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#### DLN: 93491134021125

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 year beginning 01-	01-2014	, aı	nd ending 1	.2-31-2014			
		ındatıon		A Employer identification number					
AL	ION FO	UNDATION	41-1917226						
Num	ber and	I street (or P O box number if mail is not delivered to street address	B Telephone number (see instructions) (320) 251-9361  C If exemption application is pending, check here						
	BOX 84								
Cıtı	or town	, state or province, country, and ZIP or foreign postal code							
		MN 563020848			C ii exemption	аррисацоп із репат	g, check here F		
<u> </u>		II that apply Initial return Initial return of a	former public charit				_		
GC	теск а	Final return Amended return	Tormer public charit	У		rganizations, check h	• •		
		Address change Name change			test, chec	rganizations meeting k here and attach co	mputation		
		pe of organization Section 501(c)(3) exempt priva				undation status was t n 507(b)(1)(A), chec			
		4947(a)(1) nonexempt charitable trust Other taxa							
		ret value of all assets at end from Part II, col. (c),	l♥ Cash I Acc	rual		ation is in a 60-mont n 507(b)(1)(B), chec			
		\$ 1,545,910 (Part I, column (d) must	t be on cash basis.)						
Pa	rt 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>(b)</b> N	let investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)		
	1	Contributions, gifts, grants, etc , received (attach							
		schedule)	200,000						
	2	Check F required to attach							
		Sch B							
	3	Interest on savings and temporary cash investments	158		158				
	4	Dividends and interest from securities	53,236		53,236				
	5a	Gross rents							
ф	b	Net rental income or (loss)							
Revenue	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a							
Æ	7	Capital gain net income (from Part IV, line 2)			0				
_	8	Net short-term capital gain			Ŭ				
	9	Income modifications				1,700			
	10a	Gross sales less returns and				,			
		allowances							
	b	Less Cost of goods sold							
	C	Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule)	253,394		F2 204	1 700			
	12	<b>Total.</b> Add lines 1 through 11	10,000		53,394	1,700	5,000		
	13 14	Other employee salaries and wages	10,000		3,000		3,000		
S.	15	Pension plans, employee benefits							
Š	16a	Legal fees (attach schedule)							
Expenses	Ь	Accounting fees (attach schedule)	1,600		800		800		
ы ab	c	Other professional fees (attach schedule)							
Ě	17	Interest							
and Administrative	18	Taxes (attach schedule) (see instructions)	7,111		6,632		0		
Ē	19	Depreciation (attach schedule) and depletion							
틀	20	Occupancy							
4	21	Travel, conferences, and meetings							
	22	Printing and publications	<b>₩</b> 364		0		364		
Ē	23	Total operating and administrative expenses.	364		0		304		
Operating	-	Add lines 13 through 23	19,075		12,432		6,164		
8	25	Contributions, gifts, grants paid	168,800		, ·- <b>-</b>		168,800		
_	26	Total expenses and disbursements. Add lines 24 and	·				,		
		25	187,875		12,432		174,964		
	27	Subtract line 26 from line 12							
	a	Excess of revenue over expenses and disbursements	65,519						
	b	Net investment income (if negative, enter -0-)			40,962	1 700			
	C	<b>Adjusted net income</b> (If negative, enter -0 -)	I			1,700			

