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Return of Private Foundation

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

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

2014

For	calen	dar year 2014 or tax year beginning		, and ending		
Nar	ne of	foundation	A Employer identification	number		
Т	HE	JOSEPH DURDA FOUNDATIO	N		41-1672558	
		nd street (or P O box number if mail is not delivered to street		Room/suite	B Telephone number	
4	10	O PEAVEY ROAD			952-934-29	87
		own, state or province, country, and ZIP or foreign p SKA, MN 55318	C If exemption application is p	ending, check here		
_		all that apply:	Initial return of a fo	rmer public charity	D 1. Foreign organizations	check here
•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Final return	Amended return	,,		
		Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test, mputation
H C	heck	type of organization: X Section 501(c)(3) ex	cempt private foundation		E If private foundation sta	tus was terminated
	Se	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	tion	under section 507(b)(1)	
1 Fa	ır ma	rket value of all assets at end of year J Account	ng method: 🔼 Cash	Accrual	F If the foundation is in a	60-month termination
		Part II, col (c), line 16)	ther (specify)		under section 507(b)(1)	(B), check here
_		939 , 183 . (Part I, colu				1 (4)-
Pa	ırt 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))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(0) Disbursements for charitable purposes (cash basis only)
•	1	Contributions, gifts, grants, etc., received	5,300.		N/A	
	2	Check X if the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	6,494.	6,494.		STATEMENT 1
	4	Dividends and interest from securities	17,775.	17,775.		STATEMENT 2
ne		Gross rents				
	l	Net rental income or (loss)	5,545.		ļ <u> </u>	RECEIVED -
	Ι.	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 83	5,545.			(
Revenue	b	assets on line 6a Capital gain net income (from Part IV, line 2)		5,545.	4029	MAY 2 0 2015
æ	8	Net short-term capital gain		3,343.	1	0
	9	Income modifications			 	DOUCH, UT
	ـ م	Gross sales less returns				AND THE PARTY OF STREET, THE PARTY OF THE PA
	١.	Less Cost of goods sold				
	c	Gross profit or (loss)				
	11	Other income	150.	0.		STATEMENT 3
	12	Total. Add lines 1 through 11	35,264.	29,814.		
	13	Compensation of officers, directors, trustees, etc	6,000.	1,500.		0.
	14	Other employee salaries and wages				
es		Pension plans, employee benefits				
Sus		Legal fees Accounting fees STMT 4	3,500.	900.		2,600.
Š		Other professional fees	3,300.			2,000.
e E	ı	Interest	, "			
ä	ı	Taxes STMT 5	838.	0.		838.
nist	ı	Depreciation and depletion	·			
<u> </u>	20	Occupancy				
₽	21	Travel, conferences, and meetings				
and		Printing and publications	564.	0.		564.
gu		Other expenses STMT 6	1,129.	0.		1,129.
rati	24	Total operating and administrative	40001	0 400		- 404
Operating and Administrative Expens		expenses. Add lines 13 through 23	12,031.	2,400.		5,131.
		Contributions, gifts, grants paid	42,950.			42,950.
	26	Total expenses and disbursements. Add lines 24 and 25	54,981.	2,400.		48,081.
_	07	Subtract line 26 from line 12:	34,301.	2,400.	<u> </u>	40,001.
	1	Excess of revenue over expenses and disbursements	-19,717.			
	l	Net investment income (if negative, enter -0-)		27,414.		
	l	Adjusted net income (if negative, enter -0-)			N/A	

