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# 990-PF

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

OMB No 1545-0052 2013

2014
<b>2</b>
<b>=</b>
SCANNED

		nt of the Treasury evenue Service			n 990-PF and its separat				Open to Public Inspection
Fo	or ca	lendar year 2013	or tax year begin			/22 , 2013			12/31, 2013
_		of foundation					,		ntification number
	VAN	DYKE/BILLY H	FOUNDATION					46-3987	730
_	Numb	er and street (or P O b	oox number if mail is not	delivered	to street address)		Room/suite	B Telephone nu	mber (see instructions)
								(	952) 922-3203
	256	INTERLACHEN	ROAD						
_	City or	town, state or provinc	ce, country, and ZIP or fo	reign po	stal code				
								C If exemption appending, check I	olication is
	HOP	KINS, MN 5534	43					pending, areas	
G	Che	ck all that apply	X Initial return	)	Initial return of	of a former p	public charity	D 1 Foreign organ	nizations check here . >
			Final return		Amended ret	turn		2 Foreign orga	nizations meeting the
_			Address cha		Name change				ck here and attach
Н	Che	ck type of organiz	ation X Sectio	n 501(	c)(3) exempt private f	oundation	<del>-</del>		etion status was terminated
1	s	ection 4947(a)(1) no	onexempt charitable	trust	Other taxable pr	ıvate founda	tion	1 '	07(b)(1)(A), check here
ı	Fair	market value of	all assets at		unting method X Ca	ashAcc	crual	F If the foundatio	n is in a 60-month termination
		of year (from Part			ther (specify)				7(b)(1)(B), check here . ▶
_					column (d) must be on	cash basis)		<u> </u>	719
ŀ	art l	Analysis of Rev	enue and Expense	S (The	(a) Revenue and	(b) Net inve	estment	(c) Adjusted net	(d) Disbursements for charitable
		mav not necessaril	columns (b), (c), and ly equal the amounts		expenses per	Incon		income	purposes
_		column (a) (see ins	tructions) )		books				(cash basis only)
	1	Contributions, gifts, grants	s, etc., received (attach sche	dule)	11,094.				
	2	Check ▶  attack	foundation is <b>not</b> requi						<del></del>
	3	Interest on savings an	d temporary cash invest	ments	0.070		2 2 2 2		
	4	Dividends and inter	rest from securities .		2,078.		2,078.		ATCH 1
	5 a	Gross rents							
	b	Net rental income or (le	oss)		1 200 100				
ne	6a b		n sale of assets not on li		1,209,103.				
еП	D	assets on line 6a	2,036,	64 /.	ļ				
Revenue	7		come (from Part IV, Iir			1,20	9,103.	REC	EIVED)
_	8		ital gain						701
	9 10 a	Income modification Gross sales less returns	ns • • • • • • • • • • • • • • • • • • •	• • •				18 JUN	0 2014 9
		and allowances · · ·	· ·		·			AUL B	0 2 2017 S
		Less Cost of goods so							
			s) (attach schedule)					OGE	EN, UI
	11		ch schedule)		1,222,275.	1 01	1 101		
_	12		<u>hrough 11</u>		1,222,273.	1,21	1,181.		<del></del>
	13		ers, directors, trustees, e						
es	14		laries and wages						<del> </del> -
ens	15		ployee benefits				<del></del>		<del> </del> -
ğ	16 a		chedule)						<del> </del>
ē	۵		ttach schedule)		<del></del>				<del></del>
aţ;	15 16 a b c 17 18 19	•	fees (attach schedule	•					<del>                                     </del>
str	17		e) (see instructions)ATCI		72.		72.		<del> </del>
Ē	10	•	•						
Ę	20	•	h schedule) and dep						
		•	s, and meetings						
aŭ	21 22		ations			-	<del></del>		
	23		ations				<del></del>		
Operating	24	• •	tach schedule) Id administrative exp			<u> </u>			<del></del>
Der	~~		gh 23		72.	ļ	72.		
0	25	•	s, grants paid						<del></del>
	26	· ·	ursements Add lines 24		72.		72.		
-	27	Subtract line 26 fro	· · · · · · · · · · · · · · · · · · ·				<del></del>		
			expenses and disbursemen	nts	1,222,203.				•
	1		come (if negative, ent		,	1,21	1,109.		
			ne (if negative, enter			i i	+		