Dа	rt II	Ralance Sheets Attached schedules and amounts in the description column	Beginning of year			of year
		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 Val	ue	(c) Fair Market Value
	1	Cash—non-interest-bearing				
	2	Savings and temporary cash investments	540,371	5	67,275	567,292
	3	Accounts receivable				
		Less allowance for doubtful accounts 🟲				
	4	Pledges receivable 🟲				
		Less allowance for doubtful accounts 🟲				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) 🟲				
		Less allowance for doubtful accounts 🟲				
2	8	Inventories for sale or use				
sets	9	Prepaid expenses and deferred charges				
Д3	10a	Investments—U S and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)	430,424	<b>%</b> 4'	70,739	978,618
	С	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis				
		Less accumulated depreciation (attach schedule)				
	12	Investments—mortgage loans				
		Investments—other (attach schedule)				
		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				
	10	instructions Also, see page 1, item I)	970,795	1.0	38,014	1,545,910
	17	Accounts payable and accrued expenses	3,0,133	2,0		1,5 15,515
	18	Grants payable				+
S.		Deferred revenue				1
abilities	19	<b>-</b>				-
ā		Loans from officers, directors, trustees, and other disqualified persons  Mortgages and other notes payable (attach schedule)				_
Ï	21	<b>.</b>				_
	22	Other liabilities (describe)	0			
	23	Total liabilities (add lines 17 through 22)	0			<u>'</u>
ş		Foundations that follow SFAS 117, check here				
or Fund Balances		and complete lines 24 through 26 and lines 30 and 31.				
101	24	Unrestricted				1
ä		Temporarily restricted				
'n	26	Permanently restricted				
Fu		Foundations that do not follow SFAS 117, check here 🕨 🔽				
		and complete lines 27 through 31.				
Assets	27	Capital stock, trust principal, or current funds	0		0	
SS	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0		0	<u>'</u>
	29	Retained earnings, accumulated income, endowment, or other funds	970,795	1,0	38,014	1
Net	30	Total net assets or fund balances (see instructions)	970,795	1,0	38,014	
	31	<b>Total liabilities and net assets/fund balances</b> (see instructions)	970,795	1,0	38,014	
Pa	rt II	Analysis of Changes in Net Assets or Fund Balances				
1		Total net assets or fund balances at beginning of year—Part II, column	(a), line 30 (must aç	gree		
		with end-of-year figure reported on prior year's return)		1		970,795
2		Enter amount from Part I, line 27a		2		65,519
3		Other increases not included in line 2 (itemize)		%5 3		1,700
4		Add lines 1, 2, and 3		4		1,038,014
5		Decreases not included in line 2 (itemize) ►		5		0
6		Total net assets or fund balances at end of year (line 4 minus line 5)—P	art II, column (b), lı	ne 30 <b>. 6</b>	, [	1,038,014

the Part VI instructions

	00-PF (2014)					Page <b>3</b>
Part 1	Capital Gains	and Losses for Tax on Inve	stment Incom		1 1	
		the kınd(s) of property sold (e g , re ouse, or common stock, 200 shs M		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	<b>(d)</b> Date sold (mo , day, yr )
1a						
		(6) Danua sahan allawa	d (=) C		(h) Cau	( )
(e	) Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	107	t or other basıs xpense of sale	(e) plus (f)	or (loss) ı mınus (g)
а						
b						
С						
d						
e						
Со	mplete only for assets :	showing gain in column (h) and owne	d by the foundatio	n on 12/31/69	(I) Gains (Col	(h) gain minus
	FM V as of 12/31/69	(j) Adjusted basis	(k) Ex	cess of col (ı)	col (k), but not l	ess than -0-) <b>or</b>
(1)		as of 12/31/69	over	col (j), ıf any	Losses (fro	om col (h))
a						
b						
С						
d						
е						
2	Capital gain net inco	me or (net capital loss)	If gain, also enter If (loss), enter -0			
_	Not short torm sonit			J	2	
3		al gain or (loss) as defined in section				
	If gain, also enter in in Part I, line 8	Part I, line 8, column (c) (see instru	ctions) If (loss), e	enter - 0 -		
				· · · )	3	
Part	Qualification (	Under Section 4940(e) for R	educed Tax or	n Net Investme	nt Income	
For opt	ional use by domestic i	private foundations subject to the se	ection 4940(a) tax	on net investment	income )	
fsection	on 4940(d)(2) applies,	leave this part blank				
Nas the	foundation liable for th	e section 4942 tax on the distribute	able amount of any	vear in the base no	eriod?	┌ Yes ┌ No
		ot qualify under section 4940(e) Do				, 105 , 110
<b>1</b> E n	ter the appropriate amo	unt in each column for each year, se	ee instructions bef	ore making any ent	ries	
	(a)	412		<u> </u>	(d)	
	period years Calendar or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncha		Distribution (col (b) divided	
year (	2013	133,075		1,124,571	(cor (b) divided	0 118334
	2012	134,886		1,139,507		0 118372
	2011	133,525		1,315,009		0 101539
	2010	127,025		891,240		0 142526
	2009	183,722		860,371		0 213538
2	•	ın (d)			2	0 694309
3		ratio for the 5-year base period—div the foundation has been in existence			3	0 138862
4		f noncharitable-use assets for 2014			4	1,383,683
5		e 3	•	<b> </b>	5	192,141
6		stment income (1% of Part I, line 27		_	6	410
7					7	192,551
8		ibutions from Part XII, line 4			8	174,964
-		r greater than line 7, check the box i				

