

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



### DLN: 93491255001536

OMB No 1545-0052

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 <u>www.irs.gov/form990pf</u>.

For	caler	ndar year 2015, or tax y	ear beginning 01-0	1-2015	, ar	nd ending 1	2-31-2015	
	e of four	ndation JNDATION				A Employer ide	entification numbe	er
Jin	IKISTO	SNDALION				41-1742700		
		street (or P O box number if mail is no	ot delivered to street address)	Room/suite		<b>B</b> Telephone nun	nber (see instruction	s)
16	60 SHWY	' 100 PARKDALE PLAZA NO 426				(952) 512-1165		
		state or province, country, and ZIP or RK, MN 55416	foreign postal code			<b>C</b> If exemption	application is pendin	g, check here 🕨 🦵
<u> </u>								
<b>G</b> Cr	теск ап	that apply   Initial return   Final return   Address change	☐ Initial return of a fo ☐ A mended return e ☐ Name change	ormer public charity		2. Foreign or	ganizations, check hoganizations meeting k here and attach co	the 85%
		pe of organization				E If private fou	ndation status was to 507(b)(1)(A), chec	erminated
			JAccounting method		1	F If the founda	tion is in a 60-mont	n termination
of	ear <i>(fr</i>	om Part II. col. (c).	Other (specify)	be on cash basıs.)			n 507(b)(1)(B), chec	. —
Part I  Analysis of Revenue and Expense: (The total of amounts in columns (b), (c), and (d) manecessarily equal the amounts in column (a) (see instructions))		), (c), and (d) may not	Revenue and expenses per (a) books	(b)	Net investment income	Adjusted net (c) income	Disbursements for charitable purposes (d) (cash basis only)	
	1	Contributions, gifts, grants, et	c , received (attach					
		schedule)		266,177				
	2	Check ► ☐ If the foundation is Sch B	s <b>not</b> required to attach					
Revenue	3	Interest on savings and tempor	orary cash investments	74,700		74,700		
	4	Dividends and interest from se		256,843		256,843		
	5a	Gross rents						
	b	Net rental income or (loss)						
	6a	Net gain or (loss) from sale of	assets not on line 10	950,419				
	b	Gross sales price for all asset	s on line 6a					
ŭ	7	Capital gain net income (from	Part IV, line 2)			950,419		
	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 s	-					
	11	Other income (attach schedule			ļ	-4,801		
	12	Total.Add lines 1 through 11		2,104,095	<del>                                     </del>	1,277,161		
	13	Compensation of officers, dire		0		0		0
	14 15	Other employee salaries and we Pension plans, employee bene	_					
Š	16a	Legal fees (attach schedule).						
Expenses	ь	Accounting fees (attach sched		95, 217,612		217,612		0
Ex	°	Other professional fees (attac		3				
and Administrative	17	Interest						
rat	18	Taxes (attach schedule) (see		<b>%</b> 41,235		21,210		25
Ę.	19	Depreciation (attach schedule	•	,		·		
를	20	Occupancy						
Ą	21	Travel, conferences, and meet						
gug	22	Printing and publications	_					
	23	Other expenses (attach sched	lule)	1,288		1,288		0
atır	24	Total operating and administra	ative expenses.					
Operating		Add lines 13 through 23		260,135		240,110		25
0	25	Contributions, gifts, grants pa	ıd	831,830				831,830
	26	Total expenses and disburseme	ents.Add lines 24 and	1,091,965		240,110		831,855
	27	Subtract line 26 from line 12		1,031,303		240,110		031,033
	a	Excess of revenue over expens	ses and disbursements	1,012,130				
	ь	Net investment income (if neg				1,037,051		
	с	Adjusted net income(if negative	ve, enter - 0 - )					

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column 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	1	, ,	. ,
	2	Savings and temporary cash investments	3,309,455	1,174,544	1,174,544
	3	Accounts receivable 🟲			
		Less allowance for doubtful accounts 🟲			
	4	Pledges receivable 🟲			
		Less allowance for doubtful accounts 🟲			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	O ther notes and loans receivable (attach schedule) 🟲			
		Less allowance for doubtful accounts 🟲			
	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U S and state government obligations (attach schedule)			
	ь	Investments—corporate stock (attach schedule)	19,896	19,896	1,089,082
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis 🕨			
		Less accumulated depreciation (attach schedule) -			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	14,245,347	17,392,389	14,531,845
	14	Land, buildings, and equipment basis 🟲			
		Less accumulated depreciation (attach schedule) -			
	15	Other assets (describe 🟲)			
	16	<b>Total assets</b> (to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	17,574,699	18,586,829	16,795,471
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ě	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>6</u>	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe 🟲)			
	23	Total liabilities(add lines 17 through 22)	0	0	
J,		Foundations that follow SFAS 117, check here 🕨 🦵			
ġ		and complete lines 24 through 26 and lines 30 and 31.			
Balance	24	Unrestricted			
g	25	Temporarily restricted			
Fund	26	Permanently restricted			
∄		Foundations that do not follow SFAS 117, check here 🕨 🔽			
ō		and complete lines 27 through 31.			
왍	27	Capital stock, trust principal, or current funds	7,674,413	7,674,413	
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	9,900,286	10,912,416	
ĕ	30	Total net assets or fund balances (see instructions)	17,574,699	18,586,829	
	31	Total liabilities and net assets/fund balances(see instructions)	17,574,699	18,586,829	
Pa	rt III			<del>, , , , , , , , , , , , , , , , , , , </del>	
1		Total net assets or fund balances at beginning of year—Part II, column	· · · · ·		
		with end-of-year figure reported on prior year's return)		<del></del>	17,574,699
2		Enter amount from Part I, line 27a		<del></del>	1,012,130
3		Other increases not included in line 2 (itemize)			0
4		Add lines 1, 2, and 3			18,586,829
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)—P	art II column (b) li	ne 30. l <b>6</b> l	18.586.829