46-3987730

Ð	art II	Ralance Shoots	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End	of year
_		- Datation Officers	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-beam	ing		819,704.	819,704.
ŀ	2		cash investments			
	3	Accounts receivable				
ļ		Less allowance for dou	btful accounts ▶			
		Less allowance for dou	btful accounts ▶			
	5			···	<u>_</u> _	<del></del>
- 1	6		officers, directors, trustees, and other			
	•		tach schedule) (see instructions)			
	7		receivable (attach schedule)			
	•		btful accounts			
,				<del></del>		
Assets	8		se , , , , , , , , , , , , , , ,		<del>-</del>	
1SS	9		leferred charges			
`	10 a	Investments - US and stat	e government obligations (attach schedule).			
ı	b	Investments - corporate	stock (attach schedule) ATCH 3		201,351	
	11 C	Investments - corporate	bonds (attach schedule) ATCH 4		201,148	200,552.
	''	Investments - land, building and equipment basis				
		Less accumulated deprecia (attach schedule)	ation -			
١	12	•	toans			
	13	Investments - other (atta	ach schedule)			
ı	14	Land, buildings, and				
		Less accumulated deprecia	ation			
	15	Other assets (describe	<b>&gt;</b>			
	16		completed by all filers - see the		· · · · · · · · · · · · · · · · · · ·	
		•	page 1, item I)	0	1,222,203	1,223,746.
$\exists$	17		accrued expenses		2/022/200	1/520//10
	18				<del></del>	_
				<del>-</del>	<del></del>	†
ĕ	19					-
Ē	20		ors, trustees, and other disqualified persons			-1
Liabilities	21		otes payable (attach schedule)			4
_	22	Other liabilities (describe	e ▶)			4
_	23		es 17 through 22)	0		<u>u</u>
			low SFAS 117, check here . ▶ 📖			
S		and complete lines	24 through 26 and lines 30 and 31.			
Balances	24	Unrestricted	<i>,</i>			
ala	25	Temporarily restricted				
_	26					
Net Assets or Fund			not follow SFAS 117, ▶ 🗓			
Ē		check here and com	plete lines 27 through 31.			
ō	27		cipal, or current funds			
ets	28		r land, bldg, and equipment fund			7
SS	29		ulated income, endowment, or other funds	_	1,222,203	
it /	30	• .	d balances (see instructions)	0	1,222,203	
ž	31		net assets/fund balances (see			1
	•			o	1,222,203	İ
F	art li		anges in Net Assets or Fund	<u> </u>	2,555,255	-
			balances at beginning of year - Part		nust agree with	T
1			• •	• • •	-	
_			ed on prior year's return)		-	1,222,203
		er amount from Part I			2	1,222,203
3	Oth	er increases not inclu	ded in line 2 (itemize) ▶	·	3	1 222 202
4	Add	i lines 1, 2, and 3			4	1,222,203
		creases not included in			5	1 000 000
_6	Tota	al net assets or fund t	palances at end of year (line 4 minus	line 5) - Part II, column (t	o), line 30 6	1,222,203
						Form <b>990-PF</b> (2013)

_			
۲	ЯC	e	- 4

P	art IV Capital Gains	and Losses for Tax on Inv	estment Income			
	• •	d describe the kind(s) of property sold (		(b) How	(c) Date acquired	(d) Date sold
_	<u></u>	rick warehouse, or common stock, 200	shs MLC Co)	P - Purchase D - Donation	(mo , day, yr )	(mo , day, yr )
<u>1a</u>		DULE				
<u>_</u> b			<del></del>			
_ <u>c</u>					<del></del>	
_ <u>d</u>						
<u>e</u>		(f) Depreciation allowed	(g) Cost or other basis	-	(h) (h-)	
	(e) Gross sales price	(or allowable)	plus expense of sale		(h) Gain or (lo (e) plus (f) minu	
					· · · · · · · · · · · · · · · · · · ·	
_ <u>a</u>						
_ <u>~</u>				-		
d						
е						
	Complete only for assets	showing gain in column (h) and owner	d by the foundation on 12/31/69	(1)	Gains (Col (h) g	ain minus
	(ı) F M V as of 12/31/69	(j) Adjusted basis	(k) Excess of col (i)		(k), but not less t	han -0-) or
	(i) i w v as or 12/3 1/09	as of 12/31/69	over col (j), if any		Losses (from co	ol (h))
<u>a</u>						
_b				<u> </u>		
				<del> </del>		
_ <u>d</u>				<del> </del> -		
_ <u>e</u>			Destruction of the second of t	<del> </del> -		
2	Capital gain net income or		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2	1	209,103.
3	Net short-term capital dair	۱۱ م 12 or (loss) as defined in sections ا	• • • • • • • • • • • • • • • • • • • •	-	,	209,103.
٠		rt i, line 8, column (c) (see inst				
	=		, , ,	3		0
P			duced Tax on Net Investment I	ncome		
(F			e section 4940(a) tax on net investi		me )	
٧.	. , ,				,	
If s	section 4940(d)(2) applies,	leave this part blank NOT	AVAILABLE FOR INITIAL	YEAR R	ETURNS	
			outable amount of any year in the b	ase perio	d? ∐	」Yes ∐_ No
<u>If '</u>		not qualify under section 4940(e)				<del></del>
1			r, see the instructions before making	g any entr		
	(a) Base penod years	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	1	(d) Distribution r	
	alendar year (or tax year beginning in)	Adjusted qualifying distributions	14et Value of Horiottalitable-use assets	<del> </del> -	(col (b) divided by	col (c))
_	2012			_		
_	2011			<del> </del>		
_	2010			<u> </u>		
-	2008		<del></del>			
_	2000			<del>                                     </del>		
2	Total of line 1 column (d)	)		2		
3	Average distribution ratio	for the 5-year base period - divid	e the total on line 2 by 5, or by the			
	_	· · · · · · · · · · · · · · · · · · ·	s than 5 years	3		
	•					
4	Enter the net value of nor	ncharitable-use assets for 2013 fro	om Part X, line 5	4		
5	Multiply line 4 by line 3			5		
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		
7	Add lines 5 and 6			7		<del></del>
	_			1 1		
8	Enter qualifying distribution	ons from Part XII, line 4	in Part VI, line 1b, and complete	18   that ===	110100 = 40/ ·	v seto. Can At
	If line 8 is equal to or gr Part VI instructions	eater than line /, check the box	in Part VI, line 10, and complete	mat part	using a 1% ta	x rate See the
	r art vi ilistructions					

