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#### Form **990-PF**

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 <a href="https://www.irs.gov/form990pf">www.irs.gov/form990pf</a>

For	calendar year 2013 or tax year beginning		, and ending	<u> </u>	
Nar	me of foundation			A Employer identification	n number
J	AMES D LESLIE FAMILY FOUN		41-1918212		
	nber and street (or P O box number if mail is not delivered to street a	ddress)	Room/suite	B Telephone number	
	75 KOKESH FARMS RD	952-473-93			
-	/ or town, state or province, country, and ZIP or foreign p APLE PLAIN, MN 55359–978(			C If exemption application is p	ending check here
	Check all that apply Initial return		ormer public charity	D 1 Foreign organization	is, check here
u	Final return	Amended return	mile public charry		,
	X Address change	Name change		2 Foreign organizations m check here and attach or	eeting the 85% test, omputation
H C	Check type of organization. $X$ Section 501(c)(3) ex			E If private foundation st	
		Other taxable private founda		under section 507(b)(1	
	ur market value of all assets at end of year J Accounti	ng method X Cash ther (specify)	Accrual	F If the foundation is in a under section 507(b)(1	
	om Part II, col. (c), line 16) •\$ 907,078. (Part I, colu		asıs )		)(D), Check here
	rt   Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disburseme
	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) )	expenses per books	Income	income	for charitable purp (cash basis on
	1 Contributions, gifts, grants, etc., received	206,919.		N/A	<del> </del>
	2 Check if the foundation is not required to attach Sch B interest on savings and temporary	-			<del> </del>
	Cash investments     Dividends and interest from securities	11,946.	11,946.		STATEMEN
	5a Gross rents		,		
	b Net rental income or (loss)				
ø	6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	<7,779.>			STATEMEN
evenue	b Gross sales price for all 459,832.		68,746.		-
Rev	7 Capital gain net income (from Part IV, line 2)  8 Net short-term capital gain	-	00,740.		
	9 Income modifications				1
	Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss)				
	11 Other income 12 Total Add lines 1 through 11	211,086.	80,692.		4
	13 Compensation of officers, directors, trustees, etc	0.	0.		†
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
ses	16a Legal fees b Accounting fees STMT 3	1,550.	775.		
Ç	b Accounting fees STMT 3 c Other professional fees STMT 4	2,782.	2,782.		+
ē Ē	17 Interest				
rativ	18 Taxes STMT 5	3,668.	362.		
Administrative Expense	19 Depreciation and depletion RECEIVED				+
Ē	20 Occupancy				-
_	21 Travel, conferences and meetings 22 Printing and publications JUN 1 8 2014	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	······································		
gar	22 Printing and publications JUN 1 8 2014 23 Other expenses 24 Total operating and administrative expenses Add lines 13 through 23	တ်			
atın	24 Total operating and administrative				
Operating and	expenses Add lines 13 through 23	8,000.	3,919.		117,0
	25 Contributions, gifts, grants paid	117,000.			+ + + + / , '
	26 Total expenses and disbursements Add lines 24 and 25	125,000.	3,919.		117,
32350 10-10	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	86,086.			
5	b Net investment income (if negative enter -0-)		76,773.	37 / 3	
,	c Adjusted net income (if negative enter -0-)	j		N/A	Form <b>990-P</b>

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	art	Balance Sheets Attached schedules and amounts in the description '	Beginning of year	End of	year
Ц	arı	column should be for end of year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	3,783.	53,029.	53,029.
	2	Savings and temporary cash investments	28,704.	21,546.	53,029. 21,546.
		Accounts receivable			
		Less: allowance for doubtful accounts			
	4	Pledges receivable ►			
		Less allowance for doubtful accounts ▶			· · · · · · · · · · · · · · · · · · ·
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	ľ	disqualified persons			
	7	_			
		Less: allowance for doubtful accounts			
10	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments - U.S. and state government obligations			
	I	Investments - corporate stock STMT 6	580,165.	567,921.	706,497.
	1	Investments - corporate bonds STMT 7	62,777.	118,949.	125,858.
	i .	Investments land buildings and equipment basis			
	''	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis			
		Less accumulated depreciation			
	15	Other assets (describe ► DIVIDEND RECEIVABLE)	162.	148.	148.
	16	Total assets (to be completed by all filers - see the		1.00	<u> </u>
		instructions. Also, see page 1, item 1)	675,591.	761,593.	907,078.
	17	Accounts payable and accrued expenses	84.		
	18	Grants payable			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abil	21	Mortgages and other notes payable			
ت	22	Other liabilities (describe )			
					+
	23	Total liabilities (add lines 17 through 22)	84.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31			
ces	24	Unrestricted			
au	25	Temporarily restricted			
Net Assets or Fund Balances	26	Permanently restricted			
Pun		Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.		,	
ts	27	Capital stock, trust principal, or current funds	0.	0.	
sse	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
Ę	29	Retained earnings, accumulated income, endowment, or other funds	675,507.	761,593.	
Š	30	Total net assets or fund balances	675,507.	761,593.	
			675,591.	761,593.	
_		Total liabilities and net assets/fund balances		701,393.1	
P	art	Analysis of Changes in Net Assets or Fund Ba	lances		
_	Total	net assets or fund balances at beginning of year - Part II, column (a), line 3	- ·		
		it agree with end-of-year figure reported on prior year's return)	JO		675,507.
		amount from Part I, line 27a		2	86,086.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	761,593.
		eases not included in line 2 (itemize)		5	0.
	Total	6	761,593.		

