

Form

990-PF

Department of the Treasury  
Internal Revenue Service

Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public.

Information about Form 990-PF and its instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

OMB No 1545-0052

2014

Open to Public Inspection

For calendar year 2014, or tax year beginning 12-01-2014, and ending 11-30-2015

|                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                              |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Name of foundation<br>HB FULLER COMPANY FOUNDATION                                                                                                                                                                                                                                                 |  | A Employer identification number<br>36-3500811                                                                                                                               |  |
| Number and street (or P O box number if mail is not delivered to street address)<br>PO BOX 64683                                                                                                                                                                                                   |  | B Telephone number (see instructions)<br>(651) 236-5847                                                                                                                      |  |
| City or town, state or province, country, and ZIP or foreign postal code<br>ST PAUL, MN 551640683                                                                                                                                                                                                  |  | C If exemption application is pending, check here <input type="checkbox"/>                                                                                                   |  |
| G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity<br><input type="checkbox"/> Final return <input type="checkbox"/> Amended return<br><input type="checkbox"/> Address change <input type="checkbox"/> Name change |  | D 1. Foreign organizations, check here <input type="checkbox"/><br>2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> |  |
| H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation<br><input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation                                                   |  | E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>                                                                |  |
| I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 540,250                                                                                                                                                                                                      |  | F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>                                                             |  |
| J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual<br><input type="checkbox"/> Other (specify) _____<br>(Part I, column (d) must be on cash basis.)                                                                                                     |  |                                                                                                                                                                              |  |

| Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) ) |                                                                                                     | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|------------------------------------|---------------------------|-------------------------|-------------------------------------------------------------|
| Revenue                                                                                                                                                             | 1 Contributions, gifts, grants, etc , received (attach schedule) . . . . .                          | 675,000                            |                           |                         |                                                             |
|                                                                                                                                                                     | 2 Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . . |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 3 Interest on savings and temporary cash investments                                                |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 4 Dividends and interest from securities. . . . .                                                   | 1,075                              | 1,075                     |                         |                                                             |
|                                                                                                                                                                     | 5a Gross rents . . . . .                                                                            |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | b Net rental income or (loss) _____                                                                 |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 6a Net gain or (loss) from sale of assets not on line 10 _____                                      | -3,311                             |                           |                         |                                                             |
|                                                                                                                                                                     | b Gross sales price for all assets on line 6a _____<br>182,406                                      |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 7 Capital gain net income (from Part IV, line 2) . . . .                                            |                                    | 142,362                   |                         |                                                             |
|                                                                                                                                                                     | 8 Net short-term capital gain . . . . .                                                             |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 9 Income modifications . . . . .                                                                    |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 10a Gross sales less returns and allowances                                                         |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | b Less Cost of goods sold . . . . .                                                                 |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | c Gross profit or (loss) (attach schedule) . . . . .                                                |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 11 Other income (attach schedule) . . . . .                                                         |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 12 <b>Total.</b> Add lines 1 through 11 . . . . .                                                   | 672,764                            | 143,437                   |                         |                                                             |
| Operating and Administrative Expenses                                                                                                                               | 13 Compensation of officers, directors, trustees, etc                                               | 0                                  | 0                         |                         | 0                                                           |
|                                                                                                                                                                     | 14 Other employee salaries and wages . . . . .                                                      |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 15 Pension plans, employee benefits . . . . .                                                       |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 16a Legal fees (attach schedule) . . . . .                                                          |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | b Accounting fees (attach schedule) . . . . .                                                       |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | c Other professional fees (attach schedule) . . . . .                                               | 12,382                             | 0                         |                         | 12,382                                                      |
|                                                                                                                                                                     | 17 Interest . . . . .                                                                               |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 18 Taxes (attach schedule) (see instructions) . . . .                                               |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 19 Depreciation (attach schedule) and depletion . . .                                               |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 20 Occupancy . . . . .                                                                              |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 21 Travel, conferences, and meetings . . . . .                                                      |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 22 Printing and publications . . . . .                                                              |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 23 Other expenses (attach schedule) . . . . .                                                       | 2,092                              | 2,092                     |                         | 0                                                           |
|                                                                                                                                                                     | 24 <b>Total operating and administrative expenses.</b><br>Add lines 13 through 23 . . . . .         | 14,474                             | 2,092                     |                         | 12,382                                                      |
|                                                                                                                                                                     | 25 Contributions, gifts, grants paid . . . . .                                                      | 782,931                            |                           |                         | 832,506                                                     |
|                                                                                                                                                                     | 26 <b>Total expenses and disbursements.</b> Add lines 24 and 25                                     | 797,405                            | 2,092                     |                         | 844,888                                                     |
|                                                                                                                                                                     | 27 Subtract line 26 from line 12                                                                    |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | a <b>Excess of revenue over expenses and disbursements</b>                                          | -124,641                           |                           |                         |                                                             |
|                                                                                                                                                                     | b <b>Net investment income</b> (if negative, enter -0-)                                             |                                    | 141,345                   |                         |                                                             |
|                                                                                                                                                                     | c <b>Adjusted net income</b> (if negative, enter -0-)                                               |                                    |                           |                         |                                                             |

| Part II Balance Sheets      |                                                                                                                                          | Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )               | Beginning of year | End of year    |                       |
|-----------------------------|------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|-------------------|----------------|-----------------------|
|                             |                                                                                                                                          |                                                                                                                                   | (a) Book Value    | (b) Book Value | (c) Fair Market Value |
| Assets                      | 1                                                                                                                                        | Cash—non-interest-bearing . . . . .                                                                                               | 528,749           | 540,250        | 540,250               |
|                             | 2                                                                                                                                        | Savings and temporary cash investments . . . . .                                                                                  |                   |                |                       |
|                             | 3                                                                                                                                        | Accounts receivable ▶ _____<br>Less allowance for doubtful accounts ▶ _____                                                       |                   |                |                       |
|                             | 4                                                                                                                                        | Pledges receivable ▶ _____<br>Less allowance for doubtful accounts ▶ _____                                                        |                   |                |                       |
|                             | 5                                                                                                                                        | Grants receivable . . . . .                                                                                                       |                   |                |                       |
|                             | 6                                                                                                                                        | Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . . |                   |                |                       |
|                             | 7                                                                                                                                        | Other notes and loans receivable (attach schedule) ▶ _____<br>Less allowance for doubtful accounts ▶ _____                        |                   |                |                       |
|                             | 8                                                                                                                                        | Inventories for sale or use . . . . .                                                                                             |                   |                |                       |
|                             | 9                                                                                                                                        | Prepaid expenses and deferred charges . . . . .                                                                                   |                   |                |                       |
|                             | 10a                                                                                                                                      | Investments—U S and state government obligations (attach schedule)                                                                |                   |                |                       |
|                             | b                                                                                                                                        | Investments—corporate stock (attach schedule) . . . . .                                                                           | 185,717           |                |                       |
|                             | c                                                                                                                                        | Investments—corporate bonds (attach schedule). . . . .                                                                            |                   |                |                       |
|                             | 11                                                                                                                                       | Investments—land, buildings, and equipment basis ▶ _____<br>Less accumulated depreciation (attach schedule) ▶ _____               |                   |                |                       |
|                             | 12                                                                                                                                       | Investments—mortgage loans . . . . .                                                                                              |                   |                |                       |
|                             | 13                                                                                                                                       | Investments—other (attach schedule) . . . . .                                                                                     |                   |                |                       |
|                             | 14                                                                                                                                       | Land, buildings, and equipment basis ▶ _____<br>Less accumulated depreciation (attach schedule) ▶ _____                           |                   |                |                       |
| 15                          | Other assets (describe ▶ _____)                                                                                                          |                                                                                                                                   |                   |                |                       |
| 16                          | Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)                                               | 714,466                                                                                                                           | 540,250           | 540,250        |                       |
| Liabilities                 | 17                                                                                                                                       | Accounts payable and accrued expenses . . . . .                                                                                   |                   |                |                       |
|                             | 18                                                                                                                                       | Grants payable . . . . .                                                                                                          | 50,000            | 425            |                       |
|                             | 19                                                                                                                                       | Deferred revenue . . . . .                                                                                                        |                   |                |                       |
|                             | 20                                                                                                                                       | Loans from officers, directors, trustees, and other disqualified persons                                                          |                   |                |                       |
|                             | 21                                                                                                                                       | Mortgages and other notes payable (attach schedule) . . . . .                                                                     |                   |                |                       |
|                             | 22                                                                                                                                       | Other liabilities (describe ▶ _____)                                                                                              | 2,913             | 2,847          |                       |
|                             | 23                                                                                                                                       | Total liabilities (add lines 17 through 22) . . . . .                                                                             | 52,913            | 3,272          |                       |
| Net Assets or Fund Balances | Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31. |                                                                                                                                   |                   |                |                       |
|                             | 24                                                                                                                                       | Unrestricted . . . . .                                                                                                            | 661,553           | 536,978        |                       |
|                             | 25                                                                                                                                       | Temporarily restricted . . . . .                                                                                                  |                   |                |                       |
|                             | 26                                                                                                                                       | Permanently restricted . . . . .                                                                                                  |                   |                |                       |
|                             | Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.                         |                                                                                                                                   |                   |                |                       |
|                             | 27                                                                                                                                       | Capital stock, trust principal, or current funds . . . . .                                                                        |                   |                |                       |
|                             | 28                                                                                                                                       | Paid-in or capital surplus, or land, bldg , and equipment fund                                                                    |                   |                |                       |
|                             | 29                                                                                                                                       | Retained earnings, accumulated income, endowment, or other funds                                                                  |                   |                |                       |
|                             | 30                                                                                                                                       | Total net assets or fund balances (see instructions) . . . . .                                                                    | 661,553           | 536,978        |                       |
|                             | 31                                                                                                                                       | Total liabilities and net assets/fund balances (see instructions) . . .                                                           | 714,466           | 540,250        |                       |

| Part III Analysis of Changes in Net Assets or Fund Balances |                                                                                                                                                                    |            |
|-------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|
| 1                                                           | Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return) . . . . . | 1 661,553  |
| 2                                                           | Enter amount from Part I, line 27a . . . . .                                                                                                                       | 2 -124,641 |
| 3                                                           | Other increases not included in line 2 (itemize) ▶ _____                                                                                                           | 3 66       |
| 4                                                           | Add lines 1, 2, and 3 . . . . .                                                                                                                                    | 4 536,978  |
| 5                                                           | Decreases not included in line 2 (itemize) ▶ _____                                                                                                                 | 5 0        |
| 6                                                           | Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .                                                      | 6 536,978  |

