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Form .990-PF

Return of Private Foundation

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

Fo	r calen	dar year 2015 or tax year beginning 9/	/1/2015	, and	ending	8/31/2016	<u> </u>
Na	me of fou	indation			A Employer	identification number	
		FOUNDATION do ALERUS FINANCIAL			<u>j</u>		
Nu	mber and	i street (or PO box number if mail is not delivered to street address)		Room/suite		45-0366901	
23	<u>00 SOL</u>	JTH COLUMBIA ROAD		<u></u> _	B Telephone	number (see instructio	ns)
	y or town		ZIP co		ļ		
GF	RAND F	FORKS ND	5820	<u> </u>	ļ	(701)795-321	2
Foi	eign cou	ntry name Foreign province/state/county	Foreig	ın postal code	C If exempt	ion application is pendir	ig, check here 🕨 🗌
_							
G	Check	call that apply 🔲 Initial return 🔲 Initial return	of a former pu	iblic charity	D 1. Foreig	n organizations, check i	nere ▶ 🗌
		☐ Final return ☐ Amended ref	turn		2 Foreign	n organizations meeting	the 85% test,
		Address change Name chang	je		check	here and attach comput	ation ▶ 🗌
Н	Check	type of organization 💢 Section 501(c)(3) exempt pri	ıvate foundatı	on		oundation status was to	rminated under
	Sectio	n 4947(a)(1) nonexempt charitable trust 🔲 Other tax	able private fo	undation	section 50	17(b)(1)(A), check here	▶∟
ī	Fair m	parket value of all assets at J Accounting method	X Cash	Accrual]	Lut. DD ut	
	end of	year (from Part II, col (c), Other (specify)	_ _			dation is in a 60-month tion 507(b)(1)(B), check	
		6) > \$ 821,042 (Part I, column (d) must b	e on cash basi	s)	}		
Р	art l	Analysis of Revenue and Expenses (The total of	(a) Bayanya				(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue expenses pe	_{-r} (D) Ne	t investment	(c) Adjusted net	for charitable
		equal the amounts in column (a) (see instructions))	books	"	ncome	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	 				
	2	Check ► if the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments		220	220		
	4	Dividends and interest from securities					
	5a	Gross rents					
	b	Net rental income or (loss)					
a	6a	Net gain or (loss) from sale of assets not on line 10					
Ž	ь	Gross sales price for all assets on line 6a					
Revenue	7	Capital gain net income (from Part IV, line 2)					
Š	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances	-				
	b	Less Cost of goods sold					
	C	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	145	,145	145,145		
	12	Total. Add lines 1 through 11	145	,365	145,365	0	
S	13	Compensation of officers, directors, trustees, etc	3	3,341	2,228		1,113
enses	14	Other employee salaries and wages					
ē	15	Pension plans, employee benefits					
×	16a	Legal fees (attach schedule)					
Ш	b	Accounting fees (attach schedule)					
ž	с	Other professional fees (attach schedule)		100	100		
<u>ra</u>	17	Interest					
ist	18	Taxes (attach schedule) (see instructions)		477			
Ë	19	Depreciation (attach schedule) and depletion	ļ				
튭	20	Occupancy Travel, conferences, and meetings 2016 Printing and publications UCC 2016 Other expenses (attach capacitus)					
¥	21	Travel, conferences, and meetings 2016	<u> </u>				
Ĭ	22	Other expenses (attach achidule)	145	055	115 055		
D)	23	Other expenses (attach schedule)	175	5,055	115,055		
Ë	24	Total operating and administrative expenses.	146	073	117 202	^	4 440
ū	25	Add lines 13 through 23	178	3,973	117,383	0	1,113
Operating and Administrative Expo	25 26	Contributions, gifts, grants paid Total expenses and disbursements. Add lines 24 and 25			447.000		
<u>o</u>			118	3,973	117,383	0	1,113
	27	Subtract line 26 from line 12		200			
	a	Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	<u> </u>	5,392	27.002		
	b	Adjusted net income (if negative, enter -0-)			27,982		
	С	Aujusteu net moonie (ii negative, Cliter -U-)	1	1		()	1