Part IV Capital Gains an	d Losses for Tax on In	vestment	Income						
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)  (b) How acquired P - Purchase D - Donation			w acquired Purchase Donation	(c) Date acquir (mo., day, yr					
1a PUBLICLY TRADED	SECURITIES								
b CAPITAL GAINS DI	VIDENDS								
С				<u> </u>					
<u>d</u>	<del></del>			ļ					
e				<u></u> _					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) Gain or (e) plus (f) m	inus (g)		
a 449,252.			391,08	6.			58,166.		
b 10,580.							10,580.		
С	· <u></u>						<del></del>		
d		<del> </del>							
e		the foundation	00.10/21/00						
Complete only for assets showing g						<ol> <li>Gains (Col (h)</li> <li>(k), but not lest</li> </ol>			
(i) F M.V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (i)		•	Losses (from			
	43 01 12/01/00		(1), 11 ally	-			58,166.		
a							10,580.		
b							10,500.		
C	<del></del>	·		-: -			*****		
d							· · · · · · · · · · · · · · · · · · ·		
e	C 16	D I. I	7	$\neg \vdash$					
2 Capital gain net income or (net capital	al loss) $ \begin{cases} \text{If gain, also enter} \\ \text{If (loss), enter -0} \end{cases} $	r in Part I, line I- in Part I, line	7	<u>}</u>	2		68,746.		
3 Net short-term capital gain or (loss)		ıd (6):							
If gain, also enter in Part I, line 8, col	lumn (c).			<b> </b>	,	N	I/A		
If (loss), enter -0- in Part I, line 8  Part V   Qualification Unc	ler Section 4940(e) for	Reduced	Tax on Net	nvesi	ment Inc	ome	/ A		
If section 4940(d)(2) applies, leave this  Was the foundation liable for the section  If "Yes," the foundation does not qualify  There the appropriate amount in each	1 4942 tax on the distributable amunder section 4940(e). Do not co	mplete this pai	rt			_	Yes X No		
(a)	(b)		<u> </u>	(c)			(d) Distribution ratio		
Base period years Calendar year (or tax year beginning i	Adjusted qualifying dis	tributions	Net value of no	ncharita		;   (col. (t	b) divided by col (c))		
2012	6	2,594.			31,261		.099157		
2011	3	4,505.		4	72,194				
2010		3,481.			355,048		.066135		
2009		9,125.	_		307,248		.029699		
2008	1	0,275.		3	344,476		.029828		
2 Total of line 1, column (d)						2	.297893		
3 Average distribution ratio for the 5-ye the foundation has been in existence		on line 2 by 5,	or by the number	of years		3	.059579		
4 Enter the net value of noncharitable-use assets for 2013 from Part X, line 5			4	830,641.					
5 Multiply line 4 by line 3			5	49,489.					
6 Enter 1% of net investment income (	1% of Part I, line 27b)					6_	768.		
7 Add lines 5 and 6						7	50,257.		
8 Enter qualifying distributions from Pa If line 8 is equal to or greater than lin		th and comp	late that part using	n a 10/.+	av rate	8	117,800.		
See the Part VI instructions	e 7, GRECK THE DUX III FAIT VI, IINE	- 10, and comp -	note mat part using	yα 1/0 t	<u>αλ Γαις</u>		Form <b>990-PF</b> (2013		