	tVI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i			s)
1 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)			
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check		24,2	222.
	here  and enter 1% of Part I, line 27b			
С	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			
3	Add lines 1 and 2.		24,2	222.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		<u>-</u> -	0
5	Tax based on Investment Income. Subtract line 4 from line 3 If zero or less, enter -0-		24,2	222.
6	Credits/Payments			
а	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 6a			
b	Exempt foreign organizations - tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868) 6c 6c			
d	Backup withholding erroneously withheld 6d 6d			
7	Total credits and payments Add lines 6a through 6d			0
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due if the total of lines 5 and 8 is more than line 7, enter amount owed		24,2	222.
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 ▶ Refunded ▶ 11			
Par	t VII-A Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate	<u> </u>	Yes	No
	or intervene in any political campaign?	1a		<u> </u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the			
	definition)?	1b		<u> </u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	1		
	distributed by the foundation in connection with the activities	}		١.,
	Did the foundation file Form 1120-POL for this year?	1c		X
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		i	
	(1) On the foundation ►\$ (2) On foundation managers ►\$	ļ	:	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	Ì	1	}
•	foundation managers \$  Has the foundation engaged in any activities that have not previously been reported to the IRS?			x
2	If "Yes," attach a detailed description of the activities	2		<del>- ^</del>
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,			
3	or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		x
4 3	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
Ť	If "Yes," attach the statement required by General Instruction T			T
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			ļ
•	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict	ļ	İ	l
	with the state law 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	<u> </u>
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
		1	}	1
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation	8b	Х	<b>↓</b>
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 year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete		1	1
	Part XIV	9_	<del>                                     </del>	<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and			"
	addresses	10		<u> </u>

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Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emploannd Contractors (continued)	yees,
3 Five	nighest-paid independent contractors for professional services (see instructions). If none, enter "NONE	
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
Total numb	er of others receiving over \$50,000 for professional services	
Part IX-A	Summary of Direct Charitable Activities	
	dation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1 N/A		
2		
,		
3		
4		
Part IX-B	Summary of Program-Related Investments (see instructions)	1
	e two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE		
2		
All other pr	gram-related investments. See instructions	_
3 NONE		
<del>-</del>		
Total Add	lines 1 through 3	
TOLAL AUG	lines 1 through 3	

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Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

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6

0

qualifies for the section 4940(e) reduction of tax in those years

Form	1 990-PF (2013)				Page 9
Pa	rt XIII Undistributed Income (see instru	ctions)		<del>-</del>	
		(a)	(b)	(c)	(d)
1	Distributable amount for 2013 from Part XI.	Corpus	Years prior to 2012	2012	2013
	line 7				0
2	Undistributed income, if any, as of the end of 2013				1
a	Enter amount for 2012 only				
b	Total for pnor years 20 11 ,20 10 ,20 09	· -· ·			-
3	Excess distributions carryover, if any, to 2013				<del>                                     </del>
а	From 2008				
b					
	From 2009				
نا	From 2010				
d	From 2011		<u> </u>		
	From 2012	0			
	Total of lines 3a through e	0		<del></del>	<del> </del>
4	Qualifying distributions for 2013 from Part XII,				
	line 4 ▶ \$				
а	Applied to 2012, but not more than line 2a	,			· <del> </del>
b	Applied to undistributed income of prior years				
	(Election required - see instructions)				
С	Treated as distributions out of corpus (Election				
	required - see instructions)				
d	Applied to 2013 distributable amount				
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2013				
	(If an amount appears in column (d), the same				
6	amount must be shown in column (a) ) Enter the net total of each column as		:		
٠	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	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				
	•				<del> </del>
a	Subtract line 6c from line 6b Taxable amount - see instructions				
e	Undistributed income for 2012 Subtract line	~~			<del>                                     </del>
	4a from line 2a Taxable amount - see				
	instructions				
f	Undistributed income for 2013 Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2014				<del>                                     </del>
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2008 not				
	applied on line 5 or line 7 (see instructions)				<del> </del>
9	Excess distributions carryover to 2014.	•		1	
	Subtract lines 7 and 8 from line 6a	0			<del></del>
	Analysis of line 9				
	Excess from 2009				
	Excess from 2010				
	Excess from 2011				
d	Excess from 2012				
е	Excess from 2013			1	

