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## Form **990-PF**

# EXTENDED TO NOVEMBER 16, 2015 Return of Private Foundation

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

OMB No 1545-0052

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 <a href="https://www.lrs.gov/form990pf">www.lrs.gov/form990pf</a>, Department of the Treasury Internal Revenue Service For calendar year 2014 or tax year beginning and ending

|         |                |          | moory our correct tax your boginning                                                                                                     |                                    | , and ending              |                                                       |                                                  |
|---------|----------------|----------|------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------|-------------------------------------------------------|--------------------------------------------------|
|         | Naı            | ne o     | of feundation                                                                                                                            |                                    |                           | A Employer identificatio                              | n number                                         |
|         | .т             | c        | TURNER FAMILY FOUNDATION                                                                                                                 | ^NT                                |                           | 90-0298087                                            | 7                                                |
| -       |                |          | and street (or P O box number if mail is not delivered to street                                                                         |                                    | Room/suite                |                                                       | <u>/</u>                                         |
|         |                |          | TAX DEPT, 10350 BREN I                                                                                                                   | •                                  | T (CONT SUITE             | B Telephone number 952-656-46                         | 595                                              |
| -       |                |          | town, state or province, country, and ZIP or foreign                                                                                     |                                    |                           | C if exemption application is                         |                                                  |
|         |                |          | NETONKA, MN 55343-9014                                                                                                                   |                                    |                           | o ii exemption application is                         | pending, check here                              |
| -       |                |          | k all that apply: Initial return                                                                                                         |                                    | ormer public charity      | D 1. Foreign organization                             | s. check here                                    |
|         |                |          | Final return                                                                                                                             | Amended return                     |                           |                                                       |                                                  |
|         |                |          | Address change                                                                                                                           | Name change                        |                           | 2. Foreign organizations m<br>check here and attach c | eeting the 85% test, omputation                  |
| Ī       | 1 (            | heck     | k type of organization: X Section 501(c)(3)                                                                                              | exempt private foundation          |                           | E If private foundation sta                           |                                                  |
| _       |                | Se       |                                                                                                                                          | Other taxable private founda       | ation                     | under section 507(b)(1                                |                                                  |
| ١       | Fa             | ır ma    | · I —                                                                                                                                    | ting method: X Cash                | Accrual                   | F If the foundation is in a                           | 60-month termination                             |
|         |                |          |                                                                                                                                          | Other (specify)                    |                           | under section 507(b)(1                                | )(B), check here .                               |
| r       |                | \$       | 3,885,185. (Part I, col                                                                                                                  | umn (d) must be on cash i          | basis.)                   |                                                       |                                                  |
| L       | Pa             | irt I    | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income                               | (d) Disbursements<br>for charitable purposes     |
| -       | -              | 1        | Contributions, gifts, grants, etc., received                                                                                             |                                    |                           | N/A                                                   | (cash basis only)                                |
|         |                | 2        | Check X if the foundation is not required to attach Sch B                                                                                |                                    |                           |                                                       | <del> </del>                                     |
|         |                | 3        | Interest on savings and temporary cash investments                                                                                       | 31.                                | 31.                       |                                                       | STATEMENT 1                                      |
|         |                | 4        | Dividends and interest from securities                                                                                                   | 3,021.                             | 66,430.                   |                                                       | STATEMENT 2                                      |
|         |                | 5a       | a Gross rents                                                                                                                            |                                    |                           |                                                       |                                                  |
|         |                | b        | Net rental income or (loss)                                                                                                              |                                    |                           |                                                       |                                                  |
|         | e              | 6a       | Net gain or (loss) from sale of assets not on line 10                                                                                    | 252.                               |                           |                                                       |                                                  |
|         | eun            | b        | Gross sales price for all assets on line 6a                                                                                              |                                    |                           |                                                       |                                                  |
|         | Revenue        | 7        | Capital gain net income (from Part IV, line 2)                                                                                           |                                    | 354,150.                  |                                                       |                                                  |
|         | _              | 8        | Net short-term capital gain                                                                                                              |                                    |                           |                                                       |                                                  |
|         |                | 9        | Income modifications Gross sales less returns                                                                                            |                                    |                           |                                                       |                                                  |
|         |                | 10a      | - and anomalious                                                                                                                         | <u> </u>                           |                           |                                                       |                                                  |
|         |                |          | Cross profit or (loss)                                                                                                                   | <u> </u>                           |                           |                                                       | <u> </u>                                         |
|         |                | 11       | **                                                                                                                                       | 298,539.                           | 98.                       |                                                       | STATEMENT 3                                      |
|         |                | 12       | Total. Add lines 1 through 11                                                                                                            | 301,843.                           | 420,709.                  | <del> </del>                                          | DIMILIMITY 5                                     |
| -       |                | 13       | Compensation of officers, directors, trustees, etc                                                                                       | 0.                                 | 0.                        |                                                       | 0.                                               |
| (A)     |                | 14       | Other employee salaries and wages                                                                                                        |                                    |                           |                                                       |                                                  |
| SCAN    |                | 15       | Pension plans, employee benefits                                                                                                         |                                    |                           |                                                       | †                                                |
| ⋛       | nses           | 16a      | Legal fees                                                                                                                               |                                    |                           |                                                       |                                                  |
|         | Expen          |          | Accounting fees                                                                                                                          |                                    |                           |                                                       |                                                  |
|         |                |          | Other professional fees STMT 4                                                                                                           | 6,500.                             | 0.                        |                                                       | 6,500.                                           |
| NED NOV | Administrative |          | Interest                                                                                                                                 | 10 405                             | 680                       |                                                       |                                                  |
| ō       | stra           | 18       | Taxes STMT 5                                                                                                                             | 12,495.                            | 678.                      |                                                       | 0.                                               |
|         | ij             | 19       | Depreciation and depletion                                                                                                               |                                    |                           |                                                       |                                                  |
| 30      | Ap.            | 20<br>21 | Occupancy Travel, conferences, and meetings                                                                                              |                                    |                           | <del></del>                                           | <del></del>                                      |
| 2       | and/           | 22       | Printing and publications                                                                                                                |                                    |                           |                                                       | <del>                                     </del> |
| 2019    | ga             | 23       | Other expenses 6                                                                                                                         | 1,332.                             | 15,892.                   | <del></del>                                           | 1,176.                                           |
|         | aţiu           | 24       | 1001                                                                                                                                     | 7,5521                             | 20,0320                   | · · · — · ·                                           |                                                  |
|         | Operating      |          | Total operating and administrative expenses 25dd lines (13kthrough 25015                                                                 | 20,327.                            | 16,570.                   |                                                       | 7,676.                                           |
|         | Ō              | 25       |                                                                                                                                          | 170,000.                           |                           |                                                       | 170,000.                                         |
|         |                | 26       | Total expenses and disbursements.  Add lines 24 and 25                                                                                   |                                    |                           |                                                       |                                                  |
| _       |                |          |                                                                                                                                          | 190,327.                           | 16,570.                   |                                                       | 177,676.                                         |
|         |                | 27       | Subtract line 26 from line 12:                                                                                                           |                                    |                           |                                                       |                                                  |
|         |                |          | Excess of revenue over expenses and disbursements                                                                                        | 111,516.                           | 101-133                   |                                                       |                                                  |
|         |                |          | Net investment income (if negative, enter -0-)                                                                                           | <b>—</b>                           | 404,139.                  | 37/=                                                  | ļ <u>.</u>                                       |
|         |                | C        | Adjusted net income (if negative, enter -0-)                                                                                             | 1                                  |                           | N/A                                                   | I                                                |

