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OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

▶ Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-PF and its instructions is at <u>www.irs.gov/form990pf</u>.

For	cale	ndar year 2014, or tax y	ear beginning 01-	01-2014	, aı	nd ending 1	2-31-2014				
		indation				A Employer id	entification numbe	er			
OC	onnor F	Family Foundation				20-8968716					
Num	ber and	I street (or P O box number if mail is	not delivered to street address) Room/suite		B Telephone nu	mber (see instruction	ns)			
		mit Place		, , , , , , , , , , , , , , , , , , , ,		(952) 443-3623					
City	or town	ı, state or province, country, and ZIP o	r foreign nostal code	1		C If exemption	application is needin	g, check here			
		55318	i rorcigii postai code			2 II CACIIIPUOII	application is penulli	g, andak nere 🗜			
G C ^L	G Check all that apply			former public charity	,	D.1 Fax	annantina steet t	. –			
G CI	іеск а	Final return	A mended return	Tormer public charity	,		ganizations, check h	·			
		Address chan				rganizations meeting k here and attach co					
H Check type of organization Section 501(c)(3) exempt priva						ındatıon status was t n 507(b)(1)(A), chec					
		4947(a)(1) nonexempt charita									
		ket value of all assets at end from Part II, col. (c),	J Accounting method Other (specify)	I ∨ Cash I Acci	rual		ation is in a 60-mont n 507(b)(1)(B), chec				
line	16) -	\$ 202,524	(Part I, column (d) must	be on cash basis.)			(- , (- , (- , ,				
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) N	let investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)					
	1	Contributions, gifts, grants, et	c , received (attach								
		schedule)		25,037							
	2	Check 🕨 🦵 If the foundation is									
	3	Interest on savings and tempo	· '	c 7c=		6 765					
	4	Dividends and interest from se	curities	6,765		6,765					
Revenue	5a	Gross rents									
	b 6a	Net gain or (loss) from sale of		14,133							
	b	Gross sales price for all asset									
		63,692									
	7	Capital gain net income (from	ŀ			14,133					
	8	Net short-term capital gain	ŀ								
	9	Income modifications									
	10a	Gross sales less returns and allowances									
	ь	Less Cost of goods sold									
	С	Gross profit or (loss) (attach s	chedule)								
	11	Other income (attach schedule	e)								
	12	Total. Add lines 1 through 11		45,935		20,898					
	13	Compensation of officers, direct	ŀ								
JA.	14	Other employee salaries and v	· -								
<u>3</u>	15	Pension plans, employee bene	ŀ								
Expenses	16a b	Legal fees (attach schedule). Accounting fees (attach schedule)		1,150		1,150					
	l	Other professional fees (attach		1,130		1,130					
ĭVe	17	Interest	·								
tra1	18	Taxes (attach schedule) (see	ŀ	% 45		45					
E	19	Depreciation (attach schedule	,								
Administrative	20	Occupancy									
Ă	21	Travel, conferences, and meet	ıngs								
and	22	Printing and publications	ŀ								
2	23	Other expenses (attach sched	· .	2,276		2,276					
Operating	24	Total operating and administra	-								
<u>\$</u>	35	Add lines 13 through 23	ŀ	3,471		3,471		11 170			
0	25	Contributions, gifts, grants par	ŀ	11,170				11,170			
	26	Total expenses and disburseme	ents. Add lines 24 and	14,641		3,471		11,170			
	27	Subtract line 26 from line 12				·					
	a	Excess of revenue over expens	ses and disbursements	31,294							
	ь	Net investment income (if neg	· · · · · · · · · · · · · · · · · · ·			17,427					
	С	Adjusted net income (if negati	ve, enter -0 -)								