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2015)

SCANNED JAN 0 \$ 2017,

no

Б	art II	Balance Sheets	Attached schedules and amounts in the description column	Beginning of year	End o	of year
4		Dalatice Streets	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			
	2	Savings and tempo	rary cash investments .	57,855	87,103	87,103
	3	Accounts receivable	e >			
		Less allowance for	doubtful accounts			
	4	Pledges receivable				
		Less allowance for	doubtful accounts			
	5	Grants receivable				
	6	Receivables due fro	om officers, directors, trustees, and other			
			s (attach schedule) (see instructions) .			
	7	Other notes and loans i	receivable (attach schedule)			
		Less allowance for dou				
ts	8	Inventories for sale				
Assets	9	Prepaid expenses a	and deferred charges			
As	10a	•	state government obligations (attach schedule)			
	ь		orate stock (attach schedule)			
	С	•	orate bonds (attach schedule)			
	11		dings, and equipment basis			
	}		reciation (attach schedule)			
	12	Investments—mort				
	13	Investments—other		1,624	1,624	1,624
	14	Land, buildings, and eq	•		1,02+	1,027
	' '	•	reciation (attach schedule)	1,671,857	1,671,857	730,000
	15	•	ribe ► Amount due from IMM)	5,171	2,315	2,315
	16	•	completed by all filers—see the		2,310	2,313
		instructions Also, s	•	1,736,507	1,762,899	821,042
	17		and accrued expenses	1,750,507	1,702,009	021,042
	18	Grants payable	ind doorded expended			
Liabilities	19	Deferred revenue		<u> </u>		
=	20		lirectors, trustees, and other disqualified persons			
ap	21		er notes payable (attach schedule)			
Ë	22		scribe Due IMM - management fee balai)			i
	23	•	d lines 17 through 22)	0	0	
	 -		follow SFAS 117, check here	 		
es]		s 24 through 26 and lines 30 and 31.			
Š	24	Unrestricted	24 through 20 and mics 50 and 51.			
alances	25	Temporarily restricte	ad.			
	26	Permanently restrict		 		
Net Assets or Fund B	20	•				
H)	and complete lines		}		
ō	27	•	principal, or current funds	1,736,507	1,762,899	
S	28		irplus, or land, bldg , and equipment fund	1,730,307	1,702,099	
set	29	•	ccumulated income, endowment, or other funds			
Ąŝ		_	fund balances (see instructions)	1,736,507	1,762,899	
it.	30		i net assets/fund balances (see	1,730,307	1,702,099	
ž	31		Thet assets/fully balances (see	1 726 507	4 762 000	
D	rt III	Instructions)	ange in Not Assets or Fund Palaness	1,736,507	1,762,899	L
			langes in Net Assets or Fund Balances	line 30 (must see a	uth	
1			alances at beginning of year—Part II, column (a)	, inte 50 (must agree v		4 700 507
_			d on prior year's return)		1	1,736,507
_		amount from Part I,	Ind in line O (domina)		2	26,392
3			ded in line 2 (itemize)			4 700 000
4		ines 1, 2, and 3	line O (itematica)		4	1,762,899
5 e		eases not included in	l line 2 (Itemize) ▶ alances at end of year (line 4 minus line 5)—Par	til column (h) line 20	5	4 700 000
0	iotal	TICL GOOGLO OF TUITO DO	nances at end of year (lifte 4 minus lifte 5)—Par	. 11, column (b), in le 30	6	1,762,899