	990-PF (2014) <b>t VI</b> Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst			age <b>4</b>
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			819
	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			0
3	Add lines 1 and 2			819
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)  4			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			819
6	C redits/P ay ments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014   6a   220			
b	Exempt foreign organizations—tax withheld at source 6b			
c	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d			220
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached.			11
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9			610
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10			
11	Enter the amount of line 10 to be Credited to 2015 estimated tax Refunded 11			
Par	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No
	ıt partıcıpate or ıntervene ın any political campaign?	1a		No
b	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 <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials			
_	published or distributed by the foundation in connection with the activities.	4.		N.
	Did the foundation file Form 1120-POL for this year?	1c		No
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year  (1) On the foundation  \$\text{\$\texi{\$\text{\$\tex{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
-	on foundation managers $\blacktriangleright$ \$0			
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
ь	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		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			
	By state legislation that effectively amends the governing instrument so that no mandatory directions	] .		
	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)			
	MN  This consists the line 7 has the foundation formula to a firm of 5 mm (000 DE to the Attention)			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney	OL.	V	
^	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 c
	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			l
	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 ▶PATRICIA ALTON BAKER Telephone no ▶(320	251-	9361	
	Located at ▶444 E ST GERMAIN STREET ST CLOUD MN ZIP+4 ▶56304	,		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —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			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
1 41	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)			
Lu	(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?			
	(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			
<b>L</b>	after termination of government service, if terminating within 90 days ) Yes $\checkmark$ No If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations			
U		16		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			<sub>N-</sub>
_	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?			
_	If "Yes," list the years > 20			
Ь	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> 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
	ıf the foundation had excess business holdings in 2014.)	3b		<u> </u>
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

Pa	rt VII-B Sta	tements Rega	rdir	ng Activities for	Wh	ich Form 4720	May	Be Required (cont	inued	')	1 age O
5a	During the year	did the foundation	n pay	or incur any amoun	t to						
	(1) Carry on pro	paganda, or othe	rwise	attempt to influenc	e leg	ıslatıon (section 49	45(e	:)) <sup>?</sup>	√ No		
	(2) Influence th	e outcome of any	spec	ıfıc publıc election (	see	section 4955), or to	car	ry			
	on, directly	or indirectly, any	voter	registration drive?.				<b>┌</b> Yes <b>┌</b>	√ No		
	(3) Provide a gi	ant to an individu	al for	travel, study, or oth	ners	ımılar purposes?		☐ Yes Ϝ	√ No		
	(4) Provide a gi	ant to an organiza	ition	other than a charita	ble,	etc , organization de	scrib	ped			
	ın section 4	945(d)(4)(A)? (s	ee ins	structions)				<b>┌</b> Yes <b>┌</b>	√ No		
	(5) Provide for a	any purpose other	than	religious, charitabl	e, sc	ientific, literary, or					
	educational	purposes, or for t	he pr	evention of cruelty t	to ch	ıldren or anımals?.		Yes 🔽	√ No		
b	If any answer is	"Yes" to 5a(1)-(	5), d	ıd <b>any</b> of the transad	tion	s fail to qualify unde	r the	exceptions described in			
	Regulations sec	tion 53 4945 or i	nac	urrent notice regard	ling c	lısaster assıstance	(see	instructions)?		5b	
	O rganizations r	elyıng on a curren	t not	ice regarding disast	eras	sistance check her	e	▶↑	- [		
С				4), does the foundat							
								T Yes [	- <sub>No</sub>		
				y Regulations section							
6a				ceive any funds, dire			prer	niums on			
									√ No		
ь	•							benefit contract?		6b	No
	If "Yes" to 6b, fi			,	•	., .			ŀ		-
7a	•		vas tl	ne foundation a party	v to a	nrohibited tax shel	lter ti	ransaction? <b>TYes F</b>	- No		
								the transaction?		7b	
								n Managers, Highly			ovees
Pa		Contractors			-,	ustees, i suitae				р.	, , , ,
1	List all officers,	directors, trustee	s, foı	ındation managers a	nd t	heir compensation (	see i	nstructions).			
				Title, and average		c) Compensation		(d) Contributions to	(e) E:	xpense	account,
	(a) Name and	daddress	1	hours per week evoted to position	(1	(f not paid, enter -0-)		mployee benefit plans I deferred compensation			wances
See	Addıtıonal Data T	ahle		.voccu to position		• ,	una	deterred compensation			
	Additional Data 1	чыс	1								
			┨								
					_				-		
			-								
_2_	Compensation of	five highest-paid	emp	loyees (other than	thos	e included on line 1-	-see	instructions). If none, er	nter "N	ONE."	
<b>/</b>	<b>.</b> N			(b) Title, and aver	age			(d) Contributions to	(-) [		
(a		ss of each emplo nan \$50,000	/ee	hours per week		(c) Compensation	on	employee benefit plans and deferred	1	•	account, wances
	<b>F</b>	····· + · · / · · · /		devoted to positi	on			compensation			
NON	1E										
				1							
									-		
								<u> </u>			
Tota	ı <b>I</b> number of other	employees paid o	vers	\$50,000					1		0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)					
3 Five highest-paid independent contractors for professional serv	ices (see instructions). If none, enter "NONE".				
(a) Name and address of each person paid more than \$50,000	<b>(b)</b> Type of service	(c) Compensation			
NONE					
<b>Total</b> number of others receiving over \$50,000 for professional servi	ces	0			
Part IX-A Summary of Direct Charitable Activities					
List the foundation's four largest direct chantable activities during the tax year. Inclu	do relevant statistical information such as the number of				
organizations and other beneficiaries served, conferences convened, research paper		Expenses			
1					
2					
3					
4					
Part IX-B Summary of Program-Related Investmen					
Describe the two largest program-related investments made by the foundation d	luring the tax year on lines 1 and 2	A mount			
1					
2					
All other program-related investments See instructions					
3					
Total. Add lines 1 through 3		0			