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	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se	ee insi	truc	lions	<u>'</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here   and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)	<del></del>			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%				58.
	of Part I, line 27b				- 1
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			7/	0.
3	Add lines 1 and 2				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			7.	58.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-				
6	Credits/Payments 2013 estimated tax payments and 2012 overpayment credited to 2013 680.				
	20 to communication by months and 20 to companions of contract to the contract				
	Exempt foreign organizations - tax withheld at source  6b				
	Tax paid with application for extension of time to file (Form 8868)  Backup withholding erroneously withheld  6d				
	July 1			61	30.
/	Total credits and payments. Add lines 6a through 6d  Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached.				1.
ď	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed				39.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
11	Enter the amount of line 10 to be. Credited to 2014 estimated tax				
_	rt VII-A   Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in			Yes	No
	any political campaign?		1a		X
b	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 or			ĺ	
	distributed by the foundation in connection with the activities	L			
С	Did the foundation file Form 1120-POL for this year?		1c		<u>X</u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				İ
	(1) On the foundation ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0 .		ŀ		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			- 1	
	managers. ► \$0 .	L			لــــا
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	F	2		<u> </u>
	If "Yes," attach a detailed description of the activities	1			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	ļ.			<del>_</del>
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	<del> </del>	3		$\frac{x}{x}$
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?  If "Yes" has it filed a tay return on Form 990-T for this year?	— <u></u>	4a		
	in res, has it filed a tax retain on roth 350 r for the year	^	4b 5		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	<b></b>			<del>^</del> _
^	If "Yes," attach the statement required by General Instruction T  Are the requirements of coston 509(a) (relating to sections 4941 through 4945) satisfied either:			]	
b	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				į
	<ul> <li>By language in the governing instrument, or</li> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law</li> </ul>				
	remain in the governing instrument?	-	6	х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		7	х	
'	2.0 the foundation have at four φορούς in accord at any time during the year. If Tes, Complete Fart II, Cor (c), and Fart Av		$\neg$		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)		- 1		
	MN				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	L			
	of each state as required by General Instruction G? If "No," attach explanation		8b	Х	
9	is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	L			
	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV	L	9		<u>X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes" attach a schedule listing their names and addresses		10		X
		Form	990	·PF (	2013)

b If "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)

had not been removed from jeopardy before the first day of the tax year beginning in 2013?

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

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

3b

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Yes X No

N/A

during the year?

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Part VII-B   Statements Regarding Activities for Which F		Required (contin	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	n 4945(e))?	Y	es X No	] ]
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir	ectly,		
any voter registration drive?		Y	es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?	Y	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	for			
the prevention of cruelty to children or animals?		Y	es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described	ın Regulations		
section 53 4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	ere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for	rom the tax because it mainta	uned	ľ	
expenditure responsibility for the grant?	I.	N/A Y	s No	
If "Yes," attach the statement required by Regulations section 53 4945	i-5(d)			
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?		Ye	s X No	
<b>b</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	shelter transaction?	Ye	s X No	
b if "Yes," did the foundation receive any proceeds or have any net income attribu	itable to the transaction?		N/A	7b
Part VIII Information About Officers, Directors, Truste		nagers, Highly		
Paid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their	compensation.			
( ) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deterred	(e) Expense account, other
(a) Name and address	to position	enter -0-)	and deferred compensation	allowances
JAMES D. LESLIE	SECRETARY			1
575 KOKESH FARMS ROAD		}		I
MAPLE PLAIN, MN 55359	0.25	0.	0.	0.
NORMA F. LESLIE	PRESIDENT			1
575 KOKESH FARMS ROAD				}
MAPLE PLAIN, MN 55359	0.25	0.	0.	0.
				l
		<u> </u>		<u> </u>
	<u> </u>			
				l
				<u> </u>
2 Compensation of five highest-paid employees (other than those inc	luded 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	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	devoted to position	(C) Compensation	and deterred compensation	allowances
NONE				
				_ <del></del>
				<del></del>
	_			
	_			
Total number of other ampleyees paid ever \$50,000	·			0

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Part VIII Information About Officers, Directors, Trustees, Foundation M Paid Employees, and Contractors (continued)	anagers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ _0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical infornumber of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	mation such as the	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 lines 1 and	d 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions 3		
Total Add lines 1 through 3	<b>&gt;</b>	0.

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Р	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, 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 /52	144.
b	Average of monthly cash balances	1b 91	146.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d 843	3,290.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d		3,290.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)		2,649.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4.		,641.
6	Minimum investment return Enter 5% of line 5	6 41	,532.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certain	
	foreign organizations check here  and do not complete this part.)	41	.,532.
1	Minimum investment return from Part X, line 6	1 41	.,534.
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 )	ļ. <u> </u>	T.C.O.
C	Add lines 2a and 2b	2c	768.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3 40	764.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5 40	764.
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 40	764.
Р	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a 117	7,800.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4 117	,800.
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	768.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6 117	7,032.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	ualifies for the section	