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d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

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factors

Page 11

Part XV Supplementary Information (	continued)			
3 Grants and Contributions Paid Durin Recipient Name and address (home or business)	ng the Year or Appr	oved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	, anoun
a Paid during the year				
		ļ ,		4
		}	•	
		Į .		
				}
	.II	;		
		1		
	1			
		•		İ
		<u>'</u>		
Total			▶ 3a	
b Approved for future payment				
, ,	1			<b>1</b> 6
				}
			Ì	
	į			
		1		
				-
	<u> </u>		<u> </u>	<del> </del>
Total	<u> </u>		<u> ▶ 3b</u>	

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Part XVI-	A Analysis of Income-Produ	icing Activ	vities	-	<del></del>	
	amounts unless otherwise indicated		ated business income	Excluded by	y section 512, 513, or 514	(e)
	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income
	- Scriffice (Civalina)			+		(See instructions)
				<u> </u>		<del></del>
. —						
е			"-"			
f						
g Fees	and contracts from government agencies					
2 Member	ship dues and assessments					
	on savings and temporary cash investments					
	ds and interest from securities			14	2,078.	
	al income or (loss) from real estate		<u> </u>			
a Debt	-financed property	<u> </u>		<u> </u>		<del>.</del>
	debt-financed property		-			
	I income or (loss) from personal property	<u> </u>	<del> </del>	<del> </del>		
	vestment income			18	1 200 102	<del></del>
	loss) from sales of assets other than inventory			10	1,209,103.	<del></del>
	ome or (loss) from special events	<del></del>				
•	rofit or (loss) from sales of inventory			+		
	venue a			<del></del>	<del></del>	
		<del></del>				
					<del></del>	
e						
	Add columns (b), (d), and (e)				1,211,181.	<del></del>
	dd line 12, columns (b), (d), and (e)				13	1,211,181.
	heet in line 13 instructions to verify calc	ulations)				
Part XVI-	B Relationship of Activities	to the Ac	complishment of Ex	empt Purp	oses	
Line No ▼	Explain below how each activit accomplishment of the foundation	-	·		•	· -
			··			· · · · · · · · · · · · · · · · · · ·
_						
_						
			,		<u> </u>	· ——
					·	
					· · · · · · · · · · · · · · · · · · ·	
					· · · · · · · · · · · · · · · · · · ·	
			<del></del>			<del> </del>
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In section 501(c) of 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 (1) Cash.  (2) Other assets.  b Other transactions  (1) Sales of assets to a noncharitable exempt organization.  (2) Purchases of assets from a noncharitable exempt organization.  (3) Rental of facilities, equipment, or other assets.  (4) Reimbursement arrangements  (5) Loans or loan guarantees.  (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 (a) Lie no (b) Almount involved (c) Name of noncharitable exempt organization.  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  Almount involved (c) Name of noncharitable exempt organization (d) the value of the goods, other assets, or services received (e) Lie no (b) Almount involved (c) Name of noncharitable exempt organization (e) Description of transfers, transactions, and sharing arrangements.  N/A  10 If "Yes," complete the following schedule (e) Type of organization (e) Description of relationship (e) Type of organization (e) Type of organization of which prepare has any hnowledge and bead, it is for concept, described from the intercept of prince (other than the tax pays) in broader and statements, and to the beat of my knowledge and bead, it is for concept, described from the intercept of prince (other than the transp	Form 990-PF (2	2013)	VAN DYKE/	BILLY FOUNDATIO	N	46-398	7730	Pa	ge 13