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations. see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. 1 purposes 1a 518.616 1h 886.138 1c 1d 1.404.754 Reduction claimed for blockage or other factors reported on lines 1a and 1e 2 2 3 3 Subtract line 2 from line 1d. 1.404.754 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 4 21.071 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 5 1.383.683 5 69.184 **Distributable Amount** (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and Part XT certain foreign organizations check here  $\blacktriangleright \Gamma$  and do not complete this part.) 69.184 1 Tax on investment income for 2014 from Part VI, line 5. . . . . . 819 2a Income tax for 2014 (This does not include the tax from Part VI). . . 819 2c 3 3 68.365 4 1.700 4 5 5 70.065 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . 7 7 70.065 Part XIII Oualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1 Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . . . . . . . . . . 1a 174.964 1b 0 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. 2 2 3 Amounts set aside for specific charitable projects that satisfy the За. 3b 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 174,964 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 174,964 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

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

Р	art XIII Undistributed Income (see instr	uctions)			<u> </u>
		(a) Corpus	(b) Years prior to 2013	<b>(c)</b> 2013	( <b>d)</b> 2014
1	Distributable amount for 2014 from Part XI, line 7				70,065
2	Undistributed income, if any, as of the end of 2014				
а	Enter amount for 2013 only			0	
b	Total for prior years 20, 20, 20		0		
3	Excess distributions carryover, if any, to 2014				
а	From 2009 141,309				
b	From 2010 83,054				
C	From 2011				
d	From 2012				
	From 2013				
	<b>Total</b> of lines 3a through e	448,901			
4	Qualifying distributions for 2014 from Part				
	XII, line 4 🕨 \$ 174,964				
	Applied to 2013, but not more than line 2a		_	0	
b	Applied to undistributed income of prior years (Election required—see instructions)		0		
C	Treated as distributions out of corpus (Election	0			
_	required—see instructions)				70.065
	Applied to 2014 distributable amount	104.000			70,065
	Remaining amount distributed out of corpus	104,899			
5	Excess distributions carryover applied to 2014	0			
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	553,800			
b	Prior years' undistributed income Subtract		0		
	line 4b from line 2b		U		
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		
е	Undistributed income for 2013 Subtract line				
	4a from line 2a Taxable amount—see			0	
f	Undistributed income for 2014 Subtract				
•	lines 4d and 5 from line 1. This amount must				
	be distributed in 2015				(
7	A mounts 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)	0			
Я	Excess distributions carryover from 2009 not				
·	applied on line 5 or line 7 (see instructions)	141,309			
9	Excess distributions carryover to 2015.				
	Subtract lines 7 and 8 from line 6a	412,491			
	Analysis of line 9				
а	Excess from 2010 83,054				
b	Excess from 2011				
_	Excess from 2012				
d	Excess from 2013				
е	Excess from 2014 104,899				

