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Form 990-PF Department of the Treasury Internal Revenue Service

Extended to November 16, 2015 **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.irs.gov/form990pf. OMB No 1545-0052

For calendar year 2014 or tax year beginning , and ending Name of foundation A Employer identification number P M ALLEN FAMILY FOUNDATION 46-2692811 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 50 SOUTH SIXTH STREET 1500 (612) 492-6813 City or town, state or province, country, and ZIP or foreign postal code C if exemption application is pending, check here MINNEAPOLIS, MN 55402 G Check all that apply: 🔟 Inıtıal return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method: F If the foundation is in a 60-month termination Other (specify) (from Part II, col (c), line 16) under section 507(b)(1)(B), check here 25762919 . (Part I, column (d) must be on cash basis) ▶\$ Part | Analysis of Revenue and Expenses (a) Revenue and expenses per books (d) Disbursements for charitable purpose (cash basis only) (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) income income 24145265 N/A Contributions, gifts, grants, etc., received 2 Check In the foundation is not required to attach Sch B Interest on savings and temporary cash investments 70. 70. Statement 4 Dividends and interest from securities SCANNED DEC 1 0 2015 5a Gross rents D Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a n. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less. Cost of goods sold c Gross profit or (loss) 15 15. 11 Other income Statement Total. Add lines 1 through 11 24145350 85. 12 0. Ō. 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 186. 16a Legal fees Stmt 3 0. 186. 2230. 0 Stmt 4 2230. **b** Accounting fees c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications OCDEN. UT 23 Other expenses 24 Total operating and administrative 2416. expenses. Add lines 13 through 23 0 2416. 30000. 25 Contributions, gifts, grants paid 30000. 26 Total expenses and disbursements. 32416. 0 Add lines 24 and 25 32416. 27 Subtract line 26 from line 12: 24112934 2 Excess of revenue over expenses and disburse 85 b Net investment income (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-) LHA For Paperwork Reduction Act Notice, see instructions. Form **990-PF** (2014)

10150825 099821 PMAL2811MIN

2014.04020 P M ALLEN FAMILY FOUNDATION PMAL2811

Part II Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of year			
column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
1 Cash - non-interest-bearing	1649985.	1000.	1000.		
2 Savings and temporary cash investments .		25761919.	25761919.		
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 .					
7 Other notes and loans receivable					
Less: allowance for doubtful accounts		_			
8 Inventories for sale or use					
9 Prepaid expenses and deferred charges					
10a Investments - U.S. and state government obligations			··-		
b Investments - corporate stock					
c Investments - corporate bonds					
11 Investments - land, buildings, and equipment basis			-		
Less accumulated depreciation					
12 Investments - mortgage loans					
13 Investments - other					
14 Land, buildings, and equipment basis	-				
Less accumulated depreciation			· .		
15 Other assets (describe)					
16 Total assets (to be completed by all filers - see the	1640005	05760010	05560010		
instructions. Also, see page 1, item I)	1649985.	25762919.	25762919		
17 Accounts payable and accrued expenses					
18 Grants payable					
19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable					
20 Loans from officers, directors, trustees, and other disqualified persons					
21 Mortgages and other notes payable					
22 Other liabilities (describe >)					
23 Total liabilities (add lines 17 through 22)	0.	0.			
Foundations that follow SFAS 117, check here	- 0.	0.			
and complete lines 24 through 26 and lines 30 and 31.	İ				
24 Unrestricted					
25 Temporarily restricted					
26 Permanently restricted					
Foundations that do not follow SFAS 117, check here					
and complete lines 27 through 31.					
27 Capital stock, trust principal, or current funds	0.	0.			
28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.				
29 Retained earnings, accumulated income, endowment, or other funds	1649985.	25762919.			
Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances	1649985.	25762919.			
i i i i i i i i i i i i i i i i i i i		237023131			
31 Total liabilities and net assets/fund balances	1649985.	25762919.			
<u></u>		23,023234			
Total net assets or fund balances at beginning of year - Part II, column (a), line	30	1			
(must agree with end-of-year figure reported on prior year's return)		1	1649985		
Enter amount from Part I, line 27a		2	24112934		
Other increases not included in line 2 (itemize)		3	0		
Add lines 1, 2, and 3		4	25762919		
Decreases not included in line 2 (itemize)			0.		
Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	25762919.		

