,757.34 \$15,000.00 \$757.34	\$121,580.86 \$110,500.00 \$11,080.86	NET COST •		\$205,453.86	\$25,684.50	\$25,472.75	NET COST •	
-\$5,	-\$5 -\$5	GAIR	\$48,	\$25 \$23 \$2	\$5 \$5	. S S	\$14 \$13	GAIR		<b>\$</b> 2,	51		GAIR	
-\$5,616.64	-\$5,616.64 -\$5,615.79 -\$0.84	UNREALIZED GAIN/LOSS *	\$48,960.26	\$25,176.47 \$23,121.15 \$2,055.31	\$5,534 08 \$5,364.13 \$169.94	\$3,814.73 \$3,615.90 \$198.82	\$14,434.98 \$13,584.37 \$850 60	GAIN/LOSS ,		\$2,845.48	\$1,132.00	\$754.00	UNREALIZED GAIN/LOSS •	
			\$12	\$1:				ESTIMATED ANNUALIZED INCOME		\$7	<b>~</b>	بد	ESTIMATED ANNUALIZED INCOME	
	2950 1000	.AQNUO: \\$1-14	,752.65 <u>m</u> ±	\$11,966.77 TH	\$668.25	\$117.63		DINCOME		\$7,238.53	\$1,312.50	\$1,218.75	STIMATED D INCOME	