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Form **990-PF**

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 cale	endar year 2015, or tax year beginning	, 2015,	and ending			
		EY FAMILY FOUNDATION			Α	Employer identification nun 41–1949696	
2	910	HOLLY LANE NORTH #100 DUTH, MN 55447-1733			В	Telephone number (see instraction 763-475-0123	ructions)
	1111	John, IM John Tide			С	If exemption application is	pending, check here
G	Che	ck all that apply: Initial return	Initial return of a form Amended return	ner public charity	D	1 Foreign organizations, chec	k here ▶
_		Address change	Name change			2 Foreign organizations meet here and attach computation	ing the 85% test, check
Н	Che	ck type of organization: X Section 501(Section 4947(a)(1) nonexempt charitable tri	(c)(3) exempt private for ust Other taxable p	oundation private foundation	E	If private foundation status	was terminated
T			ounting method: X Ca	ash Accrual	F	under section 507(b)(1)(A) If the foundation is in a 60	_
	► s	448,665. (Part I,	column (d) must be on			under section 507(b)(1)(B)	, check here ►
<u> </u>	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	(b) Net investmer income	ıt	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
2016		1 Contributions, gifts, grants, etc, received (attach schedule) 2 Ck if the foundation is not required to attach Sch B	5,000.		·		, , , , , , , , , , , , , , , , , , , ,
8 2		3 Interest on savings and temporary cash investments					
6		4 Dividends and interest from securities	11,230.	11,23	0.	11,230.	
SCANNED MAY		5a Gross rents					
<u> </u>	R E	6 a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all 51,635.	-9,212.				
2	E V E N U	7 Capital gain net income (from Part IV, line 2) .			0.		
H		8 Net short-term capital gain 9 Income modifications				0.	
D D	Ε	10 a Gross sales less returns and allowances					
		b Less. Cost of goods sold					
		Gross profit or (loss) (attach schedule) 11 Other income (attach schedule)	 				
		12 Total. Add lines 1 through 11	7,018.	11,23	<u></u>	11,230.	
		13 Compensation of officers, directors, trustees, etc.	0.		<u> </u>		
		14 Other Tanto of Section 14 Other Tanto of			_		
	A D	16a Legal fees (attach schedule)	3,006.				3,006.
o	M I	c Other prof fees (attach sch).					
P	S	17 Interest GDEN UTSEE STM 2	198.				198.
Ā	RAT	19 Depreciation (attach schedule) and depletion					
N G		20 Occupancy 21 Travel, conferences, and meetings					
A	E X P	22 Printing and publications 23 Other expenses (attach schedule)	108.				108.
D	Ε	SEE STATEMENT 3	3,042.	2,97	7.		65.
	N S E S	24 Total operating and administrative expenses. Add lines 13 through 23	6,354.	2,97	7.		3,377.
		25 Contributions, gifts, grants paidSTMT 4 26 Total expenses and disbursements.	55,000.				55,000.
		Add lines 24 and 25	61,354.	2,97	7.	0.	58,377.
		a Excess of revenue over expenses and disbursements	-54,336.				
		b Net investment income (if negative, enter -0-)	32,000.	8,25	3.	11 000	
		C Adjusted net income (if negative, enter -0-)				11,230.	

Form 990-PF (2015)

