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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

**2015**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](http://www.irs.gov/form990pf).

Open to Public Inspection

For calendar year 2015 or tax year beginning , and ending

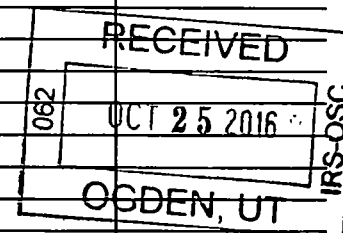
|   |   |  |
|---|---|--|
| Name of foundation<br><b>ESS FAMILY FOUNDATION</b>  |   | A Employer identification number<br><b>41-1975420</b>  |
| Number and street (or P O box number if mail is not delivered to street address)<br><b>9761 ROOKERY CIRCLE</b>  | Room/suite  | B Telephone number (see instructions)<br><b>612-309-1570</b>   |
| City or town, state or province, country, and ZIP or foreign postal code<br><b>ESTERO FL 33928</b>  |   | C If exemption application is pending, check here <input type="checkbox"/>   |
| G Check all that apply<br><input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity<br><input type="checkbox"/> Final return <input type="checkbox"/> Amended return<br><input type="checkbox"/> Address change <input type="checkbox"/> Name change |   | D 1. Foreign organizations, check here <input type="checkbox"/><br>2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> |
| H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation<br><input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation  |   | E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>  |
| I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ► \$ <b>151,157</b>  | J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual<br><input type="checkbox"/> Other (specify) | F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>   |
| (Part I, column (d) must be on cash basis)  |   |  |

| Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)) |  | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|--|--|------------------------------------|---------------------------|-------------------------|---|
| 1  | Contributions, gifts, grants, etc., received (attach schedule)                   | 42,000                             |                           |                         |   |
| 2  | Check <input type="checkbox"/> if the foundation is not required to attach Sch B |                                    |                           |                         |   |
| 3  | Interest on savings and temporary cash investments                               | 4                                  | 4                         |                         |   |
| 4  | Dividends and interest from securities   | 1,323                              | 1,323                     |                         |   |
| 5a   | Gross rents  |                                    |                           |                         |   |
| b  | Net rental income or (loss)  |                                    |                           |                         |   |
| 6a   | Net gain or (loss) from sale of assets not on line 10                            | 8,121                              |                           |                         |   |
| b  | Gross sales price for all assets on line 6a                                      | 41,471                             |                           |                         |   |
| 7  | Capital gain net income (from Part IV, line 2)                                   |                                    | 8,121                     |                         |   |
| 8  | Net short-term capital gain  |                                    |                           | 0                       |   |
| 9  | Income modifications   |                                    |                           |                         |   |
| 10a  | Gross sales less returns and allowances  |                                    |                           |                         |   |
| b  | Less: Cost of goods sold   |                                    |                           |                         |   |
| c  | Gross profit or (loss) (attach schedule)   |                                    |                           |                         |   |
| 11   | Other income (attach schedule) Stmt 1  | 335                                |                           |                         |   |
| 12   | Total. Add lines 1 through 11  | 51,783                             | 9,448                     | 0                       |   |
| 13   | Compensation of officers, directors, trustees, etc                               | 0                                  |                           |                         |   |
| 14   | Other employee salaries and wages  |                                    |                           |                         |   |
| 15   | Pension plans, employee benefits   |                                    |                           |                         |   |
| 16a  | Legal fees (attach schedule)   |                                    |                           |                         |   |
| b  | Accounting fees (attach schedule) Stmt 2   | 1,020                              |                           |                         |   |
| c  | Other professional fees (attach schedule)  |                                    |                           |                         |   |
| 17   | Interest   |                                    |                           |                         |   |
| 18   | Taxes (attach schedule) (see instructions) Stmt 3                                | 137                                | 137                       |                         |   |
| 19   | Depreciation (attach schedule) and depletion                                     |                                    |                           |                         |   |
| 20   | Occupancy  |                                    |                           |                         |   |
| 21   | Travel, conferences, and meetings  |                                    |                           |                         |   |
| 22   | Printing and publications  |                                    |                           |                         |   |
| 23   | Other expenses (att sch) Stmt 4  | 790                                | 707                       |                         |   |
| 24   | Total operating and administrative expenses. Add lines 13 through 23             | 1,947                              | 844                       | 0                       | 0   |
| 25   | Contributions, gifts, grants paid  | 25,476                             |                           |                         | 25,476  |
| 26   | Total expenses and disbursements. Add lines 24 and 25                            | 27,423                             | 844                       | 0                       | 25,476  |
| 27   | Subtract line 26 from line 12:   |                                    |                           |                         |   |
| a  | Excess of revenue over expenses and disbursements                                | 24,360                             |                           |                         |   |
| b  | Net investment income (if negative, enter -0-)                                   |                                    | 8,604                     |                         |   |
| c  | Adjusted net income (if negative, enter -0-)                                     |                                    |                           | 0                       |   |

For Paperwork Reduction Act Notice, see instructions.

