

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



DLN: 93491132014646

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

For	cale	ndar year 2015, or tax y	year beginning 01-0	1-2015	, aı	nd ending 1	2-31-2015	
	e of four	ndation MILY FOUNDATION				A Employer id	entification numb	er
Ci	ILLEN I A	THE TOOMDATION				41-1989004		
		street (or P O box number if mail is	not delivered to street address)	Room/suite		B Telephone nur	nber (see instruction	s)
36	INTERLA	ACHEN COURT				(952) 474-0977		
		state or province, country, and ZIP on State or province, country, and ZIP on State or province, state or province, country, and ZIP of the state of the	r foreign postal code			C If exemption	application is pendin	g, check here 🕨 🦵
G CI	neck al	I that apply Tinitial return	Initial return of a fo	ormer public charity		D 1 Foreign or	ganizations chock h	oro
		Final return Address chang	A mended return	,		2. Foreign or	ganizations, check h ganizations meeting k here and attach co	the 85%
H Ch	eck ty ction 4	pe of organization 🔽 Section 1947(a)(1) nonexempt charital	ole trust 「Other taxable	e private foundation		•	indation status was to 507(b)(1)(A), chec	. —
		et value of all assets at end rom Part II, col. (c),	JAccounting method Other (specify)	✔ Cash Accrual	ı		ition is in a 60-mont n 507(b)(1)(B), chec	
		\$ 2,206,347	(Part I, column (d) must	be on cash basıs.)		and of section	. 307(B)(1)(B), enec	, increase and inc
(The total of amounts in columns		Analysis of Revenue a (The total of amounts in columns in necessarily equal the amounts in constructions)	(b), (c), and (d) may not	Revenue and expenses per (a) books	(b)	Net investment income	Adjusted net (c) income	Disbursements for charitable purposes (d) (cash basis only)
	1	Contributions, gifts, grants, e	etc , received (attach					(, (, ,
		schedule)		60,000				
	2	Check 🟲 🦵 If the foundation	is not required to attach					
		'						
	3	Interest on savings and temp	oorary cash investments					
	4	Dividends and interest from s	securities	107,923		107,923		
	5a	Gross rents						
	b	Net rental income or (loss) _						
₽	6a	Net gain or (loss) from sale o	fassets not on line 10	-48,908				
Reveilue	b	Gross sales price for all asse 246,668	ets on line 6a					
	7	Capital gain net income (fron				0		
	8	Net short-term capital gain .						
	9	Income modifications						
	10a	Gross sales less returns and allowances						
	ь	Less Cost of goods sold .						
	c	Gross profit or (loss) (attach	schedule)					
	11	Other income (attach schedu	ıle)					
	12	Total. Add lines 1 through 11		119,015		107,923		
	13	Compensation of officers, dir		5,246		0		5,246
	14	O ther employee salaries and						
φ	15	Pension plans, employee ben						
	16a	Legal fees (attach schedule).						
Expenses	Ь	Accounting fees (attach sche		3,267		0		3,267
	С	O ther professional fees (atta	ch schedule)	100		0		100
ativ	17	Interest						
봈	18	Taxes (attach schedule) (see	•	5,000		0		0
	19	Depreciation (attach schedul						
Administrative	20	Occupancy						
and /	21	Travel, conferences, and mee		5,753		0		5,753
	22	Printing and publications		% 5,455		0		5,455
Ĭ.		Other expenses (attach sche		3,433				3,433
Operating	24	Total operating and administ Add lines 13 through 23	-	24,821		0		19,821
ô	25	Contributions, gifts, grants p		82,790		· ·		82,790
	26	Total expenses and disburser		02,730				02,730
		25	ments.Aud lilles 24 and	107,611	L	0		102,611
	27	Subtract line 26 from line 12						
	a	Excess of revenue over expe		11,404				
	Ь	Net investment income (If ne				107,923		
	С	Adjusted net income(If negat	rive, enter -0-)					