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Under penaltities of penalty, I Abctare shall have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true correct, and complete Deplaration of pripager (other than texpeyer) is based on all information of which preparer has any knowledge  May the IRS discuss this return with the preparer shown below issee instructions)? X yes Nowledge  Print/Type preparer's name  STEVEN W SCHEIBE  Preparer  Firm's name  PRICEWATERHOUSECOOPERS LLP  Firm's EIN  Prim's EIN  13-4008324	describ	bed in section 501(c	) of the Code (otl				Ye	s X	] No
Sign Here Signature Of Nice or trustee Days Title STED With the preparer shown below (see instructions)? X ves Nice or trustee Days Title STEVEN W SCHEIBE STEVEN W SCHEIBE Preparer Firm's name ▶ PRICEWATERHOUSECOOPERS LLP Firm's EIN ▶ 13-4008324  Use Only Firm's address ▶ ONE NORTH WACKER DRIVE		(a) Name of organization	on	(b) Type of organi	zation	(c) Description of relation	ship		
Sign Here Signature Of Nice or trustee Days Title STED With the preparer shown below (see instructions)? X ves Nice or trustee Days Title STEVEN W SCHEIBE STEVEN W SCHEIBE Preparer Firm's name ▶ PRICEWATERHOUSECOOPERS LLP Firm's EIN ▶ 13-4008324  Use Only Firm's address ▶ ONE NORTH WACKER DRIVE	_			<del></del>					
Sign Here Signature Of Nice or trustee Days Title STED With the preparer shown below (see instructions)? X ves Nice or trustee Days Title STEVEN W SCHEIBE STEVEN W SCHEIBE Preparer Firm's name ▶ PRICEWATERHOUSECOOPERS LLP Firm's EIN ▶ 13-4008324  Use Only Firm's address ▶ ONE NORTH WACKER DRIVE					<del>.</del>				
Sign Here Signature Of Nice or trustee Days Title STED With the preparer shown below (see instructions)? X ves Nice or trustee Days Title STEVEN W SCHEIBE STEVEN W SCHEIBE Preparer Firm's name ▶ PRICEWATERHOUSECOOPERS LLP Firm's EIN ▶ 13-4008324  Use Only Firm's address ▶ ONE NORTH WACKER DRIVE						<del></del>			
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Sign Here Signature Of Nice or trustee Days Title STED With the preparer shown below (see instructions)? X ves Nice or trustee Days Title STEVEN W SCHEIBE STEVEN W SCHEIBE Preparer Firm's name ▶ PRICEWATERHOUSECOOPERS LLP Firm's EIN ▶ 13-4008324  Use Only Firm's address ▶ ONE NORTH WACKER DRIVE	Linde	r nenalties of person 1 Abo	lare that I have evamin	ed this return including accomi	nanving schedules	and statements and to the best of my knowled	toe and h	ellef it	is trui
Here Signature of officer or trustee Date Title Stee instructions)? X ves No Stee instructions No Stee Instructions No Stee Instructions No Stee Instructions No Stee Instructions No Stee Instructions No Stee Instructions No Stee Instructions No Stee Instructions No Stee Instructions No Stee Instructions No No Stee Instructions No No Stee Instructions No No No No No No No No No No No No No	I	ct and complete Declaration	of preparer (other than ta	xpayer) is based on all information	of which preparer	has any knowledge	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Paid  STEVEN W SCHEIBE  Preparer  Firm's name		Water et of Nieger or Trustee	the _	15/15/14 Days	Title	IRUS (BB) with the p	reparer s	hown	retum below No
Paid  STEVEN W SCHEIBE  Preparer  Firm's name		Dent/Transaction	ome .	Aranamia signatura *			DTINI		
Preparer    Firm's name   PRICEWATERHOUSECOOPERS LLP   Firm's EIN   ▶ 13-4008324	Paid	1 '' '		Keparers signature	_	"   '\' '\'   \' \' \' \' \' \' \' \' \' \' \' \' \'		c	
Use Only Firm's address ► ONE NORTH WACKER DRIVE			<del></del>	NATURE TERMINATION OF THE PERSON				<u>, 9</u>	
· [	•					Firm's EIN ► 13-4	00832	. 4	
	Jac Olliy			WIN DAIAR		60606 Phone no 312-2	98-20	000	

Form 990-PF (2013)

