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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Fo	r calen	dar year 2015 or tax year beginning ,	and ending					
	lame of fo				A Empi	oyer identification number		
		TED AND LORRAINE GLASRUD FAM		0004715				
_		DATION, INC		-0094715				
		d street (or P O box number if mail is not delivered to street address)  E COCHISE RD	om/suite	B Telephone number (see instructions) $480-926-0666$				
		<u> </u>						
	-	n, state or province, country, and ZIP or foreign postal code  DISE VALLEY AZ 85253-1		C If exe	mption application is pending,	check here		
			irn of a former public ch	narity	D 1 Fo	reign organizations, check he	re 🕨 📗	
		Final return Amended	return .	•	2 Fc	reign organizations meeting t	ne	
		Address change Name cha	ange			% test, check here and attach		
_	Chack	type of organization X Section 501(c)(3) exempt private	<u>`</u>	<del></del> .	E If priv	ate foundation status was term	unated under	
$\ddot{\Box}$			le private foundation			n 507(b)(1)(A), check here	▶ □	
		rket value of all assets at J Accounting method	X Cash Acc	rual	F If the	foundation is in a 60-month te	rmination	
		rear (from Part II, col (c), Other (specify)				section 507(b)(1)(B), check h	.	
	line 16)	_ 400 000	he on cash basis )		ŀ		_	
	art i	Analysis of Revenue and Expenses (The total of	(a) Revenue and		l		(d) Disbursements	
	u	amounts in columns (b), (c), and (d) may not necessarily equal	expenses per	(b) Net inv		(c) Adjusted net income	for charitable purposes	
		the amounts in column (a) (see instructions) )	books				(cash basis only)	
	1	Contributions, gifts, grants, etc , received (attach schedule)	2,559,444					
	2	Check ▶ ☐ If the foundation is <b>not</b> required to attach Sch B						
	3	Interest on savings and temporary cash investments	83		83		· · · · · · · · · · · · · · · · · · ·	
	4	Dividends and interest from securities	40,764		40,764			
	5a	Gross rents						
9	) b	Net rental income or (loss)	011 070					
ū	6a	Net gain or (loss) from sale of assets not on line 10	211,078					
Revenue	b	Gross sales price for all assets on line 6a 977, 313		2	11 070			
α	- I	Capital gain net income (from Part IV, line 2)			11,078	0		
	8	Net short-term capital gain				<u> </u>		
	9 10a	Income modifications						
	b	Gross sales less returns and allowances Less Cost of goods sold			••••••			
	C	Gross profit or (loss) (attach schedule)					——————————————————————————————————————	
	11	Other income (attach schedule) Stmt 1	220,710	2	20,710			
	12	Total. Add lines 1 through 11	3,032,079		72 <u>/</u> 635	10 mm 0	****	
あ <u>.</u>	, 13	Compensation of officers, directors, trustees, etc	0		1	くにしにことにい	20	
<b>Q</b>	14	Other employee salaries and wages			0		192	
	15	Pension plans, employee benefits			8	OCT 1 7 2016		
Z	16a	Legal fees (attach schedule)						
	, b	Accounting fees (attach schedule) Stmt 2	1,960		980	OGDEN. UT	980	
	, c	Other professional fees (attach schedule)			ــــــا			
Ħ	17	Interest						
	18	Taxes (attach schedule) (see instructions) Stmt 3	3,421		163			
<b>%</b>	19	Depreciation (attach schedule) and depletion						
Z	20	Occupancy			<del></del>			
	21	Travel, conferences, and meetings						
7	22	Printing and publications Other expenses (att sch ) Stmt 4	13,856		13,831		25	
	23	• • •	13,636		<u> </u>	_		
ţ	24	Total operating and administrative expenses.	19,237		14,974	o	1,005	
٥	25	Add lines 13 through 23 Contributions, gifts, grants paid	232,000	<del>(</del>	,,,,		232,000	
Ĉ	26	Total expenses and disbursements. Add lines 24 and 25	251,237		14,974	0		
_	27	Subtract line 26 from line 12			,			
	a l	Excess of revenue over expenses and disbursements	2,780,842					
	b	Net investment income (if negative, enter -0-)	, , , , , , , , , , , , , , , , , , , ,		57,661			
	c					0		

Page 2

Part	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	year		
	should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value		
1	Cash – non-interest-bearing					
2	Savings and temporary cash investments	355,052	75,649	75,649		
3	Accounts receivable ▶		İ			
	Less allowance for doubtful accounts ▶			<del></del>		
4	Pledges receivable ▶					
	Less allowance for doubtful accounts ▶					
5	Grants receivable					
6	Receivables due from officers, directors, trustees, and other					
-	disqualified persons (attach schedule) (see					
_	instructions)					
7	Other notes and loans receivable (att schedule) ► See Wrk 3,535,215	2 670 501	2 525 215	2 525 015		
	Less allowance for doubtful accounts ▶ 0	3,678,501	3,535,215	3,535,215		
ets 8	Inventories for sale or use					
Assets 6 8	Prepaid expenses and deferred charges		<del></del>			
	, , , ,	528,806	2 720 227	3 403 000		
b		328,808	3,732,337	3,493,099		
C	Investments – corporate bonds (attach schedule)					
11	Investments – land, buildings, and equipment basis		1			
122	Less accumulated depreciation (attach sch.)					
12	Investments – mortgage loans					
14	Investments – other (attach schedule)  Land, buildings, and equipment basis ▶					
'*	Less accumulated depreciation (attach sch )		•			
15				<del></del>		
16	Other assets (describe ► )  Total assets (to be completed by all filers – see the					
'"	instructions Also, see page 1, item I)	4,562,359	7,343,201	7,103,963		
17	Accounts payable and accrued expenses	2,002,000	7,343,201	7,203,303		
18	Grants payable					
	Deferred revenue					
Liabilities 20 21 22	Loans from officers, directors, trustees, and other disqualified persons					
G 21	Mortgages and other notes payable (attach schedule)					
⊐ <sub>22</sub>	Other liabilities (describe ► )					
23	Total liabilities (add lines 17 through 22)	0	0			
	Foundations that follow SFAS 117, check here					
Ses	and complete lines 24 through 26 and lines 30 and 31.					
24	Unrestricted	4,562,359	7,343,201			
<u>छ</u> 25	Temporarily restricted					
<u>m</u> 26	Permanently restricted					
틱	Foundations that do not follow SFAS 117, check here					
띕	and complete lines 27 through 31.					
ο 27	Capital stock, trust principal, or current funds					
28	Paid-in or capital surplus, or land, bldg, and equipment fund					
Net Assets or Fund Balan 8	Retained earnings, accumulated income, endowment, or other funds					
등 30	Total net assets or fund balances (see instructions)	4,562,359	7,343,201			
<b>Z</b> 31	Total liabilities and net assets/fund balances (see					
	instructions)	4,562,359	7,343,201			
Part						
	al net assets or fund balances at beginning of year – Part II, column (a), line 30 (mu	st agree with				
	l-of-year figure reported on prior year's return)		1	4,562,359		
	er amount from Part I, line 27a		2	2,780,842		
3 Other increases not included in line 2 (itemize) ▶ 3						
4 Add lines 1, 2, and 3						
	creases not included in line 2 (itemize)		5	T 040 005		
6 Tot	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (	b), iine 30		7,343,201		