Check here F if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

- a The name, address, and telephone number or email address of the person to whom applications should be addressed
- b The form in which applications should be submitted and information and materials they should include
- c Any submission deadlines
- **d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Part XV Supplementary Inform	nation (continued)			Page <b>1</b>
3 Grants and Contributions Paid		proved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	A mount
	or substantial contributor	recipient		
a Paid during the year See Additional Data Table	or substantial contributor	recipient		
Total			▶ 3a	168,80
<b>b</b> Approved for future payment				
			h. 21.	

Form 990-I		na Activitio				Page <b>12</b>
	Analysis of Income-Producions amounts unless otherwise indicated		usiness income	Excluded by section	n 512, 513, or 514	(e)
_	n service revenue	(a) Business code	<b>(b)</b> A mount	(c) Exclusion code	(d) A mount	Related or exempt function income (See instructions)
с						
e						
<ul><li>g Fees</li><li>2 Membe</li><li>3 Interes</li></ul>	and contracts from government agencies rship dues and assessments			14	150	
<b>4</b> Divider	nds and interest from securities			14	53,236	
<b>a</b> Debt-	financed property ebt-financed property					
<b>6</b> Net rer	ntal income or (loss) from personal					
<b>7</b> Other I	nvestment income.  r (loss) from sales of assets other than ory					
9 Netinc	ome or (loss) from special events profit or (loss) from sales of inventory.					
<b>11</b> Other r	revenue <b>a</b>					
с						
е						
13 Total. A	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)				53,394 L <b>3</b>	53,394
	Explain below how each activity for which the accomplishment of the foundation's instructions )	the Accom	ported ın column (	e) of Part XVI-A c	ontributed importa	
-						

Form 990-P	°F (2014)										Рa	ge <b>13</b>
Part XVI	Information R Noncharitable					actio	ns and I	Relationships \	With			
section	organization directly or 501(c) of the Code (oth	ındırectly er	ngage in	any of t	the following wit						Yes	No
organiza												
	rs from the reporting fou											l
• •	sh									1a(1)		No
	ner assets			• • •						1a(2)		No
	ansactions				_					41.74		
	es of assets to a noncha											No
	chases of assets from a											No No
	ntal of facilities, equipme									1b(3)		No
	mbursement arrangeme ins or loan guarantees.									1b(5)		No
	ormance of services or i									1b(6)		No
	of facilities, equipment,									<u> </u>		No
<b>d</b> If the ar	nswer to any of the above ods, other assets, or seransaction or sharing ari	e is "Yes," ( ervices give rangement,	complete n by the show in o	e the fol reporti column	lowing schedule ng foundation I	Colum f the fou f the go	nn <b>(b)</b> sho undation r ods, other	uld always show the eceived less than it assets, or service	ne fair ma fair marke es receive	rket va et value ed	1	
(a) Line No	( <b>b)</b> Amount involved	(C) Name o	и попспат	каріе ехе	empt organization	(a)	Description	of transfers, transactio	ns, and sna	ining arra	ngemer	its
describe	oundation directly or ind ed in section 501(c) of t " complete the following (a) Name of organization	he Code (ot schedule		section	· · · · · · · · · · · · · · · · · · ·	ın sectı	-	=		.厂Y∈	es F	
the	nder penalties of perjury e best of my knowledge formation of which prepa *****	and belief, it rer has any	t ıs true,	correct	2015-05-12		*****		May the return	r) is bas	sed on	all
	Signature of officer or t	trustee			Date	,	Title			tr )? 🔽 🕦	∕es 厂 I	Мо
	Print/Type preparer's TODD A JACKSON		Preparer	r's Sıgn	ature	Date		Check if self- employed ▶	PTIN P(	00926	572	
Paid Prepare Use						1		Firm's EIN ► 42-	071432	5		
Only	Firm's address ► 801 NICOLLET MAL MN 55402	L SUITE 11	11M 00.	NNEAP	OLIS,			Phone no (612)	332-430	00		

efile GRAPHIC print - DO NOT PROCESS Schedule B

As Filed Data

DLN: 9349113402112

**Schedule of Contributors** 

Attach to Form 990, 990-EZ, or 990-PF.