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	16,118	18,818	
	2	Savings and temporary cash investments	,	,	,
	3	Accounts receivable -			
	3	Less allowance for doubtful accounts			
	4	Pledges receivable			
	4				
	_	Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	_	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts -			
sets	8	Inventories for sale or use			
3. 2.	9	Prepaid expenses and deferred charges			
ď	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	152,490	166,189	183,706
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) -			_
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis 🟲			
		Less accumulated depreciation (attach schedule) 🟲			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers—see the			
		instructions Also, see page 1, item I)	168,608	185,007	202,524
	17	Accounts payable and accrued expenses			
	18	Grants payable			
φ	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ap	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)		0	
		Foundations that follow SFAS 117, check here			
9		and complete lines 24 through 26 and lines 30 and 31.			
Balance	24	Unrestricted	168,608	185,007	
ପାର	25	Temporarily restricted			
	26	Permanently restricted			
Fund	20	Foundations that do not follow SFAS 117, check here			
		and complete lines 27 through 31.			
y 0,	27				
Assets	27	Capital stock, trust principal, or current funds			
155	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	160.600	105.007	
Net	30	Total net assets or fund balances (see instructions)	168,608	185,007	
	31	Total liabilities and net assets/fund balances (see instructions)	168,608	185,007	
Pa	rt II				
1		Total net assets or fund balances at beginning of year—Part II, column (
		, , , , , , , , , , , , , , , , , , , ,			168,608
2		Enter amount from Part I, line 27a			31,294
3		Other increases not included in line 2 (itemize)			283
4		Add lines 1, 2, and 3		. <u>.</u> 4	200,185
5		Decreases not included in line 2 (itemize) 🟲		_5	15,178
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Pa	art II, column (b), lır	ie 30 . 6	185,007

the Part VI instructions

			s) of property sold (e g , re common stock, 200 shs M	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)	
1 a	BP PLC Spons ADR			Р	2014-03-20	2014-09-04	
	Rockwell Automation	1			Р	2013-01-01	2014-01-01
c	CVR Refining LP				Р	2013-06-18	2014-03-20
d	CVR Refining LP				P	2013-08-16	2014-03-20
e							
) Gross sales price		(f) Depreciation allowe (or allowable)	t or other basis opense of sale		or (loss)) minus (g)	
а		6,901	,	· ·	7,07		-171
ь		52,207			36,61	0	15,597
c 2,292				3,06	9	-777	
d		2,292			2,80	+	-516
<u>е</u>					,		
	mnlete only for assets	showing c	jain in column (h) and owne	d by the foundation	n on 12/31/69	(I) Counc (Col	(h) gaın mınus
	F M V as of 12/31/69	3110 Willing S	(j) A djusted basis as of 12/31/69	(k) Exc	cess of col (1)	col (k), but not	less than -0-) or om col (h))
а							-171
ь							15,597
С							-777
d							-516
e							
3	•	al gaın or	(loss) as defined in sectio e 8, column (c) (see instru	ctions) If(loss), e)	3	14,133
Part \	V Qualification (Jnder S	Section 4940(e) for R	educed Tax or	Net Investme	1 - 1	
(For opt			undations subject to the se				
Ifsectio	on 4940(d)(2) applies,	leave this	s part blank				
			4942 tax on the distributa under section 4940(e) Do			eriod?	┌ Yes ┌ No
1 Ent	er the appropriate amo	unt ın ea	ch column for each year, se	ee instructions befo	ore making any ent	ries	
	(a) period years Calendar or tax year beginning in)	Adjus	(b) ted qualifying distributions	(c) Net value of noncha		(d) Distributio (col (b) divided	n ratio
	2013		5,670		90,067		0 06295
	2012		6,070		80,143		0 07574
	2011		6,070		81,102		0 07484
	2010		4,820		77,171		0 06246
	2009	,	4,000		72,331		0 05530
2	,	` '			· · · · ·	2	0 33130
3	the number of years	he found	the 5-year base period—divation has been in existence	e ıf less than 5 yea	rs	3	0 06626
4			itable-use assets for 2014		—	4	178,001
5						5	11,794
6	Enter 1% of net inve	stment ır	come (1% of Part I, line 2	7b) .	[6	174
7	Add lines 5 and 6.					7	11,968
8	Enter qualifying distr	ibutions	rom Part XII, line 4		[8	11,170
	If line 8 is equal to o	greater	than line 7, check the box	ın Part VI, lıne 1b,	and complete that	part using a 1% tax	rate See