	4
D	
Paue	

Part IV Capital Gains and	Losses for Tax on Investme	nt Income			
	ne kind(s) of property sold (e.g., real estate, use, or common stock, 200 shs MLC Co.)	(b) How a P – Pur D – Dor	hase (6)	Date acquired no , day, yr )	(d) Date sold (mo , day, yr )
<sub>1a</sub> BAIRD #7848 see a	ttached schedule	P		rious	12/31/15
	ttached schedule	P	Va	rious	12/31/15
c BAIRD #9607 see a	ttached schedule	P	Va	rious	12/31/15
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale			n or (loss) i) minus (g)
a 251,038		239	,962		11,076
ь 593,365	-	386	,250		207,115
c 132,910		140	,023		-7,113
d					
е					
Complete only for assets showing ga	in in column (h) and owned by the for	undation on 12/31/69		(I) Gains (Col	(h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis	(k) Excess of col (i)			less than -0-) or
(,,	as of 12/31/69	over col (j), if any		Losses (II	om col (h))
<u>a</u>					11,076
b				<del> </del>	207,115
С					7,113
d					
е					
2 Capital gain net income or (net capital	al loss) If gain, also enter in F				211 070
	If (loss), enter -0- in F	<del>_</del>	2		211,078
3 Net short-term capital gain or (loss) a		_			
If gain, also enter in Part I, line 8, coli	umn (c) (see instructions) If (loss), e	nter -0- in		,	211,078
Part V Qualification Unde	er Section 4940(e) for Reduce	ad Tay on Not Investme	mt Income		211,078
If section 4940(d)(2) applies, leave this parameters was the foundation liable for the section of "Yes," the foundation does not qualify under the section of the section o	4942 tax on the distributable amount		>		Yes X No
1 Enter the appropriate amount in each	n column for each year, see the instru	ctions before making any entri	es		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitat	le-use assets		(d) tribution ratio divided by col (c))
2014	232,	373 4,	780,748		0.048606
2013	221,	413 4,	677,982		0.047331
2012	219,	276 4,	564,704		0.048037
2011	167,	440 4,	469,254		0.037465
2010	7,	200 3,	409,028		0.002112
2 Total of line 1, column (d)				2	0.183551
3 Average distribution ratio for the 5-ye	ear base period – divide the total on li	ne 2 by 5, or by the			
number of years the foundation has b	peen in existence if less than 5 years			3	0.036710
4 Enter the net value of noncharitable-t	use assets for 2015 from Part X, line	5		4	4,756,068
5 Multiply line 4 by line 3				5	174,595
6 Enter 1% of net investment income (	1% of Part I, line 27b)			6	4,577
7 Add lines 5 and 6				7	179,172
8 Enter qualifying distributions from Pa		and complete that	10/ +====================================	8	233,005
If line 8 is equal to or greater than lin Part VI instructions	e 7, check the box in Part VI, line 1b,	and complete that part using a	1 170 tax rate S	ee me	

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Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)	_				
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1					
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		4,	<u>577</u>		
	here ▶ X and enter 1% of Part I, line 27b					
С	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-)			0		
3	Add lines 1 and 2		4,	<u>577</u>		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0		
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		4,	577		
6	Credits/Payments					
а	2015 estimated tax payments and 2014 overpayment credited to 2015					
b	Exempt foreign organizations – tax withheld at source					
С	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					
8	Enter any penalty for underpayment of estimated tax. Check here   X   if Form 2220 is attached   8			74		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		4,	651		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid					
11	Enter the amount of line 10 to be Credited to 2016 estimated tax ▶ Refunded ▶ 11					
Pa	rt 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		Yes	No		
	participate or intervene in any political campaign?	1a		X		
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see						
	Instructions for the definition)?					
	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					
С	c Did the foundation file Form 1120-POL for this year?					
d	ranger and the contract of the					
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					
	on foundation managers  \$					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X		
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of					
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X		
b	If "Yes," has it filed a tax return on Form 990-T for this year?  N/A	4b				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X		
	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that					
	conflict with the state law remain in the governing instrument?	6	X			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	_		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)   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? If "No," attach explanation	8b	X	ļ		
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 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"	1				
	complete Part XIV	9		X		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their					
	names and addresses Stmt 6	10	X	<u> </u>		
		Form 99	10-Pl	(2015)		

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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 2015?