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value			
	1	Cash—non-interest-bearing	(a) Book Value	(B) Book Value	(c) I all Flance Value			
	2	Savings and temporary cash investments	177,517	179,618	179,618			
	3	Accounts receivable -	,	,				
		Less allowance for doubtful accounts -						
	4	Pledges receivable						
	7	Less allowance for doubtful accounts -						
	5	Grants receivable						
	6	Receivables due from officers, directors, trustees, and other			_			
	O	disqualified persons (attach schedule) (see instructions)						
	7	Other notes and loans receivable (attach schedule)						
	,	Less allowance for doubtful accounts -						
		Inventories for sale or use						
왍	8	Prepaid expenses and deferred charges						
Assets	9		· · · · · · · · · · · · · · · · · · ·					
⋖	10a	Investments—U S and state government obligations (attach schedule)						
	b	Investments—corporate stock (attach schedule)						
	С	Investments—corporate bonds (attach schedule)						
	11	Investments—land, buildings, and equipment basis 🕨						
		Less accumulated depreciation (attach schedule) ▶						
	12	Investments—mortgage loans						
	13	Investments—other (attach schedule)	2,023,528	2,026,729	2,026,729			
	14	Land, buildings, and equipment basis 🟲						
		Less accumulated depreciation (attach schedule) 🟲						
	15	O ther assets (describe 🟲)						
	16	Total assets(to be completed by all filers—see the						
		ınstructions Also, see page 1, item I)	2,201,045	2,206,347	2,206,347			
	17	Accounts payable and accrued expenses						
	18	Grants payable						
ě	19	Deferred revenue						
abilities	20	Loans from officers, directors, trustees, and other disqualified persons						
	21	Mortgages and other notes payable (attach schedule)						
┚	22	O ther liabilities (describe 🟲)						
	23	Total liabilities(add lines 17 through 22)	0	0				
		Foundations that follow SFAS 117, check here 🕨 🔽						
ě		and complete lines 24 through 26 and lines 30 and 31.						
aŭ	24	Unrestricted	2,201,045	2,206,347				
89	25	Temporarily restricted						
Fund Balances	26	Permanently restricted						
ᆵ		Foundations that do not follow SFAS 117, check here 🕨 🦵						
<u>-</u>		and complete lines 27 through 31.						
	27	Capital stock, trust principal, or current funds						
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund						
ă	29	Retained earnings, accumulated income, endowment, or other funds						
Net	30	Total net assets or fund balances(see instructions)	2,201,045	2,206,347				
-	31	Total liabilities and net assets/fund balances(see instructions)	2,201,045	2,206,347				
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances						
1		Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must ag	ree				
		with end-of-year figure reported on prior year's return)		1	2,201,045			
2		Enter amount from Part I, line 27a		2	11,404			
3		Other increases not included in line 2 (itemize)		3	0			
4		Add lines 1, 2, and 3		4	2,212,449			
5		Decreases not included in line 2 (itemize)			6,102			
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Pa		ne 30 . 6	2,206,347			

the Part VI instructions

Part	Capital Gains	and Losses for Tax on Inv	estment Inco	me			
List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)					se /	Date acquired (mo , day, yr)	Date sold (d) (mo , day, yr)
1 a	CHARLES SCHWAB			Р			
b							
С							
d							
e							
	e) Gross sales price	Depreciation allow (f) (or allowable)		Cost or other basis lus expense of sale			or (loss) (f) minus (g)
a	2	46,668	137.	295,!	76		-48,908
ь							
С							
d							
<u>ч</u> е							
	mplata aply for accets	chaving gain in column (h) and av	road by the found:	ation on 12/21/60		C (C-I	/h \
	implete only for assets :	showing gain in column (h) and ow Adjusted basis		Excess of col (i)	_		(h) gain minus t less than -0-) or
(i)	FMV as of 12/31/69	(j) as of 12/31/69		over col (j), if any	(1)		from col (h))
а				<u> </u>			-48,908
b							
С							
d							
<u> </u>					+		
			[If gain also or	nter in Part I, line 7	1		
2	Capital gain net inco	me or (net capital loss)		-0- in Part I, line 7	} _		40.000
_	Not all out to any accept		[۱ (۲)	' ├-	2	-48,908
3	·	al gain or (loss) as defined in sect	, ,	• •	,		
		Part I, line 8, column (c) (see inst	ructions) If (loss	s), enter -0-	}		
	ın Part I, line 8 .			· · ·	· 1	3	
Part	V Qualification (Under Section 4940(e) for	Reduced Tax	on Net Investr	nent :	Income	
	tional use by domestic ; on 4940(d)(2) applies,	private foundations subject to the leave this part blank	section 4940(a)	tax on net investme	nt inco	ome)	
Was the	e foundation liable for th	ne section 4942 tax on the distrib	utable amount of	any vear in the base	period	12	┌ Yes ┌ No
		not qualify under section 4940(e)			P 000	-	,
1 En	ter the appropriate amo	ount in each column for each year,	see instructions	before making any e	ntries		
	(a)	<u> </u>	1		1	(d)	
	e period years Calendar or tax year beginning in)	(b) Adjusted qualifying distributions	Net value of no	(c) ncharitable-use assets		Distributio (col (b) divided	n ratio
	2014	101,90		2,145,439			0 047497
	2013	106,467		2,129,040			0 050007
	2012	97,636		2,099,273			0 046509
	2011	89,550		1,955,952			0 045783
	Z010	84,033		1,866,478		T	0 045022
2 3	A verage distribution	n (d)	divide the total o	n line 2 by 5, or by	2		0 234818
_		the foundation has been in exister			3	-	0 046964
4		of noncharitable-use assets for 20	•		4		2,195,790
5	• • • • • • •	e 3			5	1	103,123
6		estment income (1% of Part I, line	•		6		1,079
7					7		104,202
8	Enter qualifying distr	ributions from Part XII, line 4			8		102,611