Part IV Capital Gains and Losses for Tax on Investment Income

		the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs	•	How acquired P—Purchase (b) D—Donation	1/6	Date acquired (mo , day, yr )	Date sold (d) (mo , day, yr )	
1a	See Additional Data	Table		(b) B Bonacion				
b								
С								
d								
(e) Gross sales price		Depreciation allowe <b>(f)</b> (or allowable)	Depreciation allowed Cost (f) (or allowable) (g) plus e			Gain or (loss) (h) (e) plus (f) minus (g)		
<u>а</u>	See Additional Data		(g) pius	expense of sale		(11) (2) pius	(1) 1111142 (9)	
<u></u>					+			
d					+			
					+			
e				12/21/60				
	implete only for assets	showing gain in column (h) and owne Adjusted basis	· 1	ess of col (1)		•	(h) gain minus ot less than -0-) <b>or</b>	
(i)	FMV as of 12/31/69	(j) as of 12/31/69		rcol (j), if any	(1)		(from col (h))	
а	See Additional Data							
b								
С								
d					+			
3	Net short-term capit If gain, also enter in in Part I, line 8	me or (net capital loss) { al gain or (loss) as defined in sectio Part I, line 8, column (c) (see instru	ctions) If (loss), e	nn Part I , line 7 )  nter -0 -	. 3	3	950,419	
	tional use by domestic	Jnder Section 4940(e) for Reprivate foundations subject to the se						
Nas the f "Yes,	," the foundation does n	eave this part blank e section 4942 tax on the distribut: ot qualify under section 4940(e) Do unt in each column for each year, so	o not complete this	part		?	┌ Yes ┌ No	
	(a) e period years Calendar or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncha	rıtable-use assets		(d) Distributio (col (b) divided	n ratio	
	2014	733,262		17,072,975			0 042949	
	2013	672,839		16,012,824			0 042019	
	2012	605,615		14,339,152			0 042235	
	2011	628,399		14,283,851			0 043994	
	2010	475,025		12,893,414			0 036842	
2		n (d)		<b>—</b>	2		0 208039	
3	the number of years	ratio for the 5-year base period—di the foundation has been in existence	e ıf less than 5 yea	rs	3		0 041608	
4		f noncharitable-use assets for 2015	•	_	4		17,050,259	
5		e 3		<u> </u>	5		709,427	
6	Enter 1% of net inve	stment income (1% of Part I, line 2	7b)		6		10,371	
7	Add lines 5 and 6.			[	7		719,798	

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

831,855

ĽŒΙ	Excise Tax based on Investment Income (Section 4940(a), 4940(b), 49		, UI 4340—SC	e pag	C 10 01	rue ins	LIUCLIO	'IIS)	
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			ļ					
	(attach copy of letter if necessary-see instructions)			ĺ					
b	Domestic foundations that meet the section 4940(e) requirements in Part V,			ļ	1			1(	371
	here 🟲 🔽 and enter 1% of Part I, line 27b			•					
С	All other domestic foundations enter $2\%$ of line $27b$ Exempt foreign organiza Part I, line $12$ , col (b)	itions e	enter 4% of						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)								
3	Add lines 1 and 2			•	3			1 (	371
4	Subtitle A (income) tax (domestic section $4947(a)(1)$ trusts and taxable four enter -0-)	ndation	is only Othe	ers	4				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, en	nter - 0			5			1(	0,371
6	Credits/Payments								
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	2	7,275					
b	Exempt foreign organizations—tax withheld at source	6b							
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				7			2	7,275
8	Enter any <b>penalty</b> for underpayment of estimated tax Check here if Form 2	220 is	attached		8				
9	Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed .			•	9				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount	t overp	paid	Þ	10			16	5,904
11		.6,904	Refunded	<u> </u>	11				0
Par	t VII-A Statements Regarding Activities								
1a	During the tax year, did the foundation attempt to influence any national, state	, or loc	al legislatio	n or d	ıd			Yes	No
	it participate or intervene in any political campaign?						1a	igwdown	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for p		-	see Ir	ıstructı	ions	l		
	for definition)?					Ē	1b		No
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities	ana co	pies of any n	nateria	iis				
_	published or distributed by the foundation in connection with the activities.  Did the foundation file Form 1120-POL for this year?						1c		No
	Enter the amount (if any) of tax on political expenditures (section 4955) impos	• •	· · · ·			•	10		NO
u	(1) On the foundation $\Rightarrow$ \$ 0 (2) On foundation managers			0					
e	Enter the reimbursement (if any) paid by the foundation during the year for poli				nosed				
	on foundation managers $\blacktriangleright$ \$0	icicui c	xpendicure c	ux 1111	Josea				
2	Has the foundation engaged in any activities that have not previously been rep	orted	to the IRS?				2		No
_	If "Yes," attach a detailed description of the activities.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					_		
3	Has the foundation made any changes, not previously reported to the IRS, in it	ts nove	rnına instru	ment	article	s			
_	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a confo	_	=	-		· 	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more di						4a		No
ь	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?						4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction dur						5		No
	If "Yes," attach the statement required by General Instruction T.	_							
6	Are the requirements of section 508(e) (relating to sections 4941 through 49-	45)sa	tisfied eithe	r					
	<ul> <li>By language in the governing instrument, or</li> <li>By state legislation that effectively amends the governing instrument so the</li> </ul>	at no n	oandatory di	roctio	nc				
							6	Yes	
7	that conflict with the state law remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year?						•	res	
7	and Part XV.		· · · · ·	• •			7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (s	see ins	tructions)						
	►MN								
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99	90-PF	to the Attori	ney					
	General (or designate) of each state as required by General Instruction G? If $^\prime$	"No," at	tach explana	tion .			8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the n		_						
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see	ee inst	ructions for	Part >	(IV)?				
	If "Yes," complete Part XIV						9	$\longmapsto$	No
10	Did any persons become substantial contributors during the tax year? If "Yes,"			_					
	and addresses.						10	1 1	No

Par	t 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 ► <u>N/A</u>			
14	The books are in care of ►JOANNE KLETSCHER Telephone no ►(952	2)512	-1165	
	Located at ▶1660 S HWY 100 STE 426 ST LOUIS PARK MN ZIP+4 ▶55416			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here		▶ □	-
	and enter the amount of tax-exempt interest received or accrued during the year	•	- ,	
			1	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	مد ا	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		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			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			т
	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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	-		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(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 )			
ь	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
_	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
Ī	that were not corrected before the first day of the tax year beginning in 2015?	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))			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2015? Yes V No			
	If "Yes," list the years ▶ 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		
C	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	► 20, 20, 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2015 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 2015.)	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 2015?	4b		No