Part IV

Capital Gains and Losses for Tax on Investment Income

|                                                                                                                                   |                                        |                                              |                                      |                                  |
|-----------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|----------------------------------------------|--------------------------------------|----------------------------------|
| (a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co ) |                                        | (b) How acquired<br>P—Purchase<br>D—Donation | (c) Date acquired<br>(mo , day, yr ) | (d) Date sold<br>(mo , day, yr ) |
| 1 a                                                                                                                               | H B FULLER COMPANY STOCK - 4300 SHARES |                                              | 1993-01-01                           | 2015-05-21                       |
| b                                                                                                                                 |                                        |                                              |                                      |                                  |
| c                                                                                                                                 |                                        |                                              |                                      |                                  |
| d                                                                                                                                 |                                        |                                              |                                      |                                  |
| e                                                                                                                                 |                                        |                                              |                                      |                                  |

|                       |                                            |                                                 |                                              |
|-----------------------|--------------------------------------------|-------------------------------------------------|----------------------------------------------|
| (e) Gross sales price | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>(e) plus (f) minus (g) |
| a 182,406             |                                            | 40,044                                          | 142,362                                      |
| b                     |                                            |                                                 |                                              |
| c                     |                                            |                                                 |                                              |
| d                     |                                            |                                                 |                                              |
| e                     |                                            |                                                 |                                              |

|                                                                                             |                                      |                                               |                                                                                              |
|---------------------------------------------------------------------------------------------|--------------------------------------|-----------------------------------------------|----------------------------------------------------------------------------------------------|
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 |                                      |                                               | (I) Gains (Col (h) gain minus<br>col (k), but not less than -0-) or<br>Losses (from col (h)) |
| (i) F M V as of 12/31/69                                                                    | (j) Adjusted basis<br>as of 12/31/69 | (k) Excess of col (i)<br>over col (j), if any |                                                                                              |
| a                                                                                           |                                      |                                               | 142,362                                                                                      |
| b                                                                                           |                                      |                                               |                                                                                              |
| c                                                                                           |                                      |                                               |                                                                                              |
| d                                                                                           |                                      |                                               |                                                                                              |
| e                                                                                           |                                      |                                               |                                                                                              |

|   |                                                                                                                                                                                                              |                                                                                     |   |         |
|---|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|---|---------|
| 2 | Capital gain net income or (net capital loss)                                                                                                                                                                | { If gain, also enter in Part I, line 7<br>If (loss), enter -0- in Part I, line 7 } | 2 | 142,362 |
| 3 | Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)<br><br>If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0-<br>in Part I, line 8 . . . . . | }                                                                                   | 3 |         |

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

|                                                                      |                                          |                                              |                                                           |
|----------------------------------------------------------------------|------------------------------------------|----------------------------------------------|-----------------------------------------------------------|
| (a)<br>Base period years Calendar<br>year (or tax year beginning in) | (b)<br>Adjusted qualifying distributions | (c)<br>Net value of noncharitable-use assets | (d)<br>Distribution ratio<br>(col (b) divided by col (c)) |
| 2013                                                                 | 912,494                                  | 1,394,049                                    | 0 654564                                                  |
| 2012                                                                 | 817,871                                  | 1,392,406                                    | 0 587380                                                  |
| 2011                                                                 | 624,349                                  | 2,014,752                                    | 0 309889                                                  |
| 2010                                                                 | 623,101                                  | 2,562,650                                    | 0 243147                                                  |
| 2009                                                                 | 832,595                                  | 2,787,991                                    | 0 298636                                                  |

|   |                                                                                                                                                                                       |   |          |
|---|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|----------|
| 2 | Total of line 1, column (d). . . . .                                                                                                                                                  | 2 | 2 093616 |
| 3 | Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by<br>the number of years the foundation has been in existence if less than 5 years . . . . | 3 | 0 418723 |
| 4 | Enter the net value of noncharitable-use assets for 2014 from Part X, line 5. . . . .                                                                                                 | 4 | 536,952  |
| 5 | Multiply line 4 by line 3. . . . .                                                                                                                                                    | 5 | 224,834  |
| 6 | Enter 1% of net investment income (1% of Part I, line 27b). . . . .                                                                                                                   | 6 | 1,413    |
| 7 | Add lines 5 and 6. . . . .                                                                                                                                                            | 7 | 226,247  |
| 8 | Enter qualifying distributions from Part XII, line 4. . . . .                                                                                                                         | 8 | 844,888  |

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See  
the Part VI instructions

Part VI

Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

|    |  |                                                                                                                                                                      |    |    |       |
|----|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|----|-------|
| 1a |  | Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1                                          |    |    |       |
| b  |  | Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . . |    | 1  | 1,413 |
| 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  | 1,413 |
| 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  | 1,413 |
| 6  |  | Credits/Payments                                                                                                                                                     |    |    |       |
| a  |  | 2014 estimated tax payments and 2013 overpayment credited to 2014                                                                                                    | 6a | 92 |       |
| b  |  | Exempt foreign organizations—tax withheld at source . . . . .                                                                                                        | 6b |    |       |
| c  |  | Tax paid with application for extension of time to file (Form 8868) . . . . .                                                                                        | 6c |    |       |
| d  |  | Backup withholding erroneously withheld . . . . .                                                                                                                    | 6d |    |       |
| 7  |  | Total credits and payments. Add lines 6a through 6d. . . . .                                                                                                         |    | 7  | 92    |
| 8  |  | Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.                                                   |    | 8  |       |
| 9  |  | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . . . . .                                                                              |    | 9  | 1,321 |
| 10 |  | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. . . . .                                                                   |    | 10 |       |
| 11 |  | Enter the amount of line 10 to be Credited to 2015 estimated tax Refunded                                                                                            |    | 11 |       |

Part VII-A

Statements Regarding Activities

|    |                                                                                                                                                                                                                                                                                                                                                          |    |     |    |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|----|
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .                                                                                                                                                                           | 1a | Yes | No |
| b  | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . .<br><i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i> | 1b |     | No |
| c  | Did the foundation file Form 1120-POL for this year? . . . . .                                                                                                                                                                                                                                                                                           | 1c |     | No |
| d  | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:<br>(1) On the foundation <input type="checkbox"/> \$ 0 (2) On foundation managers <input type="checkbox"/> \$ 0                                                                                                                                       |    |     |    |
| e  | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0                                                                                                                                                                                       |    |     |    |
| 2  | Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . .<br><i>If "Yes," attach a detailed description of the activities.</i>                                                                                                                                                                           | 2  |     | No |
| 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? <i>If "Yes," attach a conformed copy of the changes.</i> . . . .                                                                                                               | 3  |     | No |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .                                                                                                                                                                                                                                                    | 4a |     | No |
| b  | If "Yes," has it filed a tax return on Form 990-T for this year? . . . . .                                                                                                                                                                                                                                                                               | 4b |     |    |
| 5  | Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . .<br><i>If "Yes," attach the statement required by General Instruction T.</i>                                                                                                                                                                     | 5  |     | No |
| 6  | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:<br>• By language in the governing instrument, or<br>• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .             | 6  | Yes |    |
| 7  | Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i> . . . . .                                                                                                                                                                                                      | 7  | Yes |    |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions):<br><input type="checkbox"/> MN                                                                                                                                                                                                                       |    |     |    |
| 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) of each state as required by General Instruction G? <i>If "No," attach explanation.</i> . . . .                                                                                                                              | 8b | Yes |    |
| 9  | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)?<br><i>If "Yes," complete Part XIV.</i> . . . . .                                                                                | 9  |     | No |
| 10 | Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i> . . . . .                                                                                                                                                                                                     | 10 |     | No |

Part VII-A Statements Regarding Activities (continued)

|                                                                                                                                                                                   |                                                                                                                                                                                           |    |     |    |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|----|
| 11                                                                                                                                                                                | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).  | 11 |     | No |
| 12                                                                                                                                                                                | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)  | 12 |     | No |
| 13                                                                                                                                                                                | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?                                                                       | 13 | Yes |    |
| Website address N/A                                                                                                                                                               |                                                                                                                                                                                           |    |     |    |
| 14                                                                                                                                                                                | The books are in care of JENNA DETKO & ANNA BOSAK Telephone no (651) 236-5847<br>Located at 1200 WILLOW LAKE BLVD ST PAUL MN ZIP+4 551105101                                              |    |     |    |
| 15                                                                                                                                                                                | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the year.       | 15 |     |    |
| 16                                                                                                                                                                                | At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? | 16 | Yes | No |
| See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country |                                                                                                                                                                                           |    |     |    |

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

|                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |    |     |    |
|-----------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|----|
| File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |    | Yes | No |
| 1a                                                                                      | During the year did the foundation (either directly or indirectly)                                                                                                                                                                                                                                                                                                                                                                                                                               |    |     |    |
|                                                                                         | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No                                                                                                                                                                                                                                                                                                                                                                                                    |    |     |    |
|                                                                                         | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes No                                                                                                                                                                                                                                                                                                                                                                            |    |     |    |
|                                                                                         | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No                                                                                                                                                                                                                                                                                                                                                                                                |    |     |    |
|                                                                                         | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No                                                                                                                                                                                                                                                                                                                                                                                                      |    |     |    |
|                                                                                         | (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes No                                                                                                                                                                                                                                                                                                                                             |    |     |    |
|                                                                                         | (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days ). Yes No                                                                                                                                                                                                                                          |    |     |    |
| b                                                                                       | If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here.                                                                                                                                                                                         | 1b |     | No |
| c                                                                                       | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014?                                                                                                                                                                                                                                                                                                          | 1c |     | No |
| 2                                                                                       | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))                                                                                                                                                                                                                                                                                                                    |    |     |    |
| a                                                                                       | At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014? If "Yes," list the years 20 , 20 , 20 , 20 Yes No                                                                                                                                                                                                                                                                                              |    |     |    |
| b                                                                                       | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions ).                                                                                                                                                                                         | 2b |     |    |
| c                                                                                       | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20 , 20 , 20 , 20                                                                                                                                                                                                                                                                                                                                                                |    |     |    |
| 3a                                                                                      | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes No                                                                                                                                                                                                                                                                                                                                                                |    |     |    |
| b                                                                                       | If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.). | 3b |     |    |
| 4a                                                                                      | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?                                                                                                                                                                                                                                                                                                                                                                                  | 4a |     | No |
| b                                                                                       | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?                                                                                                                                                                                                                                                                | 4b |     | No |

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a

During the year did the foundation pay or incur any amount to

(1)

Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

YesNo

(2)

Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

YesNo

(3)

Provide a grant to an individual for travel, study, or other similar purposes?

YesNo

(4)

Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions).

YesNo

(5)

Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

YesNo

b

If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b

Yes

Organizations relying on a current notice regarding disaster assistance check here.

c

If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

YesNo

If "Yes," attach the statement required by Regulations section 53.4945–5(d).

6a

Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

YesNo

b

Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

No

If "Yes" to 6b, file Form 8870.

7a

At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

YesNo

b

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1

List all officers, directors, trustees, foundation managers and their compensation (see instructions).

| (a) Name and address      | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---------------------------|-----------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|---------------------------------------|
| See Additional Data Table |                                                           |                                           |                                                                       |                                       |
|                           |                                                           |                                           |                                                                       |                                       |
|                           |                                                           |                                           |                                                                       |                                       |
|                           |                                                           |                                           |                                                                       |                                       |
|                           |                                                           |                                           |                                                                       |                                       |
|                           |                                                           |                                           |                                                                       |                                       |
|                           |                                                           |                                           |                                                                       |                                       |

2

Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---------------------------------------------------------------|-----------------------------------------------------------|------------------|-----------------------------------------------------------------------|---------------------------------------|
| NONE                                                          |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |

Total number of other employees paid over \$50,000.