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4a

X

		ND LORRAINE GLASRUD					Pa	age 6
P	art VII-B Statements Reg	arding Activities for Which For	<u>rm 4720 May Be F</u>	Required (cont	inued)	<del></del>		
5a	During the year did the foundation p	pay or incur any amount to						
	(1) Carry on propaganda, or otherw	vise attempt to influence legislation (sect	ion 4945(e))?	\ \ <b>\</b>	′es 🏋 No			
	(2) Influence the outcome of any sp	pecific public election (see section 4955)	, or to carry on,					
	directly or indirectly, any voter re	egistration drive?		<u> </u>	res X No			
	(3) Provide a grant to an individual	for travel, study, or other similar purpose	es?	\ \ \ \	es X No			
	(4) Provide a grant to an organizati	on other than a charitable, etc , organiza	ation described in		_			
	section 4945(d)(4)(A)? (see inst	tructions)		\ \\	′es 🛚 🗶 No			
	(5) Provide for any purpose other the	han religious, charitable, scientific, literar	ry, or educational					
	purposes, or for the prevention	of cruelty to children or animals?		\ <b>\</b>	′es X No			
b	If any answer is "Yes" to 5a(1)–(5),	did any of the transactions fail to qualify	under the exceptions d	lescribed in				
	Regulations section 53 4945 or in a	current notice regarding disaster assista	ance (see instructions)?	?	N/A	5b		
	Organizations relying on a current n	notice regarding disaster assistance chec	ck here		<b>▶</b>			
С	If the answer is "Yes" to question 5a	a(4), does the foundation claim exemptio	n from the tax					
	because it maintained expenditure r	esponsibility for the grant?		N/A 📗 Y	′es 🔲 No		*	
	If "Yes," attach the statement requir	red 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?			Y	′es X No			
b		pay premiums, directly or indirectly, on a	a personal benefit conti	ract?		6b		X
	If "Yes" to 6b, file Form 8870							
7a	• • •	s the foundation a party to a prohibited ta			es X No			
_ <u>p</u>		any proceeds or have any net income att			N/A	7b		
Pi	_	t Officers, Directors, Trustees,	Foundation Man	agers, Highly	Paid Employ	ees,		
	and Contractors	£ d .ki		4				
	LIST All OTHICERS, directors, trustees,	foundation managers and their comp	ensation (see instruc	tions).				
			(b) Title, and average	(c) Compensation	<ul><li>(d) Contributions to employee benefit</li></ul>	(e) Exp	ense aco	count.
	(a) Name	and address	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred		allowan	
	R 03	ET 11	G		compensation	<del> </del>		
	naron E Glasrud	Woodbury	Secretary					
	546 Sunbury Drive	MN 55125	1.00	0	0	├──		0
	eborah Lentsch	Paradise Valley	CEO					^
	032 E Cochise Road	AZ 85253	2.00	0	0	<del>                                     </del>		0
•				<u> </u>		<del></del>		
	Compensation of five highest-pai	id employees (other than those includ	ed on line 1 – see ins	tructions) If non-	o ontor	<u> </u>		
-	"NONE."	d employees (other than those moldu	ed on line 1 – see ms	tructions). It non	e, enter			
					(d) Contributions to			
	(a) Name and address of each emp	lovee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit		ense acc	
	(-)		devoted to position	(-,	plans and deferred compensation	other	allowan	ces
- NO	ONE					<u> </u>		
-11								
						<b>†</b>	-	
					<del> </del>			
Tota	Il number of other employees paid ov	er \$50,000						0

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Part VIII Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	ation Managers, Highly Paid E	mployees,
3 Five highest-paid independent contractors for professional services (see instruc	ctions). 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		<b>•</b>
Part IX-A Summary of Direct Charitable Activities	•	<del>-</del>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information su organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ich as the number of	Expenses
1 See Statement 7		
2		
3		
4		
<u>.</u>		
Part IX-B Summary of Program-Related Investments (see instruc	ctions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  1 N/A		Amount
1 N/A		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	· · · · · · · · · · · · · · · · · · ·	

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4. Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Enter 1% of Part I, line 27b (see instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

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

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233,005

228.428

4

5

Pa	art XIII Undistributed Income	e (see instructions)_	····			<u> </u>
			(a)	(b)	(c)	(d)
1	Distributable amount for 2015 from Part	XI,	Corpus	Years prior to 2014	2014	2015
	line 7					233,226
2	Undistributed income, if any, as of the e	nd of 2015				
а	Enter amount for 2014 only				231,743	
þ	Total for prior years 20 , 20	, 20	·····			
3	Excess distributions carryover, if any, to	2015				
а	From 2010					
b	From 2011					
С	From 2012					
d	From 2013					
е	From 2014					
f	Total of lines 3a through e					
4	Qualifying distributions for 2015 from Pa	ert XII,				
	line 4 ▶ \$ 233,005					
а	Applied to 2014, but not more than line 2	2a			231,743	
b	Applied to undistributed income of prior	years				
	(Election required – see instructions)					····
С	Treated as distributions out of corpus (E	lection				
	required – see instructions)	<u></u>				
d	Applied to 2015 distributable amount					1,262
е	Remaining amount distributed out of cor	pus				
5	Excess distributions carryover applied to	2015				
	(If an amount appears in column (d), the	same				
	amount must be shown in column (a))					
6	Enter the net total of each column as					
	ındicated below:					
а	Corpus Add lines 3f, 4c, and 4e Subtra	ct line 5				
b	Prior years' undistributed income Subtra	act				
	line 4b from line 2b					
С	Enter the amount of prior years' undistril	buted				
	income for which a notice of deficiency !	nas	İ			
	been issued, or on which the section 49	42(a)				
	tax has been previously assessed					
d	Subtract line 6c from line 6b Taxable					
	amount - see instructions					
е	Undistributed income for 2014 Subtract	line				
	4a from line 2a Taxable amount - see					
	instructions	<u> </u>				<del></del>
f	Undistributed income for 2015 Subtract	lines				
	4d and 5 from line 1 This amount must	be				
	distributed in 2016	<u> </u>				231,964
7	Amounts treated as distributions out of	corpus				
	to satisfy requirements imposed by sect	i				
	170(b)(1)(F) or 4942(g)(3) (Election may	/ be				
	required—see instructions)	-				······································
8	Excess distributions carryover from 201				[	
	applied on line 5 or line 7 (see instruction					
9	Excess distributions carryover to 201	6.				
	Subtract lines 7 and 8 from line 6a	ļ				
10	Analysis of line 9					
а	Excess from 2011				-	
b	Excess from 2012					
С	Excess from 2013					
d	Excess from 2014	<u> </u>				
<u>e</u>	Excess from 2015	<u>l</u>				

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

factors N/A

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Part XV Supplementary Information (continued)

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Grants and Contributions Paid During the	If recipient is an individual,			
Recipient	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
See Statement 8				
•			-	232,000
				,
			1	
		1		
		ľ		
		1		
,				
Total	<del></del>	<del>-1</del>	▶ 3a	232,00
b Approved for future payment				
N/A				
Total			▶ 3b	
				5 990 PE 105