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| <b>Part II Balance Sheets</b> Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) |   | Beginning of year | End of year    |                       |
|--|---|-------------------|----------------|-----------------------|
|  |   | (a) Book Value    | (b) Book Value | (c) Fair Market Value |
| <b>Assets</b>  | <b>1</b> Cash – non-interest-bearing  | <b>18,076</b>     | <b>28,576</b>  | <b>28,576</b>         |
|  | <b>2</b> Savings and temporary cash investments   | <b>13,129</b>     | <b>2,593</b>   | <b>2,593</b>          |
|  | <b>3</b> Accounts receivable ▶<br>Less: allowance for doubtful accounts ▶   |                   |                |                       |
|  | <b>4</b> Pledges receivable ▶<br>Less: allowance for doubtful accounts ▶  |                   |                |                       |
|  | <b>5</b> Grants receivable  |                   |                |                       |
|  | <b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)                |                   |                |                       |
|  | <b>7</b> Other notes and loans receivable (att. schedule) ▶<br>Less: allowance for doubtful accounts ▶  | <b>0</b>          |                |                       |
|  | <b>8</b> Inventories for sale or use  |                   |                |                       |
|  | <b>9</b> Prepaid expenses and deferred charges  |                   |                |                       |
|  | <b>10a</b> Investments – U S and state government obligations (attach schedule)   |                   |                |                       |
|  | <b>b</b> Investments – corporate stock (attach schedule) <b>See Stmt 5</b>  | <b>75,000</b>     | <b>94,454</b>  | <b>98,712</b>         |
|  | <b>c</b> Investments – corporate bonds (attach schedule)  |                   |                |                       |
|  | <b>11</b> Investments – land, buildings, and equipment: basis ▶ <b>21,276</b><br>Less: accumulated depreciation (attach sch) ▶ <b>Stmt 6</b>    | <b>21,276</b>     | <b>21,276</b>  | <b>21,276</b>         |
|  | <b>12</b> Investments – mortgage loans  |                   |                |                       |
|  | <b>13</b> Investments – other (attach schedule)   |                   |                |                       |
|  | <b>14</b> Land, buildings, and equipment: basis ▶<br>Less: accumulated depreciation (attach sch) ▶  |                   |                |                       |
| <b>15</b> Other assets (describe ▶ )   |   |                   |                |                       |
| <b>16</b> <b>Total assets</b> (to be completed by all filers – see the instructions. Also, see page 1, item I)                                   | <b>127,481</b>  | <b>146,899</b>    | <b>151,157</b> |                       |
| <b>Liabilities</b>   | <b>17</b> Accounts payable and accrued expenses   |                   |                |                       |
|  | <b>18</b> Grants payable  |                   |                |                       |
|  | <b>19</b> Deferred revenue  |                   |                |                       |
|  | <b>20</b> Loans from officers, directors, trustees, and other disqualified persons  |                   |                |                       |
|  | <b>21</b> Mortgages and other notes payable (attach schedule)   |                   |                |                       |
|  | <b>22</b> Other liabilities (describe ▶ <b>See Statement 7</b> )  | <b>5,000</b>      | <b>58</b>      |                       |
|  | <b>23</b> <b>Total liabilities</b> (add lines 17 through 22)  | <b>5,000</b>      | <b>58</b>      |                       |
| <b>Net Assets or Fund Balances</b>   | <b>Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.</b> ▶ <input checked="" type="checkbox"/> |                   |                |                       |
|  | <b>24</b> Unrestricted  | <b>122,481</b>    | <b>146,841</b> |                       |
|  | <b>25</b> Temporarily restricted  |                   |                |                       |
|  | <b>26</b> Permanently restricted  |                   |                |                       |
|  | <b>Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.</b> ▶ <input type="checkbox"/>                         |                   |                |                       |
|  | <b>27</b> Capital stock, trust principal, or current funds  |                   |                |                       |
|  | <b>28</b> Paid-in or capital surplus, or land, bldg, and equipment fund   |                   |                |                       |
|  | <b>29</b> Retained earnings, accumulated income, endowment, or other funds  |                   |                |                       |
|  | <b>30</b> <b>Total net assets or fund balances</b> (see instructions)   | <b>122,481</b>    | <b>146,841</b> |                       |
| <b>31</b> <b>Total liabilities and net assets/fund balances</b> (see instructions)   | <b>127,481</b>  | <b>146,899</b>    |                |                       |

**Part III Analysis of Changes in Net Assets or Fund Balances**

|   |          |                |
|---|----------|----------------|
| <b>1</b> Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) | <b>1</b> | <b>122,481</b> |
| <b>2</b> Enter amount from Part I, line 27a   | <b>2</b> | <b>24,360</b>  |
| <b>3</b> Other increases not included in line 2 (itemize) ▶   | <b>3</b> |                |
| <b>4</b> Add lines 1, 2, and 3  | <b>4</b> | <b>146,841</b> |
| <b>5</b> Decreases not included in line 2 (itemize) ▶   | <b>5</b> |                |
| <b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30  | <b>6</b> | <b>146,841</b> |

**Part IV Capital Gains and Losses for Tax on Investment Income**

| (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.) |  | (b) How acquired<br>P - Purchase<br>D - Donation | (c) Date acquired<br>(mo., day, yr.) | (d) Date sold<br>(mo., day, yr.) |
|---|--|--|--------------------------------------|----------------------------------|
| <b>1a AMG SYSTEMATIC MID CAP</b>  |  | <b>P</b>   | <b>07/01/15</b>                      | <b>12/29/15</b>                  |
| <b>b MFS UTILITIES I</b>  |  | <b>P</b>   | <b>03/05/12</b>                      | <b>07/02/15</b>                  |
| <b>c MORGAN STANLEY</b>   |  |  |                                      |                                  |
| <b>d</b>  |  |  |                                      |                                  |
| <b>e</b>  |  |  |                                      |                                  |

| (e) Gross sales price | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>(e) plus (f) minus (g) |
|-----------------------|--|---|--|
| <b>a 7,208</b>        |  | <b>8,350</b>                                    | <b>-1,142</b>                                |
| <b>b 29,932</b>       |  | <b>25,000</b>                                   | <b>4,932</b>                                 |
| <b>c 4,331</b>        |  |   | <b>4,331</b>                                 |
| <b>d</b>              |  |   |  |
| <b>e</b>              |  |   |  |

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

| (i) F M V as of 12/31/69 | (j) Adjusted basis<br>as of 12/31/69 | (k) Excess of col (i)<br>over col (j), if any | (l) Gains (Col (h) gain minus<br>col (k), but not less than -0-) or<br>Losses (from col (h)) |
|--------------------------|--------------------------------------|---|--|
| <b>a</b>                 |                                      |   | <b>-1,142</b>  |
| <b>b</b>                 |                                      |   | <b>4,932</b>   |
| <b>c</b>                 |                                      |   | <b>4,331</b>   |
| <b>d</b>                 |                                      |   |  |
| <b>e</b>                 |                                      |   |  |

**2** Capital gain net income or (net capital loss)

If gain, also enter in Part I, line 7  
If (loss), enter -0- in Part I, line 7

**2****8,121****3** Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)

If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in  
Part I, line 8

**3****Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

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

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

| (a) Base period years<br>Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of nonchantable-use assets | (d) Distribution ratio<br>(col (b) divided by col (c)) |
|---|---------------------------------------|--|--|
| 2014  | <b>24,645</b>                         | <b>136,228</b>                           | <b>0.180910</b>  |
| 2013  | <b>66,399</b>                         | <b>125,653</b>                           | <b>0.528431</b>  |
| 2012  | <b>40,899</b>                         | <b>148,536</b>                           | <b>0.275347</b>  |
| 2011  | <b>33,148</b>                         | <b>122,514</b>                           | <b>0.270565</b>  |
| 2010  | <b>24,579</b>                         | <b>128,705</b>                           | <b>0.190972</b>  |

**2** Total of line 1, column (d)**2****1.446225****3** Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years**3****0.289245****4** Enter the net value of nonchantable-use assets for 2015 from Part X, line 5**4****139,590****5** Multiply line 4 by line 3**5****40,376****6** Enter 1% of net investment income (1% of Part I, line 27b)**6****86****7** Add lines 5 and 6**7****40,462****8** Enter qualifying distributions from Part XII, line 4**8****25,476**