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

ĽŒL	Excise Tax based on Investment Income (Section 4940(a), 4940(b), 49	54 0(e),	, UI 4340—SE	e pag	C 10 01	rue ins	LIUCLIO	'IIS)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	• F)					
	Date of ruling or determination letter			ļ					
	(attach copy of letter if necessary—see instructions)			ĺ					
Ь	Domestic foundations that meet the section 4940(e) requirements in Part V,			J	1				158,2
_	here Fand enter 1% of Part I, line 27b			•					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organiza Part I, line 12, col (b)	ations 6	enter 4% of						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foun enter -0-)	ndation	s only Othe	ers	2				0
3	Add lines 1 and 2				3			;	 2,158
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable four enter -0-)	ndatıor	s only Othe	ers	4				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, e	nter - 0			5				2,158
6	Credits/Payments								
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a		6,341					
ь	Exempt foreign organizations—tax withheld at source	6b							
С	Tax paid with application for extension of time to file (Form 8868)	6c							
d	Backup withholding erroneously withheld	6d							
7	Total credits and payments Add lines 6a through 6d				7			(5,341
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2	2220 is	attached		8				
9	Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed .			•	9				
10	Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amoun	t over	oaid	F	10			-	4,183
11	Enter the amount of line 10 to be Credited to 2015 estimated tax	4,183	Refunded	•	11				0
Par	t VII-A Statements Regarding Activities					•			
1a	During the tax year, did the foundation attempt to influence any national, state	e, or loc	al legislatio	n or d	ıd			Yes	No
	ıt participate or intervene in any political campaign?						1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for p	oolitica	l purposes (see In	structi	ions			
	for definition)?						1b		No
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities	and co	pies of any r	materia	ıls				
	published or distributed by the foundation in connection with the activities.								
С	Did the foundation file Form 1120-POL for this year?						1c		No
d	Enter the amount (If any) of tax on political expenditures (section 4955) impos			r					
	(1) On the foundation \$\(\bigs\)			0					
е	Enter the reimbursement (if any) paid by the foundation during the year for poli	itical e	xpenditure t	ax ımp	osed				
	on foundation managers 🕨 \$0								
2	Has the foundation engaged in any activities that have not previously been rep	ported	to the IRS?				2		No
	If "Yes," attach a detailed description of the activities.								
3	Has the foundation made any changes, not previously reported to the IRS, in it	_	_	-		S			
_	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a confi						3	\vdash	No
4a	Did the foundation have unrelated business gross income of \$1,000 or more d						4a		No
ь	If "Yes," has it filed a tax return on Form 990-T for this year?						4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction du	ring the	e year/				5		No
6	If "Yes," attach the statement required by General Instruction T. Are the requirements of section 508(e) (relating to sections 4941 through 49	4E\ aa	trafiad artha	_					
U	By language in the governing instrument, or	43)Sa	tisiled eitile	ı					
	 By state legislation that effectively amends the governing instrument so th 	at no n	nandatory di	irectio	ns				
	that conflict with the state law remain in the governing instrument?						6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year?					·),			
	and Part XV.					" • • •	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see ins	tructions)						
	►MN		-						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99	90-PF	to the Attor	ney					
	General (or designate) of each state as required by General Instruction G? If	"No," at	tach explana	tion .			8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the r	meanın	g of section	4942	(յ)(3)				
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (s	ee inst	ructions for	Part X	(IV)?				
	If "Yes," complete Part XIV						9	igsqcup	No
10	Did any persons become substantial contributors during the tax year? If "Yes,	" attach	a schedule	listing	their n	ames			
	and addresses.						10	1	No

Pai	Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12	<u> </u>	No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ► <u>N/A</u>			
14	The books are in care of ►THE FOUNDATION Telephone no ►(952) 474	-0977	
	Located at >36 INTERLACHEN COURT EXCELSIOR MN ZIP+4 >5533195			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here		▶ □	
13	and enter the amount of tax-exempt interest received or accrued during the year	•	- ,	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	مدا	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			1
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days) Yes V No			
ь	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)?	1b		No
	Organizations relying on a current notice regarding disaster assistance check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2015?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2015?			
	If "Yes," list the years > 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement—see instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	If the foundation had excess business holdings in 2015.).	3b	 	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	1	No