	990-PF (2014) t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst			age 4
1a		ructio	115)	
Id	on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary–see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			349
	here Fand enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others			
	enter -0 -) 2			
3	Add lines 1 and 2			349
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			349
6	C redits/P ayments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 386			
b	Exempt foreign organizations—tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			386
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			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10			37
11	Enter the amount of line 10 to be Credited to 2015 estimated tax 37 Refunded 11			
1a	To VII-A Statements Regarding Activities During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No No
	It participate or intervene in any political campaign?	. 1a		No
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions			
	for definition)?	1b		No
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.			
С	Did the foundation file Form 1120-POL for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation 🕨 \$ (2) On foundation managers 🕨 \$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers 🕨 \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		No
_	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	. 3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No No
ч а b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	-	No
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		No
_	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or] .	1	
	By state legislation that effectively amends the governing instrument so that no mandatory directions	J,	<u> </u>	
	that conflict with the state law remain in the governing instrument?	. 6	Yes	
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	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
Ь	►MN If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney			
D	General (or designate) of each state as required by General Instruction G? If "No," attach explanation.	8b	Yes	
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 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)?			
	If "Yes," complete Part XIV	. 9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
	and addresses.	10		No

				age s
	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			١
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	. 12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►N/A			
14	The books are in care of ▶Bernard O Connor Telephone no ▶(952)443-	3623	
	Located at ▶2715 Summit Place Chaska MN ZIP+4 ▶55318			
4=				
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here			- 1
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over		Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
T G	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
14	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days) Yes V No			
h	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
b	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1 _b		No
		10		140
_	Organizations relying on a current notice regarding disaster assistance check here			
C				No.
_	that were not corrected before the first day of the tax year beginning in 2014?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2014? Yes ▶ No			
	If "Yes," list the years > 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			١
	to all years listed, answer "No" and attach statement—see instructions)	2b		No
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2014 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			1
	by the Commissioner under section $4943(c)(7)$) to dispose of holdings acquired by gift or bequest, or (3)			1
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			1
	if the foundation had excess business holdings in 2014.)	3b		No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		No

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Pai	rt VIII-B Statements Rega	ardii	ng Activities for	· Wł	nich Form 4720	May	, Be Required <i>(cont</i>	inue	d)	
5a	During the year did the foundation	n pay	orincurany amoun	t to						
	(1) Carry on propaganda, or othe	rwise	attempt to influenc	e leg	jislation (section 49	45(e	(a)))?	✓ No		
	(2) Influence the outcome of any	-	•	-						
	on, directly or indirectly, any		=			•				
	(3) Provide a grant to an individu	ıal foı	travel, study, or oth	hers	ımılar purposes?		┌ Yes ┌	√ No		
	(4) Provide a grant to an organiz									
	ın section 4945(d)(4)(A)? (s	ee in	structions)			•	\ Yes \	√ No		
	(5) Provide for any purpose othe		= •							
	educational purposes, or for									
b	If any answer is "Yes" to 5a(1)-									
	Regulations section 53 4945 or			_					5b	No
	Organizations relying on a currer	nt not	ice regarding disast	eras	ssistance check her	e		_		
C	If the answer is "Yes" to questio		**		·					
	tax because it maintained expen	diture	e responsibility for th	ne gr	ant?		\ Yes \	√ No		
	If "Yes," attach the statement requ	ııred i	by Regulations sectio	n 53.	.4945–5(d).					
6a	Did the foundation, during the ye	ar, re	ceive any funds, dire	ectly	or indirectly, to pay	prei	niums on			
	a personal benefit contract?							√ No		
b	Did the foundation, during the ye	ar, pa	y premiums, directl	y or i	indirectly, on a perso	onal	benefit contract?		6b	No
	If "Yes" to 6b, file Form 8870.									
7a	7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?							√ No		
b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?								7b	No	
Par		t Of	ficers, Directors	s, T	rustees, Founda	itio	n Managers, Highly	Paid	Emp	loyees,
	and Contractors				.h.i					
	List all officers, directors, trustee		Title, and average		c) Compensation ((d) Contributions to			
	(a) Name and address	(5)	hours per week devoted to position		` ' '		mployee benefit plans	(e) Expense accou other allowances		
		d			-0-)	and	deferred compensation	other allowances		
Berna	rd J O'Connor		sident	0						
	5 Summit Place	0 00)							
	ka,MN 55318 LO'Connor	C = =			0					
	5 Summit Place	0 0	retary D							
	ska, MN 55318									
	0 0'Connor	Vice	President		0					
120	8 Nolden St	0 00								
Los	Angeles,CA 900421956									
_2	Compensation of five highest-paid	d em	oloyees (other than	thos	e included on line 1-	-see	· · · · · · · · · · · · · · · · · · ·	nter "I	NONE."	
(2)	Name and address of each emplo		(b) Title, and aver	age			(d) Contributions to employee benefit	(0)	Evnono	a account
(a)	paid more than \$50,000	yee	hours per week		(c) Compensation	n	plans and deferred			e account, owances
			devoted to positi	on			compensation			
NON	IE									
]							
			1							
			1							
			1							
Tota	I number of other employees paid	over	<u> </u>				·			