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))?  Yes								
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?								
	· No							
(2) Influence the outcome of any specific public election (see section 4955), or to carry								
on, directly or indirectly, any voter registration drive?	- No							
(3) Provide a grant to an individual for travel, study, or other similar purposes?								
(4) Provide a grant to an organization other than a charitable, etc., organization described								
in section 4945(d)(4)(A)? (see instructions)	· No							
(5) Provide for any purpose other than religious, charitable, scientific, literary, or								
educational purposes, or for the prevention of cruelty to children or animals? <b>Yes</b>	· No							
<b>b</b> If any answer is "Yes" to $5a(1)-(5)$ , did <b>any</b> 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							
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?	- No							
If "Yes," attach the statement required by Regulations section 53.4945–5(d).								
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on								
a personal benefit contract?	· No							
<b>b</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.								
·	. No							
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	140							
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes • b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?								
b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?  Information About Officers, Directors, Trustees, Foundation Managers, Highly	. 7b							
b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?  Part VIII  Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors	. 7b							
b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?  Part VIII  Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors  List all officers, directors, trustees, foundation managers and their compensation (see instructions).	. 7b							
b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?  Part VIII  Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  Title and average (c) Compensation(If (d)	. 7b Paid Employees,							
b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  Title, and average hours per week hours per	. 7b							
Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors  List all officers, directors, trustees, foundation managers and their compensation (see instructions).  Title, and average hours per week not naid enter.	Paid Employees,  Expense account,							
Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  Title, and average hours per week (b) devoted to position  DIRECTOR  O  O  O  O  O  O  O  O  O  O  O  O	Paid Employees,  Expense account,							
Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  Title, and average hours per week (b) devoted to position  (b) devoted to position  DIRECTOR  O  O  O  O  O  O  O  O  O  O  O  O	Expense account,  (e) other allowances							
Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  Title, and average hours per week (b) devoted to position  (b) devoted to position  DIRECTOR  O  O  O  O  O  O  O  O  O  O  O  O	Expense account,  (e) other allowances							
Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  (b) devoted to position  DIRECTOR  O OO  WAYZATA, MN 55391	Expense account, (e) other allowances							
Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors  List all officers, directors, trustees, foundation managers and their compensation (see instructions).  Title, and average hours per week (b) devoted to position  DIRECTOR  DIRECTOR  O OO  Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, er	. 7b Paid Employees,  Expense account, (e) other allowances  0							
Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  (b) devoted to position  DIRECTOR  DIRECTOR  O  Contributions to employee benefit plans and deferred compensation  DIRECTOR  O  Compensation  O  Contributions to employee benefit plans and deferred compensation  Title, and average (b) devoted to position  Title, and average (c) Compensation  O  Contributions to employee benefit plans and deferred compensation  Title, and average (c) Compensation  Contributions to employee benefit plans and deferred compensation  Title, and average (c) Compensation  Contributions to employee benefit	Expense account, (e) other allowances  0  nter "NONE."							
Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  (b) devoted to position  DIRECTOR  DIRECTOR  O OO  Contributions to employee benefit plans and deferred compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, end of the plans and deferred compensation (a)  Name and address of each employee paid more than \$50,000  (b) devoted to position  Title, and average hours per week (c) Compensation  Contributions to employee benefit plans and deferred compensation (a)  Title, and average hours per week (c) Compensation (c) Compensation (d)  Contributions to employee benefit plans and deferred compensation (d)	. 7b Paid Employees,  Expense account, (e) other allowances  0							
Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  Title, and average hours per week (b) devoted to position  DIRECTOR  OUCY B HARTWELL  Title, and average hours per week (c) Compensation  Title, and average hours per week (c) Compensation  Title, and average hours per week hours per week hours per week (c) Compensation	Expense account, (e) other allowances  0  nter "NONE."							
Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  Title, and average hours per week (b) devoted to position  DIRECTOR  DIRECTOR  DIRECTOR  O  Contributions to employee benefit plans and deferred compensation  AWAYZATA, MN 55391  Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, error of the hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (c) Compensation (d) co	Expense account, (e) other allowances  0  nter "NONE."							
Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  Title, and average hours per week (b) devoted to position  DIRECTOR  DIRECTOR  DIRECTOR  O  Contributions to employee benefit plans and deferred compensation  AWAYZATA, MN 55391  Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, error of the hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (c) Compensation (d) co	Expense account, (e) other allowances  0  nter "NONE."							
Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  Title, and average hours per week (b) devoted to position  DIRECTOR  DIRECTOR  DIRECTOR  O  Contributions to employee benefit plans and deferred compensation  AWAYZATA, MN 55391  Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, error of the hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (c) Compensation (d) co	Expense account, (e) other allowances  0  nter "NONE."							
Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  Title, and average hours per week (b) devoted to position  DIRECTOR  DIRECTOR  DIRECTOR  O  Contributions to employee benefit plans and deferred compensation  AWAYZATA, MN 55391  Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, error of the hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (c) Compensation (d) co	Expense account, (e) other allowances  0  nter "NONE."							
Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  Title, and average hours per week (b) devoted to position  DIRECTOR  DIRECTOR  DIRECTOR  O  Contributions to employee benefit plans and deferred compensation  AWAYZATA, MN 55391  Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, error of the hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (c) Compensation (d) co	Expense account, (e) other allowances  0  ter "NONE."							
Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  Title, and average hours per week (b) devoted to position  DIRECTOR  DIRECTOR  DIRECTOR  O  Contributions to employee benefit plans and deferred compensation  AWAYZATA, MN 55391  Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, error of the hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (c) Compensation (d) co	Expense account, (e) other allowances  0  nter "NONE."							
Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  Title, and average hours per week (b) devoted to position  DIRECTOR  DIRECTOR  DIRECTOR  O  Contributions to employee benefit plans and deferred compensation  AWAYZATA, MN 55391  Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, error of the hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (c) Compensation (d) co	Expense account, (e) other allowances  0  nter "NONE."							
Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  Title, and average hours per week (b) devoted to position  DIRECTOR  DIRECTOR  DIRECTOR  O  Contributions to employee benefit plans and deferred compensation  AWAYZATA, MN 55391  Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, error of the hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (c) Compensation (d) co	Expense account, (e) other allowances  0  nter "NONE."							
Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  Title, and average hours per week (b) devoted to position  DIRECTOR  DIRECTOR  DIRECTOR  O  Contributions to employee benefit plans and deferred compensation  AWAYZATA, MN 55391  Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, error of the hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (b) devoted to position  Title, and average hours per week (c) Compensation (d) co	Expense account, (e) other allowances  0  nter "NONE."							