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LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2014)

| Б                         | art  | Balance Sheets Attached schedules and amounts in the description                 | Beginning of year | End of         | <u> </u>                              |
|---------------------------|------|----------------------------------------------------------------------------------|-------------------|----------------|---------------------------------------|
| 뜨                         | ai t | column should be for end-of-year amounts only                                    | (a) Book Value    | (b) Book Value | (c) Fair Market Value                 |
|                           | 1    | Cash - non-interest-bearing                                                      |                   |                |                                       |
|                           | 2    | Salvings and temporary cash investments                                          | 54,286.           | 192,282.       | 192,282.                              |
|                           | 3    | Accounts receivable ▶                                                            |                   |                |                                       |
|                           | -    | Less: allowance for doubtful accounts                                            |                   | 1              |                                       |
|                           |      | Pledges receivable ►                                                             |                   |                |                                       |
|                           | "    | -                                                                                |                   |                |                                       |
|                           | ۱.   | Less: allowance for doubtful accounts                                            |                   |                |                                       |
|                           | 5    | Grants receivable                                                                |                   |                |                                       |
|                           | 6    | Receivables due from officers, directors, trustees, and other                    |                   | 1              |                                       |
|                           |      | disqualified persons                                                             |                   |                |                                       |
|                           | 7    | Other notes and loans receivable                                                 |                   | į              |                                       |
|                           |      | Less: allowance for doubtful accounts                                            |                   |                |                                       |
| 2                         | 8    | Inventories for sale or use                                                      |                   |                |                                       |
| Assets                    | 9    | Prepaid expenses and deferred charges                                            |                   |                |                                       |
| ĕ                         |      | Investments - U.S. and state government obligations                              |                   |                |                                       |
|                           | ı    | Investments - corporate stock STMT 8                                             | 105,170.          | 112,927.       | 112,927.                              |
|                           | ŀ    | T                                                                                |                   |                |                                       |
|                           | 1    | · · · · · · · · · · · · · · · · · · ·                                            |                   |                |                                       |
|                           | ' '  | Investments - land, buildings, and equipment basis                               | 1                 | ł              |                                       |
|                           |      | Less accumulated depreciation                                                    |                   |                |                                       |
|                           | i i  | Investments - mortgage loans Investments - other STMT 9                          | 2 714 104         | 2 5 7 0 0 7 6  | 2 500 006                             |
|                           | 13   |                                                                                  | 3,714,194.        | 3,579,976.     | 3,579,976.                            |
|                           | 14   | Land, buildings, and equipment basis                                             |                   |                |                                       |
|                           | 1    | Less accumulated depreciation                                                    |                   |                |                                       |
|                           | 15   | Other assets (describe )                                                         |                   |                |                                       |
|                           | 16   | Total assets (to be completed by all filers - see the                            |                   |                |                                       |
|                           |      | instructions. Also, see page 1, item I)                                          | 3,873,650.        | 3,885,185.     | 3,885,185.                            |
|                           | 17   | Accounts payable and accrued expenses                                            |                   |                |                                       |
|                           | 18   | Grants payable                                                                   | 1                 |                |                                       |
| 60                        | 19   | Deferred revenue                                                                 |                   |                |                                       |
| Liabilities               | 20   | Loans from officers, directors, trustees, and other disqualified persons         | -                 |                |                                       |
| ਛੋ                        | 21   |                                                                                  |                   |                |                                       |
| <u>.</u>                  |      | Mortgages and other notes payable                                                |                   |                |                                       |
|                           | 22   | Other liabilities (describe                                                      | -                 |                |                                       |
|                           | ١    |                                                                                  |                   |                |                                       |
| _                         | 23   | Total liabilities (add lines 17 through 22)                                      | 0.                | 0.             |                                       |
|                           |      | Foundations that follow SFAS 117, check here                                     |                   |                |                                       |
| •                         |      | and complete lines 24 through 26 and lines 30 and 31.                            |                   |                |                                       |
| ces                       | 24   | Unrestricted                                                                     |                   |                |                                       |
| ᆵ                         | 25   | Temporarily restricted                                                           |                   |                |                                       |
| Net Assets or Fund Balanc | 26   | Permanently restricted                                                           |                   |                |                                       |
| 5                         |      | Foundations that do not follow SFAS 117, check here                              |                   |                |                                       |
| 교                         |      | and complete lines 27 through 31.                                                |                   | ł              |                                       |
| ò                         | 27   | Capital stock, trust principal, or current funds                                 | 0.                | 0.             |                                       |
| ets                       | 28   | Paid-in or capital surplus, or land, bldg., and equipment fund                   | 0.                | 0.             |                                       |
| SS                        | 1    | Retained earnings, accumulated income, endowment, or other funds                 | 3,873,650.        | 3,885,185.     |                                       |
| j j                       | 29   | - · · · · · · · · · · · · · · · · · · ·                                          | 3,873,650.        | 3,885,185.     |                                       |
| ž                         | 30   | Total net assets or fund balances                                                | 3,013,030.        | 3,003,103.     |                                       |
|                           | ١    |                                                                                  | 2 072 650         | 2 005 105      |                                       |
| _                         | 31   | Total liabilities and net assets/fund balances                                   | 3,873,650.        | 3,885,185.     | <del></del>                           |
| P                         | art  | III Analysis of Changes in Net Assets or Fund Ba                                 | alances           |                |                                       |
| Ξ                         |      |                                                                                  | 20                | <del></del>    | · · · · · · · · · · · · · · · · · · · |
| ı                         |      | I net assets or fund balances at beginning of year - Part II, column (a), line ( | DU                |                | 2 972 650                             |
| •                         | -    | st agree with end-of-year figure reported on prior year's return)                | ••                |                | 3,873,650.                            |
|                           |      | r amount from Part I, line 27a                                                   |                   |                | 111,516.                              |
|                           |      | r increases not included in line 2 (itemize)                                     |                   | 3              | 0.                                    |
|                           |      | lines 1, 2, and 3                                                                |                   | 4              | 3,985,166.                            |
|                           |      | eases not included in line 2 (itemize) FAIR MARKET VA                            |                   |                | 99,981.                               |
| 6                         | Tota | I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co | lumn (b), line 30 | 6              | 3,885,185.                            |
|                           |      |                                                                                  |                   |                | Form <b>990-PF</b> (2014)             |