Pa	rt VII-B	Statements Rega	rdir	ng Activities for	Wŀ	ich Form 4720	May	Be Required <i>(Cont</i>	inue	ed)	
5a	During th	e year dıd the foundatıor	рау	or incurany amoun	t to						
	(1) Carry	on propaganda, or other	wise	attempt to influence	e leg	ıslatıon (section 494	45(e)) [?]	No		
	(2) Influe	ence the outcome of any	spec	ıfıc publıc election (see	section 4955), or to	car	ry			
	on, dı	rectly or indirectly, any	votei	registration drive?.				┌ Yes ▽	No		
	(3) Provi	de a grant to an individu	al for	travel, study, or oth	ers	ımılar purposes?		☐ Yes ☑	No		
	(4) Provi	de a grant to an organıza	tıon	other than a charita	ble,	etc , organization de:	scrib	ped			
	ın sed	ction 4945(d)(4)(A)? (se	e ins	structions)				⊤ Yes ▽	No No		
	(5) Provi	de for any purpose other	than religious, charitable, scientific, literary, or								
	educational purposes, or for		he pr	evention of cruelty t							
ь	If any ans	swerıs "Yes" to 5a(1)–(5), d), did any of the transactions fail to qualify under the exceptions described in							
	Regulatio	ns section 53 4945 or i	nac	urrent notice regard	ıng d	lisaster assistance (see	ınstructions)?		5b	
	O rganıza	tions relying on a curren	t not	ice regarding disast	eras	ssistance check here	· .	▶Γ	_		
С	_	wer is "Yes" to question									
	tax becau	use it maintained expend	iture	responsibility for th	ie gr	ant?		Г Yes Г	- No		
		attach the statement requ									
6a	Did the fo	oundation, during the yea	r, re	ceive any funds, dire	ctly	or indirectly, to pay	prer	miums on			
	a persona	al benefit contract?							No		
ь								benefit contract?		6b No	
	If "Yes" to	o 6b, file Form 8870.									
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?											
ь	If yes, do	d the foundation receive	any	proceeds or have an	y ne	t income attributable	to t	the transaction?		7b	
		Information About	: Of	ficers, Directors	, Tı	rustees, Founda	tio	n Managers, Highly	Paid	Employees,	
	rt VIII	and Contractors		-							
1	List all off	icers, directors, trustees	, fo	ındation managers a	nd t	heir compensation (see i				
				Title, and average	(c	Compensation(If		(d) Contributions to		Expanse assount	
	(a) Na	me and address	hours per week			not paid, enter	l e	mployee benefit plans	(e)	Expense account, other allowances	
			(b)	(b) devoted to position		-0-)		l deferred compensation	Ĺ		
DAVI	O CHIZEK		4	RESIDENT		0		0		0	
		HEN COURT	5 00)							
	ELSIOR, M	N 55331									
	SENGER		DIR 0 10	ECTOR		0		0		0	
	ELSIOR, M	HEN COURT		,							
	AEL HOLMQU		DIR	ECTOR		5,246		0		0	
		HEN COURT	3 0 0		3,240			ŭ			
	ELSIOR, M										
2	Compensa	tion of five highest-paid	emp	loyees (other than	hos	e included on line 1—	see	instructions). If none, er	iter "	NONE."	
		(a)		Title, and avera	age			Contributions to		_	
Na	me and add	lress of each employee p	aıd	hours per wee	ek	(c) Compensatio	n	employee benefit plans and deferred	(6)	Expense account, other allowances	
	mo	re than \$50,000		(b) devoted to posi	tıon			(d) compensation	(0)	other anowances	
пои	1E										
		.		<u> </u>							
rota	ıı number o	f other employees paid o	vers	550,000				🟲	1	0	

and Contractors (continued) 3 Five highest-paid independent contractors for professional services (s	see instructions). If none, enter "NON	NF".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
otal number of others receiving over \$50,000 for professional services.		• 0
Part IX-A Summary of Direct Charitable Activities		•
·	aught statutural information such as the number	or of
ist the foundation's four largest direct charitable activities during the tax year. Include rele rganizations and other beneficiaries served, conferences convened, research papers produ		Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the	the tax year on lines 1 and 2	A mount
1		
2		
All other program-related investments See instructions		
· -		
3		I
3		