	(see instructions). If none, enter "NO!	VE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	<b>、</b>	
otal number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
st the foundation's four largest direct charitable activities during the tax year Include re rganizations and other beneficiaries served, conferences convened, research papers pro		er of Expenses
1	duced, etc	
2		
3		
4		
Part IX-B Summary of Program-Related Investments	•	
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during	•	Amount
Part IX-B Summary of Program-Related Investments	•	A mount
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during	•	Amount
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during	•	A mount
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during  1	•	A mount
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during  1  2	•	Amount
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during  1  2  All other program-related investments See instructions	•	Amount
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during  1  2	•	Amount

Pa	(All domestic foundations must complete this part. Foreign foundations, see instruction	s.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	<u> </u>	
	purposes		
а	A verage monthly fair market value of securities	1a	15,321,111
b	A verage of monthly cash balances	1b	1,988,797
c	Fair market value of all other assets (see instructions)	1c	0
d	<b>Total</b> (add lines 1a, b, and c)	1d	17,309,908
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	17,309,908
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	259,649
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	17,050,259
6	Minimum investment return. Enter 5% of line 5	6	852,513
Pai	t XI  Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cer check here ► □ and do not complete this part.)	rtaın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	852,513
2a	Tax on investment income for 2015 from Part VI, line 5 2a 10,371		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	10,371
3	Distributable amount before adjustments Subtract line 2c from line 1	3	842,142
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	842,142
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	842,142
	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	4-	024.055
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	831,855
	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	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
ь	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	831,855
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	10,371
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	821,484
	<b>Note:</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the	roundation qualifies for

-	art XIIII Undistributed Income (see insti	ructions)			
		<b>(a)</b> Corpus	(b) Years prior to 2014	<b>(c)</b> 2014	<b>(d)</b> 2015
1	Distributable amount for 2015 from Part XI, line 7				842,142
2	Undistributed income, if any, as of the end of 2015				
а	Enter amount for 2014 only			828,920	
b	Total for prior years 20, 20, 20		0		
3	Excess distributions carryover, if any, to 2015				
a	From 2010				
	From 2011				
c	From 2012				
	From 2013				
e	From 2014				
	Total of lines 3a through e		0		
	Qualifying distributions for 2015 from Part				
Ī	XII, line 4 🕨 \$ 831,855				
а	Applied to 2014, but not more than line 2a			828,920	
	Applied to undistributed income of prior years		0	·	
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)		0		
d	Applied to 2015 distributable amount				2,935
е	Remaining amount distributed out of corpus		0		
5	Excess distributions carryover applied to 2015		0		0
	(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 indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5		0		
	Prior years' undistributed income Subtract		0		
	line 4b from line 2b				
С	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		
_	Undistributed income for 2014 Subtract line				
_	4a from line 2a Taxable amount—see				
	instructions			0	
f	Undistributed income for 2016 Subtract				
	lines 4d and 5 from line 1 This amount must				020 207
	be distributed in 2015				839,207
7	A mounts 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)		o o		
Ω	Excess distributions carryover from 2010 not				
Ü	applied on line 5 or line 7 (see instructions)		0		
9	Excess distributions carryover to 2016.				
_	Subtract lines 7 and 8 from line 6a		0		
10	Analysis of line 9				
а	Excess from 2011				
b	Excess from 2012				
c	Excess from 2013				
d	Excess from 2014				
е	Excess from 2015				

	District On suction Formula		. at a a a a a d Da ut	LV/TT A SUSSELECT	- 0\	Page II
	art XIV Private Operating Foundat	·			1 9)	
1a	If the foundation has received a ruling or detern					
	foundation, and the ruling is effective for 2015,		_			
	Check box to indicate whether the organization		ting foundation de		4942(j)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for each	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(-)
	year listed					
ь	35% of line 2a					
c	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used					
	directly for active conduct of exempt					
_	activities					
е	Qualifying distributions made directly for active conduct of exempt activities					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying					
	under section 4942(j)(3)(B)(i)			1		
b	"Endowment" alternative test— enter 2/3					
	of minimum investment return shown in Part X, line 6 for each year listed					
r	"Support" alternative test—enter		1	1		
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments					
	on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(III)					
	(3) Largest amount of support					
	from an exempt organization					
	(4) Gross investment income					
Pa	rt XV Supplementary Information (			ne organizatio	n had \$5,000 o	r more in
	assets at any time during the	year—see ins	tructions.)			
L a	<b>Information Regarding Foundation Managers:</b> List any managers of the foundation who have c	ontributed more th	nan 2% of the tota	al contributions red	reived by the found	ation
_	before the close of any tax year (but only if they					acion
	, , , ,		' '		. , , , ,	
b	List any managers of the foundation who own 10				large portion of th	e
	ownership of a partnership or other entity) of wh	nich the foundation	n has a 10% or gr	eater interest		
2	Information Regarding Contribution, Grant, Gif	t, Loan, Scholarshi	ip, etc., Programs:			
	Check here ► If the foundation only makes co	ontributions to pre	selected charitab	le organizations ar	nd does not accept	
	unsolicited requests for funds If the foundation	makes gifts, gran				
	other conditions, complete items 2a, b, c, and d	I				
а	The name, address, and telephone number or e	-mail address of t	he person to whon	n applications sho	uld be addressed	
	LUCY B HARTWELL					
	1660 S HWY 100 SUITE 426					
	ST LOUIS PARK, MN 55416					
	(952) 512-1165					
b	The form in which applications should be subm			•		
	PAST AND PRESENT INFORMATION ABOUT	THE APPLICAN	T, BUDGET, PRO	JECTIONS, USE C	F FUNDS, OTHER	FUND RAISING
	EFFORTS, TAX EXEMPTION LETTER, ETC					
C	Any submission deadlines					
	NONE					
d	Any restrictions or limitations on awards, such	as by geographic	al areas, charitab	le fields, kinds of i	nstitutions, or othe	r
	factors					
	NONE					

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 831,830 **b** Approved for future payment

Form 990-PF (2015)  Part XVI-A Analysis of Income-Produc	ing Activitie	s			Page <b>12</b>
Enter gross amounts unless otherwise indicated					(e) Related or exempt function income
1 Program service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	(See Instructions )
a b					
c d					
e					
<b>f</b> g Fees and contracts from government agencies					
<ul><li>2 Membership dues and assessments</li><li>3 Interest on savings and temporary cash investments</li></ul>			14	74,700	
<ul><li>4 Dividends and interest from securities</li><li>5 Net rental income or (loss) from real estate</li></ul>			14	256,843	
<ul><li>a Debt-financed property.</li><li>b Not debt-financed property.</li></ul>					
6 Net rental income or (loss) from personal property					
<b>7</b> Other investment income			14	555,956	
8 Gain or (loss) from sales of assets other than inventory			18	950,419	
<ul><li>9 Net income or (loss) from special events</li><li>0 Gross profit or (loss) from sales of inventory</li></ul>					
.1 Other revenue a					
b					
d					
2 Subtotal Add columns (b), (d), and (e).  3 Total.Add line 12, columns (b), (d), and (e).		0		1,837,918 13	
(See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities to		plishment of E	xempt Purpos	es	
Line No. Explain below how each activity for whe the accomplishment of the foundation's instructions )	ıch ıncome ıs re	ported ın column (	e) of Part XVI-A c	ontributed importa	