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	( <b>c)</b> 2012	( <b>d</b> ) 2013
1 Distributable amount for 2013 from Part XI,				40,764.
line 7			· · · · · · · · · · · · · · · · · · ·	10,701.
2 Undistributed income if any as of the end of 2013			0.	}
a Enter amount for 2012 only				
<b>b</b> Total for prior years		0.		
3 Excess distributions carryover, if any, to 2013		0.		
<b>a</b> From 2008				
<b>b</b> From 2009				
c From 2010 5,817.				
d From 2011 11,635.				
e From 2012 36,443.				
f Total of lines 3a through e	53,895.			
4 Qualifying distributions for 2013 from				
Part XII, line 4. ► \$ 117,800.				
a Applied to 2012, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2013 distributable amount				40,764.
e Remaining amount distributed out of corpus	77,036.		· - · · · · · · · · · · · · · · · · · ·	
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below.				
·	130,931.			
2 Corpus Add lines 3f 4c and 4e Subtract line 5	130,731.			
b Prior years' undistributed income. Subtract		0.		
line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		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.			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				
Subtract lines 7 and 8 from line 6a	130,931.			
0 Analysis of line 9				
a Excess from 2009				
b Excess from 2010 5,817.				
c Excess from 2011 11,635.				
d Excess from 2012 36,443.				
e Excess from 2013 77,036.			<u> </u>	Form 990-PF (2012)

Form 990-PF (2013) <b>JAMES</b> D	LESLIE FAM	ILY FOUNDAT	'ION	41-191	L8212 Page 10
Part XIV Private Operating F				N/A	
1 a If the foundation has received a ruling of	r determination letter that	it is a private operating			
foundation, and the ruling is effective fo			<b>•</b>		
<b>b</b> Check box to indicate whether the found	dation is a private operatio	ig foundation described	in section	4942(J)(3) or 494	12(J)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2013	<b>(b)</b> 2012	(c) 2011	(d) 2010	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a					<del></del>
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not	}				
used directly for active conduct of					
exempt activities				<u> </u>	
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the					
alternative test relied upon					
a "Assets" alternative test - enter	}				
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" afternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year					
listed				-	
c "Support" alternative test - enter					
<ol> <li>Total support other than gross investment income (interest,</li> </ol>					
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties) (2) Support from general public					<del></del>
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			if the foundation	had \$5,000 or more	e in assets
at any time during t	he year-see instr	uctions.)	77		
1 Information Regarding Foundation					
a List any managers of the foundation wh			tributions received by the	foundation before the close	of any tax
year (but only if they have contributed i	nore than \$5,000) (See S	echon 507(a)(2).)			
SEE STATEMENT 8					
b List any managers of the foundation who other entity) of which the foundation ha			(or an equally large portion	on of the ownership of a par	thership of
NONE	g				
2 Information Regarding Contribut	ion Grant Gift Loan	Scholarship etc. Pr	rograms:		
Check here <b>X</b> if the foundation of				not accept unsolicited reques	sts for funds If
the foundation makes gifts, grants, etc					
a The name, address, and telephone num	ber or e-mail address of t	he person to whom appl	ications should be addres	ssed.	
			<del> </del>		
<b>b</b> The form in which applications should l	oe submitted and informat	ion and materials they s	hould include		
c Any submission deadlines					
d Any restrictions or limitations on award	s, such as by geographica	il areas, charitable fields	, kınds of institutions, or	other factors	

3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual. Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager or substantial contributor status of contribution Name and address (home or business) recipient a Paid during the year BE THE MATCH FOUNDATION N/A PUBLIC CHARITY GENERAL OPERATING 3001 BROADWAY STREET N.E., SUITE 100 1,000. MINNEAPOLIS, MN 55413 CHARTER SCHOOLS PARTNERS N/A PUBLIC CHARITY GENERAL OPERATING 2800 UNIVERSITY AVE SE SUITE 103 50,000. MINNEAPOLIS, MN 55414 CHILDREN'S HOSPITAL N/A HOSPITAL MINNEAPOLIS NICU 2525 CHICAGO AVE S 2,500. MINNEAPOLIS, MN 55404 COLLEGE POSSIBLE N/A PUBLIC CHARITY GENERAL OPERATING 540 FAIRVIEW AVE N, SUITE 304 ST PAUL, MN 55104 2,500. DOCTORS WITHOUT BORDERS N/A PUBLIC CHARITY GENERAL OPERATING 333 7TH AVENUE, 2ND FLOOR NEW YORK NY 10001 2,500. CONTINUATION SHEET(S 117,000. SEE ▶ 3a Total **b** Approved for future payment NONE **▶** 3b Total