Form 990-PF (2015) Part X Minimum Investment Return

ΓŒ	(All domestic foundations must complete this part. Foreign foundations, see instructions	s.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	2,028,164
b	A verage of monthly cash balances	1b	201,064
c	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	2,229,228
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	2,229,228
4	Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ % of line 3 (for greater amount, see		
	ınstructions)	4	33,438
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,195,790
6	Minimum investment return. Enter 5% of line 5	6	109,790
Par	Distributable Amount (see instructions) (Section 4043(1)(3) and (1)(5) private energing foundations and ser		
	(see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cer check here ► ☐ and do not complete this part.)	tain fo	reign organizations
1	Minimum investment return from Part X, line 6	1	109,790
- 2a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	2,158
3	Distributable amount before adjustments Subtract line 2c from line 1	3	107,632
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	107,632
6	Deduction from distributable amount (see instructions)	6	107,032
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	107,632
	Distributable amount as adjusted Subtract line of non-line 5. Enter here and on late XIII, line 1		107,032
Par	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	102,611
ь	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	За	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	102,611
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	102,611
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth	er the f	· · · · · · · · · · · · · · · · · · ·

P	art XIIII Undistributed Income (see instr	uctions)			
		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1	Distributable amount for 2015 from Part XI, line 7				107,632
2	Undistributed income, if any, as of the end of 2015				
а	Enter amount for 2014 only			100,230	
Ь	Total for prior years 20, 20, 20		0		
3	Excess distributions carryover, if any, to 2015				
а	From 2010				
	From 2011				
c	From 2012				
	From 2013				
e	From 2014				
	Total of lines 3a through e		0		
	Qualifying distributions for 2015 from Part				
-	XII, line 4 🕨 \$ 102,611				
а	Applied to 2014, but not more than line 2a			100,230	
	Applied to undistributed income of prior years		0	·	
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2015 distributable amount				2,381
е	Remaining amount distributed out of corpus	1	0		
5	Excess distributions carryover applied to 2015	(0		0
	(If an amount appears ın column (d), the same amount must be shown ın column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	1)		
	Prior years' undistributed income Subtract		0		
	line 4b from line 2b		0		
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has been issued, or on which the section 4942(a)				
	tax has been previously assessed		0		
d	Subtract line 6c from line 6b Taxable amount				
	—see instructions		0		
е	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount—see			0	
f	Undistributed income for 2016 Subtract				
'	lines 4d and 5 from line 1. This amount must				
	be distributed in 2015				105,251
7	A mounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election may				
	be required - see instructions)		<u> </u>		
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	(o e		
10	Analysis of line 9				
	Excess from 2011				
	Excess from 2012				
	Excess from 2013				
	Excess from 2014				
	Excess from 2015				

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

c Any submission deadlines

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 82,790 **b** Approved for future payment

Form 990-PF (20 Part XVI-A	Analysis of Income-Produc	ing Activities	3			Page 1 2
Enter gross amounts unless otherwise indicated			siness income	Excluded by section	512, 513, or 514	(e) Related or exemp
1 Program servi		(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	function income (See instructions)
b						
g Fees and co2 Membership d3 Interest on sa	ntracts from government agencies dues and assessments					
	d interest from securities ome or (loss) from real estate			14	107,923	
a Debt-finance	ed property					
6 Net rental inc	anced property					
8 Gain or (loss)	nent income			18	-48,908	
	r (loss) from special events r (loss) from sales of inventory					
	e a _					
с						
a e						
	columns (b), (d), and (e) e 12, columns (b), (d), and (e)			1	59,015 .3	59,015
(See workshe	eet in line 13 instructions to verify Relationship of Activities to	calculations)			es	
Line No. Exp	olain below how each activity for wh accomplishment of the foundation's cructions)	ıch ıncome ıs rep	orted in column	(e) of Part XVI-A co	ntributed importa	

Par	t XVI	Information Report Noncharitable				actions a	nd Relationships	With		
		organization directly or i	ndırectly e	engage in any of t	he following wit				Yes	No
		501(c) of the Code (other)	er than sec	ction 501(c)(3) o	organizations) oi	in section 5	527, relating to politic	al	res	NO
_	ganızat									
		s from the reporting four						10/1		Na
•		h						1a(1	+ +	No
•		erassets						1a(2	<u>' </u>	No
		ansactions			_			41.74		NI-
		es of assets to a noncha							+ +	No
		chases of assets from a							+ +	No
		tal of facilities, equipme							+ +	No
		mbursement arrangemer							+ +	No
		ns or loan guarantees.							+ +	No
		rmance of services or m							' ——	No
	_	of facilities, equipment,	_							No
of '	the go any tra	swer to any of the above ods, other assets, or se ansaction or sharing arr (b) Amount involved	rvices giv angement	en by the reporti	ng foundation I' (d) the value of	the foundat the goods, o	ion received less than	n fair market valu ces received	ıe	nte.
(a) Lili	e No	(b) Amount involved	(c) Name	of Horichantable exe	inpt organization	(d) Descri	puon or transfers, transact	ions, and sharing ar	angemen	11.5
	-									
	-									
de	scribe	undation directly or indid in section 501(c) of the complete the following (a) Name of organization	ne Code (c schedule	other than section		n section 5.	27°	otion of relationship	es 🔽	No
Sign	the	der penalties of perjury, best of my knowledge a prmation of which prepa	and belief,	ıt ıs true, correct	, and complete	Declaration	of preparer (other tha		ased on	all
Here		*****			2016-05-06	_ \ _	***	return with the prep	arer shov	vn
		Signature of officer or t	rustee		Date	Title		below (see instr)?		
		Print/Type preparer's GEORGIA AKINS	name	Preparer's Sign	ature	Date	Check if self- employed ►	PTIN P00950	1359	
Use	arer	Firm's name AKINS HENKE AND	COMPANY	,			Firm's EIN ► 4	6-3220328		
Only		600 INWOOD AVEN OAKDALE, MN 5512	H SUITE 160			Phone no (651	.)636-3806			