David		Attached schedules and amounts in the description	Beginning of year	Ena of	year
ran	L 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	10,857.	12,506.	12,506.
	2	Savings and temporary cash investments	11,706.	3,585.	3,585.
	3	Accounts receivable	11,700.	0,000.	
	,	Less: allowance for doubtful accounts			,
	4	Pledges receivable			
	4	Less: allowance for doubtful accounts			•
	_				
- 1	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach sch) .		,	
S		Less: allowance for doubtful accounts ▶			
Š	8	Inventories for sale or use			
A S E T	9	Prepaid expenses and deferred charges			··
Ś	10 a	Investments – U.S. and state government obligations (attach schedule)			
	l t	Investments — corporate stock (attach schedule)		-	
	، ا	: Investments — corporate bonds (attach schedule)			
	11	Investments – land, buildings, and			
	''	equipment: basis			
		Less: accumulated depreciation (attach schedule)	1		
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule)	455,825.	407,961.	432,574.
	14	Land, buildings, and equipment: basis ►			
		Less: accumulated depreciation (attach schedule)	*,		* **
	15	Other assets (describe >		· ·	
		Total assets (to be completed by all filers — see the instructions. Also, see page 1, item l)	478,388.	424,052.	448,665.
L	17	Accounts payable and accrued expenses		-	
I A	18	Grants payable			
B	19	Deferred revenue			
- 1	20	Loans from officers, directors, trustees, & other disqualified persons .			
L	21	Mortgages and other notes payable (attach schedule)			
Ţ	22	Other liabilities (describe ►)			
Į E		,			
E S	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here X and complete lines 24 through 26 and lines 30 and 31.			
NF	24	Unrestricted	478,388.	424,052.	
ĔÜ	25	Temporarily restricted	270,300.	12 1, 002 1	
IИ	26	Permanently restricted		-	
Ă _	~~	Foundations that do not follow SFAS 117, check here.	-		
A B S A E T A		and complete lines 27 through 31.			^
FA	27	Capital stock, trust principal, or current funds			
SN	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
O E	29	Retained earnings, accumulated income, endowment, or other funds.			
RS	30	Total net assets or fund balances (see instructions)	478,388.	424,052.	
	31	Total liabilities and net assets/fund balances (see instructions)	478,388.	424,052.	
Parl	:	Analysis of Changes in Net Assets or Fund Balance	es		
1	Total	net assets or fund balances at beginning of year — Part II, colur of-year figure reported on prior year's return)	mn (a), line 30 (must agi	ree with	478,388.
		r amount from Part I, line 27a			-54,336.
		increases not included in line 2 (itemize)		3	31/3301
					424,052.
		ases not included in line 2 (itemize)	, ,,,,,	5	727,002.
		net assets or fund balances at end of year (line 4 minus line 5)	- Part II, column (b). Iir		424,052.

(a) List and descr	d Losses for Tax on Investmer be the kind(s) of property sold (e.g., pouse; or common stock, 200 shares MI	real estate, C Company)	How acquired P — Purchase	(C) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a SEE STATEMENT 5			D — Donation		<u> </u>
b					
С					
d					
е					<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	5	(h) Gain or (e) plus (f) n	(loss) ninus (g)
a				 	
b					
<u>c</u>					
					_ -
	owing gain in column (h) and owned t	by the foundation on 12/31/69	, 	(I) Gains (Co	(h)
(i) F M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	a a	ain minus col. (k), an -0-) or Losses (f	but not less
а					
b					
С					
d					
е				r	
2 Capital gain net income or (Tiet capital loss).	tenter in Part I, line 7 ter -0- in Part I, line 7	2		-9,212
3 Net short-term capital gain of	or (loss) as defined in sections 1222(5) and (6):			
If gain, also enter in Part I,	line 8, column (c) (see instructions). It	f (loss), enter -0-			20
in Part I, line 8 Part V Qualification Und	ler Section 4940(e) for Reduce	d Tay on Not Investme	· · 3		-38
	e foundations subject to the section 4940				
If 'Yes,' the foundation does not o	section 4942 tax on the distributable a jualify under section 4940(e). Do not c	omplete this part.		Yes	X No
	in each column for each year; see the ins	· · · · · · · · · · · · · · · · · · ·	ntries.	4.5	
(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use asset	ts (col.	Distribution (b) divided by	
2014	58,363.	600,	912.		0.097124
2013	63,598.		493.		0.108069
2012	87,641.		030.		0.131587
2011	114,243.		564.		0.145986
2010	94,583.	777,	977.		0.121576
2 Total of line 1, column (d).			. 2		0.604342
3 Average distribution ratio for	the 5-year base period — divide the tool has been in existence if less than	otal on line 2 by 5, or by the			0.120868
•	paritable-use assets for 2015 from Pari	•	4		498,114.
5 Multiply line 4 by line 3			5		60,206.
6 Enter 1% of net investment	income (1% of Part I, line 27b) .		6		83.
7 Add lines 5 and 6			. 7		60,289.
8 Enter qualifying distributions					
	from Part XII, line 4		8		58,377.