0

Form 990-PF (2014)

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

| 3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE". |                     |                  |
|------------------------------------------------------------------------------------------------------------------|---------------------|------------------|
| (a) Name and address of each person paid more than \$50,000                                                      | (b) Type of service | (c) Compensation |
| NONE                                                                                                             |                     |                  |
|                                                                                                                  |                     |                  |
|                                                                                                                  |                     |                  |
|                                                                                                                  |                     |                  |
|                                                                                                                  |                     |                  |
|                                                                                                                  |                     |                  |
|                                                                                                                  |                     |                  |
|                                                                                                                  |                     |                  |
|                                                                                                                  |                     |                  |
| Total number of others receiving over \$50,000 for professional services. . . . .                                |                     | 0                |

Part IX-A

Summary of Direct Charitable Activities

| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc | Expenses |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 1                                                                                                                                                                                                                                                     |          |
| 2                                                                                                                                                                                                                                                     |          |
| 3                                                                                                                                                                                                                                                     |          |
| 4                                                                                                                                                                                                                                                     |          |

Part IX-B

Summary of Program-Related Investments (see instructions)

| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 | Amount |
|------------------------------------------------------------------------------------------------------------------|--------|
| 1                                                                                                                |        |
|                                                                                                                  |        |
|                                                                                                                  |        |
| 2                                                                                                                |        |
|                                                                                                                  |        |
|                                                                                                                  |        |
| All other program-related investments. See instructions.                                                         |        |
| 3                                                                                                                |        |
|                                                                                                                  |        |
|                                                                                                                  |        |
| Total. Add lines 1 through 3. . . . .                                                                            | 0      |

Part X

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

|   |                                                                                                                    |    |         |
|---|--------------------------------------------------------------------------------------------------------------------|----|---------|
| 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 | 83,504  |
| b | Average of monthly cash balances. . . . .                                                                          | 1b | 461,625 |
| c | Fair market value of all other assets (see instructions). . . . .                                                  | 1c | 0       |
| d | Total (add lines 1a, b, and c). . . . .                                                                            | 1d | 545,129 |
| e | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . . | 1e | 0       |
| 2 | Acquisition indebtedness applicable to line 1 assets. . . . .                                                      | 2  | 0       |
| 3 | Subtract line 2 from line 1d. . . . .                                                                              | 3  | 545,129 |
| 4 | Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .  | 4  | 8,177   |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4                | 5  | 536,952 |
| 6 | Minimum investment return. Enter 5% of line 5. . . . .                                                             | 6  | 26,848  |

Part XI

Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

|    |                                                                                                           |    |        |
|----|-----------------------------------------------------------------------------------------------------------|----|--------|
| 1  | Minimum investment return from Part X, line 6. . . . .                                                    | 1  | 26,848 |
| 2a | Tax on investment income for 2014 from Part VI, line 5. . . . .                                           | 2a | 1,413  |
| b  | Income tax for 2014 (This does not include the tax from Part VI ). . . . .                                | 2b |        |
| c  | Add lines 2a and 2b. . . . .                                                                              | 2c | 1,413  |
| 3  | Distributable amount before adjustments Subtract line 2c from line 1. . . . .                             | 3  | 25,435 |
| 4  | Recoveries of amounts treated as qualifying distributions. . . . .                                        | 4  | 0      |
| 5  | Add lines 3 and 4. . . . .                                                                                | 5  | 25,435 |
| 6  | Deduction from distributable amount (see instructions). . . . .                                           | 6  | 0      |
| 7  | Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . . | 7  | 25,435 |

Part XII

Qualifying Distributions (see instructions)

|   |                                                                                                                                                              |    |         |
|---|--------------------------------------------------------------------------------------------------------------------------------------------------------------|----|---------|
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes                                                                    |    |         |
| a | Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .                                                                         | 1a | 844,888 |
| b | Program-related investments—total from Part IX-B. . . . .                                                                                                    | 1b | 0       |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .                                           | 2  |         |
| 3 | Amounts set aside for specific charitable projects that satisfy the                                                                                          |    |         |
| a | Suitability test (prior IRS approval required). . . . .                                                                                                      | 3a |         |
| b | Cash distribution test (attach the required schedule). . . . .                                                                                               | 3b |         |
| 4 | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4                                                    | 4  | 844,888 |
| 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 (see instructions). . . . . | 5  | 1,413   |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4. . . . .                                                                                      | 6  | 843,475 |

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

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                                                                                                                                |               |                            |             | 25,435      |
| 2 Undistributed income, if any, as of the end of 2014                                                                                                                               |               |                            |             |             |
| a Enter amount for 2013 only. . . . .                                                                                                                                               |               |                            | 0           |             |
| b Total for prior years 20____, 20____, 20____                                                                                                                                      |               | 0                          |             |             |
| 3 Excess distributions carryover, if any, to 2014                                                                                                                                   |               |                            |             |             |
| a From 2009. . . . .                                                                                                                                                                | 693,224       |                            |             |             |
| b From 2010. . . . .                                                                                                                                                                | 495,002       |                            |             |             |
| c From 2011. . . . .                                                                                                                                                                | 523,643       |                            |             |             |
| d From 2012. . . . .                                                                                                                                                                | 748,263       |                            |             |             |
| e From 2013. . . . .                                                                                                                                                                | 842,828       |                            |             |             |
| f Total of lines 3a through e. . . . .                                                                                                                                              | 3,302,960     |                            |             |             |
| 4 Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ 844,888                                                                                                              |               |                            |             |             |
| a Applied to 2013, but not more than line 2a                                                                                                                                        |               |                            | 0           |             |
| b Applied to undistributed income of prior years (Election required—see instructions). . . . .                                                                                      |               | 0                          |             |             |
| c Treated as distributions out of corpus (Election required—see instructions). . . . .                                                                                              | 0             |                            |             |             |
| d Applied to 2014 distributable amount. . . . .                                                                                                                                     |               |                            |             | 25,435      |
| e Remaining amount distributed out of corpus                                                                                                                                        | 819,453       |                            |             |             |
| 5 Excess distributions carryover applied to 2014<br>(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:                                                                                                                            |               |                            |             |             |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5                                                                                                                                   | 4,122,413     |                            |             |             |
| b Prior years' undistributed income Subtract line 4b from line 2b. . . . .                                                                                                          |               | 0                          |             |             |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . |               | 0                          |             |             |
| d Subtract line 6c from line 6b Taxable amount—see instructions . . . . .                                                                                                           |               | 0                          |             |             |
| e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .                                                                             |               |                            | 0           |             |
| f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015 . . . . .                                                               |               |                            |             | 0           |
| 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .       | 0             |                            |             |             |
| 8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions). . .                                                                                  | 693,224       |                            |             |             |
| 9 Excess distributions carryover to 2015.<br>Subtract lines 7 and 8 from line 6a . . . . .                                                                                          | 3,429,189     |                            |             |             |
| 10 Analysis of line 9                                                                                                                                                               |               |                            |             |             |
| a Excess from 2010. . . .                                                                                                                                                           | 495,002       |                            |             |             |
| b Excess from 2011. . . .                                                                                                                                                           | 523,643       |                            |             |             |
| c Excess from 2012. . . .                                                                                                                                                           | 748,263       |                            |             |             |
| d Excess from 2013. . . .                                                                                                                                                           | 842,828       |                            |             |             |
| e Excess from 2014. . . .                                                                                                                                                           | 819,453       |                            |             |             |

**b** Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

**Part XV** **Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

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

**a** The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

APPLICATIONS MUST BE SUBMITTED ONLI  
PO BOX 64683  
ST PAUL, MN 551640683  
(651) 236-5847  
HBFULLERFOUNDATION@HBFULLER.COM

**b** The form in which applications should be submitted and information and materials they should include

APPLICATIONS MUST BE SUBMITTED ONLINE

**c Any submission deadlines**  
GRANTS ARE REVIEWED TWICE A YEAR WITH PROPOSAL DEADLINES OF MARCH 31 AND AUGUST 31

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

GRANT RECIPIENTS MUST BE A TAX-EXEMPT 501(C)(3) ORGANIZATION RELATED PROJECTS MUST BE ALIGNED WITH H B FULLER'S FOCUS AREAS AND AIM TO BENEFIT PEOPLE WHERE EMPLOYEES LIVE AND WORK RECIPIENTS MUST BE LOCATED IN, OR WITHIN THE SURROUNDING COMMUNITY, OF AN H B FULLER FACILITY INDIVIDUAL GRANTS TYPICALLY RANGE FROM \$5,000 TO \$15,000 AN INVITATION TO SUBMIT AN APPLICATION DOES NOT GUARANTEE A GRANT WILL BE MADE

Part XV

Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

| Recipient                                                                                                       | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution                | Amount  |
|-----------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------|-------------------------------------------------|---------|
| Name and address (home or business)                                                                             |                                                                                                           |                                |                                                 |         |
| a Paid during the year<br>See Additional Data Table                                                             |                                                                                                           |                                |                                                 |         |
| Total . . . . .                                                                                                 |                                                                                                           |                                | 3a                                              | 835,356 |
| b Approved for future payment<br>SCIENCE MUSEUM OF MINNESOTA<br>120 WEST KELLOGG BOULEVARD<br>ST PAUL, MN 55102 | NONE                                                                                                      | PUBLIC CHARITY                 | GENERAL OPERATIONS, MATCHING GIFTS TO EDUCATION | 425     |
|                                                                                                                 |                                                                                                           |                                |                                                 |         |
|                                                                                                                 |                                                                                                           |                                |                                                 |         |
| Total . . . . .                                                                                                 |                                                                                                           |                                | 3b                                              | 425     |

Enter gross amounts unless otherwise indicated

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

Form **990-PF** (2014)

Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

|                                                                                                    |              |  |           |
|----------------------------------------------------------------------------------------------------|--------------|--|-----------|
| <b>(1)</b> Cash. . . . .                                                                           | <b>1a(1)</b> |  | <b>No</b> |
| <b>(2)</b> Other assets. . . . .                                                                   | <b>1a(2)</b> |  | <b>No</b> |
| <b>b</b> Other transactions                                                                        |              |  |           |
| <b>(1)</b> Sales of assets to a noncharitable exempt organization. . . . .                         | <b>1b(1)</b> |  | <b>No</b> |
| <b>(2)</b> Purchases of assets from a noncharitable exempt organization. . . . .                   | <b>1b(2)</b> |  | <b>No</b> |
| <b>(3)</b> Rental of facilities, equipment, or other assets. . . . .                               | <b>1b(3)</b> |  | <b>No</b> |
| <b>(4)</b> Reimbursement arrangements. . . . .                                                     | <b>1b(4)</b> |  | <b>No</b> |
| <b>(5)</b> Loans or loan guarantees. . . . .                                                       | <b>1b(5)</b> |  | <b>No</b> |
| <b>(6)</b> Performance of services or membership or fundraising solicitations. . . . .             | <b>1b(6)</b> |  | <b>No</b> |
| <b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees. . . . . | <b>1c</b>    |  | <b>No</b> |

[illegible]

**b** If "Yes," complete the following schedule

| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
|--------------------------|--------------------------|---------------------------------|
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |

\*\*\*\*\* 2016-10-14 \*\*\*\*\*  
 \_\_\_\_\_  
 Signature of officer or trustee Date Title

|                               |                                                                                               |                      |      |                                                            |                   |
|-------------------------------|-----------------------------------------------------------------------------------------------|----------------------|------|------------------------------------------------------------|-------------------|
| <b>Paid Preparer Use Only</b> | Print/Type preparer's name<br>LAWRENCE H MOHR<br>CPA                                          | Preparer's Signature | Date | Check if self-employed <input checked="" type="checkbox"/> | PTIN<br>P00447603 |
|                               | Firm's name <input checked="" type="checkbox"/><br>BAKER TILLY VIRCHOW KRAUSE LLP             |                      |      | Firm's EIN <input checked="" type="checkbox"/> 39-0859910  |                   |
|                               | Firm's address <input checked="" type="checkbox"/><br>225 S 6TH ST 2300 MINNEAPOLIS, MN 55402 |                      |      | Phone no (612) 876-4500                                    |                   |

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

| (a) Name and address                                                | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---------------------------------------------------------------------|-----------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|---------------------------------------|
| JIM OWENS                                                           | DIRECTOR<br>1 00                                          | 0                                         | 0                                                                     | 0                                     |
| HB FULLER COMPANY 1200 WILLOW LAKE<br>BLVD<br>ST PAUL, MN 551640683 |                                                           |                                           |                                                                       |                                       |
| NATHAN WEAVER                                                       | DIRECTOR,<br>PRESIDENT<br>1 00                            | 0                                         | 0                                                                     | 0                                     |
| HB FULLER COMPANY 1200 WILLOW LAKE<br>BLVD<br>ST PAUL, MN 551640683 |                                                           |                                           |                                                                       |                                       |
| KIRSTEN STONE                                                       | DIRECTOR<br>1 00                                          | 0                                         | 0                                                                     | 0                                     |
| HB FULLER COMPANY 1200 WILLOW LAKE<br>BLVD<br>ST PAUL, MN 551640683 |                                                           |                                           |                                                                       |                                       |
| WES OREN                                                            | DIRECTOR<br>1 00                                          | 0                                         | 0                                                                     | 0                                     |
| HB FULLER COMPANY 1200 WILLOW LAKE<br>BLVD<br>ST PAUL, MN 551640683 |                                                           |                                           |                                                                       |                                       |
| TRACI JENSEN                                                        | DIRECTOR<br>1 00                                          | 0                                         | 0                                                                     | 0                                     |
| HB FULLER COMPANY 1200 WILLOW LAKE<br>BLVD<br>ST PAUL, MN 551640683 |                                                           |                                           |                                                                       |                                       |
| LEE POLANCE                                                         | DIRECTOR<br>1 00                                          | 0                                         | 0                                                                     | 0                                     |
| HB FULLER COMPANY 1200 WILLOW LAKE<br>BLVD<br>ST PAUL, MN 551640683 |                                                           |                                           |                                                                       |                                       |
| ANN PARRIOTT                                                        | EX-OFFICIO<br>DIRECTOR<br>1 00                            | 0                                         | 0                                                                     | 0                                     |
| HB FULLER COMPANY 1200 WILLOW LAKE<br>BLVD<br>ST PAUL, MN 551640683 |                                                           |                                           |                                                                       |                                       |
| KIMBERLEE SINCLAIR                                                  | EXECUTIVE<br>DIRECTOR<br>1 00                             | 0                                         | 0                                                                     | 0                                     |
| HB FULLER COMPANY 1200 WILLOW LAKE<br>BLVD<br>ST PAUL, MN 551640683 |                                                           |                                           |                                                                       |                                       |
| MATT BENDIXEN                                                       | DIRECTOR,<br>TREASURER<br>1 00                            | 0                                         | 0                                                                     | 0                                     |
| HB FULLER COMPANY 1200 WILLOW LAKE<br>BLVD<br>ST PAUL, MN 551640683 |                                                           |                                           |                                                                       |                                       |
| RACHEL HART                                                         | DIRECTOR,<br>SECRETARY<br>1 00                            | 0                                         | 0                                                                     | 0                                     |
| HB FULLER COMPANY 1200 WILLOW LAKE<br>BLVD<br>ST PAUL, MN 551640683 |                                                           |                                           |                                                                       |                                       |
| JODIE MONSON                                                        | DIRECTOR<br>1 00                                          | 0                                         | 0                                                                     | 0                                     |
| HB FULLER COMPANY 1200 WILLOW LAKE<br>BLVD<br>ST PAUL, MN 551640683 |                                                           |                                           |                                                                       |                                       |
| ANNA BOSAK                                                          | DIRECTOR,<br>SECRETARY<br>1 00                            | 0                                         | 0                                                                     | 0                                     |
| HB FULLER COMPANY 1200 WILLOW LAKE<br>BLVD<br>ST PAUL, MN 551640683 |                                                           |                                           |                                                                       |                                       |

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

| Recipient                                                                                                              | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution                               | Amount  |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------|----------------------------------------------------------------|---------|
| Name and address (home or business)                                                                                    |                                                                                                           |                                |                                                                |         |
| <b>a</b> Paid during the year                                                                                          |                                                                                                           |                                |                                                                |         |
| ACHIEVEMPLS 111 3RD AVENUE<br>SOUTH SUITE 5<br>MINNEAPOLIS,MN 55401                                                    | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                                    | 180     |
| AMERICAN NATIONAL RED CROSS<br>- TWIN CITIES AREA CHAPTER<br>1201 WEST RIVER PARKWAY<br>MINNEAPOLIS,MN 55454           | NONE                                                                                                      | PUBLIC CHARITY                 | EMPLOYEE MATCH FOR ONLINE PLEDGING FOR NEPAL EARTHQUAKE RELIEF | 1,705   |
| AUGSBURG COLLEGE 2211<br>RIVERSIDE AVENUE<br>MINNEAPOLIS,MN 55454                                                      | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                                    | 10,000  |
| BATTLE GROUND SCHOOL<br>DISTRICT #119 PO BOX 200<br>BATTLE GROUND,WA 98604                                             | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                                    | 2,000   |
| BEMIDJI STATE UNIVERSITY<br>FOUNDATION 1500 BIRCHMONT<br>DRIVE NE 17<br>BEMIDJI,MN 56601                               | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                                    | 100     |
| BENEDICTINE UNIVERSITY 5700<br>COLLEGE ROAD<br>LISLE,IL 60532                                                          | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                                    | 250     |
| BENET ACADEMY 2200 MAPLE<br>AVENUE<br>LISLE,IL 60532                                                                   | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                                    | 300     |
| BESTPREP 7100 NORTHLAND<br>CIRCLE NORTH SUITE<br>402<br>BROOKLYN PARK,MN 55428                                         | NONE                                                                                                      | PUBLIC CHARITY                 | MN BUSINESS VENTURE & EMENTORS PROGRAMS (EB - B MARTSCHING)    | 10,000  |
| BETHEL UNIVERSITY 3900 BETHEL<br>DRIVE<br>ST PAUL,MN 55112                                                             | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                                    | 1,000   |
| BOYS & GIRLS CLUB OF GORDON<br>MURRAY AND WHITFIELD<br>COUNTIES INC PO BOX 309<br>DALTON,GA 30722                      | NONE                                                                                                      | PUBLIC CHARITY                 | EDUCATIONAL PROGRAMMING INCLUDING SUMMER STEM CAMPS            | 5,000   |
| BRIDGTON ACADEMY 11<br>ACADEMY LANE PO BOX 292<br>NORTH BRIDGTON,ME 04057                                              | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                                    | 200     |
| CENTER FOR IRISH MUSIC INC<br>836 PRIOR AVENUE NORTH<br>ST PAUL,MN 55104                                               | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                                    | 1,000   |
| CHILDREN'S THEATRE COMPANY<br>AND SCHOOL 2400 THIRD<br>AVENUE SOUTH<br>MINNEAPOLIS,MN 55404                            | NONE                                                                                                      | PUBLIC CHARITY                 | GENERAL OPERATIONS                                             | 5,000   |
| COLLEGES OF THE SENECA<br>HOBART & WM SMITH COLLEGES<br>337 PULTENEY STREET<br>GENEVA,NY 14456                         | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                                    | 100     |
| COMMUNITIES IN SCHOOLS OF<br>AURORA INC 712 SOUTH RIVER<br>STREET<br>AURORA,IL 60506                                   | NONE                                                                                                      | PUBLIC CHARITY                 | AMAZING SUMMER SCIENCE PROGRAM                                 | 15,000  |
| <b>Total . . . . .</b>  <b>3a</b> |                                                                                                           |                                |                                                                | 835,356 |

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

| Recipient                                                                                                              | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution                               | Amount  |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------|----------------------------------------------------------------|---------|
| Name and address (home or business)                                                                                    |                                                                                                           |                                |                                                                |         |
| <b>a</b> Paid during the year                                                                                          |                                                                                                           |                                |                                                                |         |
| COMO FRIENDS 1225 ESTABROOK DRIVE<br>ST PAUL,MN 55103                                                                  | NONE                                                                                                      | PUBLIC CHARITY                 | SCIENCE AND CONSERVATION PROGRAMS, MATCHING GIFTS TO EDUCATION | 10,635  |
| CONCORDIA COLLEGE ALABAMA 1712 BROAD STREET<br>SELMA,AL 36701                                                          | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                                    | 1,000   |
| COVINGTON-NEWTON COUNTY UNITED FUND PO BOX 1344<br>COVINGTON,GA 30015                                                  | NONE                                                                                                      | PUBLIC CHARITY                 | UNITED WAY CAMPAIGN                                            | 1,202   |
| DEPAUL UNIVERSITY ATTN ADVANCEMENT GIFT PROCESSING1<br>EAST JACKSON BOULEVARD CHICAGO,IL 60604                         | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                                    | 50      |
| DEPAUW UNIVERSITY 300 EAST SEMINARY STREET<br>GREENCASTLE,IN 46135                                                     | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                                    | 1,000   |
| DES MOINES METRO OPERA INC 106 WEST BOSTON AVENUE<br>INDIANOLA,IA 50125                                                | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                                    | 50      |
| DOWLING PARENT TEACHER ORGANIZATION 3900 WEST RIVER PARKWAY<br>MINNEAPOLIS,MN 55406                                    | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                                    | 100     |
| DOWLING URBAN ENVIRONMENTAL SCHOOL 3900 WEST RIVER PARKWAY<br>MINNEAPOLIS,MN 55406                                     | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                                    | 200     |
| FLORIDA ATLANTIC UNIVERSITY FOUNDATION INC 777 GLADES ROAD<br>BOCA RATON,FL 33431                                      | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                                    | 100     |
| FLORIDA STATE UNIVERSITY FOUNDATION INC 2010 LEVY AVENUE BLDG B SUITE 300<br>TALLAHASSEE,FL 32306                      | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                                    | 1,000   |
| FOX VALLEY UNITED WAY 44 EAST GALENA BOULEVARD<br>AURORA,IL 60505                                                      | NONE                                                                                                      | PUBLIC CHARITY                 | UNITED WAY CAMPAIGN                                            | 1,118   |
| FRIENDS OF THE GRAVES COUNTY LIBRARY INC 601 NORTH 17TH STREET<br>MAYFIELD,KY 42003                                    | NONE                                                                                                      | PUBLIC CHARITY                 | A TO Z ELECTRONIC DATABASES, 3D PRINTERS, AND STEM BOOKS       | 5,000   |
| FRIENDS OF THE MINNESOTA SINFONIA 901 NORTH THIRD STREET SUITE 112<br>MINNEAPOLIS,MN 55401                             | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                                    | 100     |
| FRIENDS OF THE MISSISSIPPI RIVER 360 NORTH ROBERT STREET SUITE 400<br>ST PAUL,MN 55101                                 | NONE                                                                                                      | PUBLIC CHARITY                 | YOUTH ENVIRONMENTAL STEWARDS (YES!) PROGRAM                    | 5,000   |
| FRIENDS OF THE VIRGINIA PUBLIC LIBRARY 215 - 5TH AVENUE SOUTH<br>VIRGINIA,MN 55792                                     | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                                    | 50      |
| <b>Total . . . . .</b>  <b>3a</b> |                                                                                                           |                                |                                                                | 835,356 |