## 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

Name of the organization				Employer Identification number
VAN DYKE/BILLY FOUN	DATION			46-3987730
Organization type (check on	e)			
Filers of:	Section:			
Form 990 or 990-EZ	501(c)(	) (enter number) organization		
	4947(a)(1) n	onexempt charitable trust not treate	ed as a private fou	indation
	527 political	organization		
Form 990-PF	X 501(c)(3) ex	empt private foundation		
	4947(a)(1) n	onexempt charitable trust treated a	s a private founda	tion
	501(c)(3) tax	xable private foundation		
Check if your organization is Note. Only a section 501(c)( instructions		Rule or a Special Rule. ation can check boxes for both the Go	eneral Rule and a	Special Rule See
General Rule				
	n filing Form 990, 990- one contributor Comp	EZ, or 990-PF that received, during blete Parts I and II	the year, \$5,000	or more (in money or
Special Rules				
under sections 509	9(a)(1) and 170(b)(1)(A 55,000 or <b>(2)</b> 2% of the	Form 990 or 990-EZ that met the 3 ((vi) and received from any one cor amount on (i) Form 990, Part VIII,	ntributor, during th	e year, a contribution of
during the year, to	tal contributions of mor	nization filing Form 990 or 990-EZ the re than \$1,000 for use exclusively fo an of cruelty to children or animals.	r religious, charita	ble, scientific, literary,
during the year, co not total to more to year for an <i>exclusi</i> applies to this org	ontributions for use excludent shadown shadows shadown shadows	nization filing Form 990 or 990-EZ the street for religious, charitable, etc., is checked, enter here the total context, purpose Do not complete an exerced nonexclusively religious, charitation.	purposes, but the tributions that were my of the parts unle table, etc, contrib	ese contributions did e received during the ss the <b>General Rule</b> utions of \$5,000 or
990-EZ, or 990-PF), but it m	ust answer "No" on Pa	General Rule and/or the Special Ru rt IV, line 2, of its Form 990, or chec ot meet the filing requirements of Sc	ck the box on line	H of its Form 990-EZ or on its
For Paperwork Reduction Act Not	ce, see the instructions for F	Form 990, 990-EZ, or 990-PF.	Schedule	B (Form 980, 990-EZ, or 990-PF) (201

Employer Identification number 46-3987730

Part I	Contributors (see instructions) Use duplicate copies of F	Part I if additional space is nee	ded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1 _	WILLIAM G. VAN DYKE & JODI KAY BILLY  256 INTERLACHEN ROAD  HOPKINS, MN 55343	- \$5,547. -	Person X Payroll X Noncash X  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2 _	WILLIAM G. VAN DYKE & JODI KAY BILLY  256 INTERLACHEN ROAD  HOPKINS, MN 55343	- \$5,547. -	Person X Payroll X Noncash (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)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person Payroll Noncash (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)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		ss	Person Payrotl Noncash (Complete Part II for noncash contributions)

Employer Identification number 46-3987730

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed

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

	(Form 990, 990-EZ, or 990-PF) (2013)	_		Page 4	
Name of o	rganization VAN DYKE/BILLY FOUNDAT	ION	_	Employer Identification number	
Part III	Evoluments religious should be sto	i		46-3987730	
Part III	Exclusively religious, charitable, etc. that total more than \$1,000 for the y	, individual contrib rear. Complete colu	iutions to section imns (a) through (	501(c)(7), (8), or (10) organizations (e) and the following line entry	
	For organizations completing Part III.	enter the total of exc	clusively religious	charitable etc	
	contributions of \$1,000 or less for the	e year (Enter this in	formation once S	See instructions ) ▶ \$	
	Use duplicate copies of Part III if addit	onal space is need	e <u>d</u>		
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held	
		(e) Transi	fer of gift	1	
	Transferee's name, address, ar	nd ZIP + 4	Relatio	onship of transferor to transferee	
				·	
			<b></b>		
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held	
		(e) Transi	fer of aift		
		(o) Trans.	J. g		
	Transferee's name, address, ar	nd ZIP + 4	Relatio	onship of transferor to transferee	
(a) No from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee		
		·			
				·	
(a) No			<u> </u>		
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held	
	**				
	-	(e) Trans	fer of gift	<u></u>	
		(e) italis	o. o. g.n.		
	Transferee's name, address, ar	nd ZIP + 4	Relation	onship of transferor to transferee	
			1		

## SCHEDULE D (Form 1041)

Department of the Treasury

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T.

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10

OMB No 1545-0092

2013

Internal Revenue Service ▶ Information about Schedule D and its separate instructions is at www irs.gov/form1041. Name of estate or trust Employer Identification number VAN DYKE/BILLY FOUNDATION 46-3987730 Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less See instructions for how to figure the amounts to enter on (h) Gain or (loss) Adjustments to gain or loss from Subtract column (e) the lines below (d) (e) Proceeds from column (d) and combine the result with This form may be easier to complete if you round off cents (sales pnce) (or other basis) Form(s) 8949, Part I, line 2, column (g) column (g) to whole dollars 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b 1b Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 5 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts . . . . . . . . . Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2012 Capital Loss 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h) Enter here and on Long-Term Capital Gains and Losses - Assets Held More Than One Year See instructions for how to figure the amounts to enter on (h) Gain or (loss) (g) Adjustments to gain or loss from Form(s) 8949, Part II, Subtract column (e) from column (d) and the lines below Proceeds This form may be easier to complete if you round off cents (sales price) combine the result with (or other basis) line 2, column (g) column (g) to whole dollars 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 1,219,816. 11,094. 1,208,722. Totals for all transactions reported on Form(s) 8949 10 Totals for all transactions reported on Form(s) 8949 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 . . . . . . . . . . . . Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts. . . . . . . . . . 12 381. 13 13 14 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2012 Capital Loss 15 Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h) Enter here and on 

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

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1,209,103.