Form 990-PF (2015) CONLEY FAMILY FOUNDATION		1949			<u> </u>	age 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	- see	instru	ıction	s)		
1 a Exempt operating foundations described in section 4940(d)(2), check here						,
Date of ruling or determination letter: (attach copy of letter if necessary — see instrs)						
b Domestic foundations that meet the section 4940(e) requirements in Part V,		1			1	<u> 165.</u>
check here. ► and enter 1% of Part I, line 27b						
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)						•
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable		_				_
foundations only. Others enter -0-)	٠	2				0.
3 Add lines 1 and 2		3				<u> 165.</u>
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -		4				0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		5]	L65.
6' Credits/Payments:						
a 2015 estimated tax pmts and 2014 overpayment credited to 2015 6a						
b Exempt foreign organizations — tax withheld at source						
c Tax paid with application for extension of time to file (Form 8868)						
d Backup withholding erroneously withheld 6d		_		-		•
7 Total credits and payments. Add lines 6a through 6d		7				0.
8 Enter any penalty for underpayment of estimated tax. Check here		8				
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	🏲	9				L65.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	··· •	10				
11 Enter the amount of line 10 to be: Credited to 2016 estimated tax • Refunded	-	11				
Part VII-A Statements Regarding Activities	_		- 1			
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	l it				Yes	No
participate or intervene in any political campaign?				1 a		Х
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes				4 6		,,
(see Instructions for the definition)?		• •	• • •	1 b		X
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published	1		ļ			
or distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-POL for this year?				1 c	~	Х
c Did the foundation file Form 1120-POL for this year?	• •			- 10		
(1) On the foundation ►\$ 0. (2) On foundation managers ►\$			0.			
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on						
foundation managers. •\$ 0.				_		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?.		•	• • • •	_2		X
If 'Yes,' attach a detailed description of the activities.						
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles				_		
of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the change		•		3		Х
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4 a		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?				4 b	N	/A
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:			ŀ		l	
By language in the governing instrument, or						
 By state legislation that effectively amends the governing instrument so that no mandatory directions that conf with the state law remain in the governing instrument?	ıct					
			••••	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		•	ŀ	7	Х	
8 a 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 <i>General Instruction G? If 'No,' attach explanation</i>				8 b	х	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' col	(3) or	4942(Part	1)(5)	9	x	
		uit	~~ ~ }	 -	^	
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their nan and addresses				10		х
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Part VII-A	Statements Regarding Activities (continued)					
11 At any t	ime during the year, did the foundation, directly or indirectly, own a controlled entity ne meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)			11		Х
12 Did the t	oundation make a distribution to a donor advised fund over which the foundation or a disqualified person privileges? If 'Yes,' attach statement (see instructions)	had 		12		Х
13 Did the	foundation comply with the public inspection requirements for its annual returns and exemption a	pplicati	on?	13	Х	
	address		763- 4 7	5-0	 123	
Located	at > 2910 HOLLY LANE N, STE 100 PLYMOUTH MN ZIP + 4 >	5544	7-173		 	
	4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here er the amount of tax-exempt interest received or accrued during the year	- 1		ŅĀ		∐ N/A
16 At any to	me during calendar year 2015, did the foundation have an interest in or a signature or other authority ove ecurities, or other financial account in a foreign country?	ra	[16	Yes	No X
See the	instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,'					
Part VII-B	Statements Regarding Activities for Which Form 4720 May Be Required			1		
File For	m 4720 if any item is checked in the 'Yes' column, unless an exception applies.				Yes	No
-	he year did the foundation (either directly or indirectly):	1				
_		Yes	X No			
(2) Bor	row money from, lend money to, or otherwise extend credit to (or accept it from) a qualified person?	Yes	X No			
	nish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No		1	
	compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	XNo			
(5) Train for	nsfer any income or assets to a disqualified person (or make any of either available the benefit or use of a disqualified person)?	Yes	ΧNο			
(6) Agr four of g	ee to pay money or property to a government official? (Exception. Check 'No' if the dation agreed to make a grant to or to employ the official for a period after termination overnment service, if terminating within 90 days.).	Yes	X No			
b If any a Regulat	nswer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in ions section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?.			1 b	N	/A
_	ations relying on a current notice regarding disaster assistance check here	>				
c Did the that we	foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, se not corrected before the first day of the tax year beginning in 2015?			1 c		Х
2 Taxes of private	n failure to distribute income (section 4942) (does not apply for years the foundation was a operating foundation defined in section 4942(j)(3) or 4942(j)(5)):					,
and 6e,	nd of tax year 2015, did the foundation have any undistributed income (lines 6d Part XIII) for tax year(s) beginning before 2015?	Yes	XNo			
If 'Yes,'	list the years ► 20 , 20 , 20				ı	
(relating	e any years listed in 2a for which the foundation is not applying the provisions of section 4942(a) to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		2 b		/ B
	s listed, answer 'No' and attach statement – see instructions.) ovisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years her			20	N	A
	_ , 20 , 20 , 20					
3 a Did the	foundation hold more than a 2% direct or indirect interest in any business	Yes	X No			
	did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation alified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or apse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to the if the foundation had excess business holdings in 2015.)			3 b	N	′ A
4a Did the	foundation invest during the year any amount in a manner that would jeopardize its le purposes?			4 a		х
b Did the	foundation make any investment in a prior year (but after December 31, 1969) that could te its charitable purpose that had not been removed from jeopardy before the first day of year beginning in 2015?			4ь		х