Part X	VI-A Analysis of Income-Producing Ad			0034712	<u></u>	Faye 12
	s amounts unless otherwise indicated		ousiness income	Excluded by s	section 512, 513, or 514	
_		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
-	m service revenue		<del></del>	<del>                                     </del>		(000 monactions)
a		-				
		-	<del> </del>	<del>                                     </del>		<del>· · · </del>
		-		<del>-     -   -   -   -   -   -   -   -</del>		
			· · · · · · · · · · · · · · · · · · ·			
f		-		1		
·	es and contracts from government agencies	- \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<del></del>			
_	ership dues and assessments					-
	it on savings and temporary cash investments			14	. 83	
	nds and interest from securities		-, -	14	40,764	
5 Net rer	ntal income or (loss) from real estate					
a De	bt-financed property					
b No	t debt-financed property					
6 Net rer	ntal income or (loss) from personal property					
7 Other i	nvestment income			14	220,710	
8 Gain o	r (loss) from sales of assets other than inventory			18	211,078	
	come or (loss) from special events					
	profit or (loss) from sales of inventory			<del>                                     </del>		
	revenue a	_				
		_				
		-	· <del></del> ·			<del></del>
		-				<del></del>
e	al Add columns (b), (d), and (e)	-		0	472,635	0
	Add line 12, columns (b), (d), and (e)			<u> </u>	13	472,635
	sheet in line 13 instructions to verify calculations )				15	472,033
Part X		Accomplishme	nt of Exempt	Purposes	<del></del>	
Line No					d importantly to the	
	accomplishment of the foundation's exempt pur					ons )
<u> N/A</u>						
					<del></del>	
					<del></del>	
.=		<u> </u>				
		<del></del>	<del></del>		<del></del>	
			<del>-</del>			
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<del> · · · ·</del>						<del></del>
						<del></del>
			· · · ·		<del></del>	<del></del>
				<del></del>		
		<del></del>	-			

Part XVII	Information Reg Exempt Organiz	_	nsfers To an	d Transactio	ns and Relationships W	ith Noncharitable		
1 Did the or			e in any of the follo	lowing with any	other organization described		Yes	No
					ection 527, relating to political		103	
organizati		3. than 300tion	00 ((0)(0) 0.gu	12410113) 01 111 30	ction 327, relating to political			
•	from the reporting found	tation to a nor	ncharitable exemi	ot organization o	f			
(1) Cash				, r o . g o		1a(1	7	x
(2) Other	assets					1a(2		X
b Other tran						<u></u>	1	
	of assets to a noncharit	able exempt o	organization			1ь(1	<u>, l</u>	x
, ,	ases of assets from a ne	•	<del>-</del>	on	•	1b(2		X
	l of facilities, equipment					1b(3		X
(4) Reimb	oursement arrangement	S				1b(4		X
(5) Loans	or loan guarantees					1b(5	<u> </u>	X_
(6) Perfor	mance of services or m	embership or	fundraising solici	tations		1b(6	<u>)                                     </u>	X
•	f facilities, equipment, m	•	•			1c		<u> </u>
d If the ansv	ver to any of the above i	s "Yes," comp	olete the following	ş schedule Colu	mn (b) should always show the	fair market		
	•	-	-	-	the foundation received less that			
					the goods, other assets, or sen			
(a) Line no	(b) Amount involved	(c) Name	of noncharitable exemp	pt organization	(d) Description of transfers,	transactions, and sharing arrangen	nents	
N/A								
		<b>_</b>						
	<del>-  </del>	<del> </del>	<del>,</del>	<del></del>				
	+	<del> </del>						
		<del> </del>						
		<del> </del>		<del></del>				
		<del>                                     </del>	··					
		<del> </del>			-	· · · · · · · · · · · · · · · · · · ·		
				-				
						-		
	-							
							,	
described	ndation directly or indirect in section 501(c) of the omplete the following so (a) Name of organization	Code (other t		c)(3)) or in sectio	on 527?	ription of relationship	Yes X	No
N/A						· · · · · · · · · · · · · · · · · · ·		
				on all information of	edules and statements, and to the best of which preparer has any knowledge	May the IRS discuss this with the preparer shown	return	No
/     Sign	gnature of officer or trustee		3	Date				
Paid	Type preparer's name	_		Preparer's signatu	$\bigcirc$	Date, 9/22//	Check self-en	f mployed
reparer -	cy M. Rasmusse		utler, G	erlach &	y <u>Comuser c</u> /Brazil, LTD	100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>	
Jse Only			arkway,			PTIN		
l Film,			N 55116		· ·	Phone no 651-6	90-1	040
L	<u> </u>	·aur, M	<u> </u>				90-P	
						Form 3	,3U-P	(2015)

**Schedule B** (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

THE TED AND LORRAINE GLASRUD FAMILY

### **Schedule of Contributors**

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

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

OMB No 1545-0047

Employer identification number

2015

FOUNDATION,	INC	30-0094715			
Organization type (chec	ck one)				
Filers of:	Section:				
Form 990 or 990-EZ	501(c)( ) (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	527 political organization				
Form 990-PF	<b>X</b> 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
Note. Only a section 5010 instructions	n is covered by the <b>General Rule</b> or a <b>Special Rule</b> . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special	l Rule See			
General Rule					
	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totali ey or property) from any one contributor. Complete Parts I and II. See instructions for def I contributions				
Special Rules					
regulations under 13, 16a, or 16b, a	ion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> / <sub>3</sub> % support sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ and that received from any one contributor, during the year, total contributions of the great of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete F	<sup>r</sup> ), Part II, line eater of <b>(1)</b>			
contributor, during	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.					
990-EZ, or 990-PF), but it	n that is not covered by the General Rule and/or the Special Rules does not file Schedule it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its I s 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-	Form 990-EZ or on its			

Page 1 of 1

Page 2

Name of organization

**Employer identification number** 

THE TED AND LORRAINE GLASRUD FAMILY 30-0094715 Contributors (see instructions) Use duplicate copies of Part I if additional space is needed Part I (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 1 LORRAINE GLASRUD IRA BENEFICIARY X Person 5032 EAST COCHISE ROAD Payroll 2,559,444 X Noncash AZ 85253 PARADISE VALLEY (Complete Part II for noncash contributions) (b) (d) (a) (c) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person **Payroll** \$ Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person Payroll Noncash \$ (Complete Part II for noncash contributions) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person Payroll \$ Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Type of contribution **Total contributions** Person Payroll \$ Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person **Payroll** \$ Noncash (Complete Part II for noncash contributions)

Page 3

Page 1 of 1

Name of organization THE TED AND LORRAINE GLASRUD FAMILY Employer identification number 30-0094715

Part II	Noncash Property (see instructions). Use duplicate	copies of Part II if additional s	pace is needed
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	LORRAINE GLASRUD IRA BENEFICAIRY		
		\$ 2,136,983	08/19/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		, \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

### GLASRUD THE TED AND LORRAINE GLASRUD FAMILY 30-0094715 Federal Statements

FYE: 12/31/2015

### Statement 1 - Form 8868, Part II, Line 7 - Explanation for Extension

### Description

An attempt to obtain information necessary for filing a return was requested in a timely fashion, but the information was not furnished in sufficient time to permit the timely filing of the return, or the taxpayer personally visited an IRS office for the purpose of securing information or advice and was unable to meet with an IRS representative.