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

| Recipient                                                                                                              | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution                               | Amount  |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------|----------------------------------------------------------------|---------|
| Name and address (home or business)                                                                                    |                                                                                                           |                                |                                                                |         |
| <b>a</b> Paid during the year                                                                                          |                                                                                                           |                                |                                                                |         |
| GEORGIA ROBOTICS ALLIANCE INC 2152 COLLINS DRIVE NW ATLANTA,GA 30318                                                   | NONE                                                                                                      | PUBLIC CHARITY                 | FIRST ROBOTICS CHALLENGE TOURNAMENTS                           | 5,000   |
| GIRL SCOUT COUNCIL OF ST CROIX VALLEY 400 ROBERT STREET SOUTH ST PAUL,MN 55107                                         | NONE                                                                                                      | PUBLIC CHARITY                 | GIRL SCOUTS ROBOTICS                                           | 10,000  |
| GIVE2ASIA 340 PINE STREET SUITE 501 SAN FRANCISCO,CA 94104                                                             | NONE                                                                                                      | PUBLIC CHARITY                 | EMPLOYEE MATCH FOR ONLINE PLEDGING FOR NEPAL EARTHQUAKE RELIEF | 11,460  |
| GLOBALGIVING FOUNDATION 1110 VERMONT AVENUE NW SUITE 550 WASHINGTON,WA 20005                                           | NONE                                                                                                      | PUBLIC CHARITY                 | VALUABLE GIRL PROJECT, EMPLOYEE MATCH FOR DISASTER FUNDS       | 227,830 |
| GREATER TWIN CITIES UNITED WAY 404 SOUTH 8TH STREET MINNEAPOLIS,MN 55404                                               | NONE                                                                                                      | PUBLIC CHARITY                 | UNITED WAY CAMPAIGN                                            | 50,449  |
| HEART OF WEST MICHIGAN UNITED WAY UNITED WAY CENTER118 COMMERCE AVENUE SW GRAND RAPIDS,MI 49503                        | NONE                                                                                                      | PUBLIC CHARITY                 | UNITED WAY CAMPAIGN                                            | 130     |
| HILL-MURRAY SCHOOL 2625 LARPEUTEUR AVENUE EAST ST PAUL,MN 55109                                                        | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                                    | 2,100   |
| HOLY SPIRIT CHURCH AND SCHOOL 515 ALBERT STREET SOUTH ST PAUL,MN 55116                                                 | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                                    | 1,000   |
| ILLINOIS INSTITUTE OF TECHNOLOGY 10 WEST 35TH STREET SUITE 1700 CHICAGO,IL 60616                                       | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                                    | 450     |
| INDEPENDENT SCHOOL DISTRICT #12 4707 NORTH ROAD CIRCLE PINES,MN 55014                                                  | NONE                                                                                                      | PUBLIC CHARITY                 | STEM MINI-GRANTS                                               | 17,553  |
| INDEPENDENT SCHOOL DISTRICT #14 6000 WEST MOORE LAKE DRIVE FRIDLEY,MN 55432                                            | NONE                                                                                                      | PUBLIC CHARITY                 | STEM MINI-GRANTS                                               | 4,500   |
| INDEPENDENT SCHOOL DISTRICT #196 4185 BRADDOCK TRAIL EAGAN,MN 55123                                                    | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                                    | 1,000   |
| INDEPENDENT SCHOOL DISTRICT #621 350 HWY 96 WEST SHOREVIEW,MN 55126                                                    | NONE                                                                                                      | PUBLIC CHARITY                 | STEM MINI-GRANTS                                               | 10,733  |
| INDEPENDENT SCHOOL DISTRICT #622 2520 EAST 12TH AVENUE NORTH ST PAUL,MN 55109                                          | NONE                                                                                                      | PUBLIC CHARITY                 | STEM MINI-GRANTS                                               | 14,523  |
| INDEPENDENT SCHOOL DISTRICT #624 4855 BLOOM AVENUE WHITE BEAR LAKE,MN 55110                                            | NONE                                                                                                      | PUBLIC CHARITY                 | STEM MINI-GRANTS                                               | 9,450   |
| <b>Total . . . . .</b>  <b>3a</b> |                                                                                                           |                                |                                                                | 835,356 |

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

| Recipient                                                                                                              | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution                 | Amount  |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------|--------------------------------------------------|---------|
| Name and address (home or business)                                                                                    |                                                                                                           |                                |                                                  |         |
| <b>a</b> Paid during the year                                                                                          |                                                                                                           |                                |                                                  |         |
| INDEPENDENT SCHOOL DISTRICT #832 1520 MAHTOMEDI AVENUE MAHTOMEDI,MN 55115                                              | NONE                                                                                                      | PUBLIC CHARITY                 | STEM MINI-GRANTS                                 | 5,494   |
| INDEPENDENT SCHOOL DISTRICT #833 7362 EAST POINT DOUGLAS ROAD SOUT COTTAGE GROVE,MN 55016                              | NONE                                                                                                      | PUBLIC CHARITY                 | STEM MINI-GRANTS                                 | 12,660  |
| INNOVATIONS IN SCIENCE AND TECHNOLOGY EDUCATION 111 3RD AVENUE SOUTH SUITE 120 MINNEAPOLIS,MN 55401                    | NONE                                                                                                      | PUBLIC CHARITY                 | MN FIRST LEGO LEAGUE AND MN FIRST TECH CHALLENGE | 10,000  |
| IOWA STATE UNIVERSITY FOUNDATION 2505 UNIVERSITY BOULEVARD PO BOX 2230 AMES,IA 50010                                   | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                      | 1,000   |
| JUNIOR ACHIEVEMENT OF THE UPPER MIDWEST INC 1800 WHITE BEAR AVENUE NORTH MAPLEWOOD,MN 55109                            | NONE                                                                                                      | PUBLIC CHARITY                 | GENERAL OPERATIONS                               | 15,000  |
| KETTERING UNIVERSITY 1700 UNIVERSITY AVENUE FLINT,MI 48504                                                             | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                      | 1,000   |
| LOS ALTOS HIGH SCHOOL 201 ALMOND AVENUE LOS ALTOS,CA 94022                                                             | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                      | 350     |
| LUTHER COLLEGE 700 COLLEGE DRIVE DECORAH,IA 52101                                                                      | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                      | 50      |
| MACALESTER COLLEGE 1600 GRAND AVENUE ST PAUL,MN 55105                                                                  | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                      | 250     |
| MARQUETTE CATHOLIC SCHOOL 311 - 3RD STREET SOUTH VIRGINIA,VA 55792                                                     | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                      | 800     |
| MATERNITY OF MARY - ST ANDREW SCHOOL 592 ARLINGTON AVENUE WEST ST PAUL,MN 55117                                        | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                      | 1,300   |
| MERRICK INC 3210 LABORE ROAD VANDAIS HEIGHTS,MN 55110                                                                  | NONE                                                                                                      | PUBLIC CHARITY                 | GENERAL OPERATIONS                               | 5,000   |
| METROPOLITAN OPERA GUILD INC 30 LINCOLN CENTER NEWYORK,NY 10023                                                        | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                      | 400     |
| MINNEAPOLIS SOCIETY OF FINE ARTS 2400 THIRD AVENUE SOUTH MINNEAPOLIS,MN 55404                                          | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                      | 60      |
| MINNEHAHA ACADEMY 3100 WEST RIVER PARKWAY MINNEAPOLIS,MN 55406                                                         | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                      | 400     |
| <b>Total . . . . .</b>  <b>3a</b> |                                                                                                           |                                |                                                  | 835,356 |

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

| Recipient                                                                                                              | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution        | Amount  |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------|-----------------------------------------|---------|
| Name and address (home or business)                                                                                    |                                                                                                           |                                |                                         |         |
| <b>a</b> Paid during the year                                                                                          |                                                                                                           |                                |                                         |         |
| MINNESOTA ALLIANCE WITH YOUTH 2233 UNIVERSITY AVENUE WEST SUITE 235 ST PAUL,MN 55114                                   | NONE                                                                                                      | PUBLIC CHARITY                 | MINNESOTA YOUTH COUNCIL                 | 10,000  |
| MINNESOTA CHILDREN'S MUSEUM 10 WEST SEVENTH STREET ST PAUL,MN 55102                                                    | NONE                                                                                                      | PUBLIC CHARITY                 | 21ST CENTURY INNOVATION EDUCATION FOCUS | 7,500   |
| MINNESOTA HISTORICAL SOCIETY 345 KELLOGG BOULEVARD WEST ST PAUL,MN 55102                                               | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION             | 1,000   |
| MINNESOTA LANDSCAPE ARBORETUM FOUNDATION 3675 ARBORETUM DRIVE CHASKA,MN 55318                                          | NONE                                                                                                      | PUBLIC CHARITY                 | URBAN GARDEN PROGRAM                    | 10,000  |
| MINNESOTA PROFESSIONAL ENGINEERS FOUNDATION 880 BLUE GENTIAN ROAD 170 EAGAN,MN 55121                                   | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION             | 12,000  |
| MINNESOTA PUBLIC RADIO 480 CEDAR STREET ST PAUL,MN 55101                                                               | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION             | 490     |
| MINNESOTA STATE UNIVERSITY MANKATO FOUNDATION INC 126 ALUMNI FOUNDATION CENTER MANKATO,MN 56001                        | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION             | 50      |
| MINNESOTA ZOO FOUNDATION 13000 ZOO BOULEVARD APPLE VALLEY,MN 55124                                                     | NONE                                                                                                      | PUBLIC CHARITY                 | ZOOMS PROGRAM                           | 7,750   |
| MOUNT ST MARY SEMINARY OF THE WEST ATHENAEUM OF OHIO NORWOOD 6616 BEECHMONT AVENUE CINCINNATI,OH 45230                 | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION             | 1,000   |
| MOUNTAIN VIEW LOS ALTOS HIGH SCHOOL FOUNDATION PO BOX 1146 LOS ALTOS,CA 94023                                          | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION             | 500     |
| NATIONAL INVENTORS HALL OF FAME INC 3701 HIGHLAND PARK NW NORTH CANTON,OH 44720                                        | NONE                                                                                                      | PUBLIC CHARITY                 | CAMP INVENTION PROGRAMS                 | 29,000  |
| NATIONAL TRUST FOR HISTORIC PRESERVATION IN THE US 2600 VIRGINIA AVENUE NORTHWEST SUITE 1100 WASHINGTON,DC 20037       | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION             | 35      |
| NORTHLAND COLLEGE 1411 ELLIS AVENUE ASHLAND,WI 54806                                                                   | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION             | 1,000   |
| NORWAY HOUSE 913 EAST FRANKLIN AVENUE MINNEAPOLIS,MN 55404                                                             | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION             | 500     |
| OTTER LAKE PTA 1401 COUNTY ROAD H2 EAST WHITE BEAR LAKE,MN 55110                                                       | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION             | 250     |
| <b>Total . . . . .</b>  <b>3a</b> |                                                                                                           |                                |                                         | 835,356 |