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)				(b) Ho P - D -	w acquired Purchase Donation		te acquired , day, yr.)	(d) Date sold (mo., day, yr.)	
1a									
b NO	NE								
<u>c</u>					_				
<u>d</u>			···		╁			·	
<u>e</u>	(f) Do	preciation allowed	(0) 000	t or other basis	┸┯		(6)	Gain or (loss	\
(e) Gross sales price		(or allowable)		xpense of sale				lus (f) minus	
<u>a</u>		_							
b c									
<u>d</u>									
e		 							
Complete only for assets show	ng gain in co	olumn (h) and owned by	the foundation	on 12/31/69				(Col. (h) gain	
(i) F.M.V. as of 12/31/69		Adjusted basis is of 12/31/69		cess of col. (ı) col. (ı), if any		ı		it not less that es (from col. (
a									
b									
C			<u> </u>		.				
<u>d</u>									
<u>e</u>					-				-
2 Capital gain net income or (net c	anıtal Inss)	If gain, also ente	r in Part I, line L in Part I line	7 7	 	2			
3 Net short-term capital gain or (io				,	7				
If gain, also enter in Part I, line 8			iu (0).		7				
If (loss), enter -0- in Part I, line 8	3				1	3			
		ection 4940(e) for		·			ncome	1	
(For optional use by domestic private	te foundation	is subject to the section	4940(a) tax on	net investment i	ncome.)			
If section 4940(d)(2) applies, leave	this part blar	ık.							
Was the foundation liable for the se	ction 4942 ta	ex on the distributable an	nount of any v	ear in the base ne	rind?				Yes X No
If "Yes," the foundation does not qua				•	1104				
1 Enter the appropriate amount in					entries.	•			
(a) Base period years		(b)			(c)		. [Distril	(d) oution ratio
Calendar year (or tax year beginn	ແກ g ເກ)	Adjusted qualifying dis		Net value of no	onchari			(col. (b) div	rided by col. (c))
2013			0.			7015	43.		.000000
2012				· · · · · · · · · · · · · · · · · · ·					
2010									
2009			•						
	<u> </u>					-		1	
2 Total of line 1, column (d)							_2		.00000
3 Average distribution ratio for the			on line 2 by 5,	or by the numbe	r of yea	rs	1		20000
the foundation has been in exist	ence if less t	han 5 years	•				3		.00000
4 Enter the net value of noncharita	ibla-uca acco	ate for 2014 from Part Y	line 5				4		2609692
4 Litter the net value of nonchang	inic-noc asse	515 101 20 14 HOIRF alt A	, iiiie 5						2003032
5 Multiply line 4 by line 3							5	;	0 .
									
6 Enter 1% of net investment inco	me (1% of P	art I, line 27b)					6		1
7 Add lines 5 and 6							7	,	1
· rad inico Jana o			•			-	 '	 -	
8 Enter qualifying distributions fro	=						_ 8		32416
If line 8 is equal to or greater that See the Part VI instructions.	ın lıne 7, che	ck the box in Part VI, fin	e 1b, and com	olete that part usi	ng a 1%	tax rate.			