| Part IV   Capital Gains a                                                                                                     | nd Losses for Tax o                                           | on investmen                                        | Income                               |          |                                    |                                                  |                                                 |
|-------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|-----------------------------------------------------|--------------------------------------|----------|------------------------------------|--------------------------------------------------|-------------------------------------------------|
|                                                                                                                               | be the kind(s) of property sol<br>ehouse; or common stock, 2  |                                                     |                                      | P-F      | w acquired<br>Purchase<br>Donation | (c) Date acquired<br>(mo., day, yr.)             | (d) Date sold<br>(mo., day, yr.)                |
| 1a SEE STATEMENT 7                                                                                                            |                                                               |                                                     |                                      |          | P                                  | VARIOUS                                          | VARIOUS                                         |
| b SEE STATEMENT 7                                                                                                             |                                                               |                                                     |                                      |          | P                                  | VARIOUS                                          | VARIOUS                                         |
| c CAPITAL GAIN DI                                                                                                             | STRIBUTION                                                    |                                                     |                                      |          | P                                  | VARIOUS                                          | VARIOUS                                         |
| d                                                                                                                             |                                                               |                                                     |                                      |          |                                    |                                                  |                                                 |
| <u>e</u>                                                                                                                      |                                                               |                                                     |                                      | <u> </u> |                                    |                                                  |                                                 |
| (e) Gross sales price                                                                                                         | (f) Depreciation allowed<br>(or allowable)                    |                                                     | st or other basis<br>expense of sale |          |                                    | (h) Gain or (lo<br>(e) plus (f) min              | us (g)                                          |
| a                                                                                                                             |                                                               |                                                     |                                      |          |                                    |                                                  | 6,488.                                          |
| b                                                                                                                             |                                                               |                                                     |                                      |          |                                    |                                                  | 347,410.                                        |
| С                                                                                                                             |                                                               |                                                     |                                      |          |                                    | · · · · · · · · · · · · · · · · · · ·            | 252.                                            |
| _d                                                                                                                            |                                                               |                                                     |                                      |          |                                    |                                                  |                                                 |
| Complete only for secrets showing                                                                                             | asin in solumn (h) and our                                    | ad by the foundation                                | on 19/21/60                          |          |                                    | //\ O-! (O-1 //-\ )                              |                                                 |
| Complete only for assets showing                                                                                              | <del></del>                                                   |                                                     |                                      |          |                                    | (I) Gains (Col. (h) g<br>ol. (k), but not less : |                                                 |
| (i) F.M.V. as of 12/31/69                                                                                                     | (j) Adjusted basis<br>as of 12/31/69                          |                                                     | cess of col. (i)<br>col. (j), if any |          |                                    | Losses (from co                                  |                                                 |
| 8                                                                                                                             |                                                               |                                                     | .==                                  |          |                                    |                                                  | 6,488.                                          |
| b                                                                                                                             |                                                               |                                                     |                                      |          |                                    |                                                  | 347,410.                                        |
| C                                                                                                                             |                                                               |                                                     |                                      |          |                                    |                                                  | 252.                                            |
| d                                                                                                                             |                                                               |                                                     |                                      |          |                                    |                                                  |                                                 |
| e                                                                                                                             |                                                               |                                                     |                                      |          | ,                                  |                                                  |                                                 |
| 2 Capital gain net income or (net cap                                                                                         |                                                               | o enter in Part I, line<br>nter -0- in Part I, line |                                      | }        | 2                                  |                                                  | 354,150.                                        |
| 3 Net short-term capital gain or (loss                                                                                        | ) as defined in sections 1222                                 | ?(5) and (6):                                       |                                      | [ Γ      |                                    |                                                  |                                                 |
| If gain, also enter in Part I, line 8, c                                                                                      |                                                               |                                                     |                                      | J        | İ                                  |                                                  |                                                 |
| If (loss), enter -0- in Part I, line 8                                                                                        |                                                               |                                                     |                                      | 儿        | 3                                  | N,                                               | 'A                                              |
| Part V   Qualification Un                                                                                                     | ider Section 4940(e                                           | ) for Reduced                                       | Tax on Net                           | inve     | stment in                          | come                                             |                                                 |
| If section 4940(d)(2) applies, leave this Was the foundation liable for the section If "Yes," the foundation does not qualify | on 4942 tax on the distributal<br>y under section 4940(e). Do | not complete this pa                                | rt.                                  |          |                                    | -                                                | Yes X No                                        |
| 1 Enter the appropriate amount in ea                                                                                          | <del></del>                                                   |                                                     | rore making any e                    |          |                                    |                                                  | (6)                                             |
| (a)<br>Base period years<br>Calendar year (or tax year beginning                                                              | (b)<br>(n) Adjusted qualifyi                                  | ng distributions                                    | Net value of no                      |          |                                    | (col. (b)                                        | (d)<br>stribution ratio<br>divided by col. (c)) |
| 2013                                                                                                                          |                                                               | 163,650.                                            |                                      |          | 622,51                             |                                                  | .045176                                         |
| 2012                                                                                                                          |                                                               | 168,972.                                            |                                      |          | 359,29                             |                                                  | .050300                                         |
| 2011                                                                                                                          |                                                               | 156,174.                                            |                                      |          | 404,38                             |                                                  | .045874                                         |
| 2010                                                                                                                          |                                                               | 153,956.                                            |                                      |          | 252,52                             |                                                  | .047334                                         |
| 2009                                                                                                                          |                                                               | 180,632.                                            |                                      | 3,       | 003,14                             | 5.                                               | .060148                                         |
| 2 Total of line 1, column (d)                                                                                                 |                                                               |                                                     |                                      |          |                                    | 2                                                | .248832                                         |
| 3 Average distribution ratio for the 5-<br>the foundation has been in existence                                               | -                                                             | total on line 2 by 5,                               | or by the number                     | of years | S                                  | 3                                                | .049766                                         |
| 4 Enter the net value of noncharitable                                                                                        | e-use assets for 2014 from P                                  | art X, line 5                                       |                                      | -        |                                    | 4                                                | 3,875,179.                                      |
| 5 Multiply line 4 by line 3                                                                                                   |                                                               |                                                     |                                      |          |                                    | 5                                                | 192,852.                                        |
| 6 Enter 1% of net investment income                                                                                           | ! (1% of Part I. line 27h)                                    |                                                     |                                      | ••       |                                    | 6                                                | 4,041.                                          |
|                                                                                                                               | . (                                                           |                                                     |                                      |          |                                    |                                                  | 196,893.                                        |
| 7 Add lines 5 and 6                                                                                                           |                                                               |                                                     | ••••                                 | • ••     |                                    | 7                                                |                                                 |
| 8 Enter qualifying distributions from<br>If line 8 is equal to or greater than I<br>See the Part VI instructions.             | •                                                             | <br>/I, line 1b, and comp                           | <br>lete that part usin              | g a 1%   | tax rate.                          | 8                                                | 177,676.                                        |
| See the rait vi insudctions.                                                                                                  |                                                               |                                                     | <del></del> -                        |          |                                    |                                                  | Form <b>900</b> - <b>DE</b> (2014               |

|    |                                                                                                                                                | <u> 90-029</u>    |        |      | Page 4         |
|----|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|--------|------|----------------|
|    | art VI   Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49                                                       | <u> 148 - see</u> | instru | ctio | ns)            |
| 18 | a Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.                                         |                   |        |      |                |
|    | Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)                                                  |                   |        |      |                |
| b  | b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 📖 and enter 1%                                       | 1                 |        | 8,0  | 83.            |
|    | of Part I, line 27b                                                                                                                            |                   |        |      |                |
| C  | 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                                                                                                                              | 3                 |        | 8,0  | 83.            |
| 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-                                                        | 5                 |        | 8,0  | 83.            |
| 6  | Credits/Payments:                                                                                                                              |                   |        |      |                |
| 8  | a 2014 estimated tax payments and 2013 overpayment credited to 2014                                                                            |                   |        |      |                |
| t  | b Exempt foreign organizations - tax withheld at source                                                                                        |                   |        |      |                |
| C  | c Tax paid with application for extension of time to file (Form 8868) 8c 9,500.                                                                |                   |        |      |                |
| 0  | d Backup withholding erroneously withheld 6d 6d                                                                                                |                   |        |      |                |
| 7  | Total credits and payments. Add lines 6a through 6d                                                                                            | 7                 | 1      | 6,5  | 00.            |
| 8  | Enter any penalty for underpayment of estimated tax. Check here X 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                 |        |      |                |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid                                                      | 10                |        | 8,4  | <del>17.</del> |
| 11 | Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ 8,417. Refunded ▶                                                          | 11                |        |      | 0.             |
| Pa | art VII-A Statements Regarding Activities                                                                                                      |                   |        |      |                |
| 18 | a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in | 1                 |        | Yes  | No             |
|    | any political campaign?                                                                                                                        |                   | 1a     |      | X              |
| b  | 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 activities and copies of any materials published                      | d or              |        |      |                |
|    | distributed by the foundation in connection with the activities.                                                                               |                   | 1 1    |      |                |
| c  | c Did the foundation file Form 1120-POL for this year?                                                                                         |                   | 1c     |      | X              |
| d  | d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:                                           |                   |        |      |                |
|    | (1) On the foundation. ▶ \$ 0 • (2) On foundation managers. ▶ \$ 0 •                                                                           |                   |        |      | İ              |
| e  | e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure 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 governing instrument, articles of incorporation, or            |                   |        |      |                |
|    | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes                                                         |                   | 3      |      | X              |
| 48 | a Did the foundation have unrelated business gross income of \$1,000 or more during the year?                                                  |                   | 4a     |      | X              |
| b  | 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.                                                                              |                   |        |      |                |
| 6  | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:                                              |                   | 1 1    |      |                |
|    | 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!            | aw                |        |      | l              |
|    | 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," complete Part II, col. (c), and Part XV              |                   | 7      | X    |                |
|    |                                                                                                                                                |                   |        |      |                |
| 88 | a Enter the states to which the foundation reports or with which it is registered (see instructions)                                           |                   |        |      |                |
|    | MN                                                                                                                                             |                   |        |      | 1              |
| t  | b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)                  |                   |        |      | 1              |
|    | of each state as required by General Instruction G? If "No," attach explanation                                                                |                   | 86     | X    | 1              |
| 9  | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calen           | dar               |        |      |                |
|    | year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV                                   |                   | 9      |      | Х              |
| 10 | Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses             |                   | 10     |      | X              |