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

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)**

|           |   |           |            |
|-----------|---|-----------|------------|
| <b>1a</b> | Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1<br>Date of ruling or determination letter (attach copy of letter if necessary—see instructions) |           |            |
| <b>b</b>  | Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b   | <b>1</b>  | <b>172</b> |
| <b>c</b>  | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)  |           |            |
| <b>2</b>  | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)   | <b>2</b>  | <b>0</b>   |
| <b>3</b>  | Add lines 1 and 2   | <b>3</b>  | <b>172</b> |
| <b>4</b>  | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)   | <b>4</b>  | <b>0</b>   |
| <b>5</b>  | <b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-  | <b>5</b>  | <b>172</b> |
| <b>6</b>  | Credits/Payments  |           |            |
| <b>a</b>  | 2015 estimated tax payments and 2014 overpayment credited to 2015   | <b>6a</b> |            |
| <b>b</b>  | Exempt foreign organizations – tax withheld at source   | <b>6b</b> |            |
| <b>c</b>  | Tax paid with application for extension of time to file (Form 8868)   | <b>6c</b> |            |
| <b>d</b>  | Backup withholding erroneously withheld   | <b>6d</b> |            |
| <b>7</b>  | Total credits and payments. Add lines 6a through 6d   | <b>7</b>  |            |
| <b>8</b>  | Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached  | <b>8</b>  |            |
| <b>9</b>  | <b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>   | <b>9</b>  | <b>172</b> |
| <b>10</b> | <b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>   | <b>10</b> |            |
| <b>11</b> | Enter the amount of line 10 to be <b>Credited to 2016 estimated tax</b> <input type="checkbox"/> <b>Refunded</b> <input type="checkbox"/>   | <b>11</b> |            |

**Part VII-A Statements Regarding Activities**

|  | Yes      | No       |
|--|----------|----------|
| <b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?   |          | <b>X</b> |
| <b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?<br>If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities |          | <b>X</b> |
| <b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year?   |          | <b>X</b> |
| <b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:<br>(1) On the foundation <b>\$</b> _____ (2) On foundation managers <b>\$</b> _____  |          |          |
| <b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <b>\$</b> _____  |          |          |
| <b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS?<br>If "Yes," attach a detailed description of the activities  |          | <b>X</b> |
| <b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes  |          | <b>X</b> |
| <b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year?  |          | <b>X</b> |
| <b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?   |          |          |
| <b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year?<br>If "Yes," attach the statement required by General Instruction T  |          | <b>X</b> |
| <b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:<br>• By language in the governing instrument, or<br>• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?                        | <b>X</b> |          |
| <b>7</b> 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  | <b>X</b> |          |
| <b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <b>MN</b>   |          |          |
| <b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation   | <b>X</b> |          |
| <b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV  |          | <b>X</b> |
| <b>10</b> Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses   |          | <b>X</b> |

N/A

**Part VII-A Statements Regarding Activities (continued)**

|           |   |           |          |                |
|-----------|---|-----------|----------|----------------|
| <b>11</b> | 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)   | <b>11</b> | Yes      | No<br><b>X</b> |
| <b>12</b> | 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)  | <b>12</b> |          | <b>X</b>       |
| <b>13</b> | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?<br>Website address ► <b>N/A</b>   | <b>13</b> | <b>X</b> |                |
| <b>14</b> | The books are in care of ► <b>JUDITH A. ESS</b><br><b>9761 ROOKERY CIRCLE</b><br>Located at ► <b>ESTERO</b> <b>FL</b> ZIP+4 ► <b>33928</b><br>Telephone no ► <b>612-309-1570</b>  |           |          |                |
| <b>15</b> | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here and enter the amount of tax-exempt interest received or accrued during the year<br>► <b>15</b>  |           |          |                |
| <b>16</b> | At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?<br>See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ► | <b>16</b> | Yes      | No<br><b>X</b> |

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

|           |  | Yes       | No       |
|-----------|--|-----------|----------|
| <b>1a</b> | 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |           |          |
| (2)       | Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |           |          |
| (3)       | Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |           |          |
| (4)       | Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |           |          |
| (5)       | Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |           |          |
| (6)       | Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |           |          |
| <b>b</b>  | If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?<br>Organizations relying on a current notice regarding disaster assistance check here<br>N/A <input type="checkbox"/>   | <b>1b</b> |          |
| <b>c</b>  | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?<br>N/A   | <b>1c</b> |          |
| <b>2</b>  | 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))  |           |          |
| <b>a</b>  | 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?<br>If "Yes," list the years ► 20 , 20 , 20 , 20 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |           |          |
| <b>b</b>  | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement – see instructions) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   | <b>2b</b> |          |
| <b>c</b>  | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.<br>► 20 , 20 , 20 , 20  |           |          |
| <b>3a</b> | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |           |          |
| <b>b</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) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <b>3b</b> |          |
| <b>4a</b> | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?  | <b>4a</b> | <b>X</b> |
| <b>b</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?  | <b>4b</b> | <b>X</b> |

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)****5a** During the year did the foundation pay or incur any amount to

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

☐ Yes ☒ 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?

☐ Yes ☒ No**b** If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?**N/A****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?**N/A** ☐ Yes ☐ No

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

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?**6b**

If "Yes" to 6b, file Form 8870

**X****7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?☐ Yes ☒ No**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?**N/A****7b****Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1** List all officers, directors, trustees, foundation managers and their compensation (see instructions).

| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|----------------------|---|---|---|---------------------------------------|
| See Statement 8      |   |   |   |                                       |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |

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

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

**Total** number of other employees paid over \$50,000**0**

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."

| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
|---|---------------------|------------------|
| NONE  |                     |                  |
|   |                     |                  |
|   |                     |                  |
|   |                     |                  |
|   |                     |                  |
|   |                     |                  |

Total number of others receiving over \$50,000 for professional services ▶**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 |
|--------------|----------|
| <b>1</b> N/A |          |
| <b>2</b>     |          |
| <b>3</b>     |          |
| <b>4</b>     |          |

**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 |
|--|--------|
| <b>1</b> N/A   |        |
| <b>2</b>   |        |
| All other program-related investments See instructions                   |        |
| <b>3</b>   |        |
| <b>Total.</b> Add lines 1 through 3 <span style="float: right;">▶</span> |        |