Page 2

	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	
느	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	15,549.	31,402.	31,402.
	2	Savings and temporary cash investments			
	3	Accounts receivable -			
		Less: allowance for doubtful accounts ▶			
ts	4	Pledges receivable ►			
	1	Less: allowance for doubtful accounts		İ	
	5	Grants receivable	**		
	6	Receivables due from officers, directors, trustees, and other	···		
		disqualified persons			
	7		•		· · · · · · · · · · · · · · · · · · ·
		Less: allowance for doubtful accounts	İ		
	R	Inventories for sale or use			 -
Assets		Prepaid expenses and deferred charges	·		
As	10,	Investments - U.S. and state government obligations STMT 7	159,915.	161,763.	161,763.
	1	<u></u>	641,082.	667,217.	667,217.
	1	· _			
	1	· · · · · · · · · · · · · · · · · · ·	79,569.	78,801.	78,801.
	11	Investments - land, buildings, and equipment basis			
	١	Less accumulated depreciation	<u> </u>		
		Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment; basis ▶			
		Less accumulated depreciation			
	15	Other assets (describe INTEREST RECEIVABLE)	126.	0.	0.
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	896,241.	939,183.	939,183.
	17	Accounts payable and accrued expenses			· · · · · · · · · · · · · · · · · · ·
	18	Grants payable		7.77	
Ś	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ä	21	Mortgages and other notes payable		*****	
Ξ		Other liabilities (describe)			
		/	·		
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_	-	Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.		i	
ces	24	Unrestricted	896,241.	939,183.	
ဋ	25	,,, P	030,241.	333,103.	
Şaş	1	Temporarily restricted			
Ā	20	Permanently restricted		··-··	
֚֚֚֚֡֡֡֡֡֡֡֡		Foundations that do not follow SFAS 117, check here			
5		and complete lines 27 through 31.			
şţ	27	Capital stock, trust principal, or current funds			
Net Assets or Fund Balan	l	Paid-in or capital surplus, or land, bldg., and equipment fund			
¥.	29	Retained earnings, accumulated income, endowment, or other funds			
ž	30	Total net assets or fund balances	896,241.	939,183.	
		İ			
_	31	Total liabilities and net assets/fund balances	896,241.	939,183.	
P	art	III Analysis of Changes in Net Assets or Fund Ba	lances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 3	<u> </u>		
		t agree with end-of-year figure reported on prior year's return)		206 241	
		amount from Part I, line 27a	. 1	896,241.	
			2	-19,717.	
		increases not included in line 2 (itemize) UNREALIZED G	WIND WIND FORS		62,659.
		ines 1, 2, and 3		4	939,183.
		eases not included in line 2 (itemize)		5	0.
6	rotal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, con	:mn (b), line 30	6	939,183.

Part IV Capital Gains and Lo	sses for Tax on Investment Income				
	d describe the kind(s) of property sol rick warehouse; or common stock, 2		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a 200 SH TARGET	CORP		P	11/04/13	01/13/14
b 435 SH HAWAIIA		- - -	P	01/13/11	
c 365 SH HAWAIIA			P	04/21/11	
	ORGAN ENERGY PAR		P	04/08/11	
	ORGAN ENERGY PAR	TNERS LP	P	04/21/11	10/06/14
t CAPITAL GAINS	DIVIDENDS			ļ	
9				<u> </u>	<u> </u>
<u>h</u>					
<u> </u>					
<u>k</u>	· · · · · · · · · · · · · · · · · · ·			 	
1				 	
m				· 	
n					
0					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) (e) p	Gain or (loss)	
a 12,136.		13,277.			-1,141.
b 10,417.		10,925.			-508.
c 8,740.		9,207.			-467.
d 27,921.		22,608.			5,313.
e 9,307.		7,775.			1,532.
f 816.					816.
g					
<u>h</u>					
k				.	
I					
m					
n			•		
0					
Complete only for assets showing	ng gain in column (h) and owned by	the foundation on 12/31/69	(I) Los	ses (from col. (h))	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	Gains (excess of but no	of col. (h) gain òver ot less than "-0-")	col. (k),
a					-1,141.
b					-508.
С					-467.
d			·····		5,313.
e					1,532.
f					816.
g h					
1					
<u> </u>					
k					
1					
m					
n					·
0				******	
2 Capital gain net income or (net ca	pital loss) { If gain, also enter If (loss), enter -0	ın Part I, line 7	2		5,545.
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8,	s) as defined in sections 1222(5) an				
If (loss), enter "-0-" in Part I, line 8		J	3	N/A	