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

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
ANIMAL HUMANE SOCIETY 845 MEADOW LANE NORTH GOLDEN VALLEY,MN 55422	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	1,000
ANIMAL RIGHTS COALITION 317 W 48TH STREET MINNEAPOLIS,MN 55419	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	500
BICYCLE ALLIANCE OF MINNESOTA PO BOX 5078 ST PAUL, MN 55101	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	1,000
CARING FOR CATS INC 2131 DIVISION STREET NORTH ST PAUL, MN 55109	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	1,000
CHARITY NAVIGATOR PO BOX 6002 BELLMAWR,NJ 08099	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	600
BEECHWOOD EDUCATIONAL FOUNDATION INC C/O BKD 201 N ILLINOIS ST 700S INDIANAPOLIS,IN 46204	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	640
COMPASSIONATE ACTION FOR ANIMALS 2100 1ST AVENUE SOUTH 200 MINNEAPOLIS,MN 55404	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	1,000
EDUCATE THE CHILDREN PO BOX 414 ITHACA,NY 14851	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	500
EXPONENT PHILANTHROPY 1720 N STREET NW WASHINGTON,DC 20036	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	250
FRESH ENERGY 408 SAINT PETER STREET 220 ST PAUL, MN 55102	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	1,000
FRESHWATER SOCIETY 2424 TERRITORIAL ROAD STE B ST PAUL, MN 55114	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	1,000
FRIENDS OF THE MISSISSIPPI RIVER 360 N ROBERT STREET 400 ST PAUL, MN 55101	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	1,000
GILDA'S CLUB TWIN CITIES 10560 WAYZATA BLVD MINNETONKA,MN 55305	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	3,300
HIMALAYAN CATARACT PROJECT PO BOX 55 WATERBURY,VT 05676	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	1,000
INDIANA UNIVERSITY FOUNDATION IU SCHOOL OF MEDICINE PO BOX 7072 INDIANAPOLIS,IN 46207	N/A	PUBLIC CHARITY	SCHOLARSHIPS	20,000
Total			▶ 3a	82,790

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

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
INSTITUTE FOR AGRICULTURE AND TRADE POLICY 2105 FIRST AVENUE SOUTH MINNEAPOLIS,MN 55404	N/A	PUBLIC CHARITY	FARM TO SCHOOL FOOD PROGRAM	1,000
INDIANA UNIVERSITY SOUTH BEND PO BOX 7111 SOUTH BEND,IN 46634	N/A	PUBLIC CHARITY	SCHOLARSHIPS	20,000
LAKE MINNETONKA ASSOCIATION PO BOX 248 EXCELSIOR,MN 55331	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	600
MINNESOTA ADULT AND TEEN CHALLENGE 1619 PORTLAND AVE S MINNEAPOLIS,MN 55404	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	2,000
MINNESOTA PUBLIC RADIO 480 CEDAR STREET ST PAUL,MN 55101	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	2,400
MINNESOTA ZOO FOUNDATION 13000 ZOO BOULEVARD APPLE VALLEY, MN 55124	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	1,000
CLIMATE GENERATION A WILL STEGER LEGACY 2801 21ST AVENUE SOUTH 110 MINNEAPOLIS,MN 55407	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	3,000
PARKS AND TRAILS COUNCIL OF MINNESOTA 275 EAST 4TH ST 250 ST PAUL,MN 55101	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	1,000
PESTICIDE ACTION NETWORK NORTH AMERICAN 1611 TELEGRAPH AVENUE SUITE 1200 OAKLAND,CA 94612	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	500
PHYSICIANS COMMITTEE FOR RESPONSIBLE MEDICINE 5100 WISCONSIN AVE NW 400 WASHINGTON, DC 20016	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	1,000
PLANNED PARENTHOOD MN ND SD 671 VANDALIA ST 323 ST PAUL, MN 55114	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	1,000
POPULATION CONNECTION PO BOX 97129 WASHINGTON, DC 20077	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	1,000
ST LOUIS PARK EMERGENCY PROGRAM 6812 W LAKE STREET ST LOUIS PARK, MN 55426	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	1,000
THE LOPPET FOUNDATION 1301 THEODORE WIRTH PARKWAY MINNEAPOLIS, MN 55422	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	1,200
TWIN CITIES PUBLIC TELEVISION 172 E 4TH STREET ST PAUL, MN 55101	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	1,000
Total			▶ 3a	82,790