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Dort VI Evoice Toy Board on Investment Income (Continue		040/->		10940			Page 4
Part VI Excise Tax Based on Investment Income (Section		1940(e), or 4	948 -	see in	stru	ctio	<u>ns)</u>
1a Exempt operating foundations described in section 4940(d)(2), check here]					
	r if necessary-see instruct		1				_
b Domestic foundations that meet the section 4940(e) requirements in Part V, check he	ere 🕨 🔼 and enter 19	6 }	1				1.
of Part I, line 27b							
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations en		l. (b) J					_
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations of	only. Others enter -0-)	-	2				<u>0.</u>
3 Add lines 1 and 2			3				1.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations of	-		4				0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0)-		5				1.
6 Credits/Payments:							
a 2014 estimated tax payments and 2013 overpayment credited to 2014	6a						
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			7				0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220	is attached	-	8				
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		>	9				1.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overp	aid	. ▶	10				
11 Enter the amount of line 10 to be: Credited to 2015 estimated tax		Refunded ▶	11				
Part VII-A Statements Regarding Activities							
1a During the tax year, did the foundation attempt to influence any national, state, or local	al legislation or did it partic	pate or intervene	ເກ			Yes	No
any political campaign?					1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political	purposes (see instructions	for the definition)?		1b		X
If the answer is "Yes" to $_{1a}$ or $_{1b}$, attach a detailed description of the activiti	ies and copies of any m	aterials publish	ed or				
distributed by the foundation in connection with the activities							1
c Did the foundation file Form 1120-POL for this year?				1	1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed duri	ing the year:						
(1) On the foundation. ► \$ 0. (2) On foundation mai	nagers 🕨 \$	0.					
e Enter the reimbursement (if any) paid by the foundation during the year for political ex	xpenditure tax imposed on	foundation					
managers ► \$ 0.							
2 Has the foundation engaged in any activities that have not previously been reported to	the IRS?				2		X
If "Yes," attach a detailed description of the activities							
3 Has the foundation made any changes, not previously reported to the IRS, in its gove	rning instrument, articles o	f incorporation, o	Г				
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the c	hanges				3	•	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during t	he year?				4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?	-		N/	'A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the	year?				5		X
If "Yes," attach the statement required by General Instruction T.				Γ			
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfies	sfied either:				- 1		
 By language in the governing instrument, or 					I		
 By state legislation that effectively amends the governing instrument so that no mail 	ndatory directions that con	flict with the state	law		l		
remain in the governing instrument?				ĺ	6	X	
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	X	
8a Enter the states to which the foundation reports or with which it is registered (see ins MN	tructions) >						
b if the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to	the Attorney General (or o	lesignate)			ļ		
of each state as required by General Instruction G? If "No," attach explanation	, (e) t				8b	X	
9 Is the foundation claiming status as a private operating foundation within the meaning	of section 4942(i)(3) or 4	942(1)(5) for cale	ndar	⊢			\vdash
year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Y		()/(=) for ball	.,		9		x
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a				⊢	10		$\frac{x}{x}$
I 105, attached	To read the state of the state	- 400 03363				DE	(2014)

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Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es 🗶 No	
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indire		_	
any voter registration drive?		. <u> </u>	es 🗓 No	
(3) Provide a grant to an individual for travel, study, or other similar purpose	s? .	Y	es 🗓 No	1
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section			
4945(d)(4)(A)? (see instructions)		Y	es 🗶 No	
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or f	or		
the prevention of cruelty to children or animals?	÷	Ye	es X No	
b if any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described i	n Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instr	uctions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check	here		▶□□	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption	from the tax because it mainta	med		
expenditure responsibility for the grant?	N	[/A 🔲 y	es 🔲 No	
If "Yes," attach the statement required by Regulations section 53 494	15-5(d).			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		Y	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?	-	1	6b X
If "Yes" to 6b, file Form 8870.			<u> </u>	
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	Y	es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attrib			N/A	7b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	tees, Foundation Ma	nagers, Highl		
1 List all officers, directors, trustees, foundation managers and their	compensation.		 	
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to	(e) Expense account, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	account, other allowances
JOHN OTTERLEI	PRESIDENT/TRE		Conspensation	
101 FIFTH EAST STREET, SUITE 2400	,			
MINNEAPOLIS, MN 55101	0.25	0.	0.	0.
SONNY MILLER	VICE PRESIDEN			
50 SOUTH SIXTH STREET, SUITE 1500				
MINNEAPOLIS, MN 55402	0.25	0.	0.	0.
	_			
	_			
			·	
	-			
		ļ.]
2 Compensation of five highest-paid employees (other than those in	cluded on line 1). If none,	enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE			Compensation	
				