Part	V Capital Gains and	Losses for Tax on Investm	ient i	ncome					
		kind(s) of property sold (e.g., real estate, se, or common stock, 200 shs MLC Co.)			(b) How acquired P—Purchase D—Donation		Date acquired no , day, yr)	(d) Date sold (mo , day, yr)	
1a									
b									
<u>c</u>								 	
d									
<u>e</u>					<u> </u>			<u> </u>	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		(g) Cost or plus exper				n or (loss) (f) minus (g)	
<u>a</u>									
<u>b</u>									
<u>c</u>									
<u>d</u>									
<u>e</u>	Complete only for assets sho	wung gain in column (h) and awnod	by the	foundation	an 12/21/60				
	Complete only for assets sho	wing gain in column (h) and owned	by the					(h) gain minus	
	(I) FM V as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) Excess			col (k), but not less than -0-) or Losses (from col (h))		
<u>a</u>									
<u>b</u>									
<u>c</u>									
<u>d</u>			 .						
<u>e</u> 2	Capital gain net income or (i	net capital loss) { If gain, a	also e	nter in Pan	t I, line 7				
-	Capital gain het meome er (i	If (loss),	enter	-0- in Parl	t I, line 7	2_		0	
3	. •	or (loss) as defined in sections 1							
		ne 8, column (c) (see instruction	ns) If ((loss), ente	r-0- in }				
<u> </u>	Part I, line 8	· · · · · · · · · · · · · · · · · · ·	 .		<u> </u>	_3_		0	
Part		er Section 4940(e) for Redu te foundations subject to the sec							
Wast		this part blank ection 4942 tax on the distributable ealify under section 4940(e) Do i				e perio	od?	Yes X No	
1		nt in each column for each year,		_ 		na anv	entries		
<u> </u>	(a)		1	10 III Oli GOLI		ig arry	CHITCO	(d)	
Cal	Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	ŀ	Net value of	(c) f noncharitable-use as	sets		tribution ratio divided by col (c))	
	2014		1,114			1,282	(coi (b)	0 025157	
	2013		,428			3,957		0 052973	
	2012		611			,894		0 034146	
	2011		933			2,950		0 072046	
	2010		458			1,994		0 030546	
									
2	Total of line 1, column (d)					İ	2	0 214868	
3	Average distribution ratio for	r the 5-year base period—divide	the to	tal on line	2 by 5, or by the				
	number of years the foundat	tion has been in existence if less	than	5 years			3	0 042974	
4	Enter the net value of nonch	narıtable-use assets for 2015 from	m Parl	t X, line 5			4	71,392	
5	Multiply line 4 by line 3						5	3,068	
6	Enter 1% of net investment	income (1% of Part I, line 27b)					6	280	
7	Add lines 5 and 6						7	3,348	
8	Enter qualifying distributions If line 8 is equal to or greate Part VI instructions	s from Part XII, line 4 r than line 7, check the box in Pa	art VI,	line 1b, an	nd complete that p	part us	8 sing a 1% tax	1,113 rate See the	