Form **990-PF** (2014)

| Form 990-PF (2014) JS TURNER FAMILY FOUNDAT                                                                                                                       |                                                                 |                                                 | 90-029808                                                                      | 37 Page 6                                   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|-------------------------------------------------|--------------------------------------------------------------------------------|---------------------------------------------|
| Part VII-B   Statements Regarding Activities for Which                                                                                                            | Form 4720 May Be F                                              | 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 (sectio                                                                                    |                                                                 |                                                 | es 🛣 No                                                                        |                                             |
| (2) Influence the outcome of any specific public election (see section 4955); of                                                                                  | or to carry on, directly or indire                              | ectly,                                          | ]                                                                              |                                             |
| any voter registration drive?                                                                                                                                     |                                                                 | · ·····                                         | es 🔀 No                                                                        |                                             |
| (3) Provide a grant to an individual for travel, study, or other similar purposes                                                                                 | ; <del>?</del>                                                  | L Y                                             | es 🗶 No                                                                        |                                             |
| (4) Provide a grant to an organization other than a charitable, etc., organization                                                                                | on described in section                                         |                                                 |                                                                                |                                             |
| 4945(d)(4)(A)? (see instructions)                                                                                                                                 |                                                                 |                                                 | es X No                                                                        |                                             |
| (5) Provide for any purpose other than religious, charitable, scientific, literary                                                                                | , or educational purposes, or f                                 |                                                 |                                                                                |                                             |
| the prevention of cruelty to children or animals?                                                                                                                 |                                                                 |                                                 | es 🔀 No                                                                        | 1 1                                         |
| <b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify un                                                               |                                                                 |                                                 |                                                                                |                                             |
| section 53.4945 or in a current notice regarding disaster assistance (see instru Organizations relying on a current notice regarding disaster assistance check to | uctions)?                                                       |                                                 | N/A . 5                                                                        | b                                           |
| Organizations relying on a current notice regarding disaster assistance check t                                                                                   | nere                                                            |                                                 | . ▶∟                                                                           |                                             |
| c if the answer is tes to question 5a(4), does the foundation claim exemption i                                                                                   | TOTTI UTE LAX DECAUSE IL ITIAITILA                              | mea                                             | 1                                                                              |                                             |
|                                                                                                                                                                   |                                                                 | [/A 🔲 Y                                         | es Li No                                                                       |                                             |
| If "Yes," attach the statement required by Regulations section 53.494                                                                                             | • •                                                             |                                                 |                                                                                | 1                                           |
| <b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to                                                                      | pay premiums on                                                 |                                                 |                                                                                | <b>]</b>                                    |
| a personal benefit contract?                                                                                                                                      |                                                                 | L_ Y                                            | es X No                                                                        |                                             |
| <b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p                                                                        | personal benefit contract?                                      |                                                 | <u> </u> 6                                                                     | b X                                         |
| If "Yes" to 6b, file Form 8870.                                                                                                                                   |                                                                 |                                                 |                                                                                |                                             |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax                                                                                |                                                                 |                                                 |                                                                                |                                             |
| b If "Yes," did the foundation receive any proceeds or have any net income attrib                                                                                 |                                                                 |                                                 |                                                                                | b                                           |
| Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors                                                                            |                                                                 | inagers, Highl                                  | <b>y</b><br>                                                                   |                                             |
| 1 List all officers, directors, trustees, foundation managers and their                                                                                           |                                                                 |                                                 |                                                                                |                                             |
| (a) Name and address                                                                                                                                              | (b) Title, and average<br>hours per week devoted<br>to position | (c) Compensation<br>(If not paid,<br>enter -0-) | (d) Contributions to<br>employee benefit plans<br>and deferred<br>compensation | (e) Expense<br>account, other<br>allowances |
| SUSAN R. TURNER                                                                                                                                                   | PRESIDENT                                                       |                                                 |                                                                                |                                             |
| C/O TAX DEPT 10350 BREN ROAD WEST                                                                                                                                 |                                                                 | ]                                               |                                                                                |                                             |
| MINNETONKA, MN 55343                                                                                                                                              | 12.00                                                           | 0.                                              | 0.                                                                             | 0.                                          |
| JEFFREY S. TURNER                                                                                                                                                 | VICE PRESIDEN                                                   | r                                               |                                                                                |                                             |
| C/O TAX DEPT 10350 BREN ROAD WEST                                                                                                                                 |                                                                 |                                                 |                                                                                |                                             |
| MINNETONKA, MN 55343                                                                                                                                              | 1.00                                                            | 0.                                              | 0.                                                                             | 0.                                          |
|                                                                                                                                                                   |                                                                 |                                                 |                                                                                |                                             |
|                                                                                                                                                                   |                                                                 |                                                 |                                                                                |                                             |
|                                                                                                                                                                   |                                                                 |                                                 |                                                                                |                                             |
|                                                                                                                                                                   |                                                                 |                                                 |                                                                                |                                             |
|                                                                                                                                                                   | _                                                               |                                                 | 1                                                                              |                                             |
|                                                                                                                                                                   |                                                                 |                                                 |                                                                                |                                             |
| 2 Compensation of five highest-paid employees (other than those in                                                                                                |                                                                 | enter "NONE."                                   | (d) Contributions to                                                           | (a) Evpopoo                                 |
| (a) Name and address of each employee paid more than \$50,000                                                                                                     | (b) Title, and average<br>hours per week<br>devoted to position | (c) Compensation                                | (d) Contributions to<br>employee benefit plans<br>and deferred<br>compensation | (e) Expense<br>account, other<br>allowances |
| NONE                                                                                                                                                              |                                                                 |                                                 |                                                                                | •                                           |
|                                                                                                                                                                   | ]                                                               |                                                 |                                                                                |                                             |
|                                                                                                                                                                   |                                                                 |                                                 | I T                                                                            |                                             |
|                                                                                                                                                                   |                                                                 |                                                 |                                                                                |                                             |
|                                                                                                                                                                   | 1                                                               |                                                 | į į                                                                            |                                             |
|                                                                                                                                                                   |                                                                 | ļ. <u> </u>                                     | <u> </u>                                                                       |                                             |
|                                                                                                                                                                   | 1                                                               |                                                 |                                                                                |                                             |
|                                                                                                                                                                   | ļ                                                               |                                                 | ļl                                                                             |                                             |
|                                                                                                                                                                   | 4                                                               |                                                 |                                                                                |                                             |
|                                                                                                                                                                   | <u> </u>                                                        | L                                               | <u> </u>                                                                       | <del></del>                                 |
| Total number of other employees paid over \$50,000                                                                                                                |                                                                 |                                                 | . ▶ 1                                                                          | 0                                           |

| Form 990-PF (2014) JS TURNER FAMILY FOUNDATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 90-                                   | -0298087                                         | Page 7       |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|--------------------------------------------------|--------------|
| Part VIII Information About Officers, Directors, Trustees, Foundat Paid Employees, and Contractors (continued)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | tion Managers, Highly                 |                                                  |              |
| 3 Five highest-paid independent contractors for professional services. If none, enter                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | "NONE."                               |                                                  |              |
| ` (a) Name and address of each person paid more than \$50,000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | (b) Type of service                   | (c) Com                                          | pensation    |
| NONE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                       |                                                  |              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |                                                  |              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |                                                  | <del>_</del> |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <u> </u>                              |                                                  |              |
| Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                       |                                                  | 0            |
| <u></u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                       |                                                  |              |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistinumber of organizations and other beneficiaries served, conferences convened, research papers produced to the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conference of the conferen | uced, etc.                            | Expenses                                         | S            |
| 1 PLANNING AND CARRYING OUT GRANT-MAKING TO OT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | HER UNRELATED                         | 1                                                |              |
| CHARITABLE ORGANIZATIONS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                       | _                                                | •            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       | <b>_</b>                                         | 0.           |
| 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                       | 4                                                |              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <del></del>                           | 4                                                |              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       | <del></del>                                      |              |
| 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                       | 4                                                |              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       | -                                                |              |
| 4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                       | <del>                                     </del> |              |
| <u> </u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                       | 1                                                |              |
| <del></del>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <del></del>                           | 1                                                |              |
| Part IX-B Summary of Program-Related Investments                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <del></del>                           |                                                  |              |
| Describe the two largest program-related investments made by the foundation during the tax year on li                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | ines 1 and 2.                         | Amount                                           |              |
| 1 NONE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | · · · · · · · · · · · · · · · · · · · | <del> </del>                                     |              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       | 1                                                |              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       | 1                                                | 0.           |
| 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                       |                                                  |              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       | ]                                                |              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       | <u>]</u> _                                       |              |
| All other program-related investments. See instructions.  3 NONE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                       |                                                  |              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       | 1                                                |              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       | 1                                                | 0.           |
| Total. Add lines 1 through 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                       |                                                  | 0.           |