	1			1
		 		 -
	1			
		 	 	
	1			
		 		
	1			
Total number of other employees paid over \$50,000				0

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "No	ONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	<u> </u>	
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in number of organizations and other beneficiaries served, conferences convened, research papers produced	nformation such as the	Expenses
1 N/A	,, 0.6.	
Ι		
2		
<u> </u>		
3		
4		
Ded IV DIO		
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	1000	Amount
	Tallu 2.	Amount
1 N/A		
2		
<u> </u>		
All other program-related investments See instructions.		
3		
Total. Add lines 1 through 3		0.
	-	Form 990-PF (2014)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, se	ee instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a		1a	0.
b		1b	2649433.
C		10	
d	Total (add lines 1a, b, and c)	1d	2649433.
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	2649433.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	39741.
5	Net value of noncharitable-use assets, Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2609692.
6	Minimum investment return. Enter 5% of line 5	6	130485.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(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	130485.
2a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	1.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	130484.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	130484.
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	130484.
F	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		20446
8	, , , , , , , , , , , , , , , , , , , ,	1a	32416.
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		3a	
b		3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	32416.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		_
	income. Enter 1% of Part I, line 27b	5	1.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	32415.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (4940(e) reduction of tax in those years.	qualifies for t	he section

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P M ALLEN FAMILY FOUNDATION 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,				
line 7				130484.
2 Undistributed income, if any, as of the end of 2014	_			
a Enter amount for 2013 only			29696.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2014:				
a From 2009				
b From 2010				
c From 2011				
d From 2012	İ			
e From 2013				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2014 from				
Part XII, line 4: ►\$ 32416.				
a Applied to 2013, but not more than line 2a			29696.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount				2720.
e Remaining amount distributed out of corpus	0.			
Excess distributions carryover applied to 2014 (if an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 31, 4c, and 4e Subtract line 5	0.			
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				<u>-</u>
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				127764.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2010				
b Excess from 2011				
c Excess from 2012				
dExcess from 2013			ļ	
e Excess from 2014		<u> </u>		
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	LEN FAMILY E				692811 Page 10
Part XIV Private Operating	Foundations (see in	structions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling	or determination letter tha	it it is a private operating	İ		
foundation, and the ruling is effective f	for 2014, enter the date of	the ruling	▶		
b Check box to indicate whether the four	ndation is a private operati	ing foundation described		4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of		ì		1	
exempt activities	1			İ	
e Qualifying distributions made directly				<u> </u>	
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the	• • • • • • • • • • • • • • • • • • • •	 	<u> </u>		
alternative test relied upon:		ļ			
a "Assets" alternative test - enter: (1) Value of all assets					
		 	 		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter		 			
2/3 of minimum investment return					
shown in Part X, line 6 for each year					
listed					
c "Support" alternative test - enter:		1			
(1) Total support other than gross					
investment income (interest, dividends, rents, payments on					
securities loans (section			1		
512(a)(5)), or royalties)	_				
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(III)	_				
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Inf			if the foundation	on had \$5,000 or r	nore in assets
at any time during	the year-see inst	tructions.)			
1 Information Regarding Foundat	ion Managers:				
a List any managers of the foundation v			itributions received by t	the foundation before the c	lose of any tax
year (but only if they have contributed	l more than \$5,000). (See	section 507(d)(2).)			
None					
b List any managers of the foundation v			(or an equally large po	rtion of the ownership of a	partnership or
other entity) of which the foundation h	nas a 10% or greater interc	est.			
None					
2 Information Regarding Contribu					
Check here 🕨 🗶 if the foundation					
the foundation makes gifts, grants, et	c. (see instructions) to ind	ividuals or organizations	under other conditions	, complete items 2a, b, c, a	ınd d.
a The name, address, and telephone nu	mber or e-mail address of	the person to whom app	lications should be add	lressed:	
			_		
b The form in which applications should	d be submitted and inform	ation and materials they	should include:		
			_		
c Any submission deadlines:					
d Any restrictions or limitations on awa	rds, such as by geographi	cal areas, charitable field	s, kinds of institutions,	or other factors:	
493601 11-24-14					Form 000 - DE (2014)

3 Grants and Contributions Paid During	the Year or Approved for Future	Payment		
Recipient	If recipient is an individual,		Purpose of great or	
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
a Paid during the year				
DINDITMY ON ADIMADID	N/A	ng.	GENERAL OPERATIONS.	
P.O. BOX 770001	N/A	PC	GENERAL OPERATIONS.	
CINCINNATI, OH 45277-0053				30000.
				