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

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
UNIVERSITY OF IOWA FOUNDATION OPHTHALMOLOGY FUND PO BOX 4550 IOWA CITY,IA 52244	N/A	PUBLIC CHARITY	NO ANIMAL RESEARCH	10,000
UNIVERSITY OF MINNESOTA FOUNDATION 200 OAK STREET SE SUITE 500 MINNEAPOLIS,MN 55455	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	1,000
WIKIMEDIA FOUNDATION PO BOX 98204 WASHINGTON, DC 20090	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	300
Total				82,790

TY 2015 Accounting Fees Schedule

Name: CHIZEK FAMILY FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	3,267	0		3,267

TY 2015 Investments - Other Schedule

Name: CHIZEK FAMILY FOUNDATION

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
BARCLAYS BANK	FMV	26,350	26,350
EATON VANCE FL RT IN TR	FMV	17,696	17,696
EATON VANCE LTD DURATION	FMV	57,420	57,420
HSBC HOLDING	FMV	26,690	26,690
NUVEEN FLOATNG RATE INCOME FD	FMV	40,960	40,960
GOLDMAN SACHS BK US	FMV	0	0
FNMA	FMV	118,586	118,586
FHLMC	FMV	0	0
HANCOCK JOHN FINANCIAL	FMV	35,038	35,038
ST. PAUL MN HSG/RD	FMV	0	0
GLENDALE WI CDA	FMV	0	0
TENNESSEE VALLEY AUTHORITY	FMV	55,697	55,697
VA ST HSG DEV AU	FMV	54,772	54,772
LAKE SUPERIOR MN	FMV	54,613	54,613
LONSDALE MN	FMV	57,058	57,058
BRAINERD MN ISD	FMV	54,068	54,068
MOUNDS VIEW MN ISD	FMV	113,998	113,998
TACOMA WA	FMV	54,166	54,166
BARRON WIS ASD	FMV	50,427	50,427
MT VERNON IA	FMV	16,336	16,336
NC EASTN MUN PWR	FMV	25,000	25,000
UNITES STATES NATURAL GAS FUND	FMV	0	0
GAYLORD MN	FMV	51,257	51,257
KS ST DEV FA REV	FMV	17,098	17,098
ANOKA CNTY MN CO	FMV	52,828	52,828
ST LOUIS CN MN	FMV	61,263	61,263
CLEVELAND CNTY N	FMV	53,675	53,675
MINN MN DEV	FMV	40,535	40,535
FRISCO CO FA COP	FMV	25,952	25,952
TRACY MN EDA	FMV	40,650	40,650

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
OLYMPIA WA	FMV	16,226	16,226
TACOMA WA	FMV	79,385	79,385
WELLS FARGO ADV INCOME OPPORTUNITIES FUND	FMV	38,740	38,740
ELK RIVER MN ISD #72	FMV	27,801	27,801
BLACKROCK CREDIT ALLOCATION INCOME TRUST IV	FMV	49,360	49,360
WESTERN ASSET HIGH YLD FD	FMV	18,330	18,330
BROOKFIELD TOTAL RTN FD	FMV	0	0
BLKROCK CP HIGH YILED VI	FMV	18,064	18,064
WEBSTER GRV MO	FMV	51,002	51,002
MO ST HLTH/ED ED	FMV	15,699	15,699
PLYMOUTH MIN ID C	FMV	132,433	132,433
FAIRMOUNT MN ISD	FMV	0	0
NEW AMER HIGH INC FD NEW	FMV	19,150	19,150
LICKING HTS OH LSD	FMV	40,677	40,677
YORK CN SC SD	FMV	0	0
FREDDIE MAC STRIP	FMV	20,382	20,382
ROANOKE TX ECON	FMV	22,641	22,641
ST CHARLES MO CO	FMV	83,223	83,223
STEAMBOAT SPRGS	FMV	48,913	48,913
WINTHROP MINN EL	FMV	49,976	49,976
FIRST TRUST INT DUR PRF	FMV	46,794	46,794
NUVEEN MULTI STRATEGY IN	FMV	45,800	45,800