Information About Officers, Directors, Truste	es. Foundation Managers. His	page / hlv Paid Employees.
and Contractors (continued)		
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	
(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.		<u> </u>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rele	r of Expenses	
organizations and other beneficiaries served, conferences convened, research papers produ	ced, etc	Lxpelises
1		
2		
3		
Power IV D. Common of Program Polated Investments (and instructions)	
Part IX-B Summary of Program-Related Investments (some part in the street of the two largest program-related investments made by the foundation during the street of the street investment of the street of the stre		A mount
1	the tax year on lines I and E	Amount
-		
2		
-		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		•

Pa	Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	oreign f	oundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	158,59
b	Average of monthly cash balances	1b	22,119
c	Fair market value of all other assets (see instructions)	1c	(
d	Total (add lines 1a, b, and c)	1d	180,71
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	180,71
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	2,71
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	178,00
6	Minimum investment return. Enter 5% of line 5	6	8,900
Pa	TXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper certain foreign organizations check here and do not complete this part.)	atıng fo	oundations and
1	Minimum investment return from Part X, line 6	1	8,900
2a	Tax on investment income for 2014 from Part VI, line 5 2a 349	9	
b	Income tax for 2014 (This does not include the tax from Part VI) 2b	1	
c	Add lines 2a and 2b	2c	349
3	Distributable amount before adjustments Subtract line 2c from line 1	3	8,55
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	8,55
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	8,55
Par	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	11,170
b	Program-related investments—total from Part IX-B	1b	
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	За	
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	11,170
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 (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	11,170
	Note: The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whet	her the f	

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

	olidistributed flicollie (see liistru	ictions)			
		(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1	Distributable amount for 2014 from Part XI, line 7	I	, , , , , , , , , , , , , , , , , , , ,		8,551
	Undistributed income, if any, as of the end of 2014				
	Enter amount for 2013 only				
	Total for prior years 20				
3	Excess distributions carryover, if any, to 2014				
	From 2009				
	From 2010				
	From 2011				
	From 2012				
е	From 2013 1,304				
f	Total of lines 3a through e	6,903			
4	Qualifying distributions for 2014 from Part				
	XII, line 4 🕨 \$ 11,170				
а	Applied to 2013, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)	0			
Ч	Applied to 2014 distributable amount				8,551
	Remaining amount distributed out of corpus	2,619			
	Excess distributions carryover applied to 2014				
,	(If an amount appears in column (d), the				
	same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	9,522			
	Prior years' undistributed income Subtract 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				
a	Subtract line 6c from line 6b Taxable amount —see instructions				
e	Undistributed income for 2013 Subtract line				
_	4a from line 2a Taxable amount—see				
	instructions				
f	Undistributed income for 2014 Subtract				
	lines 4d and 5 from line 1 This amount must be distributed in 2015				
7	Amounts treated as distributions out of				
•	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election may				
	be required - see instructions)				
8	Excess distributions carryover from 2009 not	387			
_	applied on line 5 or line 7 (see instructions)				+
9	Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	9,135			
10	Analysis of line 9				
а	Excess from 2010				
b	Excess from 2011 2,087				
C	Excess from 2012 2,116				
d	Excess from 2013 1,304				
е	Excess from 2014 2,619				

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

c Any submission deadlines

factors

Form **990-PF** (2014)

3 Grants and Contributions Paid		proved for F	uture Payment	ı
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year See Additional Data Table	or substantial contributor	recipient		
Total	<u> </u>	<u> </u>	▶ 3a	11,170
	-		<u> </u>	

Form 990-I	<u> </u>	na Astivitis	\ <u></u>			Page 12
	Analysis of Income-Produci		usiness income	Excluded by section	n 512, 513, or 514	(e)
_	Program service revenue a b c d e f g Fees and contracts from government agencies		(b) A mount	(c) Exclusion code	(d) A mount	Related or exempt function income (See instructions)
						mstructions)
f						
2 Membe 3 Interes	rship dues and assessments st on savings and temporary cash ments					
	nds and interest from securities			14	6,765	
a Debt-	financed property					
6 Net rer	ebt-financed property					
8 Gain or	nvestment income					
9 Netinc	ome or (loss) from special events			18	14,133	
	profit or (loss) from sales of inventory revenue a					
b						
	al Add columns (b), (d), and (e).				20,898	
13 Total.	Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify ca				.3	20,898
	-B Relationship of Activities to	the Accom				
Line No. ▼	Explain below how each activity for which the accomplishment of the foundation's instructions)					