			 	
		1		
Total			. ► 3a	30000
b Approved for future payment				
	,			
None				
_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
			<u> </u>	
		1		
Total			> 3b	0

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)
-	(a) Business	(b) Amount	Exctu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code		eboo	7 3110 6111	
å			 		
b			 		
<u> </u>			 		
d			 		
e			├ ──		
Toward and the form and the second	 		-		
g Fees and contracts from government agencies			+-		
2 Membership dues and assessments			}		
3 Interest on savings and temporary cash investments			14	70.	
4 Dividends and interest from securities					
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			01	15.	
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
C					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.	•	85.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	85.
(See worksheet in line 13 instructions to verify calculations.)		-		_	

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

the foundation's exempt purposes (other than by providing fun	
	
	
14	Form 990-PF

Part XVII					ns an	nd Relations	hips With Nonch		Pag	ge 13
1 Did the or	rganization directly or indi		of the followin	o with any other organ	nization	described in secti	on 501(c) of		'es	No
	(other than section 501(c)	, , ,						 		
	from the reporting founda									
(1) Cash			•	•				1a(1)	1	X
(2) Other	r assets	•	-					1a(2)		X
b Other tran		•						1.2(2)		
(1) Sales	s of assets to a noncharita	ble exempt organiza	tion					16(1)	Ì	X
	hases of assets from a no	· -						1b(2)		X
	al of facilities, equipment,	•	-					1b(3)		X
(4) Reim	bursement arrangements	,						1b(4)		X
(5) Loan	s or loan guarantees							1b(5)		X
(6) Perfo	ormance of services or me	mbership or fundrai	sing solicitatio	ons				1b(6)		X
c Sharing o	of facilities, equipment, ma	uling lists, other asse	ets, or paid em	ployees				1c		X
d if the ans	wer to any of the above is	"Yes," complete the	following sche	dule. Column (b) sho	uld alwa	ays show the fair n	narket value of the goods	s, other asset	s,	
or service	es given by the reporting f	oundation. If the fou	ndation receiv	ed less than fair marke	et value i	in any transaction	or sharing arrangement	, show in		
column (e	d) the value of the goods,	other assets, or serv	received							
(a) Line no	(b) Amount involved	(c) Name of	f noncharitable	e exempt organization		(d) Description	of transfers, transactions, ar	nd sharing arrai	ngemer	nts
			N/A							
							<u> </u>			
							<u> </u>			
	_									
						<u> </u>				
										
	- .	<u> </u>		·-·		<u> </u>				
		<u> </u>				<u> </u>				
						-				
										
00 10 100 500		414				<u> </u>				
	indation directly or indirec	•	•	•	organiza	itions described		—	77	3
	n 501(c) of the Code (othe	•)(3)) or in seci	110N 5217				Yes	LX] No
B II Yes, C	complete the following sch (a) Name of org			(b) Type of organiza	ation T	 -	(c) Description of relation	nchin		
	N/A	Janización -		(b) Type of organiza	111011		(c) Description of relation			
					-+					
									·	
										—
Unde	r penalties of perjury, I declare	that I have examined th	ıs return, ıncludır	I. ig accompanying schedule	es and st	tatements, and to the	best of my knowledge		_	
	pelief, it is true, correct and con						r has any knowledge	May the IRS dis return with the	cuss to	nis m
Here	· Also.)/JMM· &) 🛴	1 111121	15		1	shown below (s	ee inst)? No
Sig	nature of officer or pusted	3	<u> </u>	Date		Title	L	162		1 MO
	Print/Type preparer's na	ame	Preparer's s	ignature	1	Date	Check If PTII	N		
				ِ	,		self- employed			
Paid	GAIL LUST		(The	(Ulin	*	11/10/15		003215	29	
Preparer	Firm's name ► DEL	OITTE TAX	LLP		•	<u> </u>	Firm's EIN ➤ 86-	_		
Use Only			ſ					,	_	
_	Firm's address ▶ 50	SOUTH SI	XTH ST	REET SUITE	E 28	300	 			
	мі			5402-1538			Phone no (612) 397-	40	00