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

|          |   |           |                |
|----------|---|-----------|----------------|
| <b>1</b> | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes  |           |                |
| <b>a</b> | Average monthly fair market value of securities   | <b>1a</b> | <b>103,853</b> |
| <b>b</b> | Average of monthly cash balances  | <b>1b</b> | <b>16,587</b>  |
| <b>c</b> | Fair market value of all other assets (see instructions)  | <b>1c</b> | <b>21,276</b>  |
| <b>d</b> | <b>Total</b> (add lines 1a, b, and c)   | <b>1d</b> | <b>141,716</b> |
| <b>e</b> | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)   | <b>1e</b> | <b>0</b>       |
| <b>2</b> | Acquisition indebtedness applicable to line 1 assets  | <b>2</b>  | <b>0</b>       |
| <b>3</b> | Subtract line 2 from line 1d  | <b>3</b>  | <b>141,716</b> |
| <b>4</b> | Cash deemed held for charitable activities. Enter 1½% of line 3 (for greater amount, see instructions)      | <b>4</b>  | <b>2,126</b>   |
| <b>5</b> | <b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4 | <b>5</b>  | <b>139,590</b> |
| <b>6</b> | <b>Minimum investment return.</b> Enter 5% of line 5  | <b>6</b>  | <b>6,980</b>   |

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

|           |   |           |              |
|-----------|---|-----------|--------------|
| <b>1</b>  | Minimum investment return from Part X, line 6   | <b>1</b>  | <b>6,980</b> |
| <b>2a</b> | Tax on investment income for 2015 from Part VI, line 5  | <b>2a</b> | <b>172</b>   |
| <b>b</b>  | Income tax for 2015 (This does not include the tax from Part VI)  | <b>2b</b> |              |
| <b>c</b>  | Add lines 2a and 2b   | <b>2c</b> | <b>172</b>   |
| <b>3</b>  | Distributable amount before adjustments. Subtract line 2c from line 1                                     | <b>3</b>  | <b>6,808</b> |
| <b>4</b>  | Recovery of amounts treated as qualifying distributions   | <b>4</b>  |              |
| <b>5</b>  | Add lines 3 and 4   | <b>5</b>  | <b>6,808</b> |
| <b>6</b>  | Deduction from distributable amount (see instructions)  | <b>6</b>  |              |
| <b>7</b>  | <b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | <b>7</b>  | <b>6,808</b> |

**Part XII** **Qualifying Distributions** (see instructions)

|          |  |           |               |
|----------|--|-----------|---------------|
| <b>1</b> | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:   |           |               |
| <b>a</b> | Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26  | <b>1a</b> | <b>25,476</b> |
| <b>b</b> | Program-related investments – total from Part IX-B   | <b>1b</b> |               |
| <b>2</b> | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes  | <b>2</b>  |               |
| <b>3</b> | Amounts set aside for specific charitable projects that satisfy the  |           |               |
| <b>a</b> | Suitability test (prior IRS approval required)   | <b>3a</b> |               |
| <b>b</b> | Cash distribution test (attach the required schedule)  | <b>3b</b> |               |
| <b>4</b> | <b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4                                    | <b>4</b>  | <b>25,476</b> |
| <b>5</b> | 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) | <b>5</b>  | <b>0</b>      |
| <b>6</b> | <b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4  | <b>6</b>  | <b>25,476</b> |

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

**Part XIII Undistributed Income (see instructions)**

|   | (a)<br>Corpus  | (b)<br>Years prior to 2014 | (c)<br>2014 | (d)<br>2015  |
|---|----------------|----------------------------|-------------|--------------|
| <b>1</b> Distributable amount for 2015 from Part XI, line 7   |                |                            |             | <b>6,808</b> |
| <b>2</b> Undistributed income, if any, as of the end of 2015  |                |                            |             |              |
| <b>a</b> Enter amount for 2014 only   |                |                            |             |              |
| <b>b</b> Total for prior years 20____, 20____, 20____   |                |                            |             |              |
| <b>3</b> Excess distributions carryover, if any, to 2015  |                |                            |             |              |
| <b>a</b> From 2010  | <b>18,186</b>  |                            |             |              |
| <b>b</b> From 2011  | <b>27,030</b>  |                            |             |              |
| <b>c</b> From 2012  | <b>33,522</b>  |                            |             |              |
| <b>d</b> From 2013  | <b>60,202</b>  |                            |             |              |
| <b>e</b> From 2014  | <b>17,961</b>  |                            |             |              |
| <b>f</b> Total of lines 3a through e  | <b>156,901</b> |                            |             |              |
| <b>4</b> Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ <b>25,476</b>   |                |                            |             |              |
| <b>a</b> Applied to 2014, but not more than line 2a   |                |                            |             |              |
| <b>b</b> Applied to undistributed income of prior years (Election required – see instructions)  |                |                            |             |              |
| <b>c</b> Treated as distributions out of corpus (Election required – see instructions)  |                |                            |             |              |
| <b>d</b> Applied to 2015 distributable amount   |                |                            |             | <b>6,808</b> |
| <b>e</b> Remaining amount distributed out of corpus   | <b>18,668</b>  |                            |             |              |
| <b>5</b> Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a) )  |                |                            |             |              |
| <b>6</b> Enter the net total of each column as indicated below:   |                |                            |             |              |
| <b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5  | <b>175,569</b> |                            |             |              |
| <b>b</b> Prior years' undistributed income Subtract line 4b from line 2b  |                |                            |             |              |
| <b>c</b> 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 |                |                            |             |              |
| <b>d</b> Subtract line 6c from line 6b Taxable amount – see instructions  |                |                            |             |              |
| <b>e</b> Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount – see instructions  |                |                            |             |              |
| <b>f</b> Undistributed income for 2015 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2016  |                |                            |             | <b>0</b>     |
| <b>7</b> 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)         |                |                            |             |              |
| <b>8</b> Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)  | <b>18,186</b>  |                            |             |              |
| <b>9</b> Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a  | <b>157,383</b> |                            |             |              |
| <b>10</b> Analysis of line 9  |                |                            |             |              |
| <b>a</b> Excess from 2011   | <b>27,030</b>  |                            |             |              |
| <b>b</b> Excess from 2012   | <b>33,522</b>  |                            |             |              |
| <b>c</b> Excess from 2013   | <b>60,202</b>  |                            |             |              |
| <b>d</b> Excess from 2014   | <b>17,961</b>  |                            |             |              |
| <b>e</b> Excess from 2015   | <b>18,668</b>  |                            |             |              |