<u> </u>	and Losses for Tax on Ir		t Income					
(a) List and descr 2-story brick wai	ibe the kind(s) of property sold (e.g rehouse; or common stock, 200 sh	o., real estate, s. MLC Co.)		(0) H P - D -	ow acquired Purchase Donation	c) Date ad (mo., day		(d) Date sold (mo., day, yr.)
1a								
b SEE ATTACHED	STATEMENT							
C				ļ				
<u>d</u>				-				
<u>e</u>	(f) Depresention allowed	(a) Co.	at ar other basis	┸┯		(h) Car	n or (loss)	
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				(f) minus (
<u>a</u>								
<u>b</u>		ļ						
c d				-+				
e 69,337.		 	63,79	2.				5,545.
	g gain in column (h) and owned by	the foundation		-	(1)	Gains (Co	l. (h) gaın ı	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (1) col. (j), if any		col. (k), but no	ot less than from col. (I	ı -0-) or
a		1	·····	_				
b								
С								
đ								75
<u>e</u>		<u> </u>						5,545.
2 Capital gain net income or (net cap	oital loss) $ \begin{cases} \text{If gain, also ente} \\ \text{If (loss), enter -0} \end{cases} $	r in Part I, line)- in Part I, line	7 7	}	2			5,545.
3 Net short-term capital gain or (loss	s) as defined in sections 1222(5) ar	nd (6):						
If gain, also enter in Part I, line 8, 6 If (loss), enter -0- in Part I, line 8	column (c).			<u>}</u>	3		N/A	
Part V Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	Inve	stment inco	me		
(For optional use by domestic private	foundations subject to the section	4940(a) tax on	net investment in	icome.)			
If section 4940(d)(2) applies, leave th	is part blank.							
, , , , , ,								Yes X No
Was the foundation liable for the secti If "Yes," the foundation does not quali				rioar	•			Yes LA NO
1 Enter the appropriate amount in e				ntries.				
(a) Base period years	(b)			(c)		1	046	(d) ution ratio
Base period years Calendar year (or tax year beginnin	Adiusted auslifung die	stributions	Net value of no	nchari	table-use assets	(0	ol. (b) divi	ution ratio ided by col. (c))
2013		3,041.			857,672			.038524
2012		0,490.			804,849	, [.025458
2011		5,668.			717,285			.021843
2010		7,160.		_	172,297			.215674
2009	1	4,403.			118,852.	 		.121184
2 Total of line 1, column (d)						2		.422683
3 Average distribution ratio for the 5	-vear base period - divide the total	on line 2 hv 5.	or by the number	of vea	rs	-	• • • • • • • • • • • • • • • • • • • •	
the foundation has been in existen	•	on mio E by O,	or by the names	01 904		3		.084537
4 Enter the net value of noncharitable	e-use assets for 2014 from Part X,	line 5				4		914,914.
5 Multiply line 4 by line 3				5		77,344.		
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)		4 4			6		274.
7 Add lines 5 and 6	,					7		77,618.
O Fator qualifiera distributes (Dord VII. Iron 4					8		48,081.
8 Enter qualifying distributions from					A			40,00T
If line 8 is equal to or greater than	line 7, check the box in Part VI, line	t 1b, and comp	nete that part usin	ıg a 1%	tax rate.			

10 Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses

Pa	art VII-A Statements Regarding Activities (continued)			-
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A	•		
14	The books are in care of ► MILES J. COHEN Telephone no. ►952-9	34-2	987	
	Located at ► 10040 INDIGO DRIVE, EDEN PRAIRIE, MN ZIP+4 ►5	5347		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			-
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the			
	foreign country			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	i		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
t	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		X
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2014?	10		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
a	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?			
	If "Yes," list the years \blacktriangleright			
t	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) to all years listed, answer "No" and attach			
	statement - see instructions.)	2b		
(of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
		1		
38	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
t	olf "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 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 2014.) N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
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?	l Ah		l x

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	n Managers, Highly	
Five highest-paid independent contractors for professional services. If none, enter "N	ONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
otal number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produced	information such as the d, etc.	Expenses
N/A		
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 2.	Amount
N/A		

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Total. Add lines 1 through 3

_	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions)
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	905,610. 23,237.
b		1b	23,237.
С	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	928,847.
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	928,847.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	13,933.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	914,914.
6	Minimum investment return. Enter 5% of line 5	6	45,746.
P	art XI Distributable Amount (see instructions) (Section 4942(i)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	45,746.
2a	Tax on investment income for 2014 from Part VI, line 5 2a 548.		
b	Income tax for 2014. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	548.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	45,198.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	45,198.
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	45,198.
P	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). Ine 26	1a	48,081.
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:		
а	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	48,081.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on ret investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	48,081.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	jualifies for	the section