Form	990-PF			d Loans Receiv		2015
<u>.                                    </u>		For calendar year 201	5, or tax year beginnii	ng		
Name THE	TED AND	LORRAINE GLASI	VITMATE OILS		E	mployer Identification Number
		INC	NOD FAMILI		3	0-0094715
For	m 990-PF,	Part II, Line	⊋ 7 - Addit	ional Inform	ation	
	201722222	Name of borrower			Relationship to disqual	fied person
	ROMISSORY	NOTE ASSIGNME	ENTS			
(2) (3)						· · · · · · · · · · · · · · · · · · ·
(4)						
(5)		<del></del>				
(6)						
(7)						
(8)				<u> </u>		
(9)	· · · · · · · · · · · · · · · · · · ·	<del></del>	<del> </del>			
(10)						······
	Original amour borrowed	nt Date of loan	Maturity date	F	Repayment terms	Interest rate
(1)				•		
(2)						
(3)						
(4)	<del>.</del>					
(5)						
<u>(6)</u>	-					
(7) (8)		Î	+			
(9)						
(10)				, , , , ,		
	Se	curity provided by borrower			Purpose of loa	n
(1)			-			
(2)						
(3) (4)						<del></del>
(5)						
(6)		-				
(7)						
(8)						
<u>(9)</u>		<u> </u>	<u>-</u>			
(10)					<del></del>	
		······································				
	Consider	ration furnished by lender		Balance due at beginning of year	Balance due at end of year	Fair market value
(1)	001101001	acon farmened by fortage	·	3,678,501	3,535,21	5 3,535,215
(2)						
<u>(3)</u>						
(4)				<del></del>		
<u>(5)</u>						
<u>(6)</u>						
(7) (8)		<del> </del>	<del></del>			
(9)			<del></del>			
(10)						
Totals	· · · · · · · · · · · · · · · · · · ·			3,678,501	3,535,21	5 3,535,215

	FYE: 12/31/2015
Federal St	30-0094715
JD FAMILY	GLASRUD THE TED AND LORRAINE GLASRUD FAMII

### Federal Statements

er Income	
- Oth	
Line 11	
Part I,	
990-PF, P	
- Form	
Statement 1	

Adjusted Net Income	Charitable Purpose \$ 980	Charitable Purpose	Charitable Purpose \$ 25
Net Investment Income \$ 220,710 \$ 220,710	Adjusted Net	Adjusted Net	Adjusted Net
Revenue per Books \$ 220,710 \$ 220,710	Net   Net   Adjust   Net   N	Net lnvestment 163 163	rm 990-PF, Part I, Line 23 - Other Expenses  Net Net Investment \$ 13,831 13,831 13,856 \$ 13,856 \$ 13,831 \$  13,856
	Statement 2 - Form 990-PF,    Total	Statement 3 - Form 990-PF  Total  \$ 3,258 \$ \$ 3,258 \$ \$ \$ 3,421 \$	\$ Total \$ 25 13,831 \$ \$ 13,856
Description PROMISSORY NOTE INTEREST Total	Description ACCOUNTING FEES Total	Description FEDERAL TAX FOREIGN TAX Total	Expenses MN FILING FEE INVESTMENT MANAGEMENT FEE Total

## GLASRUD THE TED AND LORRAINE GLASRUD FAMILY 30-0094715 FYE: 12/31/2015

vestments
rporate Stock li
, Line 10b - Co
990-PF, Part II
statement 5 - Form

Description	Beginning of Year	End of Year	Basis of Valuation	T.	Fair Market Value
ACE LTD 300SH AT&T INC 1010 SH	v.	\$ 32,847	Cost	<u>۸</u>	35,055 34,754 36.381
IN TOWER CORP 5 INC 400 SH	49,170 42,885 50,307	) -	Cost Cost Cost		
ENECA PLC 695 C NEW 650 SH	•	22,341 28,060	Cost		23,595 25,103
COMPANY 12 MYERS SQU NIA RESOUR	32,117	6,81	Cost Cost		7,35
S SH NC 1	, <sub>1</sub> ,	35,777 33,395	Cost Cost		36,434 32,586
CONOCOPHILIPS 615 SH CORNING INC 645 SH	0.78	3,56 1,16	Cost		8,71 1,79
50 SH 50 SH 50RS 285		7,99 3,61 2,47	Cost Cost Cost		7,26 0,29 2,21
CO 1 C 550		34,691 27,903 22,396 22,288	Cost Cost Cost		38,470 27,150 21,708 23,943
IASE IASE ISON	47,186	7,45 6,47 8,30	Cost Cost Cost		1,929,03
500 SH I & CO 285 SH T INTL 800 SH	23,057	2,60	Cost Cost Cost		4,01
MERCK & CO 665 SH METLIFE INC 580 SH MICROSOFT CORP 715 SH NEXTERA ENERGY 330 SH		33,526 28,095 33,454 33,573	$\omega$ $\omega$ $\omega$		35,125 27,962 39,668 34,284
INC 500 SH MORRIS INTL	36,414	33,830	Cost		5,16