**Part XV** **Supplementary Information (continued)****3 Grants and Contributions Paid During the Year or Approved for Future Payment**

| Recipient<br>Name and address (home or business)  | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution | Amount        |
|---|--|--------------------------------------|-------------------------------------|---------------|
| a Paid during the year<br><b>See Statement 10</b> |  |                                      |                                     | <b>25,476</b> |
| <b>Total</b>                                      |  |                                      | ▶ <b>3a</b>                         | <b>25,476</b> |
| b Approved for future payment<br><b>N/A</b>       |  |                                      |                                     |               |
| <b>Total</b>                                      |  |                                      | ▶ <b>3b</b>                         |               |





## Federal Statements

Statement 1 - Form 990-PF, Part I, Line 11 - Other Income

| Description                 | Revenue per Books | Net Investment Income | Adjusted Net Income |
|-----------------------------|-------------------|-----------------------|---------------------|
| CHARGE CARD FEE ADJUSTMENTS | \$ 274            | \$                    | \$                  |
| MISCELLANEOUS               | 61                |                       |                     |
| Total                       | <u>335</u>        | <u>0</u>              | <u>0</u>            |

Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees

| Description        | Total        | Net Investment | Adjusted Net | Charitable Purpose |
|--------------------|--------------|----------------|--------------|--------------------|
| RETURN PREPARATION | \$ 1,020     | \$             | \$           | \$                 |
| Total              | <u>1,020</u> | <u>0</u>       | <u>0</u>     | <u>0</u>           |

Statement 3 - Form 990-PF, Part I, Line 18 - Taxes

| Description              | Total      | Net Investment | Adjusted Net | Charitable Purpose |
|--------------------------|------------|----------------|--------------|--------------------|
| SEC. 4940 TAX            | \$ 127     | \$ 127         | \$           | \$                 |
| FOREIGN TAX ON DIVIDENDS | 10         | 10             |              |                    |
| Total                    | <u>137</u> | <u>137</u>     | <u>0</u>     | <u>0</u>           |

Statement 4 - Form 990-PF, Part I, Line 23 - Other Expenses

| Description                   | Total      | Net Investment | Adjusted Net | Charitable Purpose |
|-------------------------------|------------|----------------|--------------|--------------------|
| Expenses                      | \$         | \$             | \$           | \$                 |
| FILING FEE: MINN ATTORNEY GEN | 25         |                |              |                    |
| INVESTMENT FEES: MORGAN STANL | 707        | 707            |              |                    |
| MEETING EXPENSES              | 58         |                |              |                    |
| Total                         | <u>790</u> | <u>707</u>     | <u>0</u>     | <u>0</u>           |

## Federal Statements

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

| Description                      | Beginning<br>of Year | End of<br>Year | Basis of<br>Valuation | Fair Market<br>Value |
|----------------------------------|----------------------|----------------|-----------------------|----------------------|
| SUNAMERICA FOCUSED SERIES INCOME | \$ 25,000            | \$ 25,000      | Cost                  | \$ 30,319            |
| FIRST EAGLE GLOBAL FUND          | 25,000               | 25,000         | Cost                  | 26,172               |
| ALGER SPECTRA Z                  |                      | 9,015          | Cost                  | 8,319                |
| AMG SYSTEMATIC MID-CAP VALUE     |                      | 746            | Cost                  | 742                  |
| CALAMOS INT'L GROWTH I           |                      | 6,271          | Cost                  | 5,938                |
| CONGRESS MID-CAP GROWTH          |                      | 8,414          | Cost                  | 8,029                |
| WELLS FARGO PREM LARGE CO        |                      | 8,892          | Cost                  | 8,236                |
| ISHARES MSCI USA MINN ETF        |                      | 11,116         | Cost                  | 10,957               |
| MFS UTILITIES FUND               | 25,000               |                | Cost                  |                      |
| Total                            | \$ 75,000            | \$ 94,454      |                       | \$ 98,712            |

## Statement 6 - Form 990-PF, Part II, Line 11 - Land, Building, and Equipment Investments

| Description             | Beginning<br>Net Book | End<br>Cost / Basis | End Accumulated<br>Depreciation | Net<br>FMV |
|-------------------------|-----------------------|---------------------|---------------------------------|------------|
| LAND, CARVER COUNTY, MN | \$ 21,276             | \$ 21,276           | \$                              | \$ 21,276  |
| Total                   | \$ 21,276             | \$ 21,276           | \$ 0                            | \$ 21,276  |



**Statement 7 - Form 990-PF, Part II, Line 22 - Other Liabilities**

| <u>Description</u>          | <u>Beginning<br/>of Year</u> | <u>End of<br/>Year</u> |
|-----------------------------|------------------------------|------------------------|
| CREDIT CARD CHARGES PAYABLE | \$ <u>5,000</u>              | \$ <u>58</u>           |
| Total                       | \$ <u>5,000</u>              | \$ <u>58</u>           |

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## Federal Statements

## Statement 8 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc.

| Name and Address   | Title    | Average Hours | Compensation | Benefits | Expenses |
|--|----------|---------------|--------------|----------|----------|
| JUDITH A. ESS<br>9761 ROOKERY CIRCLE<br>ESTERO FL 33928              | DIRECTOR | 1.00          | 0            | 0        | 0        |
| TIFFANY A. IMKER<br>1743 SANDBAR CIRCLE<br>WACONIA MN 55387          | DIRECTOR | 1.00          | 0            | 0        | 0        |
| TRENT ESS<br>2066 SHOREWOOD DRIVE<br>MOUND MN 55364                  | DIRECTOR | 1.00          | 0            | 0        | 0        |
| TROY ESS<br>6225 PIONEER TRAIL<br>LORETTO MN 55357                   | DIRECTOR | 1.00          | 0            | 0        | 0        |
| KIMBERLY WRIGHT<br>2012 PINE RIDGE DRIVE<br>WEST SAINT PAUL MN 55118 | DIRECTOR | 1.00          | 0            | 0        | 0        |

**Statement 9 - Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000**

| <u>Name of Manager</u> | <u>Amount</u> |
|------------------------|---------------|
| THOMAS W..ESS, DEC.    | \$            |
| JUDITH A. ESS          |               |
| Total                  | \$ 0          |