|            | m 990-PF (2014) JS TURNER FAMILY FOUNDATION                                                                                                                                     | 90-0298087                 | Page 8 |
|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|--------|
| P          | Art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four                                                                                 | ndations, see instructions | .)     |
| 1          | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:                                                                     |                            |        |
| a          | Average monthly fair market value of securities ,                                                                                                                               | 1a 107                     | ,405.  |
| b          | Average of monthly cash balances                                                                                                                                                | 1b 171                     | ,013.  |
| C          | Fair market value of all other assets                                                                                                                                           |                            | 774.   |
| d          | Total (add lines 1a, b, and c)                                                                                                                                                  | 1d 3,934                   | ,192.  |
| e          | Reduction claimed for blockage or other factors reported on lines 1a and                                                                                                        |                            |        |
|            | 1c (attach detailed explanation)                                                                                                                                                |                            |        |
| 2          | Acquisition indebtedness applicable to line 1 assets                                                                                                                            | 2                          | 0.     |
| 3          | Subtract line 2 from line 1d                                                                                                                                                    |                            | ,192.  |
| 4          | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)                                                                       |                            | 0,013. |
| 5          | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4                                                                            | 5 3,875                    | ,179.  |
| 6_         | Minimum investment return. Enter 5% of line 5                                                                                                                                   | 6 193                      | ,759.  |
| P          | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations check here and do not complete this part.) | d certain                  | _      |
| <u>-</u> - | Minimum investment return from Part X, line 6                                                                                                                                   | 1 193                      | 759.   |
| -          | Tax on investment income for 2014 from Part VI, line 5 2a 2a 8, 083.                                                                                                            |                            |        |
|            | Income tax for 2014. (This does not include the tax from Part VI.)                                                                                                              |                            |        |
|            | Add lines 2a and 2b                                                                                                                                                             | 2c 8                       | ,083.  |
| 3          | Distributable amount before adjustments. Subtract line 2c from line 1                                                                                                           |                            | ,676.  |
| 4          | Recoveries of amounts treated as qualifying distributions                                                                                                                       | 4                          | 0.     |
| 5          | Add lines 3 and 4                                                                                                                                                               |                            | ,676.  |
| 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                                                                              |                            | 676.   |
| _          | Part XII Qualifying Distributions (see instructions)                                                                                                                            |                            | 70.00  |
| 1          | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:                                                                                      |                            |        |
| 8          |                                                                                                                                                                                 | 1a   177                   | ,676.  |
| -          | 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:                                                                                                            |                            |        |
| -          | Surtability test (prior IRS approval required)                                                                                                                                  | 3a                         |        |
| b          |                                                                                                                                                                                 | 3b                         |        |
| 4          | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4                                                                      |                            | ,676.  |
| 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                          | 0.     |
| 6          | Adjusted qualifying distributions. Subtract line 5 from line 4                                                                                                                  |                            | ,676.  |
| •          | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q                                                    |                            |        |
|            | 4940(e) reduction of tax in those years.                                                                                                                                        | ,                          |        |

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| Part : | XIII | Undistributed | Income | (see instructions) |
|--------|------|---------------|--------|--------------------|
|--------|------|---------------|--------|--------------------|

| •                                                                                                                                    |               |                                       |              |                           |
|--------------------------------------------------------------------------------------------------------------------------------------|---------------|---------------------------------------|--------------|---------------------------|
| ,                                                                                                                                    | (a)<br>Corpus | (b)<br>Years prior to 2013            | (c)<br>2013  | (d)<br>2014               |
| 1 Distributable amount for 2014 from Part XI,                                                                                        | •             | · · · · · · · · · · · · · · · · · · · |              |                           |
| line 7                                                                                                                               |               |                                       |              | 185,676.                  |
| 2 Undistributed income, if any, as of the end of 2014                                                                                |               |                                       | <del> </del> | 20370700                  |
| a Enter amount for 2013 only                                                                                                         |               |                                       | 169,718.     |                           |
| b Total for prior years:                                                                                                             |               |                                       | 105,710.     |                           |
| g rotal for prior years.                                                                                                             |               | 0.                                    |              |                           |
| 3 Excess distributions carryover, if any, to 2014:                                                                                   |               | •                                     | -            |                           |
| a From 2009                                                                                                                          |               |                                       |              |                           |
| b From 2010                                                                                                                          |               |                                       |              |                           |
| · · · ———                                                                                                                            |               |                                       |              |                           |
| c From 2011                                                                                                                          |               |                                       |              |                           |
| d From 2012                                                                                                                          |               |                                       |              |                           |
| eFrom 2013                                                                                                                           | 0.            |                                       |              |                           |
| 1 Total of lines 3a through e                                                                                                        | 0.            |                                       |              |                           |
| 4 Qualifying distributions for 2014 from                                                                                             |               |                                       |              |                           |
| Part XII, line 4: ►\$ 177,676.                                                                                                       |               |                                       | 160 710      |                           |
| a Applied to 2013, but not more than line 2a                                                                                         |               |                                       | 169,718.     |                           |
| <b>b</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                                                                                               |               |                                       |              | 7,958.                    |
| e Remaining amount distributed out of corpus                                                                                         | 0.            |                                       |              |                           |
| 5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))   | 0.            |                                       |              | 0.                        |
| 6 Enter the net total of each column as indicated below;                                                                             |               |                                       |              |                           |
| & Corpus Add lines 3f, 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<br>deficiency has been issued, or on which<br>the section 4942(a) tax has been previously |               |                                       |              |                           |
| assessed                                                                                                                             |               | 0.                                    |              |                           |
| d Subtract line 6c from line 6b. Taxable                                                                                             |               |                                       |              |                           |
| amount - see instructions                                                                                                            |               | 0.                                    |              |                           |
| e Undistributed income for 2013. Subtract line                                                                                       |               | ·                                     |              |                           |
| 4a from line 2a. Taxable amount - see instr.                                                                                         |               |                                       | 0.           |                           |
| f Undistributed income for 2014. Subtract                                                                                            |               |                                       |              |                           |
| lines 4d and 5 from line 1. This amount must                                                                                         |               |                                       |              |                           |
| be distributed in 2015                                                                                                               |               |                                       |              | 177,718.                  |
| 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                                                                                                                   |               |                                       |              |                           |
| d Excess from 2013                                                                                                                   |               |                                       |              |                           |
| e Excess from 2014                                                                                                                   |               |                                       |              |                           |
| 23381                                                                                                                                |               | •                                     |              | Form <b>990-PF</b> (2014) |

| такту одржината                            |                                                                                                                    | <del>-</del>            |                                  |              |
|--------------------------------------------|--------------------------------------------------------------------------------------------------------------------|-------------------------|----------------------------------|--------------|
| 3 Grants and Contributions Paid During the | Year or Approved for Future                                                                                        | Payment                 |                                  | - <u> </u>   |
| Recipient                                  | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of | Purpose of grant or contribution | Amount       |
| Name and address (home or business)        | or substantial contributor                                                                                         | status of recipient     |                                  |              |
| a Paid during the year                     | 2.2                                                                                                                |                         |                                  | •            |
|                                            |                                                                                                                    |                         |                                  |              |
|                                            |                                                                                                                    |                         |                                  |              |
|                                            |                                                                                                                    |                         |                                  |              |
| SEE STATEMENT 10                           |                                                                                                                    |                         |                                  |              |
|                                            |                                                                                                                    |                         |                                  | 170,000.     |
|                                            |                                                                                                                    |                         |                                  |              |
|                                            |                                                                                                                    |                         |                                  |              |
|                                            |                                                                                                                    |                         |                                  |              |
|                                            |                                                                                                                    |                         |                                  |              |
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|                                            |                                                                                                                    |                         |                                  |              |
|                                            |                                                                                                                    |                         |                                  |              |
|                                            |                                                                                                                    |                         |                                  |              |
| Total                                      |                                                                                                                    |                         | ▶ 3a                             | 170,000.     |
| b Approved for future payment              | <u> </u>                                                                                                           |                         | , ,, ,                           | ,            |
|                                            |                                                                                                                    | ı                       | j                                |              |
|                                            |                                                                                                                    |                         |                                  |              |
| NONE                                       |                                                                                                                    |                         |                                  |              |
|                                            |                                                                                                                    |                         |                                  |              |
|                                            |                                                                                                                    |                         |                                  |              |
| <del></del>                                |                                                                                                                    |                         |                                  |              |
|                                            |                                                                                                                    |                         |                                  |              |
|                                            |                                                                                                                    |                         |                                  |              |
|                                            |                                                                                                                    |                         |                                  |              |
|                                            |                                                                                                                    |                         |                                  |              |
|                                            |                                                                                                                    |                         |                                  | <del>-</del> |
|                                            |                                                                                                                    |                         |                                  |              |
|                                            |                                                                                                                    |                         |                                  |              |
|                                            |                                                                                                                    |                         |                                  |              |
|                                            |                                                                                                                    |                         |                                  |              |
|                                            |                                                                                                                    |                         |                                  |              |
| Total                                      |                                                                                                                    |                         | > 3b                             | 0.           |