2014

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(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.

Name of the organization Empl	ployer identification number
ALTON FOUNDATION	
41-1	1917226

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	501(c)( ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private 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

Check if your organization is covered by the General Rule or a Special Rule.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

#### General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions

#### Special Rules

Γ	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 \(^1/3\%\) support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2\% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
Γ	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III
Г	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

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

Employer identification number

LTON	IFOUNDATION	41	-1917226
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	PAN-O-GOLD BAKING CO 444 E ST GERMAIN STREET  ST CLOUD, MN 56304	\$\$	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
		\$	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
(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
		\$	Person

Name of organization **Employer identification number** ALTON FOUNDATION 41-1917226 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) (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)

cneaule	B (Form 990, 990-EZ, or 990-PF) (2014)			Page
	organization OUNDATION			Employer identification number
LIONI	SUNDATION			41-1917226
Part III		rom any one ter the total of tructions)	contributor. Complete	ribed in section 501(c)(7), (8), or (10) columns (a) through (e) and the following line naritable, etc., contributions of \$1,000 or less for \$
(a) No. from Part I	(b) Purpose of gift		) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and		Transfer of gift Relation	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(с	Use of gift	(d) Description of how gift is held
	Transferee's name, address, and		Transfer of gift Relation	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	(e) Transfer of gift Transferee's name, address, and ZIP 4 Relation		nship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(с	) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and		Transfer of gift Relation	nship of transferor to transferee

## **TY 2014 Accounting Fees Schedule**

Name: ALTON FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	1,600	800		800

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# **TY 2014 Investments Corporate Stock Schedule**

Name: ALTON FOUNDATION

Name of Stock	End of Year Book Value	End of Year Fair Market Value
ROYAL DUTCH SHELL PLC ADR	301,641	795,768
COCA COLA CO.	112,702	129,404
GENERAL ELECTRIC CO.	56,396	53,446

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### **TY 2014 Other Expenses Schedule**

Name: ALTON FOUNDATION

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MN REGISTRATION FEE	25	0		25
OFFICE SUPPLIES	339	0		339

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#### **TY 2014 Other Increases Schedule**

Name: ALTON FOUNDATION

Description	Amount
RECOVERIES OF AMOUNTS TREATED AS QUALIFYING DISTRIBUTIONS IN PRIOR YEARS	1,700

#### **TY 2014 Taxes Schedule**

Name: ALTON FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAX PAID	259	0		0
FEDERAL ESTIMATED EXCISE TAX PAID	220	0		0
FOREIGN TAX WITHHELD	6,632	6,632		0