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b)	<u>, 4940(e), or 4948—sec</u>	e insti	<u>uctio</u>	ns)		
1a	Exempt operating foundations described in section 4940(d)(2), check here an Date of ruling or determination letter (attach copy of letter if necessary)	d enter "N/A" on line 1	1	1			
b	Domestic foundations that meet the section 4940(e) requirements in Part V,		- } [1		560	<u> </u>
	here ▶ ☐ and enter 1% of Part I, line 27b						
С	All other domestic foundations enter 2% of line 27b Exempt foreign organiz Part I, line 12, col (b)	ations enter 4% of	J			 -	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations	only Others enter -0-)		2		0	l
3	Add lines 1 and 2	•	Ī	3		560	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations	only Others enter -0-)	[4			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or les	s, enter -0-	[5		560	
6	Credits/Payments		ſ				
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a					
b	Exempt foreign organizations—tax withheld at source	6b					ĺ
C	Tax paid with application for extension of time to file (Form 8868)	6c		1			
d	Backup withholding erroneously withheld	6d					
7	Total credits and payments Add lines 6a through 6d			7		0	
8	Enter any penalty for underpayment of estimated tax. Check here			8		1	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	l	>	9		561	<u> </u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amo			10		0	
11	Enter the amount of line 10 to be Credited to 2016 estimated tax	Refunded	>	11		0	
	/II-A Statements Regarding Activities	 					
1a	During the tax year, did the foundation attempt to influence any national, sta	te, or local legislation of	r did it			Yes	
	participate or intervene in any political campaign?	1 1			_1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for	political purposes (see			146		
	Instructions for the definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities.	oo and conice of any m	atorial	_	1b		X
	published or distributed by the foundation in connection with the activities	es and copies or any me	ateriai	3			
С	Did the foundation file Form 1120-POL for this year?				1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) important	osed during the year			1		
-	(1) On the foundation > \$ (2) On foundation mana	•					
е	Enter the reimbursement (if any) paid by the foundation during the year for p		impos	ed	_		
	on foundation managers \$	·					
2	Has the foundation engaged in any activities that have not previously been r	reported to the IRS?			2		Х
	If "Yes," attach a detailed description of the activities						
3	Has the foundation made any changes, not previously reported to the IRS, in its government	•	s				
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conforme	· · ·			3_		_X_
4a	Did the foundation have unrelated business gross income of \$1,000 or more	e during the year?			4a		_X_
	If "Yes," has it filed a tax return on Form 990-T for this year?				4b	N/A	 _
5	Was there a liquidation, termination, dissolution, or substantial contraction d	uring the year?			5		<u> </u>
6	If "Yes," attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 49	M5) catisfied aither					, ,
0	 By language in the governing instrument, or 	140) satisfied either					
	 By state legislation that effectively amends the governing instrument so th 	at no mandatory directiv	one the	at			
	conflict with the state law remain in the governing instrument?	at no mandatory direction	J113 (11)	a t	6	Х	J
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," com	polete Part II col. (c) and Pa	rt XV		7	X	
8a	Enter the states to which the foundation reports or with which it is registered	•	▶				
	ND	(,					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form	990-PF to the Attorney	Gene	al			
	(or designate) of each state as required by General Instruction G? If "No," as	ttach explanation			8b	Х	
9	Is the foundation claiming status as a private operating foundation within the		42(J)(3	3)			
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (s	see instructions for Part	XIV)?	lf			
	"Yes," complete Part XIV				9		_ X
10	Did any persons become substantial contributors during the tax year? If "Ye	s," attach a schedule lıs	ting th	eir			
	names and addresses				10		_ X

	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		-	
	disqualified person? Yes X No	Ì		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X 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)? Yes X 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	1		
	termination of government service, if terminating within 90 days)			
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)?	1b	N/A	
	Organizations relying on a current notice regarding disaster assistance check here			
С	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		X
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)) At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and]		
а	6e, Part XIII) for tax year(s) beginning before 2015? Yes X No			
	If "Yes," list the years ► 20 , 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	N/A	
С	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			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?	l i		
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	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		_ <u>X</u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	415		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	 	Х

Part	VII-B	Statements Regarding Activities	for W	hich Form	<u>4720 l</u>	<u>May Be Re</u>	quire	d (contin	ued)		
5a		year did the foundation pay or incur any on propaganda, or otherwise attempt to it			section	4945(e))?		Yes	X No		
		ce the outcome of any specific public ele or indirectly, any voter registration drive		see section 49	955), oı	r to carry on	١,	Yes	X No		
	-	e a grant to an individual for travel, study		er sımılar pur	poses?	ı		Yes	X No	1	
	(4) Provide	e a grant to an organization other than an 4945(d)(4)(A)? (see instructions)		•			l ın	Yes	X No		
	(5) Provide	e for any purpose other than religious, ches, or for the prevention of cruelty to chil			terary,	or educatior	nal	— ☐ Yes	—		
b	If any ansv	wer is "Yes" to 5a(1)–(5), did any of the ti	ransact	tions fail to qu	alify ur	der the exc	eptions	described			
	Regulation	ns section 53 4945 or in a current notice i	regardı	ng disaster as	ssistand	ce (see instr	ructions	s)?		5b	N/A
С	If the answ	ons relying on a current notice regarding ver is "Yes" to question 5a(4), does the fo	undati	on claım exen					▶ □		
		maintained expenditure responsibility fo tach the statement required by Regulation	_		-5(d)			∐ Yes	∐ No		
6a		undation, during the year, receive any fur onal benefit contract?	ids, dire	ectly or indire	ctly, to	pay premiur	ns	☐ Yes	X No		
b		undation, during the year, pay premiums, 6b, file Form 8870	directly	y or indirectly,	on a p	ersonal ben	efit cor	ntract?		6b	Х
7a		during the tax year, was the foundation a pa	rty to a	prohibited tax s	shelter t	ransaction?		Yes	X No		
		d the foundation receive any proceeds or									N/A
Part		formation About Officers, Directond Contractors	ors, Ir	ustees, Fo	undat	ion Manag	gers, F	Highly Pa	ald Em	nployee) S,
1		icers, directors, trustees, foundation r	nanag	ers and their	compe	ensation (se	ee inst	ructions)			
_=			(b) Title	e, and average	(c) Co	mpensation	(d)	Contributions	s to	(e) Expen	se account,
		(a) Name and address		rs per week ted to position		not paid, nter -0-)		oyee benefit ferred compe			llowances
	Financial		Truste						ļ		
		Rd Grand Forkds, ND 58201	A di ua a	5 00		3,341					
	Inderson	nk Drayton, ND 58225	Adviso	ory 00		0					
Jiayte	on Otale Ba	ink Brayton, NB 00220									
2	_	ation of five highest-paid employees (other t	han those in	cluded	on line 1—	see ins	structions). If no	ne, ente	r
	"NONE."					<u> </u>		(d) Contribu	itions to		
	(a) Name and	address of each employee paid more than \$50,000		(b) Title, and a hours per w devoted to po	reek	(c) Compen	sation	employee plans and c	benefit leferred		se account, llowances
NONE											
					·	 -					
						<u> </u>	_				
						ļ	-				
							<u> </u>				
		— —									-
Total I	number of c	other employees paid over \$50,000							>		
				· · · · · · · · · · · · · · · · · · ·					F	orm 990	- PF (2015)