## Part XVI-A Analysis of Income-Producing Activities

| Enter gross amounts unless otherwise indicated.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Uniterated                                       | business income |                       | ded by section 512, 513, or 514 | (e)                               |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|-----------------|-----------------------|---------------------------------|-----------------------------------|
| •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | (a)<br>Business                                  | (b)<br>Amount   | (C)<br>Exclu-<br>ston | (d)<br>Amount                   | Related or exempt function income |
| 1 Program service revenue:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | code                                             |                 | code                  | Aniount                         | Tunction income                   |
| <u> </u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <del></del>                                      |                 | -                     |                                 |                                   |
| D                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                  |                 |                       |                                 |                                   |
| <u> </u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <del>                                     </del> |                 | -                     |                                 |                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <u> </u>                                         |                 |                       |                                 |                                   |
| e                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | $\vdash$                                         | · · · -         |                       |                                 | <del></del>                       |
| Total and an extract from a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint and a constraint a |                                                  |                 | -                     |                                 |                                   |
| g Fees and contracts from government agencies                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <del></del>                                      |                 | + -                   | _                               |                                   |
| 2 Membership dues and assessments                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | $\vdash$                                         |                 |                       |                                 | <del></del>                       |
| 3 Interest on savings and temporary cash                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | ] ]                                              |                 | 14                    | 31.                             |                                   |
| Investments 4 Dividends and interest from securities                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <del>  </del>                                    | <u>-</u>        | 14                    | 3,021.                          |                                   |
| 5 Net rental income or (loss) from real estate:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <del>                                     </del> |                 | 1 2                   | 3,021.                          |                                   |
| a. Dabb francisco de conserte.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | -                                                |                 | 1                     |                                 |                                   |
| b Not debt-financed property                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <del>   </del>                                   | ·····           | +                     |                                 |                                   |
| 6 Net rental income or (loss) from personal                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <del>                                     </del> |                 | +                     |                                 | <del></del>                       |
| property                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                  |                 |                       |                                 |                                   |
| 7 Other investment income                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                  |                 | 18                    | 298,539.                        |                                   |
| 8 Gain or (loss) from sales of assets other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                  |                 | $\pm$                 |                                 |                                   |
| than inventory                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                  |                 | 18                    | 252.                            |                                   |
| 9 Net income or (loss) from special events                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | l                                                |                 |                       |                                 |                                   |
| 10 Gross profit or (loss) from sales of inventory                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                  |                 |                       |                                 |                                   |
| 11 Other revenue:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                  | "               |                       |                                 |                                   |
| a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 1                                                |                 |                       |                                 |                                   |
| b                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                  |                 |                       |                                 |                                   |
| C                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                  |                 |                       |                                 |                                   |
| d                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                  |                 |                       |                                 |                                   |
| e                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                  |                 |                       |                                 |                                   |
| 12 Subtotal. Add columns (b), (d), and (e)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                  | 0               | •                     | 301,843.                        | 0.                                |
| 13 Total. Add line 12, columns (b), (d), and (e)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                  |                 |                       | 13                              | 301,843.                          |
| (See worksheet in line 13 instructions to verify calculations.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                  |                 |                       |                                 |                                   |

| Line No. | the foundation's exempt purposes (other than by providing funds for such purposes). |
|----------|-------------------------------------------------------------------------------------|
|          | N/A                                                                                 |
|          |                                                                                     |
|          |                                                                                     |
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| Part XV                                                                              | II Information Re<br>Exempt Organ                                                             |                        | sfers To         | and Transactions               | and Relation        | ships With Noncha                                            | ritabl              | е          | <b>3</b> |
|--------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|------------------------|------------------|--------------------------------|---------------------|--------------------------------------------------------------|---------------------|------------|----------|
| 1 Did the                                                                            | organization directly or indi                                                                 | rectly engage in any   | of the following | ng with any other organization | on described in sec | tion 501(c) of                                               | T -                 | Yes        | No       |
|                                                                                      | de (other than section 501(c                                                                  |                        |                  | - · · · · ·                    |                     |                                                              |                     |            |          |
| a Transiers from the reporting foundation to a noncharitable exempt organization of: |                                                                                               |                        |                  |                                |                     |                                                              |                     |            |          |
| (1) Cash                                                                             |                                                                                               |                        |                  |                                |                     |                                                              |                     | L i        | X        |
| (2) Other assets                                                                     |                                                                                               |                        |                  |                                |                     |                                                              |                     |            | X        |
|                                                                                      | ransactions:                                                                                  |                        |                  |                                |                     |                                                              |                     |            |          |
|                                                                                      | iles of assets to a noncharita                                                                |                        |                  |                                |                     |                                                              | 1b(1)               | Щ          | _X_      |
|                                                                                      | irchases of assets from a no                                                                  |                        |                  |                                |                     |                                                              | 1b(2)               | L_         | X        |
|                                                                                      | ental of facilities, equipment,                                                               |                        | ···              |                                |                     |                                                              | 1b(3)               |            | X        |
|                                                                                      | eimbursement arrangements                                                                     |                        |                  |                                |                     |                                                              | 1b(4)               |            | X        |
|                                                                                      | ans or loan guarantees                                                                        |                        |                  |                                |                     |                                                              | 1b(5)               |            | X        |
| • •                                                                                  | erformance of services or me                                                                  | •                      | •                |                                |                     |                                                              | 1b(6)               | $\sqcup$   | Х        |
|                                                                                      | g of facilities, equipment, ma                                                                |                        |                  |                                |                     |                                                              | 1c                  |            | X        |
| or serv                                                                              |                                                                                               | oundation. If the four | ndation receiv   | ed less than fair market valu  | -                   | market value of the goods, o<br>n or sharing arrangement, sh |                     | ets,       |          |
| (a)Line no                                                                           | (b) Amount involved                                                                           |                        |                  | e exempt organization          | (d) Description     | n of transfers, transactions, and s                          | hanng ar            | rangeme    | nts      |
|                                                                                      |                                                                                               |                        | N/A              |                                |                     | <del></del>                                                  |                     |            |          |
|                                                                                      |                                                                                               |                        |                  |                                |                     |                                                              |                     |            |          |
|                                                                                      |                                                                                               |                        |                  |                                |                     |                                                              |                     |            |          |
|                                                                                      |                                                                                               |                        |                  |                                |                     |                                                              |                     |            |          |
|                                                                                      |                                                                                               |                        |                  |                                |                     |                                                              |                     |            |          |
|                                                                                      |                                                                                               |                        |                  |                                |                     |                                                              |                     |            |          |
|                                                                                      |                                                                                               |                        |                  |                                |                     |                                                              |                     |            |          |
|                                                                                      |                                                                                               |                        |                  |                                |                     |                                                              |                     |            |          |
|                                                                                      |                                                                                               |                        |                  |                                |                     |                                                              |                     |            |          |
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|                                                                                      |                                                                                               |                        |                  |                                |                     |                                                              |                     |            |          |
|                                                                                      |                                                                                               |                        |                  |                                |                     |                                                              |                     |            |          |
|                                                                                      |                                                                                               |                        |                  |                                |                     |                                                              |                     |            |          |
|                                                                                      |                                                                                               |                        |                  |                                |                     |                                                              |                     |            |          |
|                                                                                      |                                                                                               |                        |                  |                                |                     |                                                              |                     |            |          |
| in secti                                                                             | oundation directly or indirect<br>on 501(c) of the Code (other<br>"complete the following sch | r than section 501(c)  |                  | : 5070                         | zations described   |                                                              | ☐ Yes               | X          | ] No     |
|                                                                                      | (a) Name of org                                                                               | anization              |                  | (b) Type of organization       |                     | (c) Description of relationsh                                | ip                  |            |          |
|                                                                                      | N/A                                                                                           |                        |                  |                                |                     |                                                              |                     |            |          |
|                                                                                      |                                                                                               |                        |                  |                                |                     |                                                              |                     |            |          |
|                                                                                      |                                                                                               |                        |                  | <u>-</u> .                     |                     |                                                              |                     |            |          |
|                                                                                      |                                                                                               |                        |                  |                                |                     |                                                              |                     |            |          |
| 1                                                                                    | der penalties of penjury, I declare                                                           |                        |                  |                                |                     | May                                                          | the IRS on with the | liscuss ti | nis      |
| Sign Here                                                                            | ignature of efficer or trustee                                                                | / Surne                | 7                | 11/// /15                      | PRESI               | shov                                                         | vn below<br>Yes     | (see inst  | n<br>No  |
|                                                                                      | Print/Type preparer's na                                                                      | ıme                    | Preparer's si    |                                | Date                | Check if PTIN                                                |                     |            |          |
|                                                                                      | , , , , , , , , , , , , , , ,                                                                 | <del>-</del>           |                  | -g                             |                     | self- employed                                               |                     |            |          |
| Paid                                                                                 |                                                                                               |                        |                  |                                |                     |                                                              |                     |            |          |
| Prepare                                                                              | Firm's name                                                                                   |                        |                  |                                | ı                   | Firm's EIN                                                   | -                   |            |          |
| Use Onl                                                                              |                                                                                               |                        |                  |                                |                     | Firm's EIN ►                                                 |                     |            |          |
|                                                                                      | Firm's address                                                                                |                        |                  |                                |                     | <del> </del>                                                 |                     |            |          |
|                                                                                      |                                                                                               |                        |                  |                                |                     | Phone no.                                                    |                     |            |          |
|                                                                                      | <u> </u>                                                                                      |                        |                  |                                | <del></del>         |                                                              | m <b>QQ</b> (       | LDE /      | 2014)    |