Part	XVII	■ Information Re Noncharitable					sactio	ns and I	Relationships	With			
		ganization directly or ii	ndırectly e	engage	ın any of	the following wi						Yes	No
orga	nızatı	ons?											
<b>a</b> Tran	sfers	from the reporting four	dation to	a noncl	harıtable (	exempt organiz	zatıon of						
(1)	Cash										1a(1)		No
(2)	Other	rassets									1a(2)		No
<b>b</b> O the	er trar	sactions											
(1)	Sales	of assets to a noncha	rıtable exe	empt or	ganızatıo	n					1b(1)		No
(2)	Purch	nases of assets from a	noncharit	able ex	empt orga	nnızatıon					1b(2)		No
(3)	Renta	ıl of facılıtıes, equipme	nt, or othe	rasset	s						1b(3)		No
(4)	Reıml	bursement arrangemen	ts								1b(4)		No
(5)	Loans	s or loan guarantees.									1b(5)		No
		nance of services or m									1b(6)		No
		facılıtıes, equipment, i									1c		No
of th	e goo ny tran	wer to any of the above ds, other assets, or se nsaction or sharing arra (b) Amount involved	rvices giv angement	en by tl , show i	he reportı n column	ng foundation	If the fou of the go	undation r ods, other	eceived less thai	n fair marke ces receive	et value ed		ıtc.
(a) Line		(b) Amount involved	(C) Name	OI HOHEH	antable exe	impt organization	(u)	Description	or transfers, transact	tions, and she	illing arrai	igenten	11.5
							ļ						
desc	rıbed	ndation directly or indii in section 501(c) of the complete the following s (a) Name of organization	e Code (d schedule		an sectio		r ın sectı			ption of relati	. 「Ye	s 🔽	No
Sign Here	the l	er penalties of perjury, pest of my knowledge a mation of which prepar ******	nd belief, er has any	ıt ıs tru	ie, correct		e Declar			May t return with t below	r) is bas he IRS dis he prepar	ed on scuss th er show	all ıs ın
		Print/Type preparer's JOANNE KLETSCH		Prepa	rer's Sıgn	ature	Date		Check if self- employed ▶	PTIN P	010844	98	
Paid Prepa Use Only	rer	Firm's name ► BURR OAK GROUP IN							Firm's EIN ► 4	1-183487	8		
-···,		_							Phone no				

### Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	Date acquired (c) (mo , day, yr )	(d) Date sold (mo , day, yr )
POCKET LLC	Р		
EVERGREEN TAX ADVANTAGED FUND	Р		
EVERGREEN TAX ADVANTAGED FUND	Р		
EVERGREEN TAX ADVANTAGED FUND	Р		
EVERGREEN SMALLCAP FUND II	Р		
EVERGREEN SMALLCAP FUND II	Р		
EVERGREEN SMALLCAP FUND II	Р		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) ( <b>h)</b> (e) plus (f) minus (g)
			16,070
			50,396
			10,377
			17,263
			-8,584
			55,308
			85
			-5,603
			89,881
			7

### Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus
(i) F M V as of 12/31/69	A djusted basıs <b>(j)</b> as of 12/31/69	Excess of col (1) <b>(k)</b> over col (1), if any	col (k), but not less than -0-) or (I) Losses (from col (h))
			16,070
			50,396
			10,377
			17,263
			-8,584
			55,308
			85
			-5,603
			89,881
			7

### Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	Date acquired (c) (mo , day, yr )	<b>(d)</b> Date sold (mo , day, yr )
EVERGREEN SMALLCAP FUND	Р		
EVERGREEN SMALLCAP FUND	Р		
EVERGREEN SMALLCAP FUND	Р		
LARGE CAP CORE	Р		
LARGE CAP CORE	Р		
421 3642 EVERGREEN LARGECAP CORE	Р	2015-04-30	2015-04-30
280 9095 EVERGREEN LARGECAP CORE	Р	2015-04-30	2015-05-31
410 3229 EVERGREEN LARGECAP CORE	Р		2015-05-31
40 0662 EVERGREEN SMALLCAP FUND	Р		2015-04-30
25 5337 EVERGREEN SMALLCAP FUND II	Р	1998-04-27	2015-04-30

### Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) <b>(h)</b> (e) plus (f) minus (g)
			-9,444
			68,630
			137
			-25,470
			497,772
900,000		900,000	0
609,584		608,584	1,000
890,416		794,734	95,682
130,000		81,459	48,541
150,000		101,629	48,371

### Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

Complete only for assets showing gain in column (h) and owned by the foundation on $12/31/69$			Gains (Col (h) gain minus
(i) F M V as of 12/31/69	A djusted basis (j) as of 12/31/69	Excess of col (1) (k) over col (j), if any	col (k), but not less than -0-) <b>or</b> (I) Losses (from col (h))
			-9,444
			68,630
			137
			-25,470
			497,772
			0
			1,000
			95,682
			48,541
			48,371

# 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	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
ACES 1115 E HENNEPIN MINNEAPOLIS, MN 55414		PUBLIC CHARITY	IMPROVE PUBLIC EDUCATION	10,000
ASCENSION CATHOLIC SCHOOL 1723 BRYANT AVENUE NORTH MINNEAPOLIS,MN 55411		PUBLIC CHARITY	TEACH CHRISTIAN FAITH	15,000
AUDUBON MINNESOTA 2357 VENTURA DRIVE STE 106 WOODBURY,MN 55125		PUBLIC CHARITY	CONSERVATION	10,000
BANYAN COMMUNITY 2647 BLOOMINGTON AVENUE SOUTH MINNEAPOLIS,MN 55407		PUBLIC CHARITY	TRANSFORM LIVES BY DEVELOPING YOUTH, STRENGTHENING FAMILIES, AND CREATING COMMUNITY	3,000
BEACON INTERFAITH HOUSING COLLABORATIVE 2610 UNIVERSITY AVENUE WEST ST PAUL, MN 55114		PUBLIC CHARITY	SOLUTION TO HOMELESSNESS IN COMMUNITIES AND CREATE AFFORDABLE HOUSING	5,000
BELWIN 1660 S HWY 100 SUITE 426 ST LOUIS PARK, MN 55416		PUBLIC CHARITY	IN MINNESOTA INSPIRE CONNECTION TO NATURAL WORLD	25,330
BEYOND WALLS 3808 LYNDALE AVE S MINNEAPOLIS, MN 55408		PUBLIC CHARITY	HEALTHY DEVELOPMENTDEVELOP AN INTENSIVE PROGRAM THAT COMBINES SQUASH PLAYING, ACADEMIC TUTORING, AND COMMUNITY SERVICE	5,000
BLAKE-LEARNING WORKS SDS 12-2577 PO BOX 86 MINNEAPOLIS,MN 554862577		PUBLIC CHARITY	EDUCATION	5,000
BOLDER OPTIONS 2100 STEVENS AVENUE MINNEAPOLIS,MN 55404		PUBLIC CHARITY	HEALTHY YOUTH DEVELOPMENT	15,000
CENTER FOR VICTIMS OF TORTURE 717 EAST RIVE ROAD MINNEAPOLIS, MN 55455		PUBLIC CHARITY	DIRECT CARE FOR THOSE TORTURED IN U S AND AROUND THE WORLD AND END TORTORE WORLD WIDE	15,000
CHILDREN AND NATURE NETWORK 808 14TH AVENUE SE MINNEAPOLIS, MN 55414		PUBLIC CHARITY	CONNECT ALL CHILDREN, THEIR FAMILIES AND COMMUNITIES TO NATURE THROUGH INNOVATIVE IDEAS	5,000
COLLEGE POSSIBLE 450 N SYNDICATE STREET SUITE 325 ST PAUL, MN 55104		PUBLIC CHARITY	ENABLE COLLEGE CAPABLE LOW INCOME STUDENTS OPPORTUNITY TO ATTEND COLLEGE	25,000
CONSERVATION MINNESOTA 1101 W RIVER PKWY 250 MINNEAPOLIS, MN 55415		PUBLIC CHARITY	CONSERVATION OF LAND AND LAKES	10,000
EDUCATORS 4 EXCELLENCE 333 WEST 39TH STREET SUITE 702 NEW YORK,NY 10018		PUBLIC CHARITY	TEACHER LED ORGANIZATION WORKS TO ENSURE THAT THE VOICES OF THE CLASSROOM TEACHERS INCLUDED IN CREATION OF POLICIES	15,000
FIRESFLY SISTERHOOD 5775 WAYZATA BOULEVARD SUITE 700 MINNEAPOLIS,MN 55416		PUBLIC CHARITY	CONNECT WOMEN DIAGNOSED WITH BREAST CANCER OFFER SUPPORT, GUIDANCE AND HOPE	5,000
Total				831,830