Part	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Em and Contractors (continued)	ployees,
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
	·	
-		
Total n	umber of others receiving over \$50,000 for professional services	
Part	IX-A Summary of Direct Charitable Activities	
List the	e foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of	
organı	zations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
	pansion and maintaining the Tisdale Retirement Home is the main purpose of this foundation	
	hen excess funds are present they may be used for other exempt charitable organizations	
	the Drayton area	
2		
3 —		
3		
4		
Part	X-B Summary of Program-Related Investments (see instructions)	
Descri	be the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/	A	
2		
All oth	er program-related investments. See instructions	
3		
Total /	add lines 1 through 3	0

Form **990-PF** (2015)

Form 990-PF (2015)

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreign	n founda	tions,
	see instructions)	· · · · ·	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities .	1a	·
b	Average of monthly cash balances	1b	72,479
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	72,479
е	Reduction claimed for blockage or other factors reported on lines 1a and	1	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d .	3	72,479
4	Cash deemed held for charitable activities Enter 1 ½ % of line 3 (for greater amount, see		
	instructions)	4	1,087
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	71,392
6	Minimum investment return. Enter 5% of line 5	6	3,570
Part 2	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)		
1	Minimum investment return from Part X, line 6	1	3,570
2a	Tax on investment income for 2015 from Part VI, line 5 2a 560		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b	1	
С	Add lines 2a and 2b	2c	560
3	Distributable amount before adjustments Subtract line 2c from line 1	3	3,010
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	3,010
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	3,010
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	1,113
b	Program-related investments—total from Part IX-B	1b	1,110
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	-	
a	Suitability test (prior IRS approval required)	3a	
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	1,113
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	 	.,,,,
•	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,113
•	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth		
	qualifies for the section 4940(e) reduction of tax in those years		