| FORM 990-PF INTERE                        | ST ON SAVI      | NGS AN               | D TEM                     | PORARY                   | CASH                    | INV | ESTMENTS                        | ST           | ATEMENT                               | 1   |
|-------------------------------------------|-----------------|----------------------|---------------------------|--------------------------|-------------------------|-----|---------------------------------|--------------|---------------------------------------|-----|
| SOURCE                                    |                 |                      | (A<br>REVEI<br>PER B      | NUE                      |                         | INV | B)<br>ESTMENT<br>OME            |              | (C)<br>ADJUSTED<br>ET INCOMI          | 3   |
| NORTHERN TRUST                            |                 |                      | 31.                       |                          |                         | 31. |                                 |              |                                       |     |
| TOTAL TO PART I, LI                       | NE 3            |                      |                           | 31.                      |                         |     | 31.                             |              |                                       |     |
| FORM 990-PF                               | DIVIDEND        | S AND                | INTER                     | EST FRO                  | OM SEC                  | URI | TIES                            | STA          | ATEMENT                               | 2   |
| SOURCE                                    | GROSS<br>AMOUNT | G                    | PITAL<br>SAINS<br>VIDENDS | RI                       | (A)<br>EVENUE<br>R BOOK |     | (B)<br>NET INVEST<br>MENT INCOM |              | (C)<br>ADJUSTI<br>NET INCO            |     |
| US BANK/MORGAN<br>STANLEY                 | 3,021           |                      | (                         | 0.                       | 3,02                    | 1.  | 3,021                           | <br>1.       |                                       |     |
| TO PART I, LINE 4                         | 3,021           |                      | (                         | ).<br>                   | 3,02                    | 1.  | 3,021                           | <br>1 .<br>= |                                       |     |
| FORM 990-PF                               |                 | ОТ                   | HER II                    | NCOME                    |                         |     | ·                               | STA          | ATEMENT                               | 3   |
| DESCRIPTION                               |                 |                      | 1                         | (A)<br>REVENT<br>PER BOO |                         |     | (B)<br>T INVEST-<br>NT INCOME   |              | (C)<br>ADJUSTEI<br>NET INCON          |     |
| PARTNERSHIP INCOME<br>OTHER INCOME FROM K | -1              |                      |                           | 298                      | 3,539.                  |     | 0 .<br>98 .                     |              |                                       |     |
| TOTAL TO FORM 990-P                       | F, PART I,      | LINE                 | 11                        | 298                      | 3,539.                  | _   | 98.                             | <br>= =      | · · · · · · · · · · · · · · · · · · · |     |
| FORM 990-PF                               | 0               | THER P               | ROFESS                    | SIONAL                   | FEES                    |     |                                 | STA          | ATEMENT                               | 4   |
| DESCRIPTION                               |                 | (A<br>EXPEN<br>PER B | SES                       |                          | 3)<br>IVEST-<br>INCOME  |     | (C)<br>ADJUSTED<br>NET INCOME   |              | (D)<br>CHARITAE<br>PURPOSE            |     |
| MANAGEMENT FEES TAX SERVICE FEES          | _               |                      | ,000.                     |                          | 0                       |     |                                 |              | 5,00<br>1,50                          |     |
| TO FORM 990-PF, PG                        | 1, LN 16C       | 6                    | ,500.                     |                          | 0                       | •   |                                 |              | 6,50                                  | 00. |
|                                           | =               |                      |                           |                          |                         | = = |                                 | ===          |                                       |     |

PARTNERSHIP, S CORPORATION, AND OTHER

ESTATES OR TRUST GAIN OR LOSS

| FORM 990-PF                                                                                                      | TAX                                                | ES                                | STATEMENT 5                   |                               |  |
|------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|-----------------------------------|-------------------------------|-------------------------------|--|
| DESCRIPTION                                                                                                      | (A) (B) EXPENSES NET INVEST- PER BOOKS MENT INCOME |                                   | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |  |
| FOREIGN TAX EXPENSE<br>EXCISE TAXES                                                                              | 0.<br>12,495.                                      | 678.                              |                               | 0.                            |  |
| TO FORM 990-PF, PG 1, LN 18                                                                                      | 12,495.                                            | 678.                              |                               | 0.                            |  |
| FORM 990-PF                                                                                                      | OTHER E                                            | XPENSES                           | STATEMENT 6                   |                               |  |
| DESCRIPTION                                                                                                      | (A)<br>EXPENSES<br>PER BOOKS                       | (B)<br>NET INVEST-<br>MENT INCOME |                               | (D)<br>CHARITABLE<br>PURPOSES |  |
| PORTFOLIO EXPENSES FROM K-1S MISC EXPENSES                                                                       | 0.<br>1,332.                                       | •                                 |                               | 0.<br>1,176.                  |  |
| TO FORM 990-PF, PG 1, LN 23                                                                                      | 1,332.                                             | 15,892.                           |                               | 1,176.                        |  |
|                                                                                                                  | FOOTN                                              | OTES                              | S                             | TATEMENT 7                    |  |
| TOTAL SHORT-TERM COMMON TRUST PARTNERSHIP, S CORPORATION ESTATES OR TRUST GAIN OR I TOTAL LONG-TERM COMMON TRUST | I, AND OTHER<br>LOSS                               |                                   |                               | 6,488.                        |  |

347,410.

| FORM 990-PF.  |                                                         | CORPORA  | re stock           |                                 | STATEMENT   | 8   |
|---------------|---------------------------------------------------------|----------|--------------------|---------------------------------|-------------|-----|
| DESCRIPTION   |                                                         |          |                    | BOOK VALUE                      | FAIR MARKET | r   |
| SECURITIES AT | F.M.V.                                                  |          |                    | 112,927.                        | 112,92      | 27. |
| TOTAL TO FORM | 990-PF, PART II, I                                      | LINE 10B |                    | 112,927.                        | 112,92      | 27. |
| FORM 990-PF   | (                                                       | OTHER IN | VESTMENTS          |                                 | STATEMENT   | 9   |
| DESCRIPTION   |                                                         |          | ALUATION<br>METHOD | BOOK VALUE                      | FAIR MARKET | r   |
| INV. IN ADLER | BOND FUND, LLC<br>EQUITY FUND, LLC<br>PHILANTHROPY, LLC |          | FMV<br>FMV<br>FMV  | 1,388,308.<br>2,191,673.<br>-5. | 2,191,67    |     |
| INV. IN ARBOR | ,                                                       |          |                    |                                 |             |     |

#### JS Turner Family Foundation FEIN #90-0298087 A Statement Attached To and Made Part of Form 990-PF For the year ended December 31, 2014