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,	Сограз	rears prior to 2015	2013	2014
line 7	ŀ			45,198.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0.	
b Total for prior years:				
, ,		0.		
3 Excess distributions carryover, if any, to 2014:				
a From 2009				
b From 2010 5,728.				
c From 2011				
d From 2012				
e From 2013				
f Total of lines 3a through e	5,728.			· · · · · · · · · · · · · · · · · · ·
4 Qualifying distributions for 2014 from		+		
Part XII, line 4: ►\$ 48,081.			•	
a Applied to 2013, but not more than line 2a			0.	
b Applied to undistributed income of prior		0		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	U •			45,198.
d Applied to 2014 distributable amount	2,883.			45,130.
e Remaining amount distributed out of corpus	2,003.			0.
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	0.	· · · · · · · · · · · · · · · · · · ·	:	
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	8,611.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'	*			
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0.			
may be required - see instructions)	U • I			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2015.	0.			· · · · · · .
Subtract lines 7 and 8 from line 6a	8,611.			
10 Analysis of line 9:	0,011.			<u> </u>
a Excess from 2010 5,728.	Į			
b Excess from 2011				
c Excess from 2012	ĺ			
d Excess from 2013				
e Excess from 2014 2,883.	}			
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Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment 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 a Paid during the year DUNMAC GOLF FOR VETS 501(C)(3) TO PROVIDE GOLF THERAPY TO VETERANS 1767 18TH AVENUE NW NEW BRIGHTON, MN 55112 WITH POST TRAUMATIC STRESS DISORDER, AS DIAGNOSTED BY THE 2,000. LIVING WELL DISABILITY SERVICES 501(C)(3) SUPPORT FOR GROUP HOME 680 O'NEILL DRIVE FOR THE MENTALLY EAGAN, MN 55121 CHALLENGED AND PHYSICALLY DISABLED. 5,200. MINNEAPOLIS HEART INSTITUTE 501(C)(3) SUPPORT FOR FOUNDATION CARDIO/HEART RESEARCH 920 EAST 28TH STREET, SUITE 100 MINNEAPOLIS, MN 55407 7,000. STORE-TO-DOOR 501(C)(3) TO DELIVER GROCERIES 1935 WEST COUNTY ROAD B2, SUITE 250 AND FOODSTUFFS TO ROSEVILLE, MN 55113 NEEDY/DISABLED ELDERLY CLIENTS AT THEIR HOMES. 3,000. U.S. ELECTRIC WHEELCHAIR HOCKEY 501(C)(3) TO HELP SUPPORT A ASSOCIATION QUALITY HOCKEY PROGRAM 7216 39TH AVE NORTH FOR DISABLED PERSONS MINNEAPOLIS, MN 55427 REQUIRING THE USE OF ELECTRIC WHEELCHAIRS 2,000. SEE CONTINUATION SHEET(S) 42,950 Total b Approved for future payment NONE Total

3 Grants and Contributions Paid During the Ye		.,		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
UNION GOSPEL MISSION		501(C)(3)	SUPPORT FOR FOOD,	<u> </u>
PO BOX 64389		1	SHELTER, AND	
SAINT PAUL, MN 55164			COUNSELING FOR THE	
			TWIN CITIES' HOMELESS	
		ļ	AND INDIGENT.	3,000
UNIVERSITY OF MINNESOTA		501(C)(3)	TO FUND THE JOSEPH	
200 OAK STREET, SUITE 500			DURDA FAMILY	
MINNEAPOLIS, MN 55455			SCHOLARHIP.	5,000
		}		
WILLIAM MITCHELL COLLEGE OF LAW		501(C)(3)	TO FUND THE JOSEPH	
875 SUMMIT AVENUE			DURDA VETERAN'S	
SAINT PAUL, MN 55105			SCHOLARSHIP AT WMCL.	6,250
WINGS OF MERCY		501(C)(3)	TO PROVIDE EMERGENCY	
PO BOX 1921			MEDICAL FLIGHT	
MAPLE GROVE, MN 55311	-		SERVICES TO PATIENTS	
	ļ]	IN "REMOTE"	
		<u> </u>	GEOGRAPHICAL	2,000
BOLDER OPTIONS		E01/G)/3)	TO GUDDORT	
2100 STEVENS AVENUE	'	501(C)(3)	TO SUPPORT	
MINNEAPOLIS, MN 55404			COMPREHENSIVE PROGRAMS THAT FOCUS ON AT-RISK	
MINDMODIO, IN 33404			YOUTH MENTORING.	2,000
MINNESOTA ASSISTANCE COUNCIL FOR		501(C)(3)	TO PROVIDE ASSISTANCE	2,000
VETERANS			THROUGHOUT MINNESOTA	
360 ROBERT STREET N, SUITE 306	İ		TO VETERANS AND THEIR	
SAINT PAUL, MN 55101			FAMILIES WHO ARE	
·			EXPERIENCING LIFE	3,000
GILLETE CHILDREN'S FOUNDATION		501(C)(3)	TO SUPPORT THE "GAITS	· · · · · · · · · · · · · · · · · · ·
200 UNIVERSITY AVENUE E			& MOTION FUND", WHICH	
SAINT PAUL, MN 55101			PROVIDES HEALTH CARE	
		1	FOR CHILDREN WITH	
			SHORT-TERM OR	2,500
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Part XV Supplementary Information				
3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution				
NAME OF RECIPIENT - DUNMAC GOLF FOR VETS				
TO PROVIDE GOLF THERAPY TO VETERANS WITH POST TRAUMATIC STRESS				
DISORDER, AS DIAGNOSTED BY THE VETERANS' ADMINISTRATION HOSPITAL.				
NAME OF RECIPIENT - U.S. ELECTRIC WHEELCHAIR HOCKEY ASSOCIATION				
TO HELP SUPPORT A QUALITY HOCKEY PROGRAM FOR DISABLED PERSONS REQUIRING				
THE USE OF ELECTRIC WHEELCHAIRS IN DAILY LIFE.				
NAME OF RECIPIENT - WINGS OF MERCY				
TO PROVIDE EMERGENCY MEDICAL FLIGHT SERVICES TO PATIENTS IN "REMOTE"				
GEOGRAPHICAL LOCATIONS.				
NAME OF RECIPIENT - MINNESOTA ASSISTANCE COUNCIL FOR VETERANS				
TO PROVIDE ASSISTANCE THROUGHOUT MINNESOTA TO VETERANS AND THEIR				
FAMILIES WHO ARE EXPERIENCING LIFE CRISES.				
NAME OF RECIPIENT - GILLETE CHILDREN'S FOUNDATION				
TO SUPPORT THE "GAITS & MOTION FUND", WHICH PROVIDES HEALTH CARE FOR				
CHILDREN WITH SHORT-TERM OR LONG-TERM DISABILITIES.				