	•				
Sche	dule D (Form 1041) 2013				Page 2
Pa	t III Summary of Parts I and II  Caution: Read the instructions before completing this parts.	art.	(1) Beneficiaries' (see instr.)	(2) Estate's or trust's	(3) Total
17	Net short-term gain or (loss)	17			
18	Net long-term gain or (loss):				
а	Total for year	18a			1,209,103.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht)	18b			<u> </u>
	28% rate gain	18c			
19	Total net gain or (loss) Combine lines 17 and 18a ▶	19			1,209,103.
gains	e: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 s, go to Part V, and <b>do not</b> complete Part IV If line 19, column (3), is a n ssary	(or Fo	rm 990-T, Part I, line 4 s, complete Part IV and	a) If lines 18a and 1 d the <b>Capital Loss C</b> a	9, column (2), are ne arryover Worksheet, a
Pa	rt IV Capital Loss Limitation	-			
20	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F	Part I. II	ne 4c, if a trust), the sn	naller of	
a	The loss on line 19, column (3) or b \$3,000			20 (	•
Loss	: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, Carryover Worksheet in the instructions to figure your capital loss carryover	page	1, line 22 (or Form 990	)-T, line 34), is a loss	, complete the Capita
	Tax Computation Using Maximum Capital Gains Rate	25			
	n 1041 filers. Complete this part only if both lines 18a and 19 in col		2) are gains or an a	mount is entered in	Part I or Part II and
ther	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mor	re thai	n zero	mount is entered in	Tarti or Tartii air
	tion: Skip this part and complete the Schedule D Tax Worksheet in the	ınstrud	ctions if.		
	ther line 18b, col (2) or line 18c, col (2) is more than zero, or				
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero				
of E	n 990-T trusts. Complete this part only if both lines 18a and 19 a orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part	ire ga	ins, or qualified divid	lends are included	in income in Part
ıfeıt	her line 18b, col (2) or line 18c, col (2) is more than zero	and c	complete the Scheau	e Diax worksnee	et in the instruction
21	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3		-   04		<del></del>
22	Enter the smaller of line 18a or 19 in column (2)	54)	. 21		
22	but not less than zero				
23	Enter the estate's or trust's qualified dividends		<del> </del>		
23	·				
	from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T) 23				
24	Add lines 22 and 23		<del> </del>		
25	If the estate or trust is filing Form 4952, enter the		<del>-  </del>		
	amount from line 4g, otherwise, enter -0 <b>&gt;</b> 25				
26	Subtract line 25 from line 24 If zero or less, enter -0-		. 26		
27	Subtract line 26 from line 21 if zero or less, enter -0-				
28	Enter the smaller of the amount on line 21 or \$2,450				
29	Enter the smaller of the amount on line 27 or line 28	• • •	29		
30	Subtract line 29 from line 28 If zero or less, enter -0- This amount is			▶ 30	
31	Enter the smaller of line 21 or line 26				
32	Subtract line 30 from line 26				
33	Enter the smaller of line 21 or \$11,950		33		
34	Add lines 27 and 30				
35	Subtract line 34 from line 33 If zero or less, enter -0-		35	<del></del>	
36	Enter the smaller of line 32 or line 35			<del></del>	
37	Multiply line 36 by 15%			▶ 37	
38	Enter the amount from line 31				
39	Add lines 30 and 36			1	
40	Subtract line 39 from line 38 If zero or less, enter -0-		40		

Schedule D (Form 1041) 2013

41

42

41

42

43

45

G, line 1a (or Form 990-T, line 36) .

Figure the tax on the amount on line 27 Use the 2013 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041) . . . .

Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule

VAN DYKE/BILLY FOUNDATION 46-3987730
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

	Ind of Property  Description  Date  Date  Date  Date						Date sold	
Gross sale	Depreciation	Cost or	FMV	Adj basis	Excess of	D	acquired_ Gain	<del></del>
price less expenses of sale	allowed/ allowable	other basis	as of 12/31/69	as of 12/31/69	FMV over adı basıs	$\coprod$	or (loss)	
	İ	TOTAL CAPITA	AL GAIN DIST				381.	
	İ	30,000 SHS I				Р	10/12/2009	VARIOUS
1,219,816.	İ	11,094.					1,208,722.	
TOTAL GAIN(L	oss)						1,209,103.	
	L	<u> </u>				$\perp$		

# ATTACHMENT 1

# FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

NET INVESTMENT INCOME	2,078.	2,078.
REVENUE AND EXPENSES PER BOOKS	2,078.	2,078.
		TOTAL
DESCRIPTION	CHARLES SCHWAB #1284-1899	

ATTACHMENT 1

VAN DYKE/BILLY FOUNDATION

46-3987730

ATTACHMENT 2

FORM 990PF, PART I - TAXES

EXPENSES PER BOOKS REVENUE AND

NET INVESTMENT INCOME

FOREIGN TAXES PAID

DESCRIPTION

72.