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 P M ALLEN FAMILY FOUNDATION 46-2692811 Organization type (check one): 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 X 501(c)(3) exempt private foundation Form 990-PF 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 property) from any one contributor. Complete Parts I and II See instructions for determining a contributor's total contributions **Special Rules** 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. 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. 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 General Rule applies to this organization because it received nonexclusively religious, chantable, 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),

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

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 990-PF, 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

P M ALLEN FAMILY FOUNDATION

46-2692811

	DEEN TIMINI TOORDATION		7-2032011
Part I	Contributors (see instructions). Use duplicate copies of Part I	ıf addıtional space is needed	·
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	IRON MALOME TRUST 2500 WEST 49TH STREET SIOUX FALLS, SD 57105	\$24145265.	Person X Payroll
(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 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)
123452 11-0	15-14	Schedule B (Form	990, 990-EZ, or 990-PF) (2014)

Employer identification number

P M ALLEN FAMILY FOUNDATION

46-2692811

Part II	Noncash Property (see instructions). Use duplicate copies of Part II	if additional space is needed	2002011
		T additional space is fleeded	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - -	
		_ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
		-	
		_ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	· · · · · ·
		_	
	· 	_ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
		_	
		_ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
		_	
423453 11-0			990, 990-EZ, or 990-PF) (201

rt III	EN FAMILY FOUNDATION Exclusively religious, charitable, etc., contri	butions to organizations described	d in section 501(c)(7), (8), or (10) that total more than \$1,000 bwing line entry. For organizations			
	the year from any one contributor. Complete co completing Part III, enter the total of exclusively religious,	lumns (a) through (e) and the follow charitable, etc., contributions of \$1,000 or	Owing line entry. For organizations sorties for the year (Enter this info once)			
No.	Use duplicate copies of Part III if additional	space is needed				
rom Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
_ =						
	1	(e) Transfer of gift	ft			
	Transferee's name, address, and	d ZIP + 4	Relationship of transferor to transferee			
_						
No. rom art 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	d ZIP + 4	Relationship of transferor to transferee			
-						
) No. rom	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
-		(e) Transfer of gif	ift			
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
) No. rom	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
_ -						
		(e) Transfer of gif	ift			
	Transferee's name, address, an		Relationship of transferor to transferee			
-						
-						
54 11-05-14			Schedule B (Form 990, 990-EZ, or 990-PF)			

Form '990-PF Interest on Savi	ngs and T	emporary	Cash :	Investments	Statement	1	
Source	Re	(a) venue Books		(b) Investment Income	(c) Adjusted Net Income	.	
WELLS FARGO 4792		70.	-	70.			
Total to Part I, line 3		70.		70.			
Form 990-PF	Other	Income			Statement	2	
Description		(a) Reven Per Bo	ue	(b) Net Invest- ment Income	(c) Adjusted Net Incom		
SERVICE CHARGE REVERSAL			15.	15	•	-	
Total to Form 990-PF, Part I,	line 11		15.	15	•		
Form 990-PF	Leg	al Fees	····		Statement	3	
Description	(a) Expenses Per Book	Net I	b) nvest- Income	(c) Adjusted Net Incom			
LEGAL FEES	18	6.	0	•	18	36.	
To Fm 990-PF, Pg 1, ln 16a =	18	6.	0	•	18	36.	
Form 990-PF	Accoun	Accounting Fees			Statement 4		
	(-)	(b)	(c)	(d) Charital	- I -	
Description	(a) Expenses Per Book		nvest- Income	Adjusted Net Incom			
Description ACCOUNTING FEES	Expenses	s ment		Net Incom	e Purpose		
	Expenses Per Book	ment 0.	Income	Net Incom	e Purpose	es 	