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - DLN: 93491132014646

TY 2015 Other Decreases Schedule

Name: CHIZEK FAMILY FOUNDATION

Description	Amount
NET UNREALIZED LOSSES ON INVESTMENTS	6,102

DLN: 93491132014646

TY 2015 Other Expenses Schedule

Name: CHIZEK FAMILY FOUNDATION

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OTHER	25	0		25
MEMBERSHIP DUES	750	0		750
POSTAGE	132	0		132
SUPPLIES	2,793	0		2,793
TELEPHONE AND INTERNET	1,755	0		1,755

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - DLN: 93491132014646

TY 2015 Other Professional Fees Schedule

Name: CHIZEK FAMILY FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OTHER CONSULTING	100	0		100

TY 2015 Taxes Schedule

Name: CHIZEK FAMILY FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX	5,000	0		0

efile GRAPHIC print - DO NOT PROCESS

As Filed Data

DLN: 93491132014646

OMB No 1545-0047

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

2015

Employer identification number

CHIZE	K FAMILY FOUNDA	TION	
			41-1989004
Organ	ization type (check of	one)	
Filers	of:	Section:	
Form 9	90 or 990-EZ	□ 501(c)() (enter number) organization	
			I
Form 9	90-PF	▼ 501(c)(3) exempt private foundation	
		☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation	
		□ 501(c)(3) taxable private foundation	
		covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Sp	pecial Rule See instructions
Gener	al Rule		
ᅜ		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions in any one contributor. Complete Parts I and II. See instructions for determining a	
Specia	al Rules		
Γ	under sections 509(a received from any or	lescribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ /3% suppose)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part the contributor, during the year, total contributions of the greater of (1) \$5,000 or Form 990-EZ, line 1 Complete Parts I and II	II, line 13, 16a, or 16b, and that
Γ	during the year, total	lescribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive contributions of more than \$1,000 exclusively for religious, charitable, scientific cruelty to children or animals Complete Parts I, II, and III	•
Γ	during the year, cont this box is checked, purpose Do not com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive ributions exclusively for religious, charitable, etc., purposes, but no such contributions there the total contributions that were received during the year for an exclusive plete any of the parts unless the General Rule applies to this organization because contributions totaling \$5,000 or more during the year	outions totaled more than \$1,000 If usively religious, charitable, etc, ause it received nonexclusively

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

Name of organization CHIZEK FAMILY FOUNDATION Employer identification number 41-1989004

Part I	Contributors (see instructions) Use duplicate copies of Part I if	additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
1	DAVID J CHIZEK TRUST		Person	-
	36 INTERLACHEN COURT	\$ 60,000	Payroll	
	EXCELSIOR, MN 55331		Noncash (Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
			Person	Γ
		\$	Payroll	Г
			Noncash	Γ
			(Complete Part II f contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
	_		Person	Γ
		\$	Payroll	Γ
			Noncash	Γ
			(Complete Part II f	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
			Person	Γ
		\$	Payroll	Γ
			Noncash	Γ
			(Complete Part II f contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
	_		Person	Γ
		\$	Payroll	Г
			Noncash	Г
			(Complete Part II f contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	tribution
	_		Person	Γ
		\$	Payroll	Γ
			Noncash	Г
			(Complete Part II f contributions)	or noncash

ame of organizati		Employer identification no	ımber
HIZEK FAMILY F	OUNDATION	41-1989004	
	Noncas h Property (see instructions) Use duplicate copies of Part II if additional space is needed		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) lo.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) lo.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) lo.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) lo.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Schedule B (Form 990, 990-EZ, or 990-F	F)	(201	5)
--	----	------	----

chedule B (Form 990,	990-EZ, or 990-PF) (2015)		Page 4
ame of organization HIZEK FAMILY FOU	EK FAMILY FOUNDATION		Employer identification number 41-1989004
total more line entry. of \$1,000 o	than \$1,000 for the year from any o	ne contributor. Complete co III, enter the total of <i>exclusive</i> mation once. See instruction	ribed in section 501(c)(7), (8), or (10) that plumns (a) through (e) and the following ely religious, charitable, etc., contributions is.) \$
(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	(e) Transfer of gr	ft 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
-	Transferee's name, address, and	(e) Transfer of gr	ft 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
- -			
-	Transferee's name, address, and	(e) Transfer of gr	ft 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
. _			
<u>-</u>	Transferee's name, address, and	(e) Transfer of gr d ZIP4	ft Relationship of transferor to transferee
_			