Part XVI-A	Analysis of li	ncome-Producing	Activities
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Enter gross amounts unless otherwise indicated.	Unrelated	business income -		ed by section 512, 513, or 514	(e)
	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion code	Amount	function income
a		·		· · · · · · · · · · · · · · · · · · ·	
b	_				
C					
d					
e					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	6,494.	
4 Dividends and interest from securities			14	17,775.	- · · · · · · · · · · · · · · · · · · ·
5 Net rental income or (loss) from real estate:					
a Debt-financed property					· ·-
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other			1		
than inventory			18	5,545.	
9 Net income or (loss) from special events					· · · · · · · · · · · · · · · · · · ·
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a KINDER MORGAN ENERGY					
b PARTNERS	211110	150.			
c	_				
d					
е					
12 Subtotal. Add columns (b), (d), and (e)		150.	ll	29,814.	0.
13 Total Add line 12, columns (b), (d), and (e)				13	29,964.
(See worksheet in line 13 instructions to verify calculations.))				

Relationship of Activities to the Accomplishment of Exempt Purposes Part XVI-B

Line No ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
	

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, fellowing production of a concharation of the following with any other organizations? 1	1 Did the cryanization directly or indirectly engage in any of the following with any other organization diseased in section 501(c) of the Code (other than section 501(c)) organizations) or in section 527, relating to political organizations? 1 Transfers from the reporting foundation to a montharitable exempt organization of: (1) Cash (2) Other assets 3 Did the transactions: (3) Purchases of assets from a noncharitable exempt organization (4) Perchases of assets from a noncharitable exempt organization (5) Renal of actionise, equipment, or other assets (6) Perdinance of services or membership or fundrasing solicitations (6) Perdinance of services or membership or fundrasing solicitations (7) Perdinance of services or membership or fundrasing solicitations (8) Perdinance of services or membership or fundrasing solicitations (9) Perdinance of services or membership or fundrasing solicitations (9) Perdinance of services or organizations of the services organization in the fundation received less than fair market value in any transaction or sharing arrangement, show in column (j) the value of the goods, other assets, or paid energy organization in the following schedule. Column (b) should always show the fair market value of the goods, other assets, or paid energy organization in the following schedule. Column (b) the value of the goods, other assets, or paid energy organization or sharing arrangement, show in column (j) the value of the goods, other assets, or paid energy organization (d) Description or sharing arrangement, show in column (j) the value of the goods, other assets, organization in section. Some organization or sharing arrangement in section 501(c)(3) or precion 5272 2 if Yes in the full organization organization organization (d) Description of relationship in the full organization of proper (b) the full organization of proper (b) the full organization of information of which proper as any investigation proper (b) the full organization of information of which proper as any investigation	Part AVI	Exempt Organ		sters 10 a	and Transactions	and Relationsi	nips with Nonchar	itable	
the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfer from the reporting foundation to a noncharitable exempt organization of: (1) Cash (2) Other assets (3) Rental of sacilities, equipment, or other assets (4) Rental section of sacilities, equipment, or other assets (5) Loans or loan quarantees (6) Performance of services or immembership or fundrisating solicitations (6) Performance of services or immembership or fundrisating solicitations (6) Performance of services or immembership or fundrisating solicitations (7) States of a solicities, equipment, making lists, other assets, or paid employees (8) Rental and the answer to any of the above or "Fee", complete the following checkedule. Column (6) should always show the four market value of the goods, other assets, or services provided in the answer to any of the above of "Fee", complete the following checkedule. Column (6) the value of the goods, other assets, or services received. (6) Amount involved (6) Amount involved (7) Ramo of inordistribute exempt organization (8) Amount involved (9) Amount involved (9) Amount involved (9) Amount organization (10) Amount involved (11) Amount involved (12) Amount involved (13) Amount involved (14) Amount involved (15) Amount involved (16) Amount involved (17) Amount involved (18) Amo	the Code (other than section 501(c)(3) organizations) or in section 527, relating to pollucial organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of. (1) Cash (2) Other sassis (3) States of assets from a noncharitable exempt organization (1) States of assets from a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Ronals of facilities, equipment, or other assets (4) Reminibusions of assets of any of the above is "75°, complete the diology of englished colouring (b) though always show the fair market value of the poods, other assets, or or services grown by the reporting foundation. If the Goundation received less than fair market value in any transaction or sharing arrangement, show in column (b) through other services grown by the reporting foundation. If the Goundation received less than fair market value in any transaction or sharing arrangement, show in column (b) while of the poods, other assets, or paid employees or services grown by the reporting foundation. If the Goundation received less than fair market value in any transaction or sharing arrangement, show in column (c) the value of the poods, other assets, or paid employees or services grown by the reporting foundation. If the Goundation directly or indirectly or indirectly affiliated with, or related to, one or more tax-exempt organization or sharing arrangement, show in section 501(c),31) or in section 507(c),31) 1 Did the			of the followin	on with any other organizate	on described in section	on 501(c) of	Yes	s No	