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

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	A mount
<b>a</b> Paid during the year	or substantial contributor			
FOUNDATION OF CHILDREN'S HOSPITALS AND CLINICS 2525 CHICAGO AVENUE MINNEAPOLIS, MN 554044518		PUBLIC CHARITY	CHAMPION HEALTH NEEDS OF CHILDREN AND FAMILIES	1,000
FRIENDSHIP ACADEMY OF THE ARTS 2600 EAST 38TH STREET MINNEAPOLIS, MN 55406		PUBLIC CHARITY	EDUCATE CHILDREN TO BE CONFIDENT, CREATIVE AND COMPETENT CITIZENS	2,500
GLOBAL RIGHTS FOR WOMEN 80 SOUTH 8TH STREET SUITE 4200 MINNEAPOLIS,MN 55402		PUBLIC CHARITY	DEDICATED TO PROMOTING WOMEN'S HUMAN RIGHTS INTERNATIONALLY	3,000
HIAWATHA ACADEMIES 3810 E 56TH STREET MINNEAPOLIS, MN 55417		PUBLIC CHARITY	EMPOWERED WITH KNOWLEDGE, CHARACTER, LEADERSHIP SKILLS TO GRADUATE FROM COLLEGE AND SERVE THE COMMON GOOD	25,000
HOPE COMMUNITY 611 EAST FRANKLIN AVENUE MINNEAPOLIS, MN 55404		PUBLIC CHARITY	TURNING ABANDONED SPACES INTO HOMES FOR FAMILIES IN NEED	1,500
INNERCITY TENNIS 4005 NICOLLET AVENUE SOUTH MINNEAPOLIS, MN 55409		PUBLIC CHARITY	FOSTER DEVELOPMENT OF CITIZENSHIP SCHOLARSHIP AND FAIR PLAY	1,000
INTERFAITH OUTREACH 1605 COUNTY ROAD 101 NORTH PLYMOUTH, MN 55447		PUBLIC CHARITY	ENCOURAGE YOUTH, FOOD SHELF, NEEDS IN COMMUNITY, FUND HOUSING PROJECTS	85,000
KIPP MINNESOTA 1601 LAUREL AVENUE MINNEAPOLIS,MN 55403		PUBLIC CHARITY	FREE OPEN ENROLLMENT COLLEGE PREPATORY SCHOOLS IN UNDER RESOURCED COMMUNITIES	10,000
LAND TRUST ALLIANCE 1331 H STREET NW SUITE 400 WASHINGTON,DC 200054734		PUBLIC CHARITY	PROMOTES VOLUNTARY LAND CONSERVATION	5,000
MD ANDERSON CANCER CENTER 1515 HOLCOMBE BLVD HOUSTON,TX 77030		PUBLIC CHARITY	EXCEPTIONAL RESEARCH AND MEDICAL CARE FOR CANCER PATIENTS	5,000
MICROGRANTS 1035 EAST FRANKLIN AVENUE MINNEAPOLIS, MN 55404		PUBLIC CHARITY	CONNECT AFFLUENT WITH LOW INCOME INDIVIDUALS TO HELP BECOME SELF SUFFICIENT	7,000
MINNCAN 287 EAST SIXTH STREET STE 513 ST PAUL, MN 55101		PUBLIC CHARITY	EDUCATION REFORM ADVOCACY	7,500
MINNEAPOLIS COLLEGE PREPARATORY SCHOOL 2131 NORTH 12TH AVENUE MINNEAPOLIS,MN 55411		PUBLIC CHARITY	PREPARATORY EDUCATION	25,000
MINNEAPOLIS FOUNDATION - EDUCATION TRANSFORMATION INITIATIVE FUND 80 SOUTH 8TH STREET SUITE 800 MINNEAPOLIS, MN 55402		PUBLIC CHARITY	COMMITTED TO IMPROVING EDUCATION, ESPECIALLY FOR LOW-INCOME CHILDREN AND CHILDREN OF COLOR	34,000
MINNESOTA LAND TRUST 2356 UNIVERSITY AVENUE WEST SUITE 240 ST PAUL, MN 55114		PUBLIC CHARITY	PROTECT OPEN SPACE IN MINNESOTA	15,000
Total			▶ 3a	831,830