## Federal Statements

Statement 10 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the  
Year

| Name                      |  | Address                   |             | Relationship | Status    | Purpose | Amount |
|---------------------------|--|---------------------------|-------------|--------------|-----------|---------|--------|
| Address                   |  |                           |             |              |           |         |        |
| CHILDREN INTERNATIONAL    |  | PO BOX 219055             | PUBLIC CHAR |              | OPERATING |         |        |
| KANSAS CITY MO 64121      |  | 615 FIRST AVENUE NE       | PUBLIC CHAR |              | OPERATING |         |        |
| MAKE A WISH FOUNDATION    |  | 2260 SUMMIT AVENUE        | PUBLIC CHAR |              | OPERATING |         |        |
| MINNEAPOLIS MN 55413      |  | 3915 GOLDEN VALLEY ROAD   | PUBLIC CHAR |              | OPERATING |         |        |
| SAINT PAUL SEMINARY       |  | 525 THOMAS AVENUE         | PUBLIC CHAR |              | OPERATING |         |        |
| SAINT PAUL MN 55105       |  | 37 SOUTH COLLEGE AVENUE   | PUBLIC CHAR |              | OPERATING |         |        |
| COURAGE CENTER            |  | 330 EXCHANGE STREET SOUTH | PUBLIC CHAR |              | OPERATING |         |        |
| MINNEAPOLIS MN 55422      |  | 41 EAST FIRST STREET      | PUBLIC CHAR |              | OPERATING |         |        |
| TOTAL LIFE CARE CENTERS   |  | 230 CONCORD EXCHANGE N    | PUBLIC CHAR |              | OPERATING |         |        |
| SAINT PAUL MN 55103       |  | 41 MADISON AVENUE         | PUBLIC CHAR |              | OPERATING |         |        |
| COLLEGE OF SAINT BENEDICT |  | 77 9TH STREET EAST        | PUBLIC CHAR |              | OPERATING |         |        |
| SAINT JOSEPH MN 56374     |  | 1200 SECOND AVENUE SOUTH  | PUBLIC CHAR |              | OPERATING |         |        |
| LITTLE SISTERS OF THE     |  | 2385 COMMERCE BOULEVARD   | PUBLIC CHAR |              | OPERATING |         |        |
| SAINT PAUL MN 55102       |  | 1900 111TH AVENUE NW      | PUBLIC CHAR |              | OPERATING |         |        |
| SAINT JOSEPH CATHOLIC     |  | 19680 CYPRESS VIEW DRIVE  | PUBLIC CHAR |              | OPERATING |         |        |
| WACONIA MN 55387          |  | 707 4TH STREET SOUTH      | PUBLIC CHAR |              | OPERATING |         |        |
| MARRIAGE ENCOUNTER        |  | 105 PEAVY ROAD            | PUBLIC CHAR |              | OPERATING |         |        |
| SOUTH SAINT PAUL MN 55075 |  | 5005 LBJ FREEWAY          | PUBLIC CHAR |              | OPERATING |         |        |
| SMILE TRAIN               |  | PO BOX 1443               | PUBLIC CHAR |              | OPERATING |         |        |
| NEW YORK NY 10010         |  |                           |             |              |           |         |        |
| UNION GOSPEL MISSION      |  |                           |             |              |           |         |        |
| SAINT PAUL MN 55101       |  |                           |             |              |           |         |        |
| CATHOLIC CHARITIES        |  |                           |             |              |           |         |        |
| MINNEAPOLIS MN 55403      |  |                           |             |              |           |         |        |
| OUR LADY OF THE LAKE      |  |                           |             |              |           |         |        |
| MOUND MN 55364            |  |                           |             |              |           |         |        |
| CHURCH OF THE EPIPHANY    |  |                           |             |              |           |         |        |
| COON RAPIDS MN 55433      |  |                           |             |              |           |         |        |
| OUR LADY OF LIGHT         |  |                           |             |              |           |         |        |
| FORT MEYERS FL 33912      |  |                           |             |              |           |         |        |
| SAINT JAMES CATHOLIC      |  |                           |             |              |           |         |        |
| SAINT JAMES MN 56081      |  |                           |             |              |           |         |        |
| MIRACLES OF MITCH         |  |                           |             |              |           |         |        |
| CHASKA MN 55318           |  |                           |             |              |           |         |        |
| SUSAN B. KOMMEN           |  |                           |             |              |           |         |        |
| DALLAS TX 75244           |  |                           |             |              |           |         |        |
| CHILDREN'S FOUNDATION     |  |                           |             |              |           |         |        |
| LOVELAND CO 80539-1443    |  |                           |             |              |           |         |        |

## Federal Statements

Statement 10 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the  
Year (continued)

| Name                     |                           | Address |                          | Relationship |           | Status | Purpose | Amount |
|--------------------------|---------------------------|---------|--------------------------|--------------|-----------|--------|---------|--------|
| SHRINERS' HOSPITAL       | MINNEAPOLIS MN 55414      | NONE    | 2025 EAST RIVER PARKWAY  | PUBLIC CHAR  | OPERATING |        |         |        |
| ALLIANCE DEFENSE FUND    | SCOTTSDALE AZ 85260       | NONE    | 15100 N 90TH STREET      | PUBLIC CHAR  | OPERATING |        |         |        |
| HERITAGE FOUNDATION      | WASHINGTON DC 20002-4999  | NONE    | 214 MASSACHUSETTS AVE NE | PUBLIC CHAR  | OPERATING |        |         |        |
| CITIZENS UNITED          | WASHINGTON DC 20003       | NONE    | 1006 PENNSYLVANIA AVE SE | PUBLIC CHAR  | OPERATING |        |         |        |
| AMERICAN FAMILY          | TUPELO MS 38803           | NONE    | PO DRAWER 2440           | PUBLIC CHAR  | OPERATING |        |         |        |
| HOLY FAMILY CATHOLIC     | VICTORIA MN 55386-8228    | NONE    | 8101 KOCHIA LANE         | PUBLIC CHAR  | OPERATING |        |         |        |
| FIDELIS FOUNDATION       | DELRAY BEACH FL 33446     | NONE    | 16668 WINNERS CIRCLE DR  | PUBLIC CHAR  | OPERATING |        |         |        |
| SALVATION ARMY           | MINNEAPOLIS MN 55401-1039 | NONE    | 910 NORTH 4TH STREET     | PUBLIC CHAR  | OPERATING |        |         |        |
| MEDIA RESEARCH CENTER    | ALEXANDRIA VA 22314       | NONE    | 325 SOUTH PATRICK STREET | PUBLIC CHAR  | OPERATING |        |         | 2,000  |
| LAKE MINNETONKA          | EXCELSIOR MN 55331        | NONE    | PO BOX 248               | PUBLIC CHAR  | OPERATING |        |         |        |
| MASONIC CANCER CENTER    | SAINT PAUL MN 55164-0001  | NONE    | PO BOX 64001             | PUBLIC CHAR  | OPERATING |        |         |        |
| CATHOLIC SERVICES APPEAL | SAINT PAUL MN 55102       | NONE    | 328 KELLOGG BOULEVARD W  | PUBLIC CHAR  | OPERATING |        |         |        |
| SCIENCE MUSEUM OF        | SAINT PAUL MN 55102       | NONE    | 120 KELLOGG BOULEVARD W  | PUBLIC CHAR  | OPERATING |        |         |        |
| CATHOLIC FAITH APPEAL    | VENICE FL 34285           | NONE    | 1000 PINEBROOK ROAD      | PUBLIC CHAR  | OPERATING |        |         | 150    |
| ORDWAY CENTER            | SAINT PAUL MN 55102       | NONE    | 345 WASHINGTON STREET    | PUBLIC CHAR  | OPERATING |        |         |        |
| AMERICAN DIABETES        | ALEXANDRIA VA 22311       | NONE    | 1701 N BEAUREGARD STREET | PUBLIC CHAR  | OPERATING |        |         |        |
| CHAPEL OF THE CROSS      | CHAPEL HILL NC 27514-3624 | NONE    | 304 EAST FRANKLIN STREET | PUBLIC CHAR  | OPERATING |        |         |        |
| SOUTHWEST CRISIS CENTER  | WORTHINGTON MN 56187      | NONE    | 920 DIAGONAL ROAD        | PUBLIC CHAR  | OPERATING |        |         |        |