Part XVI	Information Reg Noncharitable E				actions	and R	elationships	With			<u> </u>
	rganization directly or inc 01(c) of the Code (other									Yes	No
organiza	ions?										
a Transfer	from the reporting found	lation to a	noncharitable	exempt organiza	tion of						
	h								1a(1)		No
(2) Oth	erassets								1a(2)		No
b O ther tra											
• •	s of assets to a nonchari								1b(1)		No
	hases of assets from a no								-		No
(3) Rental of facilities, equipment, or other assets											No
									1b(4)		No
	ns or loan guarantees								1b(5)		No
(6) Perfo	rmance of services or me	embership	or fundraising	solicitations					1b(6)		No
_	of facilities, equipment, m	-							1c		No
of the go in any tra	swer to any of the above in ods, other assets, or servansaction or sharing arrar	rices givengement,	n by the reporti show in column	ing foundation If (d) the value of	the foun the good	dation re ls, other	ceived less than assets, or service	n fair marke ces receive	et value d		
(a) Line No	(b) Amount involved	(c) Name o	f noncharitable exe	empt organization	(d) De	escription o	f transfers, transact	ions, and sha	ring arra	ngemer	nts
25 In the fee											
describe	undation directly or indire d in section 501(c) of the complete the following so (a) Name of organization	Code (ot	her than sectio		n sectior			otion of relation	.厂Ye	s F	No
						+					
						+					
the	der penalties of perjury, I best of my knowledge an rmation of which preparei	d belief, i	t is true, correc					n taxpayer	r) is bas	ed on	
Here	*****			2015-05-11	_)	*****		May the return with the			
	Signature of officer or tru	ıstee		Date		Γıtle			r) ? 🔽 Y	'es ┌ N	No
	Print/Type preparer's na Patricia Moskalik	ame	Preparer's Sıgn	nature	Date		Check if self- employed ►	PTIN PC	09544	13	
Paid Preparer Use	Firm's name ► ET Kelly & Associates	LLC					Firm's EIN ►	1			
Only	Firm's address ► 5001 American Blvd W Suite 699 Bloomington, MN Phor 55437						Phone no (952	2)548-915	0		

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

Bernard	1	\cap	'	۸n	nc	r
Dellialu	J	\circ	_	UII	HIL	,,

Carol L O'Connor

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
American Cancer Society PO Box 22538 Oklahoma City,OK 73123	N/A	Public	To support the mission of the organization	200
Department of Natural Resources 500 Lafayette Road St Paul, MN 55155	N/A	Public	To support the mission of the organization	200
Red Cross 2025 E Street NW Washington, DC 20006	N/A	Public	To support the mission of the organization	100
St Martin's by the Lake Episcopal C 2801 Westwood Rd Minnetonka Beach, MN 55361	N/A	Public	To support the ministries of this church	4,000
The Gregorian Singers 75 Inglewood Long Lake, MN 55356	N/A	Public	In support of the organization's mission	5,000
Children's Surgery International 825 Nicollet Mall Suite 706 Minneapolis, MN 55402	N/A	Public	To support the organization's mission	100
So Cal Public Radio 474 South Raymond Avenue Pasadena,CA 91105	N/A	Public	In support of the organization's mission	120
Remer Volunteer Ambulance Service 109 Forestry Avenue Remer, MN 56672	N/A	Public	In support of the organization's mission	100
Homeboy Industries 130 W Bruno St Los Angeles, CA 90012	N/A	Public	In support of the organization's mission	100
ASPCA 424 E 92nd St New York, NY 10128	N/A	Public	In support of the organization's mission	250
Friends of Griffith Park PO Box 27573 Los Angeles, CA 90027	N/A	Public	In support of the organization's mission	250
North Central LA Animal Shelter 3201 Lacy Street Los Angeles, CA 90031	N/A	Public	In support of the organization's mission	250
Overthe Hills Gang PO Box 40 Outing, MN 56662	N/A	Public	In support of the organization's mission	500
Total			▶ 3a	11,170