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

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
a Paid during the year				
NONVIOLENT PEACEFORCE 425 OACK GROVE STREET MINNEAPOLIS, MN 55403		PUBLIC CHARITY	SERVES TO PROMOTE DEVELOP AND IMPLEMENT UNARMED CIVILIAN PEACEKEEPING AS A TOOL FOR REDUCING VIOLENCE AND PROTECTING CIVILIANS IN SIUTATIONS OF VIOLENT CONFLICT	3,000
NORTHEAST COLLEGE PREPATORY SCHOOL 2511 TAYLOR STREET NE MINNEAPOLIS,MN 55418		PUBLIC CHARITY	PREPARING EACH STUDENT FOR COLLEGE GRADUATION AND CAREER SUCCESS	50,000
NORTHSIDE ACHIEVEMENT ZONE 1200 WEST BROADWAY AVE SUITE 250 MINNEAPOLIS,MN 55411		PUBLIC CHARITY	BUILD CULTURE OF ACHIEVEMENT SO ALL YOUTH GRADUATE COLLEGE READY	25,000
OPPORTUNITY INTERNATIONAL 12625 HIGH BLUFF DRIVE SUITE 111 SAN DIEGO,CA 92130		PUBLIC CHARITY	HELP POOR BREAK CYCLE POVERTY PROVIDE FINANCIAL ASSISTANCE	5,000
PATHWAYS 3115 HENNEPIN AVENUE MINNEAPOLIS,MN 55408		PUBLIC CHARITY	PROVIDE RESOURCES AND SERVICES FOR PEOPLE WITH LIFE-THREATENING ILLNESS	5,000
PEOPLE INCORPORATED 2060 CENTRE POINTE BOULEVARD - SUITE 3 ST PAUL, MN 55120		PUBLIC CHARITY	PROMOTE HOPE AND INDEPENDENCE FOR PEOPLE WITH MENTAL ILLNESS	12,500
PHILLIPS EYE INSTITUTE FOUNDATION 2215 PARK AVENUE - SUITE 202 MINNEAPOLIS,MN 55404		PUBLIC CHARITY	EYE CARE NEEDS	10,000
PLAYWORKS MINNESOTA 1885 UNIVERSITY AVENUE WEST - SUITE 211 ST PAUL, MN 55104		PUBLIC CHARITY	LEVERAGING THE POWER OF PLAY TO TRANSFORM CHILDREN'S PHYSICAL AND EMOTIONAL HEALTH	5,000
POSITIVE COACHING ALLIANCE 1001 N RENGSTORFF AVE SUITE 100 MOUNTAIN VIEW, CA 94043		PUBLIC CHARITY	PROVIDE YOUTH ATHLETES A POSITIVE CHARACTER BUIDLING YOUTH SPORTS EXPERIENCE	10,000
PRODEO ACADEMY 1555 40TH AVENUE NE MINNEAPOLIS,MN 55421		PUBLIC CHARITY	COLLEGE PREPARATORY SCHOOL	22,500
PROJECT FOR PRIDE IN LIVING 1035 EAST FRANKLIN AVENUE MINNEAPOLIS, MN 554042929		PUBLIC CHARITY	WORK WITH FAMILIES IN TWIN CITIES METOR TO ACHIEVE GREATER SELF SUFFICIENCY	20,000
PROJECT SUCCESS ONE GROVELAND TERRACE - SUITE 300 MINNEAPOLIS,MN 55403		PUBLIC CHARITY	TO MOTIVATE AND INSPIRE YOUNG PEOPLE AND GIVE THEM THE TOOLS TO ACHIEVE THERE GOALS	50,000
STUDENTS TODAY LEADERS FOREVER 619 SOUTH 10TH STREET SUITE L10 MINNEAPOLIS,MN 55404		PUBLIC CHARITY	REVEAL LEADERSHIP THROUGH SECURE RELATIONSHIPS AND ACTION	7,500
SUMMITT ACADAMY 935 OLSON MEMORIAL HIGHWAY MINNEAPOLIS,MN 55405		PUBLIC CHARITY	EDUCATION AND VOCATIONAL TRAINING ECONOMICALLY DEPRESSED NEIGHBORHOODS	25,000
TEACH FOR AMERICA 315 WEST 36TH STREET 7TH FLOOR NEWYORK,NY 10018		PUBLIC CHARITY	RECENT COLLEGE GRADS TEACH TO EFFECT CHANGE IN UNDE RESOURCED URBAN AND RURAL AREAS	10,000
Total			▶ 3a	831,830

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

Recipient	If recipient is an individual,	Foundation	Purpose of grant or	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
TEFSA INTERNATIONAL SCHOOL 1745 UNIVERSITY AVENUE WEST ST PAUL, MN 55104		PUBLIC CHARITY	PROVIDE AN EQUITABLE AND EMPOWERING EDUCATION TO ALL	25,000
THE MASTERY SCHOOL 1300 OLSON MEMORIAL HWY MINNEAPOLIS,MN 55411		PUBLIC CHARITY	EDUCATION	15,000
TREE TRUST 2350 WYCLIFF STREET SUITE 200 ST PAUL, MN 55114		PUBLIC CHARITY	IMPROVE COMMUNITY ENVIRONMENT BY INVESTING IN PEOPLE	4,000
TRUST FOR PUBLIC LAND 2610 UNIVERSITY AVENUE SUITE 300 ST PAUL, MN 55114		PUBLIC CHARITY	LAND CONSERVATION PROGRAM	5,000
TWIN CITIES RISE 800 WASHINGTON AVENUE NORTH SUITE 203 MINNEAPOLIS,MN 55401		PUBLIC CHARITY	PROVIDE EMPLOYERS IN TWIN CITIES METRO WITH TRAINED MEN FROM COMMUNITIES OF COLOR	70,000
UNIVERSITY OF ST THOMAS LEGAL SERVICES CLINIC 30 SOUTH TENTH STREET MINNEAPOLIS,MN 55403		PUBLIC CHARITY	THOUGHTFUL APPROACH TO CHALLENGES OF CONTEMPORARY LIFE	10,000
VENTURE ACADEMY 315 27TH AVENUE SE/ MINNEAPOLIS,MN 55414		PUBLIC CHARITY	PERSONALIZED LEARNING MODEL TO CLOSE COLLEGE AND CAREER READINESS GAP TO ECONOMICALLY DISADVANTAGED YOUTH	25,000
WILDERNESS INQUIRY 808 - 14TH AVENUE SE MINNEAPOLIS,MN 554141516		PUBLIC CHARITY	HELPS PEOPLE FROM ALL WALKS OF LIFE PERSONALLY EXPERIENCE NATURAL WORLD	1,500
YOUTH FRONTIERS 6009 EXCELSIOR BOULEVARD MINNEAPOLIS,MN 55416		PUBLIC CHARITY	BUILD POSITIVE SCHOOL COMMUNITIES	20,000
Total				831,830

## **TY 2015 Accounting Fees Schedule**

Name: SMIKIS FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	69,482	69,482		0
EVERGREEN SMALLCAP FUND II	301	301		0
EVERGREEN SMALLCAP FUND II	1,876	1,876		0
LARGE CAP CORE I	38,937	38,937		0
POCKET LLC	103,904	103,904		0
EVERGREEN TAX ADVANTAGED FUND	1,597	1,597		0
EVERGREEN SMALLCAP FUND	1,515	1,515		0