## Federal Statements

Statement 10 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the  
Year (continued)

| Name                                |  | Address                   |             | Relationship | Status | Purpose   | Amount |
|-------------------------------------|--|---------------------------|-------------|--------------|--------|-----------|--------|
| SPECIAL OLYMPICS, INC               |  | 1133 19TH STREET NW       | PUBLIC CHAR |              |        | OPERATING |        |
| WASHINGTON DC 20036                 |  | 3213 DUKE STREET          | PUBLIC CHAR |              |        | OPERATING |        |
| AMERICAN CIVIL RIGHTS UNION         |  | 200 OAK STREET SE         | PUBLIC CHAR |              |        | OPERATING |        |
| ALEXANDRIA VA 22314                 |  | 172 EAST 4TH STREET       | PUBLIC CHAR |              |        | OPERATING |        |
| MINNESOTA MEDICAL FOUNDATION        |  | 1715 YANKEE DOODLE ROAD   | PUBLIC CHAR |              |        | OPERATING |        |
| MINNEAPOLIS MN 55455                |  | 3755 DUNKIRK LANE NORTH   | PUBLIC CHAR |              |        | OPERATING | 2,500  |
| TWIN CITIES PUBLIC TELEVISION       |  | 2000 EAST RED BRIDGE ROAD | PUBLIC CHAR |              |        | OPERATING |        |
| SAINT PAUL MN 55101                 |  | 425 THIRD STREET SW       | PUBLIC CHAR |              |        | OPERATING | 2,376  |
| CARING BRIDGE                       |  | 733 THIRD AVENUE          | PUBLIC CHAR |              |        | OPERATING |        |
| EAGAN MN 55121                      |  | 2925 CHICAGO AVENUE       | PUBLIC CHAR |              |        | OPERATING |        |
| PLYMOUTH PRESBYTERIAN CHURCH        |  | 480 CEDAR STREET          | PUBLIC CHAR |              |        | OPERATING |        |
| PLYMOUTH MN 55446                   |  | 262 DANNY THOMAS PLACE    | PUBLIC CHAR |              |        | OPERATING |        |
| CHILDREN'S INTERNATIONAL            |  | 1331 H STREET NW          | PUBLIC CHAR |              |        | OPERATING |        |
| KANSAS CITY MO 64121                |  | 110-A SHIELDS PARK DRIVE  | PUBLIC CHAR |              |        | OPERATING |        |
| JUDICIAL WATCH                      |  | 1311 MAMARONECK AVENUE    | PUBLIC CHAR |              |        | OPERATING |        |
| WASHINGTON DC 20024                 |  | 239 SELBY AVENUE          | PUBLIC CHAR |              |        | OPERATING |        |
| NATIONAL MULTIPLE SCLEROSIS SOCIETY |  | 101 TRUMAN AVENUE         | PUBLIC CHAR |              |        | OPERATING |        |
| NEW YORK NY 10017                   |  | PO BOX 651355             | PUBLIC CHAR |              |        | OPERATING |        |
| ABBOTT NORTHWESTERN HOSPITAL        |  |                           |             |              |        |           |        |
| MINNEAPOLIS MN 55407                |  |                           |             |              |        |           |        |
| MINNESOTA PUBLIC RADIO              |  |                           |             |              |        |           |        |
| SAINT PAUL MN 55102                 |  |                           |             |              |        |           |        |
| SAINT JUDE CHILDREN'S RESEARCH      |  |                           |             |              |        |           |        |
| MEMPHIS TN 38105                    |  |                           |             |              |        |           |        |
| AMERICAN CONSERVATIVE UNION         |  |                           |             |              |        |           |        |
| WASHINGTON DC 20025                 |  |                           |             |              |        |           |        |
| UNITED AMERICAN PATRIOTS            |  |                           |             |              |        |           |        |
| KERNERSVILLE NC 27284               |  |                           |             |              |        |           |        |
| LEUKEMIA LYMPHOMA SOCIETY           |  |                           |             |              |        |           |        |
| WHITE PLAINS NY 10605               |  |                           |             |              |        |           |        |
| CATHEDRAL OF SAINT PAUL             |  |                           |             |              |        |           |        |
| SAINT PAUL MN 55102                 |  |                           |             |              |        |           |        |
| CONSUMER REPORTS FOUNDATION         |  |                           |             |              |        |           |        |
| YONKERS NY 10703                    |  |                           |             |              |        |           |        |
| CAPITOL WATCH                       |  |                           |             |              |        |           |        |
| STERLING VA 20165                   |  |                           |             |              |        |           |        |

