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Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Schedule of Contributors

OMB No 1545-0047

Name of the organization

▶ 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

Employer identification number

MARK G AND TERESA M FOUNDATION	FLEISCHHACKER FAMILY	47-6649415			
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	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundate				
	501(c)(3) taxable private foundation	RECEIVED SO S			
Check if your organization is on Note. Only a section 501(c)(7) instructions	overed by the General Rule or a Special Rule . , (8), or (10) organization can check boxes for both the General Rule and a S	Special Rule SeeN, UT			
General Rule					
	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributer property) from any one contributor. Complete Parts I and II. See instruction tributions.				
Special Rules					
regulations under se 13, 16a, or 16b, and \$5,000 or (2) 2% of	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1 ections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 if that received from any one contributor, during the year, total contributions the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Condescribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 99	or 990-EZ), Part II, line s of the greater of (1) omplete Parts I and II			
contributor, during t	he year, total contributions of more than \$1,000 <i>exclusively</i> for religious, chal purposes, or for the prevention of cruelty to children or animals. Complet	aritable, scientific,			
contributor, during t contributions totaled during the year for a General Rule applie	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year				
990-EZ, or 990-PF), but it mus	is not covered by the General Rule and/or the Special Rules does not file Soft answer "No" on Part IV, line 2, of its Form 990, or check the box on line be certify that it does not meet the filing requirements of Schedule B (Form 99).	H of its Form 990-EZ or on its			

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

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Page 2 Name of organization MARK G AND TERESA M FLEISCHHACKER FAMILY Employer identification number 47-6649415 FOUNDATION Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. Part I (d) (c) (a) (b) Total contributions Name, address, and ZIP + 4 Type of contribution No. Х MARK & TERESA FLEISCHHACKER 1 Person Payroll Χ 3,250,000. 3530 STEELE STREET Noncash (Complete Part II for MINNETONKA, MN 55345 noncash contributions) (d) (b) (c) (a) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** Person **Payroll** Noncash (Complete Part II for noncash contributions) (b) (c) (d) (a) Total contributions Type of contribution Name, address, and ZIP + 4 No. Person Payroll \$ Noncash (Complete Part II for noncash contributions) (d) (c) (a) (b) Name, address, and ZIP + 4 Total contributions Type of contribution No. Person Payroll Noncash (Complete Part II for noncash contributions) (c) (a) (b) Total contributions Type of contribution No. Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person

\$

Payroll

Noncash (Complete Part II for noncash contributions)

Name of organization MARK G AND TERESA M FLEISCHHACKER FAMILY FOUNDATION

Employer identification number 47-6649415

Part II Noncash 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
1	SECURITIES	\$2,430,887	12/24/2015
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

	(Form 990, 990-EZ, or 990-PF) (2015)	<u> </u>	Page 4			
Name of o	rganization MARK G. AND TERESA M FLI	EISCHHACKER FAMILY	Employer identification number			
D 4 III	FOUNDATION		47-6649415			
Past III	(10) that total more than \$1,000 for the the following line entry. For organizations contributions of \$1,000 or less for the yeurs duplicate copies of Part III if additional	year from any one contribut completing Part III, enter the t ear. (Enter this information onc	tor. Complete columns (a) through (e) and cotal of exclusively religious, charitable, etc			
(a) No.			(1) Description of how off in hold			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift					
	Transferee's name, address, and ZIP + 4 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			
			1000			
		(e) Transfer of gift				
	7					
	Transferee's name, address, and ZIP + 4 Rel		elationship of transferor to transferee			
(a) No. from	(b) Purpose of gift (c) Use of gift		(d) Description of how gift is held			
Part I	(b) I dipose of gift	(o) 555 o. g	(4) 2000.1510.101.01.01.01			
		(e) Transfer of gift				
	(c) Harriston of gric					
	Transferee's name, address, and Z	IP + 4 R	elationship of transferor to transferee			
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Part I		11-1-				
						
	(e) Transfer of gift					
	Transferee's name, address, and Z	IP + 4 R	elationship of transferor to transferee			