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - DLN: 93491255001536

## **TY 2015 Investments Corporate Stock Schedule**

Name: SMIKIS FOUNDATION

Name of Stock	End of Year Book Value	End of Year Fair Market Value
GENERAL MILLS INC.	19,896	1,089,082

### **TY 2015 Investments - Other Schedule**

Name: SMIKIS FOUNDATION

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
ML WARBURG PINCUS TRUST	AT COST	67,220	4,122
EVERGREEN SMALLCAP FUND II	AT COST	472,102	556,187
FLAG VENTURE PARTNERS III, L.P.	AT COST	308,431	26,365
FLAG VENTURE PARTNERS IV L.P.	AT COST	37,178	13,460
EVERGREEN SMALLCAP FUND	AT COST	437,753	564,541
EVERGREEN LARGE CAP CORE I	AT COST	3,571,021	3,828,299
J P MORGAN U.S. REAL ESTATE INCOME	AT COST	796,218	704,493
INVESCO REAL ESTATE FUND	AT COST	508,659	61,838
J.P. MORGAN REIT	AT COST	83	83
WAYZATA OPPORTUNITY FUND LLC	AT COST	534,579	68,970
WAYZATA OPPORTUNITY FUND LLC II	AT COST	590,520	142,698
WESTLY CAPITAL FUNDS	AT COST	553,980	192,695
EUROPEAN SECONDARY OPPORTUNITIES FUND	AT COST	277,925	219,773
HARRISON STREET REAL ESTATE PARTNERS	AT COST	451,699	296,976
WESTLY CAPITAL FUNDS II	AT COST	426,706	353,174
PINEBRIDGE STRUCTURED CPITAL PARTNERS II	AT COST	863,595	793,894
FUNDAMENTAL PARTNERS MUNICIPAL	AT COST	412,000	327,120
INTERNATIONAL FARMLAND TRUST	AT COST	500,000	404,980
EATON VANCE PARA TX MGD EMG MKT	AT COST	1,950,000	1,507,303
ISHARES MSCI EAFE ETF	AT COST	1,608,506	1,532,592
SIGHTLINE HEALTHCARE OPPORTUNITY	AT COST	162,500	193,471
SPECIAL CREDIT OPPORTUNITIES OFFSHORE	AT COST	443,082	377,115
LARGECAP INDEX	AT COST	1,476,566	1,471,524
ISHARES CORE MSCI EAFE ETF	AT COST	182,854	163,140
FUNDAMENTAL PARTNERS III	AT COST	428,449	398,888
GCM GROSVENOR CO-INVESTMENT	AT COST	330,763	328,144

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - DLN: 93491255001536

### **TY 2015 Other Expenses Schedule**

Name: SMIKIS FOUNDATION

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
GROSVENOR	1,288	1,288		0

### DLN: 93491255001536

### **TY 2015 Other Income Schedule**

Name: SMIKIS FOUNDATION

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
PARTNERSHIP INCOME	560,757	0	560,757
EVERGREEN SMALLCAP FUND II	-28	-28	-28
POCKET LLC	-4,773	-4,773	-4,773

### **TY 2015 Taxes Schedule**

Name: SMIKIS FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MINNESOTA FILING FEE	25	0		25
FOREIGN TAXES	9,887	9,887		0
EVERGREEN LARGECAP CORE	5,134	5,134		0
FEDERAL TAXES	20,000	0		0
POCKET LLC	6,189	6,189		0

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491255001536

EN. 93491233001330

OMB No 1545-0047

### Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

SMIKIS FOUNDATION

### **Schedule of Contributors**

► Attach to Form 990, 990-EZ, or 990-PF.
► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

2015

**Employer identification number** 

	41-1742700		
Organization type (chec	ck one)		
Filers of:	Section:		
Form 990 or 990-EZ	□ 501(c)( ) (enter number) organization		
	☐ 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation		
	□ 527 political organization		
Form 990-PF	<b>▼</b> 501(c)(3) exempt private foundation		
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation		
	□ 501(c)(3) taxable private foundation		
	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 Rule See instructions		
General Rule			
	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.		
Special Rules			
under sections 50 received from any	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> /3% support test of the regulations 09(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 vione contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990 r (ii) Form 990-EZ, line 1 Complete Parts I and II		
during the year, to	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, otal contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or of cruelty to children or animals. Complete Parts I, II, and III		
during the year, c this box is checke purpose Do not c	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, ontributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If ed, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively le, 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,		

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF

990-EZ, or 990-PF)

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,

Name of organization SMIKIS FOUNDATION Employer identification number 41-1742700

Part I	Contributors (see instructions) Use duplicate copies of Part I if ad	ditional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1	CHARITABLE LEAD ANNUITY TRUST 2 1660 S HWY 100 SUITE 426	\$ 16,230	Person Payroll	다
	ST LOUIS PARK, MN55416		Noncash (Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
2	CHARITABLE LEAD ANNUITY TRUST NO 1 1660 S HWY 100 SUITE 426	\$ 173,876	Person Payroll Noncash	г Г Г
	ST LOUIS PARK, MN 55416		(Complete Part II t	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
3	LUCY B HARTWELL 1660 S HWY 100 SUITE 426		Person Payroll	Г Г
	ST LOUIS PARK, MN55416	\$ 76,071	Noncash (Complete Part II f	<b>▽</b> for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
		\$	Person Payroll Noncash (Complete Part II is contributions)	「 「 for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con Person	
		\$	Payroll  Noncash  (Complete Part II to contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	tribution
		\$	Person Payroll Noncash (Complete Part II for contributions)	「 「 For noncash

Name of organization SMIKIS FOUNDATION		Employer identification number 41-1742700		
(a) No.from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
3	30 4193 LARGECAP INDEX FUND	\$ 76,071	2015-10-13	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		<u> </u>		
(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	

Schedule B (Form 990, 990-E∠, or 990-PF) (2015)
---

nedule B (Form 990, 9 me of organization	990-EZ, or 990-PF) (2015)		Employer identification number
KIS FOUNDATION	N		41-1742700
total more line entry. of \$1,000 o	than \$1,000 for the year from any or	ne contributor. Complete co II, enter the total of <i>exclusiv</i> mation once. See instruction	ribed in section 501(c)(7), (8), or (10) that blumns (a) through (e) and the following ely religious, charitable, etc., contributions
(a) from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gi	ft Relationship of transferor to transferee
(a) from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
.  -			
-	Transferee's name, address, and	(e) Transfer of gi	ft Relationship of transferor to transferee
(a) From Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
. =			
- -	Transferee's name, address, and	(e) Transfer of gi	ft Relationship of transferor to transferee
(a) from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
. =			
	Transferee's name, address, and	(e) Transfer of gi	ft Relationship of transferor to transferee
-			