Part XV, Grants and contributions Paid During the Year

| Recipient Name and Address                                                                                                                | Foundation Status of Recipient | Purpose of Grant                                                 | Amount |
|-------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|------------------------------------------------------------------|--------|
| Academy of The Holy Names<br>3319 Bayshore Blvd<br>Tampa, FL 33629                                                                        | PC                             | Endowed St. Clare Scholarship                                    | 2,000  |
| Academy Prep Center of Tampa<br>V M Yoor Campus<br>1407 East Columbus Drive<br>Tampa, FL 33605                                            | PC                             | Hope Endowed Scholarship                                         | 1,000  |
| All Children's Hospital<br>500 7th Ave South<br>PO Box 30142<br>St Petersburg, FL 33731                                                   | PC                             | Eosinophilic Esophogitis or G I Research                         | 1 000  |
| Alzheimer's Support Network<br>660 Tamiami Trail North, Ste 21<br>Naples, FL 34102                                                        | PC                             | Endowment                                                        | 1,000  |
| American Camp Association<br>5000 State Road 67 North<br>Martinsville, IN 46151-7902                                                      | PC                             | Camp Foley Scholarship Fund                                      | 2,000  |
| Catholic Community Foundation<br>2610 University Ave W Ste 500<br>St Paul, MN 55114-1090                                                  | PC                             | Turner Fund                                                      | 5,000  |
| Christ the King Catholic Church<br>821 S Dale Mabry Hwy<br>Tampa, FL 33609-4410                                                           | PC                             | Capital Campaign "Continuing the Vision"                         | 20,000 |
| Cincinnati Children's Hospital Medical Center<br>Cincinnati Center for Eosinophilic Disorders<br>PO Box 5202<br>Cincinnati, OH 45201-5202 | PC                             | Cincinnati Center for Eosinophilic Disorders                     | 25,000 |
| Diocese of St. Petersburg Catholic Foundation<br>P.O. Box 40200<br>St. Petersburg, FL. 33743-0200                                         | PC                             | Catholic Foundation's Fund for St Peter Claver                   | 2,000  |
| Diocese of St. Petersburg Catholic Foundation<br>P.O. Box 40200<br>St. Petersburg, FL. 33743-0200                                         | PC                             | Catholic Charities Endowment for Foundations for Life<br>Program | 1,000  |
| Florida K of C Charities, Inc<br>8260 NW 68th Terrace<br>Tamarac, FL 33321                                                                | PC                             | Helping Life Fund                                                | 1,000  |
| Florida West Coast Public Broadcasting, Inc<br>1300 North Boulevard<br>Tampa, FL 33607-5699                                               | PC                             | Endowment                                                        | 1,000  |
| Food Allergy and Anaphylaxis Connection Team<br>P O Box 511<br>West Chester, OH 45071                                                     | PC                             | Education of children with E O E and the camp                    | 1,000  |
| Franciscan Center<br>3010 N Perry Ave<br>Tampa, FL 33603                                                                                  | PC                             | Endowment                                                        | 1,000  |
| Gonzaga University<br>502 East Boone Avenue<br>Spokane, WA 99258-0101                                                                     | PC                             | SMR Scholarship at Mater Dei Institute for Vocations             | 2,500  |
| Gonzaga University<br>502 East Boone Avenue<br>Spokane WA 99258-0101                                                                      | PC                             | Scholarship Endowment                                            | 2,000  |

#### JS Turner Family Foundation FEIN #90-0298087 A Statement Attached To and Made Part of Form 990-PF For the year ended December 31, 2014

## Part XV, Grants and contributions Paid During the Year

| Recipient Name and Address                                                                                    | Foundation Status of Recipient | Purpose of Grant                                                   | Amount |
|---------------------------------------------------------------------------------------------------------------|--------------------------------|--------------------------------------------------------------------|--------|
| Help Brings Hope For Haiti<br>3816 West Morrison Avenue<br>Tampa, FL 33629                                    | PC                             | General Operations                                                 | 5,000  |
| Helo Brings Hope For Haiti<br>3816 West Morrison Avenue<br>Tampa, FL 33629                                    | PC                             | Radio de Soleil                                                    | 5,000  |
| Helping Hands for the Poor, Inc<br>7461 SW 129th Avenue<br>Miami FL 33183                                     | PC                             | General Operations                                                 | 5,000  |
| Hope CommUnity Center Inc<br>1016 North Park Avenue<br>Apopka, FL 32712                                       | PC                             | General Operations                                                 | 1,000  |
| Hope CommUnity Center Inc<br>1016 North Park Avenue<br>Apopka, FL 32712                                       | PC                             | Sister Gail Grimes Legacy Fund                                     | 1,000  |
| Jesuit High School of Tampa<br>4701 N Himes Avenue<br>Tampa, FL 33614                                         | PC                             | Professional Development Endowment Fund                            | 2,000  |
| Lowry Park Zoological Society of Tampa Inc<br>Office of Development<br>1101 W Sligh Avenue<br>Tampa, FL 33604 | PC                             | General Operations                                                 | 1,000  |
| Mayo Clinic<br>200 First Street SW<br>Rochester, MN 55905                                                     | PC                             | Endowment                                                          | 1,000  |
| Missionary Sisters of St. Columban<br>2546 Lake Road<br>Silver Creek, NY 14136-9726                           | PC                             | Mission work of the Columban Sisters                               | 10,000 |
| Missionary Society of Salesian Sisters<br>659 Belmont Ave<br>North Haledon, NJ 07508                          | PC                             | Professional Development Endowment Fund at Villa<br>Madonna School | 5,000  |
| Missionary Society of Salesian Sisters<br>659 Belmont Ave<br>North Haledon, NJ 07508                          | PC                             | Secunty Program at Villa Madonna Convent and School                | 34,700 |
| Paulist Fathers<br>North American Paulist Center<br>3015 Fourth Street, NE<br>Washington, DC 20017            | PC                             | General Operations                                                 | 1,000  |
| Pontifical North American College<br>3211 Fourth Street, NE<br>Washington, DC 20017                           | PC                             | General Operations                                                 | 1,300  |
| Salesian Sisters of St John Bosco<br>315 W Columbus Drive<br>Tampa, FL 33602                                  | PC                             | Scholarships                                                       | 1,500  |
| Salesian Sisters of St John Bosco<br>315 W Columbus Drive<br>Tampa, FL 33602                                  | PC                             | Thanksgiving Basket                                                | 5,000  |
| Seattle University<br>901 12 <sup>th</sup> Avenue<br>ADMIN 120<br>Seattle, WA 98122-1090                      | PC                             | Institute of Public Service Endowment                              | 1,000  |

## JS Turner Family Foundation FEIN #90-0298087

## A Statement Attached To and Made Part of Form 990-PF For the year ended December 31, 2014

## Part XV, Grants and contributions Paid During the Year

Total Contributions

| Recipient Name and Address                                                                                                 | Foundation Status<br>of Recipient | Purpose of Grant                               | Amount |
|----------------------------------------------------------------------------------------------------------------------------|-----------------------------------|------------------------------------------------|--------|
| Society for the Propagation of the Faith<br>Bishop Ludden High School<br>815 Fay Road<br>Syracuse NY 13219                 | PC                                | Lusubilo Orphan Care Project                   | 10,000 |
| St Alice Catholic Church<br>PO Box 759<br>Pequot Lakes, MN 56472                                                           | PC                                | Religious Education                            | 1,000  |
| St Joseph's Hospital Foundation<br>2700 W Dr Martin Luther King Boulevard Ste310<br>Tampa, FL 33607                        | SO III FI                         | Annual Gala                                    | 1,500  |
| St Vincent de Paul Regional Seminary<br>10701 South Military Trail<br>Boynton Beach, FL 33436                              | PC                                | 2014 Golden Jubilee                            | 1,000  |
| Straz Center<br>1010 North WC MacInnes Place<br>Lampa, FL 33602                                                            | PC                                | Scholarship for St Peter Claver School - Patel | 500    |
| Tampa General Hospital<br>P O Box 1289, Room H149<br>Tampa, FL 33601-1289                                                  | PC                                | Endowment for G I disorders                    | 1,000  |
| The Convent and Academy of the Visitation 2455 Visitation Drive Mendota Heights, MN 55120                                  | PC                                | Sed Vitae Society                              | 1,500  |
| University of Minnesota Foundation<br>McNamara Alumni Center<br>200 Oak Street S E Suite 500<br>Minneapolis, MN 55455-2010 | PC                                | Support for International Adoption Clinic      | 1,000  |
| Urbi Et Orbi Communication Inc<br>14 West Main Street<br>Front Royal, VA 22630                                             | PC                                | General Operations                             | 2,500  |
| Visitation Monastery of Minneapolis<br>1527 Fremont Avenue North<br>Minneapolis, MN 55411                                  | PC                                | Inter-City Youth Program Fund                  | 1,000  |

170,000