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

| Recipient                                                                                                              | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution                | Amount  |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------|-------------------------------------------------|---------|
| Name and address (home or business)                                                                                    |                                                                                                           |                                |                                                 |         |
| <b>a</b> Paid during the year                                                                                          |                                                                                                           |                                |                                                 |         |
| PADUCAH JUNIOR COLLEGE CORP<br>4810 ALBEN BARKLEY DRIVE PO BOX<br>7380<br>PADUCAH,KY 42001                             | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                     | 5,000   |
| PAVEK MUSEUM OF BROADCASTING<br>3517 RALEIGH AVENUE<br>ST LOUIS PARK,MN 55416                                          | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                     | 50      |
| PREPARE PROSPER<br>2610 UNIVERSITY AVENUE WEST SUITE 450<br>ST PAUL,MN 55114                                           | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                     | 50      |
| PRESIDENT AND FELLOWS OF HARVARD COLLEGE<br>124 MT AUBURN STREET<br>CAMBRIDGE,MA 02138                                 | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                     | 1,000   |
| PROJECT SUCCESS ONE GROVELAND TERRACE<br>SUITE 300 MINNEAPOLIS,MN 55403                                                | NONE                                                                                                      | PUBLIC CHARITY                 | GENERAL OPERATIONS                              | 10,500  |
| REGIONS HOSPITAL FOUNDATION<br>640 JACKSON STREET<br>ST PAUL,MN 55101                                                  | NONE                                                                                                      | PUBLIC CHARITY                 | MAKE IT OK MENTAL ILLNESS ANTI-STIMA CAMPAIGN   | 25,000  |
| RIDGEWATER COLLEGE FOUNDATION<br>2101 - 15TH AVENUE NORTHWEST<br>WILLMAR,MN 56201                                      | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                     | 100     |
| RUST COLLEGE<br>150 RUST AVENUE HOLY SPRINGS,MS 38635                                                                  | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                     | 900     |
| RUTH ECKERD HALL INC<br>1111 NORTH MCMULLEN BOOTH ROAD<br>CLEARWATER,FL 33759                                          | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                     | 250     |
| SABANTHANI COMMUNITY CENTER INC<br>310 EAST 38TH STREET<br>MINNEAPOLIS,MN 55409                                        | NONE                                                                                                      | PUBLIC CHARITY                 | HORIZON YOUTH'S STEAM PROGRAM                   | 10,000  |
| SACRED HEART AREA SCHOOL<br>324 4TH STREET NE<br>STAPLES,MN 56479                                                      | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                     | 500     |
| SAINT PAUL PUBLIC SCHOOLS FOUNDATION<br>101 EAST FIFTH STREET SUITE 2400<br>ST PAUL,MN 55101                           | NONE                                                                                                      | PUBLIC CHARITY                 | TUTORING PARTNERSHIP FOR ACADEMIC EXCELLENCE    | 5,000   |
| SCIENCE MUSEUM OF MINNESOTA<br>120 WEST KELLOGG BOULEVARD<br>ST PAUL,MN 55102                                          | NONE                                                                                                      | PUBLIC CHARITY                 | GENERAL OPERATIONS, MATCHING GIFTS TO EDUCATION | 75,999  |
| SCIMATHMN<br>120 WEST KELLOGG BOULEVARD<br>ST PAUL,MN 55102                                                            | NONE                                                                                                      | PUBLIC CHARITY                 | GENERAL OPERATIONS                              | 10,000  |
| SPRINGFIELD COLLEGE<br>263 ALDEN STREET<br>SPRINGFIELD,MA 01109                                                        | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                     | 1,350   |
| <b>Total . . . . .</b>  <b>3a</b> |                                                                                                           |                                |                                                 | 835,356 |

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

| Recipient                                                                                                              | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution                                 | Amount  |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------|------------------------------------------------------------------|---------|
| Name and address (home or business)                                                                                    |                                                                                                           |                                |                                                                  |         |
| <b>a</b> <i>Paid during the year</i>                                                                                   |                                                                                                           |                                |                                                                  |         |
| ST CATHERINE UNIVERSITY ATTN<br>MATCHING GIFTS MAIL F-122004<br>RANDOLPH AVENUE<br>ST PAUL,MN 55105                    | NONE                                                                                                      | PUBLIC<br>CHARITY              | MATCHING GIFTS TO<br>EDUCATION                                   | 5,075   |
| ST IGNATIUS HIGH SCHOOL OF<br>CLEVELAND 1911 WEST 30TH<br>STREET<br>CLEVELAND,OH 44113                                 | NONE                                                                                                      | PUBLIC<br>CHARITY              | MATCHING GIFTS TO<br>EDUCATION                                   | 100     |
| ST JOHN'S UNIVERSITY LUKE 104<br>PO BOX 7222<br>COLLEGEVILLE,MN 56321                                                  | NONE                                                                                                      | PUBLIC<br>CHARITY              | MATCHING GIFTS TO<br>EDUCATION                                   | 150     |
| ST MARY'S MISSION SCHOOL<br>15341 ST MARYS MISSION ROAD<br>PO BOX<br>189<br>RED LAKE,MN 56671                          | NONE                                                                                                      | PUBLIC<br>CHARITY              | MATCHING GIFTS TO<br>EDUCATION                                   | 200     |
| ST OLAF COLLEGE<br>ADMINISTRATION OFFICE1520 ST<br>OLAF<br>AVENUE<br>NORTHFIELD,MN 55057                               | NONE                                                                                                      | PUBLIC<br>CHARITY              | MATCHING GIFTS TO<br>EDUCATION                                   | 1,100   |
| STUDENTS TODAY LEADERS<br>FOREVER 609 SOUTH 10TH<br>STREET SUITE 103<br>MINNEAPOLIS,MN 55404                           | NONE                                                                                                      | PUBLIC<br>CHARITY              | HIGH SCHOOL AND MIDDLE<br>SCHOOL STEM AND<br>LEADERSHIP PROGRAMS | 5,000   |
| THE BAKKEN 3537 ZENITH<br>AVENUE SOUTH<br>MINNEAPOLIS,MN 55416                                                         | NONE                                                                                                      | PUBLIC<br>CHARITY              | STEM EDUCATION<br>PROGRAMS                                       | 10,000  |
| THE FERNANDINA BEACH HIGH<br>SCHOOL FOUNDATION INC PO<br>BOX 15726<br>FERNANDINA BEACH,FL 32035                        | NONE                                                                                                      | PUBLIC<br>CHARITY              | MATCHING GIFTS TO<br>EDUCATION                                   | 1,000   |
| THE SAINT PAUL SEMINARY<br>SCHOOL OF DIVINITY 2260<br>SUMMIT AVENUE<br>ST PAUL,MN 55105                                | NONE                                                                                                      | PUBLIC<br>CHARITY              | MATCHING GIFTS TO<br>EDUCATION                                   | 100     |
| THE WORKS 9740 GRAND AVENUE<br>SOUTH<br>BLOOMINGTON,MN 55420                                                           | NONE                                                                                                      | PUBLIC<br>CHARITY              | ENGINEERING FOR ALL<br>INITIATIVE                                | 11,000  |
| TRINITY SCHOOLS INC 601 RIVER<br>RIDGE PARKWAY<br>EAGAN,MN 55121                                                       | NONE                                                                                                      | PUBLIC<br>CHARITY              | MATCHING GIFTS TO<br>EDUCATION                                   | 125     |
| TRUSTEES OF THE HAMLINE<br>UNIVERSITY OF MINNESOTA MS -<br>C1917 1536 HEWITT AVENUE<br>ST PAUL,MN 55104                | NONE                                                                                                      | PUBLIC<br>CHARITY              | MATCHING GIFTS TO<br>EDUCATION                                   | 800     |
| TWIN CITIES PUBLIC TELEVISION<br>INC 172 EAST FOURTH STREET<br>ST PAUL,MN 55101                                        | NONE                                                                                                      | PUBLIC<br>CHARITY              | MATCHING GIFTS TO<br>EDUCATION                                   | 660     |
| UNITED NATIONS ASSOCIATION<br>OF MINNESOTA 821 RAYMOND<br>AVENUE SUITE 400<br>ST PAUL,MN 55114                         | NONE                                                                                                      | PUBLIC<br>CHARITY              | MODEL UN INTERNATIONAL<br>EDUCATION PROGRAM                      | 5,000   |
| UNITED WAY CALIFORNIA<br>CAPITAL REGION 10389 OLD<br>PLACERVILLE ROAD<br>SACRAMENTO,CA 95827                           | NONE                                                                                                      | PUBLIC<br>CHARITY              | UNITED WAY CAMPAIGN                                              | 585     |
| <b>Total . . . . .</b>  <b>3a</b> |                                                                                                           |                                |                                                                  | 835,356 |