Part XVI-A Analysis of Income-Prod					918212 Page 1
Enter gross amounts unless otherwise indicated	Unrelated b	ousiness income	Excluded by	y section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue	code		code		
ab			+		<del></del>
С					
d					
e	_				
f	_				
g Fees and contracts from government agencies					
2 Membership dues and assessments	<del>                                     </del>				
3 Interest on savings and temporary cash					
investments 4 Dividends and interest from securities			14	11,946.	
5 Net rental income or (loss) from real estate			+	22/3200	
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property			<u> </u>		
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	<7,779.>	,
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
ab	-   -	•	<u> </u>		
C	1 1				
d	1				
e					
12 Subtotal. Add columns (b), (d), and (e)		0 .	•	4,167.	0
13 Total Add line 12, columns (b), (d), and (e)				13	4,167
(See worksheet in line 13 instructions to verify calculations.	.)				
Part XVI-B Relationship of Activities	s to the Accom	plishment of Ex	cempt Pu	poses	
Line No Explain below how each activity for which in the foundation's exempt purposes (other the			A contributed	importantly to the accomp	lishment of
the foundation's exempt purposes (other th	an by providing lands	Tor such purposes).			
				<del></del>	
				<u>-</u>	
		<del></del>			
			_		
				<del></del>	

JAMES D LESLIE FAMILY FOUNDATION 41-1918212 Page 13 Form 990-PF (2013) Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of Yes No the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of X (1) Cash 1a(1) Х 1a(2) (2) Other assets **b** Other transactions X (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) X (3) Rental of facilities, equipment, or other assets 1b(3) 1b(4) (4) Reimbursement arrangements 1b(5) (5) Loans or loan guarantees 1b(6) (6) Performance of services or membership or fundraising solicitations c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (c) Name of noncharitable exempt organization (a) Line no (d) Description of transfers transactions and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No Yes in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjury, I declare that I have examined this return including accompanying schedules and statements, and to the best of my knowledge

Here	La.all	6/8/2014 SECRE	TARY	X Yes No
_ J 5 <del>f</del> g	nature of officer or trustee	Date Title		
	Print/Type preparer's name Preparet's signature	CKOK, CPA 06/03/14	Check if P self- employed	TIN
Paid	DIANNE HICKOK, CPA DIANNE HIC	CKOK, CPA 06/03/14		P00043906
Preparer Use Only	Firm's name ▶ BAKER TILLY VIRCHOW KF		Firm's EIN ► 39	-0859910
	Firm's address ► 225 S 6TH ST #2300			
	MINNEAPOLIS, MN 55402	3	Phone no 612	.876.4500
-				5 000 DE 1001

and belief, it is true correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

return with the preparer shown below (see instr.)?

Sign

#### 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

J <u>A</u>	MES D LESLIE FAMILY FOUNDATION	41-1918212
Organization type (check o	ne)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990 PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
General Rule  X For an organization contributor Compl	n filing Form 990, 990-EZ, or 990 PF that received, during the year, \$5,000 or more lete Parts I and II	e (in money or property) from any one
Special Rules		
509(a)(1) and 170(b	c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of th o)(1)(A)(vi) and received from any one contributor, during the year, a contribution of o) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II	
total contributions	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, ruelty to children or animals. Complete Parts I, II, and III	
contributions for us If this box is check purpose Do not co	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one of se exclusively for religious, charitable, etc., purposes, but these contributions did red, enter here the total contributions that were received during the year for an excomplete any of the parts unless the <b>General Rule</b> applies to this organization because, etc., contributions of \$5,000 or more during the year	not total to more than \$1,000 <i>clusively</i> religious, charitable, etc ,
but it <b>must</b> answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Scheo Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or or 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

#### JAMES D LESLIE FAMILY FOUNDATION

41-1918212

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	I space is needed	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	JAMES & NORMA LESLIE  575 KOKESH FARM RD  MAPLE PLAIN, MN 55359	s102,775.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d) Type of contribution
	Name, address, and ZIP + 4  JAMES & NORMA LESLIE  575 KOKESH FARM RD  MAPLE PLAIN, MN 55359	\$ 102,960.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions )

Name of organization

Employer identification number

#### JAMES D LESLIE FAMILY FOUNDATION

41-1918212

(a)		(2)	
No.	(b)	(c)	(d)
rom	Description of noncash property given	FMV (or estimate)	Date received
Part I	, , , , , , ,	(see instructions)	
	10,000 SHS DATALINK CORP		
1			
		<u> </u>	02/20/13
(a)		(c)	
No.	(b)	FMV (or estimate)	(d)
from Part I	Description of noncash property given	(see instructions)	Date received
-art i	9 2EA CUC DAMALIANY CODD		
2	8,250 SHS DATALINK CORP	<del></del>	
		<del></del>	
		\$ 102,960.	07/30/13
(a)		, .	
No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	Date received
Part I	, , ,	(see instructions)	
		\$	
(a)		(c)	
No.	(b)	FMV (or estimate)	(d)
from	Description of noncash property given	(see instructions)	Date received
Part I			,
		<sub>6</sub>	
		\$	
(a)			·
No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	Date received
Part I	—	(see instructions)	
-			
		\$	
(a)		(c)	
No.	(b)	FMV (or estimate)	(d)
rom	Description of noncash property given	(see instructions)	Date received
Part I			
		\$	