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Page 6

Form 990-PF (2015) CONLEY FAMILY FOUNDATION

Form 990-PF (2015) CONLEY FAMILY FOUNDATION 41-19	949696 Page 2
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
	
,	
	T
	
Total number of others receiving over \$50,000 for professional services	<u> </u>
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 <u>N/A</u>	-
	-
2	
	
3	_
	-
4	
	_
	<u></u>
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
N/A	
2	-
	-
All other program-related investments. See instructions.	<u> </u>
3	_
	_]
Total. Add lines 1 through 3	0.
BAA	Form 990-PF (2015)

Page 8

Par	TX Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	eign fo	oundations,
1 a	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes: Average monthly fair market value of securities	1 a	505,699.
ŀ	Average of monthly cash balances.	1 b	
c	Fair market value of all other assets (see instructions)	1 c	
	Total (add lines 1a, b, and c)	1 d	505,699.
€	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	
3	Subtract line 2 from line 1d	3	505,699.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	7,585.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	498,114.
6	Minimum investment return. Enter 5% of line 5	6	24,906.
Par	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operations and certain foreign organizations check here ► X and do not complete this part.)	ing fou	indations
1	Minimum investment return from Part X, line 6	1	
2 a	Tax on investment income for 2015 from Part VI, line 5		
	Income tax for 2015. (This does not include the tax from Part VI.) 2b		
Ċ	Add lines 2a and 2b	2 c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
Par	t XII Qualifying Distributions (see instructions)		
1 a	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: Expenses, contributions, gifts, etc — total from Part I, column (d), line 26.	1 a	58,377.
	Program-related investments – total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3 a	Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required)	3 a	
b	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	58,377.
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	58,377.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four qualifies for the section 4940(e) reduction of tax in those years.	dation	
BAA			Form 990-PF (2015)

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	(a) Corpus	N/A (b) Years prior to 2014	(c) 2014	(d) 2015
<u> </u>		rears prior to 2014	2014	
1 Distributable amount for 2015 from Part XI, line 7		:		
2 Undistributed income, if any, as of the end of 2015.	····		- \ . \ \	
a Enter amount for 2014 only				
b Total for prior years: 20, 20, 20				
3 Excess distributions carryover, if any, to 2015:			<u> </u>	
a From 2010				
b From 2011				
d From 2013 e From 2014				
f Total of lines 3a through e				
4 Qualifying distributions for 2015 from Part				
XII, line 4: ► \$				
a Applied to 2014, but not more than line 2a			* * 1	
b Applied to undistributed income of prior years				
(Election required – see instructions)				
c Treated as distributions out of corpus (Election required – see instructions)				
d Applied to 2015 distributable amount				
e Remaining amount distributed out of corpus.				
5 Excess distributions carryover applied to 2015				
(If an amount appears in column (d), the same amount must be shown in column (a).)				
Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b Prior years' undistributed income. Subtract				· , · · · , · · · · · · · · · · · · · ·
line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a)				
tax has been previously assessed		<u> </u>		
d Subtract line 6c from line 6b. Taxable amount — see instructions.				
e Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount — see instructions.				
f Undertributed income for 2015. Subtract lines				
f Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016.				
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions).			,	
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9:				
a Excess from 2011				
b Excess from 2012.				
c Excess from 2013			,	
d Excess from 2014	٠,	, _× ×		
e Excess from 2015				Form 990-PF (2015