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

| Recipient                                                                                                              | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution                                            | Amount  |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------|-----------------------------------------------------------------------------|---------|
| Name and address (home or business)                                                                                    |                                                                                                           |                                |                                                                             |         |
| <b>a</b> <i>Paid during the year</i>                                                                                   |                                                                                                           |                                |                                                                             |         |
| UNITED WAY OF CENTRAL JERSEY<br>32 FORD AVENUE<br>MILLTOWN,NJ 08850                                                    | NONE                                                                                                      | PUBLIC CHARITY                 | UNITED WAY CAMPAIGN                                                         | 168     |
| UNITED WAY OF FORSYTH COUNTY<br>PO BOX 1350<br>CUMMING,GA 30028                                                        | NONE                                                                                                      | PUBLIC CHARITY                 | UNITED WAY CAMPAIGN                                                         | 490     |
| UNITED WAY OF GREATER CINCINNATI<br>2400 READING ROAD<br>CINCINNATI,OH 45202                                           | NONE                                                                                                      | PUBLIC CHARITY                 | UNITED WAY CAMPAIGN                                                         | 1,336   |
| UNITED WAY OF GRUNDY COUNTY<br>1802 NORTH DIVISION STREET<br>SUITE 500<br>MORRIS,IL 60450                              | NONE                                                                                                      | PUBLIC CHARITY                 | UNITED WAY CAMPAIGN                                                         | 35      |
| UNITED WAY OF METROPOLITAN ATLANTA<br>100 EDGEWOOD AVENUE NE 200<br>ATLANTA,GA 30303                                   | NONE                                                                                                      | PUBLIC CHARITY                 | UNITED WAY CAMPAIGN                                                         | 816     |
| UNITED WAY OF METROPOLITAN DALLAS<br>1800 NORTH LAMAR STREET<br>DALLAS,TX 75202                                        | NONE                                                                                                      | PUBLIC CHARITY                 | UNITED WAY CAMPAIGN                                                         | 2,100   |
| UNITED WAY OF NORTH CENTRAL FLORIDA<br>6031 NW 1ST PLACE<br>GAINESVILLE,FL 32607                                       | NONE                                                                                                      | PUBLIC CHARITY                 | UNITED WAY CAMPAIGN                                                         | 715     |
| UNITED WAY OF PADUCAH-MCCRACKEN COUNTY<br>333 BROADWAY SUITE 502<br>PADUCAH,KY 42001                                   | NONE                                                                                                      | PUBLIC CHARITY                 | UNITED WAY CAMPAIGN                                                         | 2,886   |
| UNITED WAY OF THE COLUMBIA-WILLAMETTE<br>619 SW 11TH AVENUE SUITE 300<br>PORTLAND,OR 97205                             | NONE                                                                                                      | PUBLIC CHARITY                 | UNITED WAY CAMPAIGN                                                         | 5,541   |
| UNITED WAY WORLDWIDE<br>701 NORTH FAIRFAX STREET<br>ALEXANDRIA,VA 22314                                                | NONE                                                                                                      | PUBLIC CHARITY                 | UNITED WAY CAMPAIGN                                                         | 468     |
| UNIVERSITY OF FLORIDA FOUNDATION INC<br>PO BOX 14425<br>GAINESVILLE,FL 32604                                           | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                                                 | 100     |
| UNIVERSITY OF ILLINOIS FOUNDATION<br>1305 WEST GREEN STREET<br>URBANA,IL 61801                                         | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                                                 | 250     |
| UNIVERSITY OF MINNESOTA FOUNDATION<br>10 CHURCH STREET SE<br>MINNEAPOLIS,MN 55455                                      | NONE                                                                                                      | PUBLIC CHARITY                 | STEM EDUCATION ADVISORY BOARD, HONEY BEES, POLLINATORS AND OUR FOOD PROGRAM | 26,900  |
| UNIVERSITY OF MINNESOTA MORRIS<br>PO BOX 860266<br>MINNEAPOLIS,MN 55486                                                | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                                                 | 300     |
| UNIVERSITY OF NORTHERN IOWA FOUNDATION<br>121 COMMONS<br>CEDAR FALLS,IA 50614                                          | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION                                                 | 100     |
| <b>Total . . . . .</b>  <b>3a</b> |                                                                                                           |                                |                                                                             | 835,356 |

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

| Recipient                                                                                                              | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution     | Amount  |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------|--------------------------------------|---------|
| Name and address (home or business)                                                                                    |                                                                                                           |                                |                                      |         |
| <b>a</b> <i>Paid during the year</i>                                                                                   |                                                                                                           |                                |                                      |         |
| UNIVERSITY OF NOTRE DAME DU LAC 1100 GRACE HALL NOTRE DAME,IN 46556                                                    | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION          | 200     |
| UNIVERSITY OF WASHINGTON PO BOX 359505 SEATTLE,WA 98195                                                                | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION          | 100     |
| UNIVERSITY OF WISCONSIN GREEN BAY FOUNDATION INC 2420 NICOLET DRIVE CL805 GREEN BAY,WI 54311                           | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION          | 250     |
| UNIVERSITY OF WISCONSIN RIVER FALLS FOUNDATION 410 SOUTH THIRD STREET RIVER FALLS,WI 54022                             | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION          | 1,000   |
| UW-EAU CLAIRE FOUNDATION INC 214 SCHOFIELD HALL 105 GARFIELD AVENUE PO BOX 4004 EAU CLAIRE,WI 54702                    | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION          | 250     |
| VANCOUVER SCHOOL DISTRICT NO 37 FOUNDATION PO BOX 8937 VANCOUVER,WA 98668                                              | NONE                                                                                                      | PUBLIC CHARITY                 | SMTM PROGRAM AT PRAIRIE HIGH SCHOOL  | 4,000   |
| VASSAR COLLEGE 124 RAYMOND AVENUE PO BOX 725 POUGHKEEPSIE,NY 12604                                                     | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION          | 500     |
| VOYAGEUR OUTWARD BOUND SCHOOL 1400 ENERGY PARK DRIVE SUITE 18 ST PAUL,MN 55108                                         | NONE                                                                                                      | PUBLIC CHARITY                 | URBAN YOUTH GO OUTWARD BOUND PROJECT | 10,000  |
| WESTMINSTER COLLEGE DEVELOPMENT OFFICE OLD MAIN ROOM 106 NEW WILMINGTON,PA 16172                                       | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION          | 300     |
| YOUTHCARE 2701 UNIVERSITY AVENUE SOUTHEAST SUITE 205 MINNEAPOLIS,MN 55414                                              | NONE                                                                                                      | PUBLIC CHARITY                 | GENERAL OPERATIONS                   | 10,000  |
| ZEPHYR POINT PRESBYTERIAN CONFERENCE CENTER PO BOX 289 ZEPHYR COVE,NV 89448                                            | NONE                                                                                                      | PUBLIC CHARITY                 | MATCHING GIFTS TO EDUCATION          | 500     |
| <b>Total . . . . .</b>  <b>3a</b> |                                                                                                           |                                |                                      | 835,356 |

**Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.**

# TY 2014 Expenditure Responsibility Statement

**Name:** HB FULLER COMPANY FOUNDATION

**EIN:** 36-3500811

| Grantee's Name                                                             | Grantee's Address                                             | Grant Date | Grant Amount | Grant Purpose                                                                                               | Amount Expended By Grantee | Any Diversion By Grantee? | Dates of Reports By Grantee | Date of Verification | Results of Verification                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|----------------------------------------------------------------------------|---------------------------------------------------------------|------------|--------------|-------------------------------------------------------------------------------------------------------------|----------------------------|---------------------------|-----------------------------|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FUNDACAO MELANIE KLEIN DE EDUCACAO ESPECIAL                                | AVENIDA NOVE DE JULHO JARDIM ZULMIRE SAN PAULO, SOROCABA BR   | 2010-11-01 | 14,583       | BASIC EDUCATION FOR PEOPLE WITH DISABILITIES                                                                |                            |                           | FINAL REPORT IS PENDING     |                      | TO THE KNOWLEDGE OF THE GRANTOR, H B FULLER COMPANY FOUNDATION, THE GRANTEE HAS NOT DIVERTED ANY PORTION OF THE FUNDS (OR INCOME THERE FROM) FROM THE PURPOSE OF THE GRANT FINAL REPORT WAS DUE FEBRUARY 2012 FOLLOW-UP NOTICE WAS SENT TO ADRILENE LEME IN BRAZIL ON SEPTEMBER 10, 2013 AS OF THE FILING DATE, THE REPORT HAS NOT BEEN RECEIVED THE GRANTOR, H B FULLER COMPANY FOUNDATION, HAS NO REASON TO DOUBT THE ACCURACY OR RELIABILITY OF PREVIOUS REPORT(S) RECEIVED BOTH AN EXTERNAL FINANCIAL AUDIT AND EXTERNAL PROGRAM AUDIT WERE CONDUCTED FOR THE FOUNDATION FOR PREVIOUS GRANTS WE ARE SATISFIED THAT ALL REPORTS RECEIVED IN THE PAST FROM THIS ORGANIZATION HAVE BEEN ACCURATE                                                                                                                                                                                                                         |
| INTEGRAR - INSTITUICAO TERAPEUTICA DE GRUPOS DE HABILITACAO E REABILITACAO | AVENIDA COMENDADOR PEREIRA INACIO 1991 - LAGEADO SAO PAULO BR | 2012-03-01 | 22,530       | FOR THE PURCHASE OF CHILDREN'S WHEELCHAIRS                                                                  |                            |                           | FINAL REPORT IS PENDING     |                      | TO THE KNOWLEDGE OF THE GRANTOR, H B FULLER COMPANY FOUNDATION, THE GRANTEE HAS NOT DIVERTED ANY PORTION OF THE FUNDS (OR INCOME THERE FROM) FROM THE PURPOSE OF THE GRANT FINAL REPORT WAS DUE JULY 1, 2013 AS OF THE FILING DATE, THE REPORT HAS NOT BEEN RECEIVED THE GRANTOR, H B FULLER COMPANY FOUNDATION, HAS NO REASON TO DOUBT THE ACCURACY OR RELIABILITY OF PREVIOUS REPORT(S) RECEIVED BOTH AN EXTERNAL FINANCIAL AUDIT AND EXTERNAL PROGRAM AUDIT WERE CONDUCTED FOR THE FOUNDATION FOR PREVIOUS GRANTS WE ARE SATISFIED THAT ALL REPORTS RECEIVED IN THE PAST FROM THIS ORGANIZATION HAVE BEEN ACCURATE                                                                                                                                                                                                                                                                                                     |
| LAS GOLONDRINAS FOUNDATION                                                 | CARRERA 21 N 59A 35 MEDELLIN CO                               | 2012-05-01 | 25,000       | PROVIDE ACCESS TO EDUCATION FOR CHILDREN LIVING IN EXTREMEPOVERTY IN THE COMMUNITY OF VILLA LILIAM, CAICEDO |                            |                           | FINAL REPORT IS PENDING     |                      | TO THE KNOWLEDGE OF THE GRANTOR, H B FULLER COMPANY FOUNDATION, THE GRANTEE HAS NOT DIVERTED ANY PORTION OF THE FUNDS (OR INCOME THERE FROM) FROM THE PURPOSE OF THE GRANT FINAL REPORT WAS DUE SEPTEMBER 1, 2013 AS OF THE FILING DATE, THE REPORT HAS NOT BEEN RECEIVED THE GRANTOR, H B FULLER COMPANY FOUNDATION, HAS NO REASON TO DOUBT THE ACCURACY OR RELIABILITY OF PREVIOUS REPORT(S) RECEIVED BOTH AN EXTERNAL FINANCIAL AUDIT AND EXTERNAL PROGRAM AUDIT WERE CONDUCTED FOR THE FOUNDATION FOR PREVIOUS GRANTS WE ARE SATISFIED THAT ALL REPORTS RECEIVED IN THE PAST FROM THIS ORGANIZATION HAVE BEEN ACCURATE                                                                                                                                                                                                                                                                                                |
| NEW LIGHT FOUNDATION                                                       | BARCO CENTENERA DEL 230 3 A CAPITAL FEDERAL AR                | 2009-10-01 | 15,000       | MEDICAL AND SHELTER NEEDS                                                                                   |                            |                           | FINAL REPORT IS PENDING     |                      | TO THE KNOWLEDGE OF THE GRANTOR, H B FULLER COMPANY FOUNDATION, THE GRANTEE HAS NOT DIVERTED ANY PORTION OF THE FUNDS (OR INCOME THERE FROM) FROM THE PURPOSE OF THE GRANT FINAL REPORT WAS DUE FEBRUARY 2011 FOLLOW-UP NOTICE WAS SENT TO JOSE MEDINA IN ARGENTINA ON MAY 26, 2011 FOLLOW-UP NOTICE WAS SENT TO MARLISE GUIER IN COSTA RICA ON JULY 17, 2012 AS OF THE FILING DATE, THE REPORT HAS NOT BEEN RECEIVED THE GRANTOR, H B FULLER COMPANY FOUNDATION, HAS NO REASON TO DOUBT THE ACCURACY OR RELIABILITY OF PREVIOUS REPORT(S) RECEIVED BOTH AN EXTERNALFINANCIAL AUDIT AND EXTERNAL PROGRAM AUDIT WERE CONDUCTED FOR THE FOUNDATION FOR PREVIOUS GRANTS WE ARE SATISFIED THAT ALL REPORTS RECEIVED IN THE PAST FROM THIS ORGANIZATION HAVE BEEN ACCURATE                                                                                                                                                     |
| ORATORIO DON BOSCO SOR MARIA ROMERO                                        | AVENIDA 9 BETWEEN CALLE 0 Y 2 NEXT TO JAPDEVA SAN JOSE CS     | 2009-10-01 | 15,000       | EDUCATIONAL PSYCHOLOGY INITIATIVE                                                                           |                            |                           | FINAL REPORT IS PENDING     |                      | TO THE KNOWLEDGE OF THE GRANTOR, H B FULLER COMPANY FOUNDATION, THE GRANTEE HAS NOT DIVERTED ANY PORTION OF THE FUNDS (OR INCOME THERE FROM) FROM THE PURPOSE OF THE GRANT FINAL REPORT WAS DUE FEBRUARY 2011 FOLLOW-UP NOTICE WAS SENT TO NATALIA CARVAJAL IN COSTA RICA ON MAY 26, 2011 WE RECEIVED WORD FROM MARLISE GUIER ON JANUARY 3, 2013 THAT THE REPORT WOULD BE HAND-DELIVERED BY A VISITING LATIN AMERICA EMPLOYEE ON JANUARY 7, 2013, BUT THE REPORT WAS NOT RECEIVED A REQUEST FOR ANOTHER COPY WAS MADE AS OF THE FILING DATE, THE REPORT IS STILL MISSING THE GRANTOR, H B FULLER COMPANY FOUNDATION, HAS NO REASON TO DOUBT THE ACCURACY OR RELIABILITY OF PREVIOUS REPORT(S) RECEIVED BOTH AN EXTERNAL FINANCIAL AUDIT AND EXTERNAL PROGRAM AUDIT WERE CONDUCTED FOR THE FOUNDATION FOR PREVIOUS GRANTS WE ARE SATISFIED THAT ALL REPORTS RECEIVED IN THE PAST FROM THIS ORGANIZATION HAVE BEEN ACCURATE |