## GLASRUD THE TED AND LORRAINE GLASRUD FAMILY 30-0094715 FYE: 12/31/2015

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Line 10b - Corporate Sto
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Beginning End of Basis of Fair Market of Year Year Valuation Value	\$ 33,598 Co 33,765 Co 33,716 Co	22, 488 Co		30,000 22,455 Cost 22,421 33,669 Cost 35,062 27,985 Cost 27,552	200,822 Cost 177,712 84,700 178,696 Cost 67,327 67,327 67,327 67,327 67,320 145,170 Cost 157,890 67,320 145,170 Cost 157,890 67,320 145,170 Cost 162,159 Cost 162,159 Cost 102,129 52,295 Cost 109,596 Cost 111,430 113,011 Cost 111,430 1155,753 Cost 102,720 99,310 Cost 102,720 99,310 Cost 102,720 42,300 Cost 26,996 61,860 Cost 246 61,8
Description	PEIZER INC 1010 SH RAYTHEON COMPANY 300 SH ROYAL DUTCH SHELL 605 SH	STARBUCKS CORP 300 SH STARBUCKS CORP 300 SH SYMANTEC CORP 1075 SH	70 SH	VF CORF 600 SH VODAFONE GROUP PLC 695 SH WELLS FARGO & CO 645 SH WELLTOWER INC 405 SH	AETNA INC 1643.655 SH AMERICAN AIRLINES 2000 SH APPLE INC 1500 SH BANK OF AMERICA 4000 SH CONOCOPHILLIPS 2857.776 SH COSTCO WHOLESALE 1000 SH DEERE & COMPANY 1000 SH FACEBOOK 500SH FREEPORT MCMORAN 10000 SH GILEAD SCIENCES INC GLAXOSMITHKLINE 2531.089 SH GOLDCORP INC 4000 SH HONEYWELL 1075.891 SH INTERNATIONAL PAPER 2114.245 SH JOHNSON&JOHNSON 1000 SH KKR & COMPANY 2000 SH LEHMAN BROTHERS HLDGS 1636.41 SH MARATHON OIL CORP 2144.232 SH MELCRO CROWN ENT 3000 SH MERCR & COMPANY 800 SH

### GLASRUD THE TED AND LORRAINE GLASRUD FAMILY 20\_0004715 30-0094715

FYE: 12/31/2015

# Statement 5 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments (continued)

		3eginning		End of	Basis of	Ÿ	air Market
Description		of Year		Year	Valuation		Value
PEPSICO CO 820.296 SH	\ \ \		ጭ	81,201	Cost	৵	81,964
RITE AID CORP 5000 SH				43,600	Cost		39,200
STARBUCKS CORP 4500 SH	-			252,411	Cost		270,135
VERITIV CORP 40 SH				1,436	Cost		1,449
VERIZON COMM 1000 SH				50,464	Cost		46,220
WHITING PETROLEUM 2800 SH				49,644	Cost		26,432
Total	w.	528,806	ۍ ه	3,732,337		\$	3,493,099

### Statement 6 - Form 990-PF, Part VII-A, Line 10 - Substantial Contributors

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Address	COCHISE ROAD
	BENEFICAIRY 5032 EAST
	IRA
	GLASRUD
	LORRAINE

PARADISE VALLEY AZ 85253-1068

City, State, Zip

### GLASRUD THE TED AND LORRAINE GLASRUD FAMILY 30-0094715 Federal Statements

FYE: 12/31/2015

### Statement 7 - Form 990-PF, Part IX-A, Line 1 - Summary of Direct Charitable Activities

### Description

The Ted and Lorraine Glasrud Family Foundation solicits and reviews grant applications associated with the charitable goals and interest of the members of the Foundation.

### GLASRUD THE TED AND LORRAINE GLASRUD FAMILY 30-0094715

FYE: 12/31/2015

# Statement 8 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Name	Address			
Address	Relationship	Status	Purpose	Amount
BIG BROTHERS BIG SISTERS	1700 KIRK ROAD	~	HEALTH AND HIMAN SERVICES	10.000
BOYS AND GIRLS CLUBS	PO BOX 910			
HOBE SOUND FL 33475	501C(3)	3)	HEALTH AND HUMAN SERVICES	10,000
	1220 FIRST AVE NE			7
CEDAR RAPIDS IA 52402	501(C)(3)	(3)	EDUCATION	10,000
COURAGE CENTER MINNEAPOLIS MN 55422	3915 GOLDEN VALLET 5010(3)	r KOAD	HEALTH AND HIMAN SERVICES	5.000
CRETIN-DERHAM HALL	550 SOUTH ALBERT	STREET		
ST PAUL MN 55116	501C(	3)	EDUCATION	15,000
DOGS FOR LIFE, INC	1230 16TH AVENUE			•
VERO BEACH FL 32960	3	(3) Pater	HEALTH AND HUMAN SERVICES	4,500
ENCHANTED EVENING PROJECT	3124 W ROIAL OANS DR. 501 (C) (3)	URI (E)	HEALTH AND HIMAN SERVICES	4.000
FLORIDA OCEANOGRAPHIC SOCIETY	890 NE OCEAN BLVD	()		
STUART FL 34996		(3)	ENVIRONMENTAL STEWARDSHIP	10,000
HIBISCUS CHILDREN'S CENTER	2400 NE DIXIE HIGHWAY	HWAY		
JENSEN BEACH FL 34957		(3)	HEALTH & HUMAN SERVICES	8,000
KEYSTONE COMMUNITY SERVICES	2000 ST ANTHONY AVE	VE		1
ST PAUL MN 55104		(3)	HEALTH AND HUMAN SERVICES	15,000
MARTIN MEMORIAL FOUNDATION	P.O. BOX 9010			1
STUART FL 34995	50	<u>8</u>	HEALTH AND HUMAN SERVICES	15,000
MILK & HONEY MISSIONS, INC	F.U. BUA 231488	(3)	HEALTH AND HIMAN SERVICES	10 000
MOODBORI MA SOLES	4434 SE CLECKLEY WAY	WAY	William Chil	
		(3)	HEALTH & HUMAN SERVICES	2,000
MOLLY'S HOUSE	430 SE OSCEOLA STREET	REET		
.L 34994	501C(3)	3)	HEALTH AND HUMAN SERVICES	10,000
NORTHERN STAR COUNCIL, BSA	393 MARSHALL AVENUE	UE (2)	HINDING COLOR	
ST PAUL MN 55102 Oben cifies dealth Center	(S) (D) TOS (S) (A) (A) (S) (A) (A) (A) (A) (A) (A) (A) (A) (A) (A	(S) SE	IOOID DEVELOPMENI	TO,000
ST. PAUL MN 55104	501 (	(3)	HEALTH & HUMAN SERVICES	2,000
PRO YOUTH HEART	505 NORTH COURT ST	STREET.	YOUTH DEVELOPMENT	15.000
VISALIA CA JOZUL	)			