## Federal Statements

Statement 10 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the  
Year (continued)

| Name                             |      | Address                   |           | Relationship | Status | Purpose | Amount |
|----------------------------------|------|---------------------------|-----------|--------------|--------|---------|--------|
| CROSS INTERNATIONAL CATHOLIC     |      | 2700 NORTH MILITARY TRAIL |           |              |        |         |        |
| BOCA RATON FL 33427              | NONE | PUBLIC CHAR               | OPERATING |              |        |         |        |
| MINNESOTA ORCHESTRA              |      | 11111 NICOLLET MALL       |           |              |        |         |        |
| MINNEAPOLIS MN 55403             | NONE | PUBLIC CHAR               | OPERATING |              |        |         |        |
| SAINT THOMAS ACADEMY             |      | 949 MENDOTA HEIGHTS ROAD  |           |              |        |         |        |
| MENDOTA HEIGHTS MN 55120         | NONE | PUBLIC CHAR               | OPERATING |              |        |         |        |
| LAKE MINNETONKA REGIONAL ARTS    |      | 5581 OLD SHORELINE DRIVE  |           |              |        |         |        |
| MOUND MN 55364                   | NONE | PUBLIC CHAR               | OPERATING |              |        |         |        |
| AMNESTY INTERNATIONAL USA        |      | 5 PENN PLAZA              |           |              |        |         |        |
| NEW YORK NY 10001                | NONE | PUBLIC CHAR               | OPERATING |              |        |         |        |
| MISSIONARY OBLATES OF MARY       |      | PO BOX 417                |           |              |        |         |        |
| WHITE EARTH MN 56591             | NONE | PUBLIC CHAR               | OPERATING |              |        |         |        |
| HENNEPIN COUNTY SHERIFF          |      | PO BOX 15011              |           |              |        |         |        |
| MINNEAPOLIS MN 55415             | NONE | PUBLIC CHAR               | OPERATING |              |        |         |        |
| INSTITUTE FOR JUSTICE            |      | 901 NORTH GLEBE ROAD      |           |              |        |         |        |
| ARLINGTON VA 22203               | NONE | PUBLIC CHAR               | OPERATING |              |        |         |        |
| UNIVERSITY OF NORTH DAKOTA       |      | 3501 UNIVERSITY AVENUE    |           |              |        |         |        |
| GRAND FORKS ND 58202             | NONE | PUBLIC CHAR               | OPERATING |              |        |         |        |
| FOOD ALLERGY SUPPORT GROUP       |      | 1730 NEW BRIGHTON BLVD    |           |              |        |         |        |
| MINNEAPOLIS MN 55413             | NONE | PUBLIC CHAR               | OPERATING |              |        |         |        |
| FOOD ALLERGY & ANAPHYLAXIS       |      | 11781 LEE JACKSON HIGHWAY |           |              |        |         |        |
| FAIRFAX VA 22033                 | NONE | PUBLIC CHAR               | OPERATING |              |        |         |        |
| GEORGE W. BUSH PRESIDENTIAL      |      | 2943 SMU BOULEVARD        |           |              |        |         |        |
| DALLAS TX 75205                  | NONE | PUBLIC CHAR               | OPERATING |              |        |         |        |
| MARCO ISLAND CENTER FOR THE ARTS |      | 1010 WINTERBERRY DRIVE    |           |              |        |         |        |
| MARCO ISLAND FL 34145            | NONE | PUBLIC CHAR               | OPERATING |              |        |         |        |
| FEED MY STARVING CHILDREN        |      | 401 93RD AVENUE NW        |           |              |        |         |        |
| COON RAPIDS MN 55433             | NONE | PUBLIC CHAR               | OPERATING |              |        |         |        |
| ALLIANCE DEFENDING FREEDOM       |      | 15100 NORTH 90TH STREET   |           |              |        |         |        |
| SCOTTSDALE AZ 85260              | NONE | PUBLIC CHAR               | OPERATING |              |        |         |        |
| FREEDOMWORKS FOUNDATION          |      | 400 NORTH CAPITOL ST. NW  |           |              |        |         |        |
| WASHINGTON DC 20001              | NONE | PUBLIC CHAR               | OPERATING |              |        |         |        |
| WESTWOOD COMMUNITY CHURCH        |      | 3121 WESTWOOD DRIVE       |           |              |        |         |        |
| EXCELSIOR MN 55331               | NONE | PUBLIC CHAR               | OPERATING |              |        |         |        |
| RIDGEVIEW FOUNDATION             |      | 500 SOUTH MAPLE STREET    |           |              |        |         |        |
| WACONIA MN 55387                 | NONE | PUBLIC CHAR               | OPERATING |              |        |         |        |

## Federal Statements

**Statement 10 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the  
Year (continued)**

| Name   |  | Address |  | Relationship | Status                                 | Purpose   | Amount        |
|--|--|---------|--|--------------|--|-----------|---------------|
| NATIONAL CENTER FOR PUBLIC<br>WASHINGTON DC 20002  |  |         |  | NONE         | 500 CAPITOL COURT, N.E.<br>PUBLIC CHAR | OPERATING |               |
| GRACE FAMILY CENTER<br>MOUND MN 55364              |  |         |  | NONE         | 2385 COMMERCE BLVD<br>PUBLIC CHAR      | OPERATING | 5,000         |
| OBLATES OF SAINT FRANCES DE<br>WILMINGTON DE 19806 |  |         |  | NONE         | 2200 KENTMERE PKWY<br>PUBLIC CHAR      | OPERATING | 200           |
| SCALPEL AT THE CROSS<br>MIAMI FL 33255             |  |         |  | NONE         | P.O. BOX 558436<br>PUBLIC CHAR         | OPERATING | 2,500         |
| MARCH OF DIMES<br>MINNEAPOLIS MN 55439             |  |         |  | NONE         | 8000 WEST 78TH STREET<br>PUBLIC CHAR   | OPERATING | 200           |
| CHILDREN'S HOSPITAL<br>SAINT PAUL MN 55102         |  |         |  | NONE         | 345 SMITH AVENUE NORTH<br>PUBLIC CHAR  | OPERATING | 1,000         |
| Total  |  |         |  |              |  |           | <u>25,476</u> |



**Schedule of Contributors**

OMB No 1545-0047

**2015**

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

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

Name of the organization

Employer identification number

**ESS FAMILY FOUNDATION**

**41-1975420**

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

Form 990-PF

☒ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private 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) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

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

**Special Rules**

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

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

Name of organization

ESS FAMILY FOUNDATION

Employer identification number

41-1975420

**Part I**

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                            | (c)<br>Total contributions | (d)<br>Type of contribution  |
|------------|--|----------------------------|--|
| 1          | TRENT ESS<br>2066 SHOREWOOD DRIVE<br><br>MOUND MN 55364      | \$ 10,000                  | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions) |
| 2          | TROY ESS<br>6225 PIONEER TRAIL<br><br>LORETTO MN 55357       | \$ 10,000                  | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions) |
| 3          | JUDITH A. ESS<br>9761 ROOKERY CIRCLE<br><br>ESTERO FL 33928  | \$ 10,000                  | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions) |
| 4          | TIFFANY IMKER<br>1734 SANDBAR CIRCLE<br><br>WACONIA MN 55387 | \$ 9,500                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions) |
|            |  | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions)            |
|            |  | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions)            |