a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash (2) Other assets b Citize transactions; (3) Other assets of a seef storal in noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Renal of facilities, equipment, or other assets (5) Renal of facilities, equipment, or other assets (5) Lonso or other assets (5) Lonso or other assets (6) Performance of sevences or membership or fundrasing solicitations (6) Performance of sevences or membership or fundrasing solicitations (6) Performance of sevences or membership or fundrasing solicitations (6) Performance of sevences or membership or fundrasing solicitations (7) In the sevences of the control	a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Casts (2) Other assets b Other transcitions: (2) Purchases of assets to a noncharitable exempt organization (3) Sites of assets to a noncharitable exempt organization (3) Renation facilities, equipment or other assets (4) Renation facilities, equipment or other assets (5) Loans or foat guarantees (6) Performance of services or membership or fundrasing sobinitations (6) Performance of services or membership or fundrasing sobinitations (7) Inches of the answer to any of the above is 7%s. Complete the following chedule. Column (b) should always show the fair market value of the goods, other assets, or services promption by the reporting foundation, reserved sets than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services promption (d) the value of the goods, other assets, or services promption (d) the value of the goods, other assets, or services promption (d) the value of the goods, other assets, or services promption (d) the value of the goods, other assets, or services promption (d) the value of the goods, other assets, or services promption (d) the value of the goods, other assets, or services promption (d) the value of the goods, other assets, or services promption (d) the value of the goods, other assets, or services promption (d) the value of the goods, other assets, or services promption (d) the value of the goods, other assets, or services promption (d) the value of the goods, other assets, or services promption (d) the value of the goods, other assets, or services promption (d) the value of the goods, other assets, or services promption (d) the value of the goods (d) the door of the goods (d) the door of the goods (d) the door of the goods (d) the door of the goods (d) the goods (d) the goods (d) the goods (d) the goods (d) the goods (d) the goods (d) the goods (d) the goods (d) the goods (d) the goods (d) the goods (d) the goods (d) the goo		-			-) 11 00 1(0) 01		+
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(a) Name of organization 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 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.)? Yes No Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's Signature Print/Type preparer's name	(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 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 shown below (see instr.)? Signature of officer or trustee Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Date Check if PTIIN self-employed LANCE R. MADSON Preparer Use Only Firm's name ▶ BOULAY PLLP Firm's address ▶ 7500 FLYING CLOUD DRIVE, #800 MINNEAPOLIS, MN 55344 Phone no. 952-893-9320	ın sectio	on 501(c) of the Code (othe	r than section 501(c)	(3)) or in sect	tion 527?			_ Yes ∟	X No
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 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.)? Yes No	N/A Sign Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge 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 shown below (see instr.)? Signature of officer or trustee Date Title	b If "Yes,"	complete the following sch	redule.						
Sign Here Under penalties of perjury, I declare that I have examined this return, including accorrigancy panying schedules and statements, and to the best of my knowledge 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 shown below (see instr.)? X Yes	Sign Here Under penalties of perjury, I declare that I have examined this return, including according panying schedules and statements, and to the best of my knowledge 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 solution below (see instr.)? May the IHS discuss this return with the preparer is not below. Signature of officer or trustee Date Check If self-employed Print/Type preparer's name Preparer's signature Date Check If self-employed Print's name BOULAY PLLP		(a) Name of org	ganization		(b) Type of organization		c) Description of relationsh	ıp	
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Here Miles J. Coh. Jecty JDF Shown below (see instr.)? X yes No No Signature of officer or trustee Date Title Print/Type preparer's name Preparer's signature Date Check if PTIN self- employed Preparer Firm's name BOULAY PLLP Firm's EIN 41-0887288	Here Signature of officer or trustee Print/Type preparer's name Preparer Use Only Firm's address ► 7500 FLYING CLOUD DRIVE, #800 MINNEAPOLIS, MN 55344 Minneapolis Signature Minneapolis Signature Minneapolis Signature Date Check if PTIN Self-employed Firm's EIN ► 41-0887288 Phone no. 952-893-9320	4					·	best of my knowledge May	the IRS discus	s this
Paid Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Date Check if PTIN self- employed Print's name ▶ BOULAY PLLP Firm's EIN ▶ 41-0887288	Here Signature of officer or trustee Print/Type preparer's name Preparer's signature Date Print/Type preparer's name Preparer's signature Date Check if PTIN self- employed Self- employed Firm's name ► BOULAY PLLP Firm's address ► 7500 FLYING CLOUD DRIVE, #800 MINNEAPOLIS, MN 55344 Phone no. 952-893-9320	Sign	belief, it is true, correct, and cor	mplete. Declaration of pri	eparer (other tha	n taxpayer) is based on all inform	nation of which preparer	has any knowledge return show	n with the prep	arer
Signature of officer or trustee Date Title	Paid Print/Type preparer's name Preparer's signature Date Check if self- employed self- employed Self- employe	Here	Mules J.	Colum	J. D.	5/2/15	Cont. Je			□ No
Paid LANCE R. MADSON Preparer Firm's name BOULAY PLLP self-employed P00131735 Firm's name BOULAY PLLP Firm's EIN \$\infty\$41-0887288	Paid Preparer Use Only LANCE R. MADSON Point	Si	gnature of officer or trustee	÷	/	Date	Title			
Paid LANCE R. MADSON PO0131735 Preparer Firm's name BOULAY PLLP Firm's EIN \$\int 41-0887288\$	Paid Preparer Use Only Firm's name BOULAY PLLP Firm's address 7500 FLYING CLOUD DRIVE, #800 MINNEAPOLIS, MN 55344 Phone no. 952-893-9320	· · · · · · · · · · · · · · · · · · ·	Print/Type preparer's na	ame	Preparer's s	ignature	Date	Check if PTIN		
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Preparer Firm's name ► BOULAY PLLP Firm's EIN ► 41-0887288	Preparer Use Only Firm's name ►BOULAY PLLP Firm's address ► 7500 FLYING CLOUD DRIVE, #800 MINNEAPOLIS, MN 55344 Phone no. 952-893-9320	Paid	LANCE R. M	IADSON	Jm.	RVMd CAA	05/04/15	P00	13173	5
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	MINNEAPOLIS, MN 55344 Phone no. 952-893-9320	•	·	00 FLYING	CLOUD	DRIVE, #800)			
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	Form 990-PF (2014		1 111		,					