Employer identification number

JAMES	D LESLIE FAMILY FOUNDAT:	ION	41-1918212
Part III	Exclusively religious, charitable, etc., individ	tal contributions to section 501(c)	(7), (8), or (10) organizations that total more than \$1,000 for the ons completing Part III, enter
	the total of exclusively religious, charitable, etc.	contributions of \$1,000 or less fo	r the year (Enter this information once)  \$
	Use duplicate copies of Part III if additional		
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I	(b) r dipose of gift	(c) 03c of gift	(d) Description of now gift is field
-			
}		(e) Transfer of gif	't
	Turneformala nama adduces and	1.71D . 4	Delationalism of transferor to transferor
<u> </u>	Transferee's name, address, and	1 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
1			
L	<u></u>		
		(e) Transfer of gif	t
	_		
	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 gif	t
-	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee
(a) No.			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<u> </u>			
		(e) Transfer of gift	t
<u> </u>	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee

FORM 990-PF	GAIN OR	(LOSS)	FROM	SALE	OF	ASSE'	rs ——		ST	ATEMENT 1
(A) DESCRIPTION OF PROPE	ERTY					MANNI CQUII		DA' ACQU		DATE SOLE
PUBLICLY TRADED SECT	URITIES									
(B) GROSS		C) T OR	EΛ	(D) PENSE	O.E.		(E)			(F)
SALES PRICE		BASIS	EA	SALE	Or	D	EPRE	c.	GAIN	OR LOSS
449,2	52.	467,611	•		0.			0.		<18,359.
CAPITAL GAINS DIVID	ENDS FROM	PART IV								10,580.
TOTAL TO FORM 990-P	F, PART I,	LINE 62	A					_		<7,779.
								=		<del> </del>
FORM 990-PF	DIVIDEND	S AND TI	MAD D	CT FD/	OM C	ECIB.	TTTE	<u> </u>	ST7	ATEMENT 2
<del></del>			NIEKE	51 FK	OM S					
SOURCE	GROSS AMOUNT	CAP:	ITAL INS DENDS	R	(A) EVEN R BC	UE	NET	(B) INVE:	ST-	(C) ADJUSTED
EVERCORE		CAP: GA: DIVII	ITAL INS	R] PEI	(A) EVEN R BC	UE	NET	(B)	ST- OME	(C) ADJUSTED
<del></del>	AMOUNT	CAP GA DIVII	ITAL INS DENDS	RI PEI	(A) EVEN R BC	UE OKS	NET MEN	(B) INVEST INCO	ST- OME	(C) ADJUSTED
EVERCORE - ACCRUED	AMOUNT 23,353	CAP: GA: DIVII	ITAL INS DENDS	RI PEI •	(A) EVEN R BC	TUE OOKS 773.	NET MEN	(B) INVEST INCO	ST- OME 	(C)
EVERCORE EVERCORE - ACCRUED INTEREST PAID	AMOUNT 23,353 <827	CAPT GATOR CAPT CAPT CAPT CAPT CAPT CAPT CAPT CAPT	ITAL INS DENDS 0,580	RI PEI •	(A) EVEN R BC 12,	TUE OKS 773.	NET MEN	(B) INVES T INCO 12,7	ST- OME 73.	(C) ADJUSTED
EVERCORE EVERCORE - ACCRUED INTEREST PAID  TO PART I, LINE 4  FORM 990-PF	AMOUNT 23,353 <827	CAPT GATOR CAPT CAPT CAPT CAPT CAPT CAPT CAPT CAPT	ITAL INS DENDS 0,580 0 0,580 UNTIN	RI PEI	(A) EVEN R BC 12, <11, S B) NVES	TUE 773. 827.> 946.	NET MEN'	(B) INVES T INCO 12,7	ST- OME 73. 27.> 46.	(C) ADJUSTED NET INCOME
EVERCORE EVERCORE - ACCRUED INTEREST PAID TO PART I, LINE 4	AMOUNT 23,353 <827	CAPT GATOR OF CAPT GATOR CAPT GAT	ITAL INS DENDS 0,580 0 0,580 UNTIN	RI PEI	(A) EVEN R BC 12, <11, S B) NVES INCC	TUE 773. 827.> 946.	NET MEN'	(B) INVE: 12,7' <82 11,9'	ST- OME 73. 27.> 46.	(C) ADJUSTED NET INCOME  ATEMENT 3  (D) CHARITABLE

FORM 990-PF C	THER PROFES	SIONAL FEES	S	TATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
AGENCY FEES	2,782.	2,782.		0.
TO FORM 990-PF, PG 1, LN 16C	2,782.	2,782.		0.
FORM 990-PF	TAX	ES	S	TATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
MINNESOTA ANNUAL REGISTRATION FOREIGN TAX FEDERAL EXCISE TAX	25. 362. 3,281.	0. 362. 0.		25. 0. 0.
TO FORM 990-PF, PG 1, LN 18	3,668.	362.		25.