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OMB No 1545-0047

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

2014

Employer identification number

O Connor Family Founda	tion	20-8968716
Organization type (che	eck one)	
Filers of:	Section:	
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a priv	vate foundation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	☐ 4947(a)(1) nonexempt charitable trust treated as a private	foundation
	501(c)(3) taxable private foundation	
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, c rom any one contributor Complete Parts I and II See instructions for d	
other property) fr	romany one contributor. Complete Parts I and II. See instructions for d	letermining a contributor's total contributions
opeoidi raice		
under sections 5 received from an	on described in section $501(c)(3)$ filing Form 990 or 990-EZ that met the $09(a)(1)$ and $170(b)(1)(A)(vi)$, that checked Schedule A (Form 990 or by one contributor, during the year, total contributions of the greater of or (ii) Form 990-EZ, line 1 Complete Parts I and II	r 990-EZ), Part II, line 13, 16a, or 16b, and that
during the year, t	ion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-Etotal contributions of more than \$1,000 <i>exclusively</i> for religious, charitant of cruelty to children or animals. Complete Parts I, II, and III	
during the year, of this box is check purpose Do not of	on described in section $501(c)(7)$, (8) , or (10) filing Form 990 or 990-Econtributions $exclusively$ for religious, charitable, etc., purposes, but need, enter here the total contributions that were received during the yeacomplete any of the parts unless the General Rule applies to this org ble, etc., contributions totaling \$5,000 or more during the year	no such contributions totaled more than \$1,000 If ear for an exclusively religious, charitable, etc, ganization because it received nonexclusively

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization O Connor Family Foundation Employer identification number

20-8968716

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Bernard Carol O'Connor 9715 Summit Place Chaska, MN 55318	\$25,037	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Name of organization **Employer identification number** O Connor Family Foundation 20-8968716 Noncash Property (see instructions) Use duplicate copies of Part II if additional space is Part II (a) No. (c) (b) (d) from FMV (or estimate) Date received Description of noncash property given Part I (see instructions) \$ 25,037 221 Shares of Rockwell Automation, Inc Stock (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$ (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$ (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions)

nization		Employer identification number
ily Foundation		20-8968716
at total more than \$1,000 for the year fi try For organizations completing Part III, ent e year (Enter this information once See ins	rom any one contributor. Cor ter the total of exclusively religio tructions)▶	described in section 501(c)(7), (8), or (10) mplete columns (a) through (e) and the following line
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(a) Transfer of sift	
Transferee's name, address, and		elationship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transferee's name, address, and	(e) Transfer of gift ZIP 4 Re	elationship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transferee's name, address, and	(e) Transfer of gift ZIP 4 Re	elationship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transferee's name, address, and	(e) Transfer of gift	elationship of transferor to transferee
	at total more than \$1,000 for the year fitry. For organizations completing Part III, enter year (Enter this information once. See instead duplicate copies of Part III if additional spanning (b) Purpose of gift Transferee's name, address, and (b) Purpose of gift Transferee's name, address, and (b) Purpose of gift Transferee's name, address, and (b) Purpose of gift Transferee's name, address, and	(e) Transfer of gift Transferee's name, address, and ZIP 4 (b) Purpose of gift (c) Use of gift (e) Transfer of gift (e) Transfer of gift (e) Transfer of gift (e) Transfer of gift (c) Use of gift (d) Use of gift (e) Transfer of gift (e) Transfer of gift (f) Use of gift (g) Transfer of gift (h) Purpose of gift (e) Transfer of gift (e) Transfer of gift (f) Use of gift (g) Transfer of gift (h) Purpose of gift

TY 2014 Accounting Fees Schedule

Name: OConnor Family Foundation

EIN: 20-8968716

Software ID: 14000265

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Accounting Fees	1,150	1,150	0	0

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TY 2014 Other Decreases Schedule

Name: OConnor Family Foundation

EIN: 20-8968716

Software ID: 14000265

Description	Amount
Difference Book vs. Tax Basis of 2013 Rockwell Sales	15,178

TY 2014 Other Expenses Schedule

Name: OConnor Family Foundation

EIN: 20-8968716

Software ID: 14000265

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Investment Fees	2,276	2,276		

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TY 2014 Other Increases Schedule

Name: OConnor Family Foundation

EIN: 20-8968716

Software ID: 14000265

Description	Amount	
Unrelated business income	283	

TY 2014 Taxes Schedule

Name: OConnor Family Foundation

EIN: 20-8968716

Software ID: 14000265

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Foreign Taxes	20	20		
State Taxes	25	25		