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

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
•	or substantial contributor			
a Paid during the year				
THE BLAKE SCHOOL 110 BLAKE ROAD SOUTH HOPKINS,MN 55343	NONE	EDUCATIONAL	EDUCATION - ANNUAL IVY CIRCLE FUND	1,000
BRECK SCHOOL ANNUAL FUND 123 OTTAWA AVENUE NORTH MINNEAPOLIS,MN 55422	NONE	EDUCATIONAL	EDUCATION	500
CARLSON SCHOOL OF MANAGEMENT - UNIVERSITY OF MINNESOTA 321 19TH AVENUE SOUTH RM 4-300 MINNEAPOLIS,MN 55455	NONE	EDUCATIONAL	EDUCATION	500
FLORIDA STATE UNIVERSITY FOUNDATION 2010 LEVY AVE TALLAHASSEE,FL 32306	NONE	EDUCATIONAL	EDUCATION	1,000
HAMLINE UNIVERSITY LAW SCHOOL 1536 HEWITT AVENUE ST PAUL, MN 55104	NONE	EDUCATIONAL	EDUCATION	2,100
JACKSONVILLE UNIVERSITY 2800 UNIVERSITY BOULEVARD NORTH JACKSONVILLE,FL 32211	NONE	EDUCATIONAL	EDUCATION	2,000
ORONO ALLIANCE FOR EDUCATION POST OFFICE BOX 211 LONG LAKE, MN 55356	NONE	EDUCATIONAL	EDUCATION	2,000
ROLLINS COLLEGE PO BOX 91- 7415 ORLANDO,FL 32891	NONE	EDUCATIONAL	EDUCATION - THE ROLLINS FUND	1,000
SMITH COLLEGE ALUMNAE FUND ALUMNAE HOUSE NORTHAMPTON,MA 01063	NONE	EDUCATIONAL	EDUCATION	6,000
UNIVERSITY OF MINNESOTA 229 19TH AVENUE SOUTH MINNEAPOLIS,MN 55455	NONE	EDUCATIONAL	EDUCATION	500
UNIVERSITY OF DENVER PO BOX 910585 DENVER,CO 80291	NONE	EDUCATIONAL	EDUCATION	1,000
WILLIAM MITCHELL COLLEGE OF LAW 875 SUMMIT AVENUE ST PAUL, MN 55105	NONE	EDUCATIONAL	EDUCATION	6,000
ABBOTT NORTHWESTERN HOSPITAL FOUNDATION 800 E 28TH ST MR 16509 MINNEAPOLIS,MN 55407	NONE	PUBLIC CHARITY	PROGRAM SUPPORT - THE MOTHER BABY CENTER	5,000
ABBOTT NORTHWESTERN HOSPITAL FOUNDATION 800 E 28TH ST MR 16509 MINNEAPOLIS,MN 55407	NONE	PUBLIC CHARITY	PROGRAM SUPPORT	10,000
ABBOTT NORTHWESTERN HOSPITAL FOUNDATION 800 E 28TH ST MR 16509 MINNEAPOLIS,MN 55407	NONE	PUBLIC CHARITY	PROGRAM SUPPORT - CRITICAL CARE CAMPAIGN	25,000
Total				168,800

# 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				
ALTON FUND FOR CANCER RESEARCH - MAYO CLINIC 200 SOUTHWEST 1ST STREET ROCHESTER,MN 55905	NONE	PUBLIC CHARITY	PROGRAM SUPPORT - CANCER RESEARCH	50,000
ALZHEIMER DISEASE RESEARCH PO BOX 1950 CLARKSBURG,MD 20871	NONE	PUBLIC CHARITY	PROGRAM SUPPORT	2,000
CHILDREN'S MEDICAL SERVICES 5101 GREENWOOD A VENUE WEST PALM BEACH,FL 33407	NONE	PUBLIC CHARITY	PROGRAM SUPPORT	5,000
LAPOINTE COMMUNITY CLINIC PO BOX 45 LAPOINTE,WI 54850	NONE	PUBLIC CHARITY	MEDICAL	5,000
MIMA FOUNDATION PO BOX 7133 JUPITER,FL 33466	NONE	PUBLIC CHARITY	MEDICAL	5,000
MINNESOTA MEDICAL FOUNDATION BOX SDS 12-0861 PO BOX 86 MINNEAPOLIS,MN 55486	NONE	PUBLIC CHARITY	PROGRAM SUPPORT	5,000
INTERFAITH OUTREACH AND COMM PARTNERS 1605 COUNTY ROAD 101 N PLYMOUTH,MN 55447	NONE	PUBLIC CHARITY	SLEEP OUT 2013 SUPPORT	1,000
KNIGHTS OF COLUMBUS 401 FELT KING ROAD VINVENNES,IN 47591	NONE	PUBLIC CHARITY	PROGRAM SUPPORT	100
MACULA VISION RESEARCH 100 FRONT ST SUITE 300 WEST CONSHOHOCKEN,PA 19428	NONE	PUBLIC CHARITY	PROGRAM SUPPORT	100
MINNESOTA ORCHESTRA ASSOCIATION 1111 NICOLLET MALL MINNEAPOLIS,MN 55403	NONE	PUBLIC CHARITY	PROGRAM SUPPORT	1,000
PARKINSON'S FOUNDATION 7700 LEESBURG PIKE 208 SOUTH LOBBY FALLS CHURCH,VA 22043	NONE	PUBLIC CHARITY	PROGRAM SUPPORT	1,000
ST LUKE'S LUTHERAN CARE CENTER 1219 S RAMSEY STREET BLUE EARTH,MN 56013	NONE	PUBLIC CHARITY	PROGRAM SUPPORT	500
LAPOINTE VOLUNTEER FIRE DEPARTMENT PO BOX 6 LAPOINTE,WI 54850	NONE	PUBLIC CHARITY	PROGRAM SUPPORT	5,000
LAWYERS CONCERNED FOR LAWYERS 2550 UNIVERSITY AVENUE WEST ST PAUL, MN 55114	NONE	PUBLIC CHARITY	PROGRAM SUPPORT	2,000
MADELINE ISLAND PUBLIC LIBRARY PO BOX 65 LAPOINTE,WI 54850	NONE	PUBLIC CHARITY	PROGRAM SUPPORT	500
Total				168,800

#### 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				
MOUNT OLIVET ROLLING ACRES 18986 LAKE DRIVE EAST CHANHASSEN,MN 55317	NONE	PUBLIC CHARITY	PROGRAM SUPPORT	500
NATIONAL INDIAN CHILD WELFARE ASSOCIATION 5100 SW MACADAM AVENUE SUITE 300 PORTLAND, OR 97329	NONE	PUBLIC CHARITY	PROGRAM SUPPORT	500
PANCREATIC CANCER ACTION NETWORK 2141 ROSECRANS AVE 7000 EL SEGUNDO,CA 90245	NONE	PUBLIC CHARITY	PURPLE RIDE	1,000
DUCKS UNLIMITED 5898 OLINDA AVE NO STILLWATER,MN 55082	NONE	PUBLIC CHARITY	PROGRAM SUPPORT	2,000
MADELINE ISLAND WILDERNESS PRESERVE 802 FAIRMOUNT AVE ST PAUL, MN 55105	NONE	PUBLIC CHARITY	ENVIRONMENTAL	1,000
MINNESOTA LAND TRUST 2356 UNIVERSITY AVENUE WEST SUITE 240 ST PAUL, MN 55114	NONE	PUBLIC CHARITY	ENVIRONMENTAL	2,000
THE NATURE CONSERVANCY 1101 WEST RIVER PARKWAY SUITE 200 MINNEAPOLIS,MN 55415	NONE	PUBLIC CHARITY	PROGRAM SUPPORT	10,000
SAVE THE LAKE MINNETONKA 23505 SMITHTOWN RD SUITE 120 SHOREWOOD,MN 55331	NONE	PUBLIC CHARITY	PROGRAM SUPPORT	1,000
TIST 7134 SOUTH YALE SUITE 31 0 TULSA,OK 74136	NONE	PUBLIC CHARITY	PROGRAM SUPPORT	1,000
THE LIFT GARAGE PO BOX 6992 MINNEAPOLIS,MN 55406	NONE	PUBLIC CHARITY	PROGRAM SUPPORT	2,000
THE RAPTOR CENTER (U OF M) PO BOX 70870 ST PAUL, MN 55170	NONE	PUBLIC CHARITY	PROGRAM SUPPORT	1,000
Total				168,800

# Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
HOWARD R ALTON III	DIRECTOR 0 50	0	0	0
444 EAST ST GERMAIN STREET ST CLOUD, MN 56304				
DENNIS G LEISTEN	TREASURER 0 50	0	O	0
444 EAST ST GERMAIN STREET ST CLOUD, MN 56304				
PATRICIA ALTON BAKER	SECRETARY 1 00	0	0	0
444 EAST ST GERMAIN STREET ST CLOUD, MN 56304				
HOWARD R ALTON JR	DIRECTOR 0 50	0	0	0
444 EAST ST GERMAIN STREET ST CLOUD, MN 56304				
CAMILLA A ALTON	DIRECTOR 0 50	0	0	0
444 EAST ST GERMAIN STREET ST CLOUD, MN 56304				
ANN L ALTON	PRESIDENT 2 00	10,000	0	0
444 EAST ST GERMAIN STREET ST CLOUD, MN 56304				
JEANINE P ALTON-RYAN	DIRECTOR 0 50	0	0	0
444 EAST ST GERMAIN STREET ST CLOUD, MN 56304				
MICHELLE ALTON BONOMO	DIRECTOR 0 50	0	0	0
444 EAST ST GERMAIN STREET ST CLOUD, MN 56304				