Fart AIV Frivate Operating Foundation	ons (see instruc	clions and Fart	VII-A, question	9)	
1 a If the foundation has received a ruling or determ is effective for 2015, enter the date of the rules.	mination letter that it	is a private operation	g foundation, and th	e ruling	12/31/08
b Check box to indicate whether the foundation	_		scribed in section	X 4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum investment return from Part X for	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
each year listed	11,230.	12,568.	12,563.	15,872.	52,233.
b 85% of line 2a	9,546.	10,683.	10,679.	13,491.	44,399.
c Qualifying distributions from Part XII, line 4 for each year listed	58,377.	58,363.	63,598.	<u>87,760.</u>	268,098.
d Amounts included in line 2c not used directly for active conduct of exempt activities					0.
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	58,377.	58,363.	63,598.	87,760.	268,098.
Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter:					
(1) Value of all assets	424,052.	478,388.	521,829.	<u>571,108.</u>	1,995,377.
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	407,961.	455,825.	505,958.	525,722.	1,895,466.
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter:					
(1) 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					- "
Part XV Supplementary Information (Complete this p	part only if the f	oundation had	\$5,000 or more	in
assets at any time during the	<u> </u>	tructions.)	 _		
Information Regarding Foundation Manage a List any managers of the foundation who have close of any tax year (but only if they have a NONE	contributed more tha	n 2% of the total con an \$5,000). (See so	tributions received bection 507(d)(2).)	y the foundation befo	ore the
	 				
b List any managers of the foundation who own 1 a partnership or other entity) of which the fo NONE	0% or more of the st jundation has a 109	tock of a corporation % or greater interes	(or an equally large t.	portion of the owner	ship of
2 Information B and the Co. 19 of the Co.	0:4 1 2 : :	under at a			
2 Information Regarding Contribution, Grant, Check here ► X if the foundation only make requests for funds. If the foundation makes complete items 2a, b, c, and d.	es contributions to pr	eselected charitable	organizations and de		
a The name, address, and telephone number or e	-mail address of the	person to whom app	lications should be a	addressed:	
b The form in which applications should be su	bmitted and inform	ation and materials	they should includ	e:	
c Any submission deadlines:					
d Any restrictions or limitations on awards, sur	ch as by goograph:	nal areas charitable	a fields kinds of in	stitutions or other	factors
~ Any resurctions of limitations on awards, suc	on as by geographi	uai aitas, uildillable	e neius, kinus VI IA	satutions, or other	iaciois.

3 Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount				
Name and address (home or business)	substantial contributor	recipient						
a Paid during the year								
i i								
!								
Total								
b Approved for future payment								
Total	<u> </u>							

BAA

Part XVI-A Analysis of Income-Producing Activities

		1		1		
Enter gros	s amounts unless otherwise indicated.		business income		by section 512, 513, or 514	(e)
		(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (See instructions.)
1 Prog	ram service revenue:	ļ		code		
a		.				
b		 				
	<u> </u>			 		
d						<u>.</u> .
e		<u> </u>				
f		ļ	<u> </u>			
7	and contracts from government agencies					
	bership dues and assessments					
3 Intere	st on savings and temporary cash investments					
4 Divid	lends and interest from securities					11,230.
5 Net r	ental income or (loss) from real estate:					
a Debt	-financed property					
b Not o	debt-financed property .					-
6 Net re	ental income or (loss) from personal property					
7 Othe	r investment income					
8 Gain o	or (loss) from sales of assets other than inventory			1 1		-9,212.
	ncome or (loss) from special events	-		1		,
10 Gros	s profit or (loss) from sales of inventory			1		
	r revenue:			1		<u></u>
а				1		
		 		 		