72.

TOTALS

ATTACHMENT 2

12:50:12 PM V 13-4.6F 4955GH 1435 5/8/2014 46-3987730

ATTACHMENT 3

- CORPORATE STOCK PART II FORM 990PE,

DFA GLOBAL EQUITY MATTHEWS ASIAN GROWTH OPPENHEIMER STEELPATH

BOOK VALUE ENDING

102,629. 40,069. 60,792. ENDING

100,574. 40,760. 60,017.

203,490.

201,351.

4955GH 1435 5/8/2014

12:50:12 PM V 13-4.6F

DESCRIPTION

TOTALS

46-3987730

ATTACHMENT 4

# - CORPORATE BONDS PART II FORM 990PE,

DESCRIPTION	DEA ONE YEAR FIXED INCM DOUBLETINE TOTAL RETURN	GOLDMAN SACHS STRATEGIC NUVEEN SYMPHONY CREDIT

TOTALS

ENDING <u>FMV</u>	79,961. 39,635. 40,667.	200,552.
ENDING BOOK VALUE	80,133. 40,382. 40,152. 40,481.	201,148.

ATTACHMENT 5

# FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

WILLIAM G. VAN DKYE 256 INTERLACHEN ROAD

PRESIDENT/CHAIR/TREASURER

HOPKINS, MN 55343

JODI KAY BILLY 256 INTERLACHEN ROAD HOPKINS, MN 55343

VICE-CHAIR/SECRETARY

ALEXANDER G. VAN DYKE 256 INTERLACHEN ROAD HOPKINS, MN 55343

DIRECTOR

STEPHANIE J. VAN DYKE 256 INTERLACHEN ROAD HOPKINS, MN 55343

DIRECTOR

ATTACHMENT 5

ATTACHMENT 6

# FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

WILLIAM G. VAN DYKE JODI KAY BILLY Name of exempt organization: Van Dyke/Billy Foundation

EIN: 46-3987730

Tax Year: 2013 990-PF

This return has been efiled on 5/15/2014 and rejected on 5/15/2014.

2013 Locator: 4955GH

Close

Refresh

Rebuild

Free

**DeActivate Return** 

Electronic Filing information for the locator: 4955GH

		Federal										Federal Only	Only		
Jurisdiction Fed Service Alerts Type	Fed Form	Service	Alerts	Filing Type	Filing Status	e- File Type	Create Date	Lock Date Option Sent	Date Sent	Date Ack.	DCN	Debts	N N	DCN Debts PIN EIC Debit Ack Rec'd	Direct Debit In Locator
FED				RETURN Rejecte	Rejected		5/8/2014 1 13 46 PM		5/15/2014 5/15/2014 9·16·00 9·31·00 AM AM	5/15/2014 9 31 00 AM					Z

Form	8949	(2013)	

Attachment Sequence No 12A

Page 2

Name(s) shown on return (Name and SSN or taxpayer identification no not required if shown on other side.)

VAN DYKE/BILLY FOUNDATION

(F) Long-term transactions not reported to you on Form 1099-B

Social security number or taxpayer identification number

46-3987730

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check Box D, E, or F below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later

Part II

Long-Term. Transactions involving capital assets you held more than one year are long term. For short-term transactions, see page 1.

**Note.** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a, you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

u	a separate Form 6343, page 2, for each applicable box in you have more long-term transactions than will fit on this page for one c
n	more of the boxes, complete as many forms with the same box checked as you need
ļ	X (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
l	(E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS

1 (a) Description of property (Example 100 sh XYZ Co )	(b) Date acquired (Mo , day, yr )	Date acquired   Date sold or	(c) (d) (e) (f) (e) (sate sold or Proceeds (basis See the	Proceeds has See the	(e) Cost or other basis See the If you enter an amount in column (g), enter a code in column (f) See the separate instructions Subtract	(d) Cost or other coceeds Casis See the Separate Instru	If you enter an amount in column (g), enter a code in column (f) See the separate Instructions		(h) Gain or (loss) Subtract column (e) from column (d) and
(Example 100 sit X12 00 )	(IWO , day, yr )	(Mo, day, ут)	(see instructions)	see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)		
30,000 SHS DONALDSON COMPANY INC	10/12/2009	VARIOUS	1,219,816.	11,094.			1,208,722.		
		_							
		_							
				· 					
		i							
2 Totals. Add the amounts in colu (subtract negative amounts) E include on your Schedule D, lin checked), line 9 (if Box E above (if Box F above is checked) ▶	nter each tota e 8b (if Box D	I here and above is	1,219,816.	11,094.			1,208,722.		

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment