

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990-PF, Department of the Treasury Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Trust Tr eated as Private Foundation

▶ Do not enter social security numb ers on this form as it may be made public.
 ▶ Information about Form 990-PF and its separ ate instructions is at www.irs.gov/form990pf

2014

For	ca <u>len</u>	dar year 2014 or tax year beginning		, and ending		
Nai	ne of	foundation			A Employer identification	number
_B	IG	OAKS FOUNDATION			45-2179357	
Nur	nber a	nd street (or PO box number if mail is not delivered to street a	B Telephone number			
_2	65	45 JADE ROAD			320-356-73	<u>55</u>
City	or t	own, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is p	ending, check here
_s	т.	CLOUD, MN 56301				
G	heck	all that apply: Initial return	Initial return of a fe	ormer public charity	D 1. Foreign organizations	s, check here
		Final return	Amended return		9.5	Ab - 050/ 44
		Address change	Name change	. <u>-</u>	Foreign organizations me check here and attach co	mputation
H (Check	type of organization: X Section 501(c)(3) ex	empt private foundation		E If private foundation sta	tus was terminated
	Se	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founds	ation	under section 507(b)(1)	(A), check here
l Fa	ur ma	arket value of all assets at end of year J Accounti	ng method; X Cash	Accrual	F If the foundation is in a	60-month termination
			ther (specify)		under section 507(b)(1)	(B), check here
	-\$	28 , 521 . (Part I, colu	mn (d) must be on cash t	pass.)		I
Pa	<u>ırt l</u>	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	(d) Disbursements for charitable purposes
			150,000.	income	N/A	(cash basis only)
	1	Contributions, gifts, grants, etc., received	150,000.		N/A	
	2	Check fit if the foundation is not required to attach Sch. B. Interest on savings and temporary				
	3	cash investments			 	
	4	Dividends and interest from securities			 	
To the state of th		Gross rents Net rental income or (loss)				
2015 •	-				£	
	1	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all				- 1
I 7	7	assets on line 6a Capital gain net income (from Part IV, line 2)		0.		· · · · · · · · · · · · · · · · · · ·
	8	Net short-term capital gain		,	2 888	<i>J</i> ,
APR	9	Income modifications			APR ES	7.4 D
	10a	Gross sales less returns			L	
CANAGE	Ι.	Less Cost of goods sold			<u> </u>	T
霓	C	Gross profit or (loss)				
23	11	Other income				
<u> </u>	12	Total Add lines 1 through 11	150,000.	0.		
W)	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
	14	Other employee salaries and wages				
		Pension plans, employee benefits				
S	16a	Legal fees STMT 1	896.	0.		896.
en en	b	Accounting fees				
Ë	C	Other professional fees				
Administrative Expense	17	Interest				
rat	18	Taxes .				
Si	19	Depreciation and depletion			 	
<u>.</u>	20	Оссиралсу			ļ	
Ă	21	Travel, conferences, and meetings				
Operating and	22	Printing and publications Other expenses STMT 2	25.	0.		25.
<u>.</u>	23	•	23.	0.		
<u> </u>	24	Total operating and administrative expenses. Add lines 13 through 23	921.	0.		921.
Ö	25	Contributions, gifts, grants paid	150,000.			150,000.
-	25	Total expenses and disbursements.			<u> </u>	
	20	Add lines 24 and 25	150,921.	0.		150,921.
	27	Subtract line 26 from line 12:				
		Excess of revenue over expenses and disbursements	<921.>			
	l	Net investment income (if negative, enter -0-)		0.		
		Adjusted net income (if negative, enter -0-)			N/A	

0.

28,521.

28,521.

28,521

29,442.

28,521.

2233.11

Form 990-PF (2014)

Attached schedules and amounts in the description

Beginning of year

(a) Book Value

29,442.

29,442.

0.

29,442.

29,442.

29,442

ightharpoonup

Bàlance Sheets

2 Savings and temporary cash investments

Less: allowance for doubtful accounts

Less: allowance for doubtful accounts

Less: allowance for doubtful accounts

9 Prepaid expenses and deferred charges

14 Land, buildings, and equipment; basis

instructions. Also, see page 1, item I)

Mortgages and other notes payable 22 Other liabilities (describe > _

and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds

30 Total net assets or fund balances

Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.

Accounts payable and accrued expenses

16 Total assets (to be completed by all filers - see the

Loans from officers, directors, trustees, and other disqualified persons

Foundations that do not follow SFAS 117, check here

28 Paid-in or capital surplus, or land, bldg., and equipment fund

(must agree with end-of-year figure reported on prior year's return)

Total liabilities and net assets/fund balances

Other increases not included in line 2 (itemize)

Decreases not included in line 2 (itemize)

29 Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances at beginning of year - Part II, column (a), line 30

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

10a Investments - U.S. and state government obligations

6 Receivables due from officers, directors, trustees, and other

1 Cash - non-interest-bearing

3 Accounts receivable ►

4 Pledges receivable ►

disqualified persons 7 Other notes and loans receivable

8 Inventories for sale or use

13 Investments - other

18 Grants payable

24 Unrestricted 25 Temporarily restricted 26 Permanently restricted

Deferred revenue

17

19

20

21

Fund Balances

det

Part III

Less accumulated depreciation 15 Other assets (describe ▶

b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans

5 Grants receivable

2				
2014.03020	BIG	OAKS	FOUNDATION	5

2 Enter amount from Part I, line 27a

Add lines 1, 2, and 3

		AKS FOUNDATION Losses for Tax on In	voctmont.	Income				45	<u>-217</u>	9357	Page 3
	(a) List and describe	the kind(s) of property sold (e.gouse; or common stock, 200 shs	., real estate,	nicome	(b)	How acquir - Purchase - Donation	ed (c) Date aco		(d) Dat (mo., da	
1a											
<u>b</u>	NONT	· · · · · · · · · · · · · · · · · · ·									
_ <u>c</u>					<u> </u>						
<u>d</u>		·	 .				_				
<u>e</u>	·	(A) Degree system allowed	(-) Co.	t er ether heeie	L			/h) Cour	os (loca)		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				(e) plus (1	or (loss)		
_ <u>a</u>											
_ <u>b</u>											
_ <u>~</u>		• • • • • • • • • • • • • • • • • • • •				-					
e											
_	Complete only for assets showing ga	an in column (h) and owned by	the foundation	on 12/31/69			(i) G	iains (Col.	(h) gaın	minus	
_	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1)				k), but not Losses (fr			
_a											
_ b)										
							_				
d										-	
<u>e</u>		C //		~	``						
2	Capital gain net income or (net capital	I loss) { If gain, also enter -(r in Part I, line)- in Part I, line	. 7 . 7	•	2					
	Net short-term capital gain or (loss) a If gain, also enter in Part I, line 8, colu	s defined in sections 1222(5) ai		•	}						
ž	If (loss), enter -0- in Part I, line 8	er Section 4940(e) for	Reduced	Tax on Net	Inve	stment	Incom	16			
	or optional use by domestic private fou										
(1.	or optional use by domestic private rou	nuadons subject to the section	1010(0) (0)	not mycounom m	001110	•,					
lf s	section 4940(d)(2) applies, leave this p	art blank									
Wa	as the foundation liable for the section	4942 tax on the distributable an	nount of any ye	ar in the base per	iod?					Yes	X No
<u>If "</u>	"Yes," the foundation does not qualify u										
1	Enter the appropriate amount in each		nstructions bef	ore making any e	ntries			г	_	74\	
	(a) Base period years Calendar year (or tax year beginning ii	(b) Adjusted qualifying dis	stributions	Net value of no	(c) oncha) ritable-use	assets	(c	Dıstrıt ol. (b) dıv	(d) outlon ratio vided by col.	(c))
	2013		5,405.				<u>650.</u>				
_	2012		5,127.			<u>35,</u>	687.		_		43666
_	2011	10	0,026.			29,	531.	3.38			87152
_	2010							-		·	
_	2009						<u> </u>	\vdash			
	Total of line 1, column (d)							2		3.6	96362
3	Average distribution ratio for the 5-ye the foundation has been in existence in		on line 2 by 5,	or by the number	of ye	ars		3		1.2	32121
4	Enter the net value of noncharitable-u	se assets for 2014 from Part X,	line 5	-				4		28	,431.
5	Multiply line 4 by line 3						-	5		35	,030.
6	Enter 1% of net investment income (1	% of Part I, line 27b)			-			6			0.
7	Add lines 5 and 6	·				·		7		35	<u>,030.</u>
8	Enter qualifying distributions from Pa	rt XII, line 4						8		150	,921.
	If line 8 is equal to or greater than line See the Part VI instructions.	e 7, check the box in Part VI, lin	e 1b, and comp	lete that part usir	ng a 1	% tax rate.	_				

)6260401 706328 52233.1

Form	990-PF (2014) BIG OAKS FOUNDATION			<u>45-</u>	2179357	Page 4
Pa	Excise Tax Based on Investment Income (Section 4940	(a), 4940(b), 4	940(e), or 49	48 -	see instruct	ions)
1a	Exempt operating foundations described in section 4940(d)(2), check here and er	nter "N/A" on line 1.)		J	
	Date of ruling or determination letter: (attach copy of letter if nec				<u> </u>	· · · · <u> </u>
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	► 🗓 and enter 19	% } [_1_		0.
	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, co	i.(b). 丿			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Other	hers enter -0-)	ļ	2		0.
3	Add lines 1 and 2			3_	ļ	0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Ot	thers enter -0-)		4		0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			5		0.
6	Credits/Payments:	1 1			ļ! !	
а	2014 estimated tax payments and 2013 overpayment credited to 2014	6a			}	
	Exempt foreign organizations - tax withheld at source	6b			į.	
	Tax paid with application for extension of time to file (Form 8868)	6c			į	
	Backup withholding erroneously withheld	6d			<u> </u>	
	Total credits and payments. Add lines 6a through 6d			7		0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attack.	ched		8		
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		▶	9		0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		▶	10	ļ	
	Enter the amount of line 10 to be Credited to 2015 estimated tax		Refunded >	_11		
_	Statements Regarding Activities					res No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legisl	lation or did it partic	ipate or intervene i	ın		X
	any political campaign?		6 Alex (d. 6 Alex A)	_	1a	$\frac{\lambda}{X}$
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos				1b	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	d ∞pies of any ma	iterials published	i or		
_	distributed by the foundation in connection with the activities				1c	X
	Did the foundation file Form 1120-POL for this year?	voor:			10	
a	Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the (1) On the foundation. \$ 0 \cdot (2) On foundation managers.		0.			
	Enter the reimbursement (if any) paid by the foundation during the year for political expendit					
t	managers. > \$ 0 .	wie wx imposed on	Touridation		į į	
2	Has the foundation engaged in any activities that have not previously been reported to the IR	192			2	Х
4						
2	If "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in its governing in	nstrument articles o	f incornoration, or			
U	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change		· moorportation, or		3	X
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year				4a	X
	If "Yes," has it filed a tax return on Form 990-T for this year?			N	I/A 4b	
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5	X
•	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 eit	ther:				
-	By language in the governing instrument, or					
	 By state legislation that effectively amends the governing instrument so that no mandatory 	directions that con	flict with the state	law	, ,	
	remain in the governing instrument?	•			6	X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes." con	nplete Part II. col.	(c), and Part XV			X
		,				
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	ns) -				
	MN					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At	ttorney General (or o	lesignate)	_	<u> ji</u> .	
	of each state as required by General Instruction G? If "No," attach explanation		8b	X		
9	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					
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedul	le listing their names and	d addresses		10	<u> </u>
					Form 990-	PF (2014)

423531 11-24-14

<u>:Pa</u>	Minimum Investment Return (All domestic foundations must complete this part. Foreign for	oundations, see	instructions.)
	air market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a /	verage monthly fair market value of securities	1a	0.
b /	everage of monthly cash balances	. 1b	28,864.
c F	air market value of all other assets	1c	
d 1	otal (add lines 1a, b, and c)	1d	28,864.
e F	Reduction claimed for blockage or other factors reported on lines 1a and		
1	c (attach detailed explanation)).	
2 /	acquisition indebtedness applicable to line 1 assets	2	0.
3 5	Subtract line 2 from line 1d	3	28,864.
4 (Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	. 4	433.
5 N	let value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	28,431.
6 N	Ainimum investment return. Enter 5% of line 5	6	1,422.
	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations foreign organizations check here and do not complete this part.)	s and certain	
1 1	Ainimum investment return from Part X, line 6	1	1,422.
	ax on investment income for 2014 from Part VI, line 5		
	ncome tax for 2014. (This does not include the tax from Part VI.)		
	Add lines 2a and 2b	2c	0.
3 [Distributable amount before adjustments. Subtract line 2c from line 1	3	1,422.
4 F	Recoveries of amounts treated as qualifying distributions	4	0.
	Add lines 3 and 4	. 5	1,422.
6 [Deduction from distributable amount (see instructions)	6	0.
	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,422.
	Qualifying Distributions (see instructions)	<u>-</u>	
1 /	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	理壁	
a E	expenses, contributions, gifts, etc total from Part I, column (d), Ine 26	1a	150,921. 0.
b F	Program-related investments - total from Part IX-B	1b	0.
2 /	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 /	Amounts set aside for specific charitable projects that satisfy the:		
a 9	Suitability test (prior IRS approval required)	3a	
b (Cash distribution test (attach the required schedule)	3b	
	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	150,921.
	oundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ncome. Enter 1% of Part I, line 27b	5	0.
	Adjusted qualifying distributions. Subtract line 5 from line 4	6	150,921.
	Note. The amount on line 6 will be used in Part V, column (b), in subæquent years when calculating whether the foundation	on qualifies for the	section

Page 9

Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
Distributable amount for	r 2014 from Part XI.	Corpus	rears prior to 2013	2013	2014
line 7	i zo i i i om i uti zu,				1,422.
2 Undistributed income, if any,	, as of the end of 2014				
a Enter amount for 2013 (only			0.	
b Total for prior years:			•		
• Evene distributions cor	, to 2014:		0.	ļ	
3 Excess distributions car	ryover, ii aliy, to 2014.				
a From 2009 b From 2010					
c From 2011	99,039.				
d From 2012	3,343.				i.
e From 2013	3,772.				
f Total of lines 3a through	· · · · · · · · · · · · · · · · · · ·	106,154.			
4 Qualifying distributions	for 2014 from				
Part XII, line 4: ▶ \$	150,921.	ļ			
a Applied to 2013, but not	t more than line 2a			0.	
b Applied to undistributed	Income of prior		_		!! !:
years (Election required	•	L	0.		
c Treated as distributions	· ·				
(Election required - see	•	0.	et. energe end to the same		1 422
d Applied to 2014 distribu		140 400			1,422.
e Remaining amount distr	•	149,499.			0.
5 Excess distributions carryove (If an amount appears in columnst be shown in column (a)	ımn (d), the same amount		· 		
6 Enter the net total of ea indicated below:	ch column as				
a Corpus Add lines 3f, 4c, and	i 4e Subtract line 5	255,653.			
b Prior years' undistribute	d income. Subtract				į.
line 4b from line 2b		<u> </u>	0.		;
c Enter the amount of pric undistributed income for deficiency has been issu the section 4942(a) tax l assessed	r which a notice of ied, or on which		0.		
d Subtract line 6c from lin	e 6b. Taxable			 	
amount - see instruction			0.		i
e Undistributed income fo	r 2013. Subtract line				
4a from line 2a. Taxable	amount - see instr.	<u> </u>		0.	
f Undistributed income fo					
lines 4d and 5 from Ine	1. This amount must				_
be distributed in 2015		<u> </u>	<u></u>	<u></u>	0.
7 Amounts treated as dist					l· ·
corpus to satisfy require	•				!
section 170(b)(1)(F) or may be required - see in		0.	!!		
8 Excess distributions care	·				
not applied on line 5 or 1		· 0.			
9 Excess distributions car					
Subtract lines 7 and 8 fr	-	255,653.	 		
10 Analysis of line 9:		:			
a Excess from 2010					
b Excess from 2011	99,039.	i i			!
c Excess from 2012	3,343.				
d Excess from 2013	3,772.				
e Excess from 2014 423581	149,499.				Form 990-PF (2014)
11-24-14					FORM 330-FF (2014)

c Any submission deadlines:

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

Supplementary Information	·			
3 Grants and Contributions Paid During the Ye	ear or Approved for Future			
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
BEMIDJI STATE UNIVERSITY FOUNDATION		SCHOOL	GENERAL CHARITABLE	
1500 BIRCHMONT DR NE			PURPOSES	150,000.
BEMIDJI, MN 56601	<u> </u>			130,000.
		-		
		<u> </u>		
Total			▶ 3a	150,000.
Total				
Approved for future payment				
NONE				
			_	
Total	1	1	<u>▶ 3b</u>	0.
19181			F	orm 990-PF (2014

Analysis of Inc	ome-Producing	Activities

ter gross amounts unless otherwise indicated.	Unrelated b	usiness income		y section 512, 513, or 514	(e)
tor gross uniound diness offer wise maloated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exemp
Program service revenue:	code	Amount	code	Amount	
a	_				
b	_				
C	_ _				
d	_				
e	_				
f	_ _				
g Fees and contracts from government agencies			 - -		
Membership dues and assessments					
Interest on savings and temporary cash investments					
Dividends and interest from securities					
Net rental income or (loss) from real estate:			سة خده ط		
a Debt-financed property		<u> </u>			
b Not debt-financed property					
Net rental income or (loss) from personal					
property					
Other investment income					· -
Gain or (loss) from sales of assets other					
than inventory					
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:					
a					
b					
C					
d		···-			
e					
Subtotal. Add columns (b), (d), and (e)		() .	0.	<u>.</u>
Total. Add line 12, columns (b), (d), and (e)				13	
ee worksheet in line 13 instructions to verify calculations	i)				
Relationship of Activitie	s to the Accom	plishment of E	Exempt Pu	rposes	
ine No. Explain below how each activity for which the foundation's exempt purposes (other the				importantly to the accom	plishment of
the foundation's exempt purposes (other the N/A	iai by providing fullus	ioi adoii pui poaca).			
μ1/Δ					

	lation's exempt purposes (other than by providing funds for such purposes	
N/A		
-		
<u> </u>		
	2012	
1		
<u> </u>		
į		
		
Ì		
-+		
1	<u>_</u>	
	<u></u>	

Part XVI	Information Re Exempt Organ	•	sfers To	and Transactions a	and Relationsh	nips With Nonch	ari table		
1 Did the	organization directly or ind		of the followi	na with any other organizat	ion decoribed in coef	ion 501(c) of		Yes	No
	le (other than section 501(c			-		1011 30 1(6) 01			<u> </u>
	rs from the reporting found				inzations:				İ
(1) Ca:		ation to a noncharite	anie exempt oi	ganzanon or			1a(1)		X
	ner assets	•				•			X
	ansactions;						1a(2)	 	
	les of assets to a noncharita	ahla avamat armaiz	ton				45/4)	 	X
							1b(1)		$\frac{x}{x}$
	rchases of assets from a no	•	organization			•	1b(2)		X
	ntal of facilities, equipment,				•		1b(3)		X
	imbursement arrangements	1				•	1b(4)		X
	ans or loan guarantees	ambarahin ar fuada	orna policitati		•		1b(5)		X
	rformance of services or me	· ·	=			•	1b(6)		X
	of facilities, equipment, ma				harana ahara tha taur		1c		
	nswer to any of the above is ces given by the reporting f							eis,	
	(d) the value of the goods,				ue in any transaction	or snaring arrangement	, SHOW III		
(a) Line no	(b) Amount involved			e exempt organization	(d) Description	of transfers, transactions, ar	ad charing area	ngomon	
(a) Line no	(b) Amount involved	(c) Name o	N/A	e exempt organization	(u) Description	ror transfers, transactions, ar	io snaring arra	ngemen	
		 	N/A						
	· · · · · · · · · · · · · · · · · · ·	 				·····-			
		<u> </u>							
		 	 	<u> </u>					
		 							
		 							
									
					-				
	,								
		ļ							
		ļ							
	·- · · · · · · · · · · · · · · · · · ·								
			 						
2a Is the fo	undation directly or indirect	tly affiliated with or	related to one	or more by-exempt organ	izations described				
	on 501(c) of the Code (other	-			izationo documbod		Yes	X	l No
	complete the following sch	• •	/(0// 0/ 11/ 300	1011 027 1					, 110
<u> </u>	(a) Name of org			(b) Type of organization		(c) Description of relatio	nship		—
	N/A	,		(b) type or or gammanon		.,			
	21/ 22				***				
	-								
			··· -						
					1				—
Und	er penalties of perjury, I declare t	that I have examined this	return, including	I accompanying schedules and s	tatements, and to the be	st of my knowledge			
	belief, it is true, correct, and com					as any knowledge	May the IRS di return with the	preparer	r
Here	\sim Λ	tuda	Aux	- 14-7-15	Δ.,	1, L	shown below (see instr	1
K	gnature of officer or trustee	· /Juou	a v vsa	Doto	Tillo	unt_	X Yes		! No
	Print/Type preparer's na		Propararie e	Date data	Data	Check If PTII	NI		
	1		reparer's s	" Asulo	mu		Y		
Paid	CINDY J. A	CVEKMAN,	may		4/1/15	self- employed	00001		
Preparer	ESQ.	O C D3 D3***	mm - 5	7	_ , ,,,,		007716		—
Use Only	THE STRUCTURE F LLC D	D & BAKNE	TT, P.	A •		Firm's EIN ► 41-	JY43 84	12	
OSE OIII)		0 G F	CULTUTE	GITTER 1000			·		
				, SUITE 1200		1.555	٠	F 4 4	
	MI	NNEAPOLIS	, MN 5	5402		Phone no. (612	<u>) 877-</u>		
							Form 990	-PF (2014)

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2014

Name of the organization

Employer identification number

В	BIG OAKS FOUNDATION	45-21/935/					
Organization type (check							
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
Note. Only a section 501(n is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special	al Rule. See instructions.					
General Rule							
	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions to ny one contributor. Complete Parts I and II. See instructions for determining a contrib						
Special Rules							
sections 509(a)(1 any one contribu	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% sup 1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, utor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the a EZ, line 1. Complete Parts I and II	16a, or 16b, and that received from					
year, total contril	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.						
year, contribution is checked, ente purpose. Do not	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, chantable, 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 General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.						
but it must answer "No" o	n that is not covered by the General Rule and/or the Special Rules does not file Scheo on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or or eet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990PF) (2014)

Name of organization

Employer identification number

BIG	OAKS	FOUNDAT	TON

45-2179357

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DOUGLAS AND SUSAN FREDRICKSON 26545 JADE ROAD ST. CLOUD, MN 56301	\$\$\$	Person X 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 Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- _ \$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- _ \$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- _ \$	Person Payroll Oncash Complete Part II for noncash contributions.)

FORM 990-PF	LEGAL FEES		STATEMENT 1	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
MOSS & BARNETT	896.	0.		896.
TO FM 990-PF, PG 1, LN 16A	896.	0.		896.

FORM 990-PF	OTHER EXPENSES		STATEMENT 2	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
STATE OF MINNESOTA	25.	0.		25.
TO FORM 990-PF, PG 1, LN 23	25.	0.		25.

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT 3

NAME OF MANAGER

SUSAN A. FREDRICKSON R. DOUGLAS FREDRICKSON