c		 		1		
ď—				 +		
		 		 		
<u> </u>	otal Add columns (b) (d) and (e)					2 018
12 Subt	otal Add columns (b), (d), and (e)				13	2,018. 2,018
12 Subte	I. Add line 12, columns (b), (d), and (e)	ons.)			13	2,018. 2,018.
12 Subto 13 Total (See works	The state of the s		nment of Exemp	pt Purpo	-	
12 Subto 13 Total (See works	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	Accomplish	<u> </u>		ses	2,018.
12 Subto 13 Total (See works) Part XVI	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the	Accomplish	<u> </u>		ses	2,018.
12 Subtraction 13 Total (See works) Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the	Accomplish	<u> </u>		ses	2,018.
12 Subtraction 13 Total (See works) Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the	Accomplish	<u> </u>		ses	2,018.
12 Subtraction 13 Total (See works) Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the	Accomplish	<u> </u>		ses	2,018.
12 Subtraction 13 Total (See works) Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the	Accomplish	<u> </u>		ses	2,018.
12 Subtraction 13 Total (See works) Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the	Accomplish	<u> </u>		ses	2,018.
12 Subtraction 13 Total (See works) Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the	Accomplish	<u> </u>		ses	2,018.
12 Subtraction 13 Total (See works) Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the	Accomplish	<u> </u>		ses	2,018.
12 Subtraction 13 Total (See works) Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the	Accomplish	<u> </u>		ses	2,018.
12 Subtraction 13 Total (See works) Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the	Accomplish	<u> </u>		ses	2,018.
12 Subtraction 13 Total (See works) Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the	Accomplish	<u> </u>		ses	2,018.
12 Subtraction 13 Total (See works) Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the	Accomplish	<u> </u>		ses	2,018.
12 Subtraction 13 Total (See works) Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the	Accomplish	<u> </u>		ses	2,018.
12 Subtraction 13 Total (See works) Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the	Accomplish	<u> </u>		ses	2,018.
12 Subtraction 13 Total (See works) Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the	Accomplish	<u> </u>		ses	2,018.
12 Subtraction 13 Total (See works) Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the	Accomplish	<u> </u>		ses	2,018.
12 Subtraction 13 Total (See works) Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the	Accomplish	<u> </u>		ses	2,018.
12 Subtraction 13 Total (See works) Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the	Accomplish	<u> </u>		ses	2,018.
12 Subtraction 13 Total (See works) Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the	Accomplish	<u> </u>		ses	2,018.
12 Subtraction 13 Total (See works) Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the	Accomplish	<u> </u>		ses	2,018.
12 Subtraction 13 Total (See works) Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the	Accomplish	<u> </u>		ses	2,018.
12 Subtraction 13 Total (See works) Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the	Accomplish	<u> </u>		ses	2,018.

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No					
a Transfers from the reporting foundation to a noncharitable exempt organization of:	[ı						
(1) Cash	1 a (1)	ľ	Х					
(2) Other assets	1 a (2)		X					
b Other transactions:								
(1) Sales of assets to a noncharitable exempt organization	1 b (1)	l	Х					
(2) Purchases of assets from a noncharitable exempt organization								
(3) Rental of facilities, equipment, or other assets								
	1 b (3)		<u>X</u>					
(4) Reimbursement arrangements	1 b (4)							
(5) Loans or loan guarantees	1 b (5)	∤	<u> </u>					
(6) Performance of services or membership or fundraising solicitations	1 b (6)		<u>X</u>					
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	1 c		<u>X</u>					
d If the answer to any of the above is 'Yes,' complete the following schedule. Column (b) should always show the fair may the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.	arket valu	e of						
(a) Line no. (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sha	arıng arrang	gement	s					
N/A	<u> </u>							
,								
			—					
	·							
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	∏Yes	\X	—— No					
b If 'Yes,' complete the following schedule.		تت						
(a) Name of organization (b) Type of organization (c) Description of relation	onship							
N/A	<u>-</u> -							
			—					
	-45-1-4-4							
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge are correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge are correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge are correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge are correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge are correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge are correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. **Total Correct	May the IR this return preparer si	S discu with the hown be	elow					
Signature of officer or trustee Date Title	(see ınstru	ctions)?	<u>'</u>					
Detti a secondo servicio de la contractica del la contractica del la contractica de la contractica de la contractica del la	TIN	es	No					
	012592	224						
Preparer Firm's name PETERSON, BEYENHOF & ZAHLER, LTD. Firm's EIN 411706	5837							
Jse Only Firm's address 5 750 BOONE AVE. NORTH								
MINNEAPOLIS, MN 55427 Phone no (763) 5	545 - 71	10						
BAA F	orm 990	PF (2	2015)					