423622 11-24-14

FORM 990-PF INTERE	ST ON SAVING	S AND T	EMPORARY	CASH :	INVESTMENTS	STATEMENT	1
SOURCE			(A) REVENUE PER BOOKS		(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME	
KINDER MORGAN ENERG	Y PARTNERS		6,452.		42. 6,452.		
TOTAL TO PART I, LI	NE 3		6,494.		6,494.		
FORM 990-PF	DIVIDENDS	AND INT	EREST FR	OM SECT	JRITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPIT GAIN DIVIDE	IS R	(A) EVENUE R BOOKS	(B) NET INVES MENT INCC		
KINDER MORGAN ENERGY PARTNERS WELLS FARGO	16. 18,575.	ı	0. 816.	10 17,75		L6.	
TO PART I, LINE 4	18,591.		816.	17,77	17,77	75.	
FORM 990-PF		OTHER	. INCOME			STATEMENT	 3
DESCRIPTION			(A) REVEŅ PER BO	UE	(B) NET INVEST- MENT INCOME		
KINDER MORGAN ENERG	Y PARTNERS			150.	0).	
TOTAL TO FORM 990-P	F, PART I, I	LINE 11		150.	C).	

FORM 990-PF	ACCOUNTI	NG FEES	S'	ratement 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	3,500.	900.		2,600.
TO FORM 990-PF, PG 1, LN 16B	3,500.	900.		2,600.
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
FEDERAL TAXES STATE TAXES	813. 25.	0.		813. 25.
TO FORM 990-PF, PG 1, LN 18	838.	0.		838.
FORM 990-PF	OTHĒR E	XPENSES	S'	TATEMENT 6
DESCRIPTION	(A) EXPENSES , PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
POSTAGE OFFICE EXPENSES OUTSIDE SERVICES	392. 163. 574.	- 0. 0. 0.		392. 163. 574.
TO FORM 990-PF, PG 1, LN 23	1,129.	. 0.		1,129.