GLASRUD THE TED AND LORRAINE GLASRUD FAMILY 30-0094715

FYE: 12/31/2015

# Statement 8 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name	Add	Address	Ţ	
Address	Relationship	Status	Purpose	Amount
SAVE THE MANATEE CLUB	500 N. MAITL	MAITLAND AVE.		
MAITLAND FL 32751	.,	501(C)(3)	ENVIRONMENTAL STEWARDSHIP	4,500
STUART SAILFISH CLUB KIDS TOURNAME		UCIE BLVD		
STUART FL 34997	501(C)(3)	501(C)(3)	YOUTH DEVELOPMENT	8,000
THE CASTLE	3525 WEST MIDWAY ROAD	DWAY ROAD		
FORT PIERCE FL 34981	4)	501(C)(3)	YOUTH DEVELOPMENT	2,000
THE LIBRARY FOUNDA OF MARTIN COUNTY 2351 SEW MONTEREY ROAD	2351 SEW MON	TEREY ROAD		
STUART FL 34996	υ,	501(C)(3)	EDUCATION	10,000
TELLURIDE AVALANCHE DOGS	PO BOX 1398			
TELLURIDE CO 81'435	4,	501(C)(3)	HEALTH AND HUMAN SERVICES	5,000
TWIN CITIES PUBLIC TELEVISION	172 EAST FOURTH STREET	RTH STREET		
SAINT PAUL MN 55101	υ,	501C(3)	EDUCATION	10,000
TYKES AND TEENS	3577 SW CORPORATE PARKWAY	ORATE PARKWP	×	
PALM CITY FL 34990	Δ,	501(C)(3)	HEALTH AND HUMAN SERVICES	8,000
WHITE BEAR LAKE AREA EDUCATION FOUN	FOUN 4855 BLOOM AVENUE	VENUE		
WHITE BEAR LAKE MN 55110	.,	501C(3)	EDUCATION	20,000
Total				232,000

### TED & LORRAINE GLASRUD FAMILY FOUNDATION INC C/O DEBBIE LENTSCH

Statement Period JANUARY 1 - DECEMBER 31, 2015 Account Number: 6267-7848 IK69

ACTIVITY DETAILS continued			S	SUBACCOUNT ACTIVITY continued	IVITY continued	} 3
Date Activity	Quantity	Price Description	Total	Cash	Money Market	Margin
12/21/15 Mny Mkt Deposit		INSURED DEPOSIT US BANK		-568.70	568 70	
12/30/15 Dividend		TRAVELERS COMPANIES INC	164 70	164.70		
12/31/15 Interest	}	INSURED DEPOSIT US BANK	2 83	2 83		
12/31/15 Mny Mkt Deposit		INSURED DEPOSIT US BANK		-2.83	2.83	
12/31/15 Mny Mkt Deposit		INSURED DEPOSIT US BANK		-164.70	164.70	
Closing Balance	27 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Total Closing Balance \$63,935.56	.56	00'0\$	\$63,935.56	\$0.00

# This section presents estimated realized gains or losses for your information only, and should not be used for tax purposes. To calculate gains or losses, the position with the highest purchase price has been liquidated first unless you have instructed us otherwise. We suggest you review this information for accuracy and contact your Baird Financial Advisor with any questions.

REALIZED GAINS/(-)LOSSES

	Date	Date	4	Purchase	Sale	Cost	Sale	Realized
Stocks/Options	neumbor	2000	Coanney	DOLL.	boil L	SISBO	spanol.	Gairr(-)/L033
AMERICAN TOWER CORP NEW	08/20/14 c 06/05/15	/05/15	200	98.0245	93.1091	49,169.75	46,396 19	-2,773.56(ST)
AMGEN INC	07/23/13c 10	/12/15	400	106.9432	152.0425	42,884.78	60,815.88	17,931 10(LT)
APPLE INC	08/20/14 c 10	/12/15	200	100 2990	111 9000	50,307.00	55,948 97	5,641.97 (LT)
BRISTOL MYERS SQUIBB CO	08/15/12c 10	/12/15	1,000	31.9100	61 4201	32,117.50	61,418 96	29,301 46(LT)
CALIFORNIA RES CORP	03/02/12 c 08	/13/15	120	9 0775	3 9900	1,093.05	427.15	-665 90 (LT)
	03/04/13 c 08	/13/15	120	7 0673	3.9900	851.82	427.17	-424 65 (LT)
			240			1,944 87	854 32	-1,090.55
CELGENE CORP	04/11/14c 06/05/15	/05/15	009	68 4227	110 4176	41,178 12	66,091.84	24,913 72(LT)
COSTCO WHOLESALE CORP	07/19/11c 10	/12/15	300	80 1459	153 3408	24,151.27	46,001 38	21,850 11(LT)
	03/02/12 c 10	/12/15	200	86 0559	153 3408	17,318 68	30,667 60	13,348 92 (LT)
			200			41,469.95	76,668 98	35,199 03
WALT DISNEY CO	08/26/15c 10	/12/15	200	96 4652	105 7603	48,390.10	52,879.17	4,489 07(ST)
HOME DEPOT INC	09/14/15c 10	/12/15	300	114.6260	121 8504	34,495 30	36,554,44	2,059 14(ST)
JPMORGAN CHASE & COMPANY	03/06/14 c 10	/12/15	165	58 8482	61 6813	9,732.13	10,177.22	445 09 (LT)
KROGER COMPANY	01/07/15c 10	/12/15	1,600	32.3852	38 3001	51,973 90	61,279.03	9,305 13(ST)
L BRANDS INC	03/02/12 c 06/05/15	/05/15	205	46 2399	86 3732	9,552 64	17,598.68	8,046.04 (LT)
L BRANDS INC	03/02/12 c 10	/12/15	95	46.2399	96 5992	4,426 83	9,176 75	4,749 92 (LT)
	03/04/13 c 10	/12/15	200	44.8499	96.5992	9,077 48	19,319 48	10,242 00 (LT)
			295			13,504 31	28,496 23	14,991 92
MARRIOTT INTL INC NEW A	10/23/14 c 08/26/15	/26/15	800	69 7188	67.6098	55,932 54	53,929 34	-2,003 20(ST)
PEPSICO INC	05/09/11 c 10	/12/15	300	69 8059	99.8901	21,049.27	29,966 47	8,917 20(LT)
	03/04/13 c 10	/12/15	200	76 2869	99 8901	15,364 88	19,977 66	4,612.78(LT)
			200			36,414 15	49,944 13	13,529 98
STARBUCKS CORP	06/20/12 c 10/12/15	/12/15	1,000	27.8098	60.3901	27,967,35	86 886'09	32,421.63(LT)
	03/06/14 c 10/12/15	/12/15	009	36 6079	60 3901	22,072 24	36,233 40	14,161.16(LT)
			1,600			50,039 59	96,622 38	46,582 79
TORONTO DOMINION BK NEW	04/07/09 n 06/05/15	/05/15	200	18 0450	43.5664	3,716.50	8,660 61	4,944 11 (LT)
	03/08/11 c 06	/05/15	400	43 0380	43 5664	17,322 70	17,321 24	-1.46 (LT)
			009			21,039 20	25,981 85	4,942 65