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2015

Employer Identification number

Name of the organization		Employer identification number
CONLEY FAMILY FOUNDATION		41-1949696
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a	private foundation
	527 political organization	
	OZ, political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a priv	ate foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the General	Rule or a Special Rule.	
Note. Only a section 501(c)(7), (8), or (10) orga	anization can check boxes for both the General Rule and a S	Special Rule. See instructions.
General Rule		
Y For an organization filing Form 990, 990-EZ	 or 990-PF that received, during the year, contributions total te Parts I and II. See instructions for determining a contribu- 	aling \$5,000 or more (in money or tor's total contributions.
Special Rules		
under sections 509(a)(1) and 170(b)(1)(A)(vi), received from any one contributor, during the Form 990, Part VIII, line 1h, or (ii) Form 990	1(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% supp that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, ne year, total contributions of the greater of (1) \$5,000 or (2) 0-EZ, line 1. Complete Parts I and II.	ort test of the regulations 16a, or 16b, and that) 2% of the amount on (i)
during the year, total contributions of more	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received than \$1,000 <i>exclusively</i> for religious, charitable, scientific, list children or animals. Complete Parts I, II, and III.	from any one contributor, terary, or educational
during the year, contributions exclusively for \$1,000. If this box is checked, enter here the charitable, etc., purpose Do not complete a	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received in religious, charitable, etc., purposes, but no such contribution total contributions that were received during the year for any of the parts unless the General Rule applies to this organic, contributions totaling \$5,000 or more during the year	ons totaled more than an <i>exclusively</i> religious, inization because
Caution. An organization that is not covered by 990-PF), but it must answer 'No' on Part IV, lin	the General Rule and/or the Special Rules does not file Sci e 2, of its Form 990; or check the box on line H of its Form e filing requirements of Schedule B (Form 990, 990-EZ, or 9	nedule B (Form 990, 990-EZ, or 990-EZ or on its Form 990-PF,

	B (Form 990, 990-EZ, or 990-PF) (2015)	Page	1 of 1 of Part	
Name of org	anization Y FAMILY FOUNDATION	1 ' '	er identification number 949696	
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space			
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1	RICHARD M. & SHARON A. CONLEY	-	Person X	
	2910 HOLLY LANE NORTH	\$ <u>5,000.</u>	Noncash	
	PLYMOUTH, MN 55447	-	(Complete Part II for noncash contributions)	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Complete Part II for noncash contributions)	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$ 	Person Payroll Complete Part II for noncash contributions.)	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
	 	\$	Person Payroll Complete Part II for noncash contributions.)	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)	
BAA	TEE 0.0703 10/1/16	Schedule B (Form 99	0. 990-F7, or 990-PF) (2015)	

Page

1 to

1 of Part II

Name of organization

CONLEY FAMILY FOUNDATION

Employer identification number

41-1949696

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
	N/A		
I		\$	
(a) No.	(b)	(c)	(d) Date received
from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	Date received
	<u></u>	1	
] s	
		Ť	
(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
		\$ <mark></mark>	-
BAA	Sche	dule B (Form 990, 990-E	Z, or 990-PF) (2015)

1 to

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

of Part III

Name of organization
CONLEY FAMILY FOUNDATION

Employer identification number 41-1949696

Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and					
	the following line entry. For organizations of contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional	ompleting Part III, enter the tota (Enter this information once. S	al of <i>exclusive</i>	ely religious, charitable, etc.,		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	N/A					
1						
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	tionship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	-					
	Transferee's name, address, and ZIP + 4			Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
-			 			
	(e) Transfer of gift Transferee's name, address, and ZIP + 4			tionship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	Transferee's name, address	Relationship of transferor to transferee				

2015	FEDERAL STATEMENTS	PAGE 1
CLIENT 5	CONLEY FAMILY FOUNDATION	41-1949696
5/12/16		03:31PN
STATEMENT 1 FORM 990-PF, PART I, LINE 1 ACCOUNTING FEES	6B	
	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME	(D) CHARITABLE PURPOSES
	TOTAL \$ 3,006. \$ 0. \$ 0.	\$ 3,006. \$ 3,006.
STATEMENT 2 FORM 990-PF, PART I, LINE 18 TAXES	8	
	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED NET INCOME TOTAL \$ 198. \$ 0. \$ 0.	(D) CHARITABLE PURPOSES \$ 198. \$ 198.
STATEMENT 3 FORM 990-PF, PART I, LINE 2 OTHER EXPENSES	3	
	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME	(D) CHARITABLE PURPOSES
BANK SERVICE CHARGE FILING FEES INVESTMENT FEES	## ## ## ## ## ## ## ## ## ## ## ## ##	\$ 40. 25. \$ 65.
STATEMENT 4 FORM 990-PF, PART I, LINE 29 CONTRIBUTIONS, GIFTS, AND		
CASH GRANTS AND ALLOCATI	-	
DONEE'S NAME: DONEE'S ADDRESS:	HAZELDEN FOUNDATION INC 15245 PLEASANT VALLEY ROA	
ORGANIZATIONAL STATUS OF AMOUNT GIVEN:		\$ 25,000.
DOMERIC MANE	MINUS DOLLC FORMDARION	

DONEE'S NAME: DONEE'S ADDRESS:

MINNEAPOLIS FOUNDATION 800 IDS CENTER 80 SOUTH EIGHTH ST MINNEAPOLIS MN 55402

ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

501 (C) (3)

25,000.