FORM 990-PF U.S. AND STA	ATE/CITY GOVERNM	ENT OBLIGATIONS	STATEMENT 7	
DESCRIPTION	U.S. OTH GOV'T GOV		FAIR MARKET VALUE	
WELLS FARGO INVESTMENTS	x	161,763.	161,763.	
TOTAL U.S. GOVERNMENT OBLIGATION	ONS	161,763.	161,763.	
TOTAL STATE AND MUNICIPAL GOVER	RNMENT OBLIGATIO	ns		
TOTAL TO FORM 990-PF, PART II,	LINE 10A	161,763.	161,763.	
FORM 990-PF	CORPORATE STOC	K	STATEMENT 8	
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	
WELLS FARGO INVESTMENTS	•	667,217.	667,217.	
TOTAL TO FORM 990-PF, PART II,	LINE 10B	667,217.	667,217.	
FORM 990-PF	CORPORATE BOND	S	STATEMENT 9	
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	
WELLS FARGO INVESTMENTS		78,801.	78,801.	
TOTAL TO FORM 990-PF, PART II,	78,801.	78,801.		

	IST OF OFFICERS, D ND FOUNDATION MANA		STATI	EMENT 10
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
DANIEL J. DURDA 5770 HARDSCRABBLE CIRCLE MOUND, MN 55364	PRESIDENT 2.00	500.	0.	0.
MILES J. COHEN 10040 INDIGO DRIVE EDEN PRAIRIE, MN 55347	SECRETARY 10.00	3,000.	0.	0.
CHERI DURDA COHEN 10040 INDIGO DRIVE EDEN PRAIRIE, MN 55347	VICE PRESIDENT 2.00	DIRECTOR 500.	0.	0.
PEG DURDA KNAPP 7201 YORK AVENUE SOUTH #311 EDINA, MN 55435	VICE PRESIDENT 2.00	DIRECTOR 500.	0.	0.
BRIAN J. COHEN 2060 PINEHURST DRIVE CHANHASSEN, MN 55317	DIRECTOR 2.00	500.	0.	0.
MICHAEL J. COHEN 4031 PIPEWOOD LANE EXCELSIOR, MN 55331	DIRECTOR 2.00	500.	0.	0.
CHRISTOPHER J. COHEN 7661 CENTURY BLVD CHANHASSEN, MN 55317	DIRECTOR 2.00	500.	0.	0.
DAVID M. DURDA 5221 BAPTIST CIRCLE VIRGINIA BEACH, VA 23464	NON-VOTING MEM	BER 0.	0.	0.
LANCE R. MADSON 5975 MCKINLEY PLACE SHOREWOOD, MN 55331	TREASURER 1.00	0.	0.	0.
SUSAN J. LINK 90 SOUTH 7TH STREET MINNEAPOLIS, MN 55402	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	6,000.	0.	0.

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT 11

NAME OF MANAGER

DANIEL J. DURDA MILES J. COHEN CHERI DURDA COHEN

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FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION STATEMENT PART XV, LINES 2A THROUGH 2D

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NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

DANIEL J. DURDA 4100 PEAVEY ROAD CHASKA, MN 55318

EMAIL ADDRESS

N/A

FORM AND CONTENT OF APPLICATIONS

REQUESTS CAN BE MADE ONLY BY A LETTER DESCRIBING THE NEED FOR A GRANT. A COPY OF THE GRANT APPLICANT'S IRS NOTICE OF TAX-EXEMPT STATUS MUST BE ATTACHED TO THE LETTER.

ANY SUBMISSION DEADLINES

NOVEMBER 1 OF THE CURRENT CALENDAR YEAR

RESTRICTIONS AND LIMITATIONS ON AWARDS

THE FOUNDATION WILL ONLY MAKE CONTRIBUTIONS TO NON-PROFIT, TAX-EXEMPT ENTITIES DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, WHICH ARE PUBLIC CHARITIES (I.E., NOT PRIVATE FOUNDATIONS) UNDER SECTION 509(A)(1) OR (2) OF THE CODE, AND WHICH CARRY OUT CHARITABLE AND/OR SCIENTIFIC PURPOSES WITHIN THE MEANING OF SECTION 501(C)(3) OF SAID CODE. THE FOUNDATION REQUIRES GRANT APPLICANTS TO SUPPLY THEIR IRS TAX-EXEMPTION LETTER AS PART OF THE APPLICATION PROCESS. GENERAL GUIDELINE FUNCTIONAL THRUST AREAS AS DEFINED BY THE BOARD ARE: EDUCATION, HEALTHCARE, DISABLED SERVICES, VETERANS AFFAIRS, CHILDREN'S NEEDS, AND INDIGENT NEEDS.

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

MILES J. COHEN 4100 PEAVEY ROAD CHASKA, MN 55318

FORM AND CONTENT OF APPLICATIONS

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