FORM 990-PF CORPORATE STOCK		STATEMENT 6
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
SEE STATEMENT 6	567,921.	706,497.
TOTAL TO FORM 990-PF, PART II, LINE 10B	567,921.	706,497.
FORM 990-PF CORPORATE BONDS		STATEMENT 7
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
SEE STATEMENT 7	118,949.	125,858.

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT 8

NAME OF MANAGER

JAMES D. LESLIE

NORMA F. LESLIE

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor N/A SCHOOL GENERAL OPERATING FRANKLIN COLLEGE 101 BRANIGIN BLVD 5,000. FRANKLIN, IN 46131 school GENERAL OPERATING HIGH MOUNTAIN INSTITUTE N/A 531 COUNTY RD A 500. LEADVILLE, CO 80461 N/A PUBLIC CHARITY GENERAL OPERATING INTERFAITH OUTREACH & COMMUNITY PARTNERS 1605 COUNTY RD 101 N PLYMOUTH MN 55447 1,000. SCHOOL GENERAL OPERATING THE BLAKE SCHOOL N/A 110 BLAKE RD S. 12,000. HOPKINS, MN 55305 PUBLIC CHARITY THE LEUKEMIA & LYMPHOMA SOCIETY N/A GENERAL OPERATING 1711 BROADWAY ST NE 2,500. MINNEAPOLIS, MN 55413 UNIVERSITY OF CALIFORNIA FOUNDATION N/A PUBLIC CHARITY COLLEGE OF LETTERS AND SCIENCE LEADERSHIP 10 DURANT HALL MC 2930 FUND 2,500. BERKELEY, CA 94720-2930 N/A SCHOOL EDUCATION UNIVERSITY OF CHICAGO 1427 E 60TH STREET, SUITE 120 5,000. CHICAGO, IL 60637 UNIVERSITY OF MINNESOTA FOUNDATION N/A PUBLIC CHARITY GENERAL OPERATING 200 OAK STREET SE, SUITE 500 MINNEAPOLIS, MN 55455 25,000. N/A school GENERAL OPERATING WASHINGTON UNIVERSITY 1 BROOKINGS DR 5,000. ST LOUIS, MO 63130 58,500. Total from continuation sheets

Asset Detail (continued)

Statement of Value and Activity

December 1, 2013 - December 31, 2013

Bond Mutual Funds			Book	FMV		
Ridgeworth Seix Floating Rate High Income Fund TICKER: SAMBX	2,771.62	\$9.060	\$24,838.92	\$25,110.86	\$1,050.44	4.18%
Doubleline Total Return Bond Fund TICKER: DBLTX	1,097 19	\$10.780	\$12,475.00	\$11,827.65	\$611 13	5 17%
Osterweis Strategic Income Fund TICKER: OSTIX	2,132.10	\$11.840	\$24,922 88	\$25,244.05	\$1,112.96	4 41%
Avenue Credit Strategies Fund TICKER: ACSBX	1,318.10	\$11.380	\$15,000.00	\$15,000.00	\$680.14	4 53%
Equities Equity Mutual Funds						
Wall Street Fund TICKER: WALLX	34,856.70	\$13.230	\$339,700.28	\$461,154.14	\$0.00	0.00%
Matthews Pacific Tiger Fd-Is TICKER: MIPTX	2,933.42	\$24.970	\$71,018.05	\$73,247.45	\$0.00	%000
Harbor International Fd-Ins TICKER: HAINX	566.20	\$71010	\$34,203.54	\$40,206.00	\$846 47	2 10%
Third Ave TR Intl Value Fd TICKER: TAVIX	1,967.38	\$20.280	\$32,280.34	\$39,898.39	\$507.58	1.27%
Aston Tamro Small Cap Fund-I TICKER: ATSIX	640.48	\$23.120	\$13,482 44	\$14,807.99	\$0 00	0.00%
			567,921	706,497		

## Asset Detail

# Statement of Value and Activity

December 1, 2013 - December 31, 2013

Fixed Income			Book	FMV		
AT&T inc AT&T inc AT&T 05/13/2008 5.600% 05/15/2018	15,000.00	\$113.561	\$15,091.67	\$17,034.15	\$840 00	4 93%
Non Callable Ford Motor Credit Co LLC DTD 05/03/2011 5.000% 05/15/2018	25,000.00	\$111.391	\$26,993.54	\$27,847.75	\$1,250.00	4 49%
Non Callable Plains Exploration & Pro DTD 10/26/2012 6.500% 11/15/2020	25,000.00	\$110.438	\$26,742.04	\$27,609 50	\$1,625 00	5.89%
Callable Hewlett-Packard Co DTD 12/09/2011 4.650% 12/09/2021	25,000.00	\$102.968	\$25,859.90	\$25,742.00	\$1,162 50	4 52%
Enterprise Products Oper	25,000.00	\$110 500	\$27,736.15	\$27,625 00	\$1,758 50	8 37%
Callable		Less Discount: 3,474	nt: 3,474	1		