DONEE'S NAME: DONEE'S ADDRESS:

WATERSTONE 2925 PROFESSIONAL PLACE STE 201 COLORADO SPRINGS CO 80904

2015	FEDE	RAL STAT	TEMENTS	;		PAGE 2
CLIENT 5	CONL	EY FAMILY FO	UNDATION			41-1949696
5/12/16					·	03:31PN
STATEMENT 4 (CONTI FORM 990-PF, PART I, CONTRIBUTIONS, GIF	LINE 25					
ORGANIZATIONAL STA	ATUS OF DONEE:	501 (C) (3)			\$	5,000.
ı					TOTAL \$	55,000.
<u> </u>			<u> </u>	<u> </u>		
STATEMENT 5 FORM 990-PF, PART IV CAPITAL GAINS AND	/, LINE 1 LOSSES FOR TAX OI	N INVESTMENT	INCOME			
ITEM	(A) DESCRIPTION	Ι	(B) ACOU	HOW (C	C) DATE	(D) DATE SOLD
1 240 DYNAMIC (2 20 DYNAMIC O	IL AND GAS		PURCH PURCH	ASED 5	/11/2006 /26/2009	11/19/2015 11/19/2015
3 500 DYNAMIC (4 180 WILDERHII	LL PROGRESSIVE EN	IERGY PORT	PURCH PURCH	ASED 6	/26/2009 /08/2007	11/19/2015
5 5 WILDERHILL 6 425 WILDERHI 7 7 PIMCO EMER	PROGRESSIVE ENER LL PROGRESSIVE EN MKTS BOND	ERGY PORT	PURCH PURCH PURCH	ASED 5	/27/2007 /26/2009 VARIOUS	11/19/2015 11/19/2015 11/19/2015
8 160.76 PIMCO	EMER MKTS BOND DEMER MKTS BOND		PURCH PURCH	ASED	VARIOUS VARIOUS	11/19/2015 11/19/2015 11/19/2015
	(F) (G) EPREC. COST	(H) GAIN	(I) FMV	(J) ADJ. BAS.		(L) GAIN
1 3,216.	LLOWED BASIS 4,999		12/31/69	12/31/69	(I) - (J)	\$ -1,783.
2 268. 3 6,699. 4 3,823. 5 106. 6 9,027. 7 715.	292 7,289 5,291	590.				-24. -590.
5 106. 6 9,027.	148 7,744	42.				-1,468. -42. 1,283.
8 1,381.	753 1,656	38.				-38. -275.
9 26,400.	32,675					-6,275.

STATEMENT 6 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
RICHARD MICHAEL CONLEY 2910 HOLLY LANE NORTH PLYMOUTH, MN 55447	CEO 15.00	\$ 0.	\$ 0.	\$ 0.
SHARON ANN CONLEY 2910 HOLLY LANE NORTH PLYMOUTH. MN 55447	COO 8.00	0.	0.	0.

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_			_

FEDERAL STATEMENTS

PAGE 3

CLIENT 5

CONLEY FAMILY FOUNDATION

41-1949696

5/12/16

03:31PM

STATEMENT 6 (CONTINUED)
FORM 990-PF, PART VIII, LINE 1
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
CHARLES DARTH 5761 OAKVIEW LANE NORTH PLYMOUTH, MN 55442	TRUSTEE 1.00	\$ 0.	\$ 0.	\$ 0.
CURTIS EDWARD LANGE 2730 MERIDIAN DRIVE ROBBINSDALE, MN 55442	TRUSTEE 1.00	0.	0.	0.
BRADLEY E. ST. MANE 48 W. DELOS ST. PAUL, MN 55107	TRUSTEE 1.00	0.	0.	0.
	TOTAL	\$ 0.	\$ 0.	<u>\$</u> 0.