### TED & LORRAINE GLASRUD FAMILY FOUNDATION INC C/O DEBBIE LENTSCH

Statement Period: JANUARY 1 - DECEMBER 31, 2015 Account Number: 6267-7848 IK69



REALIZED GAINS/(-)LOSSES continued	nued							
	Date	Date		Purchase	Sale	Cost	Sale	Realized
	Acquired	Sold	Quantity	Pnce	Pnce	Basis	Proceeds	Gam/(-)Loss*
Stocks/Options continued								
VECORP	03/06/14 c 10/12/15	10/12/15	900	59 9754	71.2436	36,065.86	42,745.37	6,679 51 (LT)
V Total Stocks/Options 2 Section 2015	The Later Later	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2)	1 1 1 1 1 1 1 1	£25.7 m. 1	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	\$844,402.98	\$218,191.29

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\$218,191.2	\$11,076.5
/Total Realized Gains/(-)Losses - \$218,191.29 \$218,191.29	**Total Net Short-Term (ST)
\$84	\$28
\$626,211.69	\$239,961.59
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- Please note "Realized Gain/(-)Loss" does not equal total sale proceeds minus total cost basis if any cost basis amounts are missing
  Covered Tax Lot The cost basis, holding period and sale proceeds on this tax lot will be reported by Baird to the IRS for taxable (reportable) accounts.
  Noncovered Tax Lot The cost basis and holding period on this tax lot will not be reported by Baird to the IRS The sale proceeds will be reported to the IRS for taxable (reportable) accounts. Cost information is being supplied for informational purposes only

### INTERESTED PARTIES AND/OR SUPPORTING REPRESENTATIVE(S)

Your Supporting Representative(s) is (are)

ROBERT W BAIRD & CO INC ADVISORY SERVICES

Visit our Web site at www rwbaird.com. Clients enrolled in Baird OnLine can access updated Account Information, Baird Research and Investing Tools including the latest market information, portfolio tracking and more Please contact your Baird Financial Advisor with questions regarding Baird OnLine, your account or this statement. Thank you for allowing Robert W. Baird & Co. Incorporated to serve you.

### TED & LORRAINE GLASRUD FAMILY FOUNDATION INC ACCT #2 C/O DEBBIE LENTSCH

Statement Period JANUARY 1 - DECEMBER 31, 2015 Account Number: 6569-9607 IK69



Expense Category Expense Code This Penod

Year-to-Date Pct of Total

\$52,500.00 \_ \$52,500.00

Cash Management Expense Summary

If your MasterCard® Debit Card is lost or stolen, IMMEDIATELY call toll-free (888) 792-7526

For calls placed internationally, please call collect (701) 461-0621.

### REALIZED GAINS/(-)LOSSES

This section presents estimated realized gains or losses for your information only, and should not be used for tax purposes. To calculate gains or losses, the position with the highest purchase price has been liquidated first unless you have instructed us otherwise. We suggest you review this information for accuracy and contact your Baird Financial Advisor with any questions.

	Date Acquired	Date Sold	Quantity	Purchase Pnce	Sale Pnce	Cost Basis	Sale Proceeds	Realized Gain/(-)Loss*
Stocks/Options					- 1			
AETNA INC NEW	08/19/15c 11	127/15	200	122 1800		61,090.00	51,823 03	-9,266 97(ST)
MOLYCORP INC DE	08/19/15c 09/02/	1/05/15	4,500	0.1430		643 50	442.44	-201 06(ST)
PEPSICO INC	08/19/15c 11/27/	127/15	200	98.9900	100.8115	49,494.98	49,997.32	502 34(ST)
STARBUCKS CORP	08/19/15c 11/27/	127/15	200	57.5900	ı	28,795.00	30,646.97	1,851.97(ST)
Total Stocks/Options		,		****		\$140,023.48	\$132,909.76	\$7,113.72

3.72	\$140,023.48 \$132,909.76 \$7,113.72 \$0.00 \$ \$0.00 \$ \$0.00 \$ \$0.00
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- Please note "Realized Gain/(-)Loss" does not equal total sale proceeds minus total cost basis if any cost basis amounts are missing.
- Covered Tax Lot The cost basis, holding period and sale proceeds on this tax lot will be reported by Baird to the IRS for taxable (reportable) accounts

Thank you for allowing Robert W. Baird & Co Incorporated to serve you

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GLASRUD THE TED AND LORRAINE GLASRUD FAMILY **Federal Statements** 30-0094715 FYE: 12/31/2015 **Taxable Interest on Investments** Unrelated Exclusion Postal US Description Amount Business Code Code Code Obs (\$ or %) 51 14 MN BAIRD #7848 \$ BAIRD #9607 32 14 MN 83 Total **Taxable Dividends from Securities** US Unrelated **Exclusion Postal** Description Amount Business Code Code Code Obs (\$ or %) 20,031 14 MN BAIRD #7848 20,733 BAIRD #9607 14 MN 40,764 Total Other Investment Income Unrelated Exclusion Postal Description Amount **Business Code** Code Code PROMISSORY NOTE INTEREST 220,710 14 MN 220,710 Total