125,858

118,949

#### Form **8868**

(Rev January 2014)

Department of the Treasury Internal Revenue Service

### Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868

OMB No 1545-1709

,	are filing for an Automatic 3-Month Extension, complet	-			•	· [ <u>A</u> ]
• If you a	are filing for an Additional (Not Automatic) 3-Month Ext					
			tic 3 month extension on a previous			
	c filing (e-file) You can electronically file Form 8868 if y					
required	to file Form 990 T), or an additional (not automatic) 3 mor	nth extens	ion of time. You can electronically fi	le Form 88	68 to request an ex	ktension
of time to	file any of the forms listed in Part I or Part II with the exc	eption of	Form 8870, Information Return for 1	ransfers A	ssociated With Cer	taın
Personal	Benefit Contracts, which must be sent to the IRS in paper	er format (:	see instructions) For more details o	n the elect	ronic filing of this fo	orm,
visit www	us gov/efile and click on e-file for Charities & Nonorofits					
Part I	Automatic 3-Month Extension of Time	. Only s	submit original (no copies nee	eded)		
A corpora	ation required to file Form 990-T and requesting an autom	natic 6 mo	nth extension check this box and o	complete		
Part I onl	y				•	· 🔲
All other	corporations (including 1120-C filers), partnerships, REMI	Cs, and tru	usts must use Form 7004 to request	an extensi	on of time	
to file inc	ome tax returns			Enter file	r's identifying nur	nber
Type or	Name of exempt organization or other filer, see instruc	ctions		Employer	dentification num	ber (EIN) or
print						
Eda bu tha	JAMES D LESLIE FAMILY FOUNDATION 41-1918212					
due date for filing your	ue date for Number, street, and room or suite no. If a PO box, see instructions Social security number (SSN) Ing your 5.75 KOKESH FARMS RD					
return See instructions	City, town or post office, state, and ZIP code For a fo	reian addi	ress, see instructions		<del></del>	<del></del>
	MAPLE PLAIN, MN 55359-9786					
Enter the	Return code for the return that this application is for (file	a separate	e application for each return)			0 4
Application Return Application						Return
Is For Code Is For						Code
	or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990	·BL	02	Form 1041-A			08
Form 472	0 (individual)	03	Form 4720 (other than individual)			09
Form 990	PF	04	Form 5227			10
Form 990	-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
	-T (trust other than above)	06	Form 8870			12
	NORMA LESLIE					
• The bo	ooks are in the care of   575 KOKESH FARM	IS RD	- MAPLE PLAIN, MN	<u>55359</u>		
Teleph	one No ▶ 952-473-9381		Fax No 🕨			
• If the o	organization does not have an office or place of business	ın the Uni	ted States, check this box		•	• 🔲
• If this	s for a Group Return, enter the organization's four digit (	Group Exe	mption Number (GEN)	If this is for	the whole group, o	check this
box 🕨	If it is for part of the group, check this box	and atta	ch a list with the names and EINs of	all membe	ers the extension is	for
1 I re	quest an automatic 3 month (6 months for a corporation					
	AUGUST 15, 2014 , to file the exemp	t organizat	tion return for the organization name	ed above 1	The extension	
	or the organization's return for X calendar year 2013 or					
<b>•</b> [	tax year beginning	, an	d ending			
,	(ax year beginning			<del></del>	_	
2 If th	ne tax year entered in line 1 is for less than 12 months, ch	neck reaso	n Initial return	Final returi	n	
	Change in accounting period	0000		<del></del>		
	nis application is for Forms 990 BL, 990-PF, 990 T, 4720,	or 6069, e	enter the tentative tax, less any			0.
	refundable credits. See instructions	<del></del>	f adalah a adalah	3a	\$	<u> </u>
	nis application is for Forms 990-PF, 990 T, 4720, or 6069,	•			•	0.
	mated tax payments made Include any prior year overpa			3b	\$	· ·
	ance due. Subtract line 3b from line 3a Include your pa	-			ф.	0.
	Using EFTPS (Electronic Federal Tax Payment System) S			3c	\$ 9970 FO fo	
	II VOLUSTE COING TO MOKE AN ELECTRONIC TUDGS WITHGROWISH	mirect der	IIO WILD INS FORM XXXX SEE FORM X	4:1.1-1-1.1 200	3 EOM 88/9 EU IO	LOSVINEDI