## TY 2014 Other Expenses Schedule

**Name:** HB FULLER COMPANY FOUNDATION

**EIN:** 36-3500811

| Description        | Revenue and Expenses<br>per Books | Net Investment<br>Income | Adjusted Net Income | Disbursements for<br>Charitable Purposes |
|--------------------|-----------------------------------|--------------------------|---------------------|------------------------------------------|
| INVESTMENT EXPENSE | 2,092                             | 2,092                    |                     | 0                                        |

**TY 2014 Other Increases Schedule**

**Name:** HB FULLER COMPANY FOUNDATION

**EIN:** 36-3500811

| Description                             | Amount |
|-----------------------------------------|--------|
| CHANGE IN DEFERRED FEDERAL EXCISE TAXES | 66     |

## TY 2014 Other Liabilities Schedule

**Name:** HB FULLER COMPANY FOUNDATION

**EIN:** 36-3500811

| Description                  | Beginning of Year -<br>Book Value | End of Year - Book<br>Value |
|------------------------------|-----------------------------------|-----------------------------|
| DEFERRED TAXES               | 2,913                             | 0                           |
| FEDERAL EXCISE TAXES PAYABLE | 0                                 | 2,847                       |

## TY 2014 Other Professional Fees Schedule

**Name:** HB FULLER COMPANY FOUNDATION

**EIN:** 36-3500811

| Category              | Amount | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements for<br>Charitable<br>Purposes |
|-----------------------|--------|--------------------------|------------------------|---------------------------------------------|
| PROFESSIONAL SERVICES | 12,382 | 0                        |                        | 12,382                                      |

|                                                                                                                                   |                                                                                                                                                                                                                                                          |                             |
|-----------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|
| <div>Schedule B</div> <div>(Form 990, 990-EZ, or 990-PF)</div> <div>Department of the Treasury<br/>Internal Revenue Service</div> | <div>Schedule of Contributors</div> <div>▶ Attach to Form 990, 990-EZ, or 990-PF.</div> <div>▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a>.</div> | <div>OMB No 1545-0047</div> |
|                                                                                                                                   |                                                                                                                                                                                                                                                          | <div>2014</div>             |

|                                                                             |                                                                 |
|-----------------------------------------------------------------------------|-----------------------------------------------------------------|
| <div>Name of the organization</div> <div>HB FULLER COMPANY FOUNDATION</div> | <div>Employer identification number</div> <div>36-3500811</div> |
|-----------------------------------------------------------------------------|-----------------------------------------------------------------|

Organization type (check one)

|                                                     |                                                                                                                                                                                                                                                                                            |
|-----------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <div>Filers of:</div> <div>Form 990 or 990-EZ</div> | <div>Section:</div> <div><div><input type="checkbox"/> 501(c)( ) (enter number) organization</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation</div><div><input type="checkbox"/> 527 political organization</div></div> |
| <div>Form 990-PF</div>                              | <div><div><input checked="" type="checkbox"/> 501(c)(3) exempt private foundation</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation</div><div><input type="checkbox"/> 501(c)(3) taxable private foundation</div></div>             |

Check if your organization is covered by the **General Rule** or a **Special Rule**.  
**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

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

Special Rules

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

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

**Employer identification number**  
36-3500811

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                               | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                             |
|------------|---------------------------------------------------------------------------------|----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1          | HB FULLER COMPANY<br><hr/> PO BOX 64683<br><hr/> ST PAUL, MN 551640683<br><hr/> | \$ 675,000                 | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br><br>(Complete Part II for noncash contributions ) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                               | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                             |
|            | <hr/><br><hr/><br><hr/><br><hr/>                                                | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br><br>(Complete Part II for noncash contributions )            |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                               | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                             |
|            | <hr/><br><hr/><br><hr/><br><hr/>                                                | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br><br>(Complete Part II for noncash contributions )            |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                               | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                             |
|            | <hr/><br><hr/><br><hr/><br><hr/>                                                | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br><br>(Complete Part II for noncash contributions )            |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                               | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                             |
|            | <hr/><br><hr/><br><hr/><br><hr/>                                                | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br><br>(Complete Part II for noncash contributions )            |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                               | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                             |
|            | <hr/><br><hr/><br><hr/><br><hr/>                                                | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br><br>(Complete Part II for noncash contributions )            |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                               | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                             |
|            | <hr/><br><hr/><br><hr/><br><hr/>                                                | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br><br>(Complete Part II for noncash contributions )            |

|                                                             |                                                     |
|-------------------------------------------------------------|-----------------------------------------------------|
| <b>Name of organization</b><br>HB FULLER COMPANY FOUNDATION | <b>Employer identification number</b><br>36-3500811 |
|-------------------------------------------------------------|-----------------------------------------------------|

|                                                                                                                         |                                              |                                                |                      |
|-------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------|----------------------|
| <b>Part II</b> <b>Noncash Property</b> (see instructions) Use duplicate copies of Part II if additional space is needed |                                              |                                                |                      |
| (a) No.<br>from<br>Part I                                                                                               | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
| _____                                                                                                                   | _____<br>_____<br>_____<br>_____             | _____ \$                                       | _____                |
| (a) No.<br>from<br>Part I                                                                                               | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
| _____                                                                                                                   | _____<br>_____<br>_____<br>_____             | _____ \$                                       | _____                |
| (a) No.<br>from<br>Part I                                                                                               | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
| _____                                                                                                                   | _____<br>_____<br>_____<br>_____             | _____ \$                                       | _____                |
| (a) No.<br>from<br>Part I                                                                                               | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
| _____                                                                                                                   | _____<br>_____<br>_____<br>_____             | _____ \$                                       | _____                |
| (a) No.<br>from<br>Part I                                                                                               | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
| _____                                                                                                                   | _____<br>_____<br>_____<br>_____             | _____ \$                                       | _____                |
| (a) No.<br>from<br>Part I                                                                                               | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
| _____                                                                                                                   | _____<br>_____<br>_____<br>_____             | _____ \$                                       | _____                |
| (a) No.<br>from<br>Part I                                                                                               | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
| _____                                                                                                                   | _____<br>_____<br>_____<br>_____             | _____ \$                                       | _____                |

|                                                      |                                              |
|------------------------------------------------------|----------------------------------------------|
| Name of organization<br>HB FULLER COMPANY FOUNDATION | Employer identification number<br>36-3500811 |
|------------------------------------------------------|----------------------------------------------|

Part III

**Exclusively** religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ \_\_\_\_\_

Use duplicate copies of Part III if additional space is needed.

| (a) No.<br>from<br>Part I             | (b) Purpose of gift | (c) Use of gift                          | (d) Description of how gift is held |
|---------------------------------------|---------------------|------------------------------------------|-------------------------------------|
| —                                     | _____               | _____                                    | _____                               |
|                                       | _____               | _____                                    | _____                               |
|                                       | _____               | _____                                    | _____                               |
| (e) Transfer of gift                  |                     |                                          |                                     |
| Transferee's name, address, and ZIP 4 |                     | Relationship of transferor to transferee |                                     |
| _____                                 |                     | _____                                    |                                     |
| _____                                 |                     | _____                                    |                                     |
| _____                                 |                     | _____                                    |                                     |
| (a) No.<br>from<br>Part I             | (b) Purpose of gift | (c) Use of gift                          | (d) Description of how gift is held |
| —                                     | _____               | _____                                    | _____                               |
|                                       | _____               | _____                                    | _____                               |
|                                       | _____               | _____                                    | _____                               |
| (e) Transfer of gift                  |                     |                                          |                                     |
| Transferee's name, address, and ZIP 4 |                     | Relationship of transferor to transferee |                                     |
| _____                                 |                     | _____                                    |                                     |
| _____                                 |                     | _____                                    |                                     |
| _____                                 |                     | _____                                    |                                     |
| (a) No.<br>from<br>Part I             | (b) Purpose of gift | (c) Use of gift                          | (d) Description of how gift is held |
| —                                     | _____               | _____                                    | _____                               |
|                                       | _____               | _____                                    | _____                               |
|                                       | _____               | _____                                    | _____                               |
| (e) Transfer of gift                  |                     |                                          |                                     |
| Transferee's name, address, and ZIP 4 |                     | Relationship of transferor to transferee |                                     |
| _____                                 |                     | _____                                    |                                     |
| _____                                 |                     | _____                                    |                                     |
| _____                                 |                     | _____                                    |                                     |
| (a) No.<br>from<br>Part I             | (b) Purpose of gift | (c) Use of gift                          | (d) Description of how gift is held |
| —                                     | _____               | _____                                    | _____                               |
|                                       | _____               | _____                                    | _____                               |
|                                       | _____               | _____                                    | _____                               |
| (e) Transfer of gift                  |                     |                                          |                                     |
| Transferee's name, address, and ZIP 4 |                     | Relationship of transferor to transferee |                                     |
| _____                                 |                     | _____                                    |                                     |
| _____                                 |                     | _____                                    |                                     |
| _____                                 |                     | _____                                    |                                     |