Part	Undistributed Income (see instructions)				
1	Distributable amount for 2015 from Part XI,	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
2	Undistributed income, if any, as of the end of 2015				3,010
a	Enter amount for 2014 only			0	
b	Total for prior years 20 _ , 20 , 20				
3	Excess distributions carryover, if any, to 2015				
a	From 2010	i			
b	From 2011 312				
C	From 2012 11	į			
d	From 2013 474	i			
e	From 2014				
f	Total of lines 3a through e	797			
4	Qualifying distributions for 2015 from Part XII,	191			
4		Į.			
_					
	Applied to 2014, but not more than line 2a				
D	Applied to undistributed income of prior years				
_	(Election required—see instructions)		<u> </u>		
С	Treated as distributions out of corpus (Election	ļ			
	required—see instructions)				
	Applied to 2015 distributable amount				1,113
e	Remaining amount distributed out of corpus	707			
5	Excess distributions carryover applied to 2015	797			797
	(If an amount appears in column (d), the same				
•	amount must be shown in column (a))				
6	Enter the net total of each column as				
_	indicated below:			,	
a	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
b	Prior years' undistributed income Subtract line 4b from line 2b		0		
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable)		
	amount—see instructions				
е	Undistributed income for 2014 Subtract line			ľ	
	4a from line 2a Taxable amount—see				
	Instructions			0	
f	Undistributed income for 2015 Subtract lines)		
	4d and 5 from line 1 This amount must be		į		
	distributed in 2016				1,100
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be)		,	
	required—see instructions)				
8	Excess distributions carryover from 2010 not			1	
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2016.				-
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9				
а	Excess from 2011	ł			
b	Excess from 2012	ļ			
С	Excess from 2013			,	
d	Excess from 2014	ľ			
е	Excess from 2015	į			

Part	XIV Private Operating Foundat	ions (see instru	ctions and Part	VII-A, question 9)		N/A
1a				ate operating		
	foundation, and the ruling is effective fo	r 2015, enter the o	date of the ruling	▶		
b	Check box to indicate whether the foundation	on is a private opera	iting foundation desc	cribed in section	4942(J)(3) or 4942(J)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(-) T-4-1
	income from Part I or the minimum investment return from Part X for	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
	each year listed					0
b	85% of line 2a					0
C	Qualifying distributions from Part XII,					
	line 4 for each year listed					0
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					0
е	Qualifying distributions made directly		1	1		
	for active conduct of exempt activities					
	Subtract line 2d from line 2c					0
3	Complete 3a, b, or c for the			ł		
	alternative test relied upon					
а	"Assets" alternative test—enter			1		
	(1) Value of all assets					0
	(2) Value of assets qualifying under			ì		
	section 4942(j)(3)(B)(i)					0
þ	"Endowment" alternative test—enter 2/3 of minimum investment return shown in			1		
	Part X, line 6 for each year listed		<u> </u>			0
С	"Support" alternative test—enter		į	ļ		
	(1) Total support other than gross investment income (interest,					
	dividends, rents, payments on					
	securities loans (section]	1		_
	512(a)(5)), or royalties) (2) Support from general public					0
	and 5 or more exempt		1			
	organizations as provided in					_
	section 4942(J)(3)(B)(III)		 -			0
	(3) Largest amount of support from]		
	an exempt organization		 	 		0
Dowl	(4) Gross investment income XV Supplementary Information	o (Complete th	in more and if the	a farmulation has		0
Part				ie foundation had	a \$5,000 or mor	e in assets at
1	any time during the year— Information Regarding Foundation M		15.)			
-	List any managers of the foundation wh	•	d more than 2% of	the total contribution	s received by the t	oundation
a	before the close of any tax year (but only					ouridation
None	beleve and evere event, tax year (but ev.	, in and in and don't		40,000) (000 000	5.1. 507 (d)(L))	
	List any managers of the foundation wh	0 0WD 10% or mo	re of the stock of a	corporation (or an e	gually large portion	of the
-	ownership of a partnership or other entire			•		10, 110
None		-,,		3		
2	Information Regarding Contribution,	Grant. Gift. Loan	. Scholarship, etc	Programs:		
	Check here ▶ ☐ if the foundation on		-	-	ations and does no	t accept
	unsolicited requests for funds If the fou					
	under other conditions, complete items	2a, b, c, and d				
а	The name, address, and telephone num	nber or e-mail add	ress of the person	to whom application	s should be addres	ssed
	·					
Bobbi	Sondreal c/o Alerus Financial PO Box 6	001 Grand Forks,	ND 58206-6001 70	01-795-2624		
b	The form in which applications should b	e submitted and i	nformation and ma	terials they should in	nclude	
Any w	ritten request Give details of request					
С	Any submission deadlines					
None						
d	Any restrictions or limitations on awards	s, such as by geog	graphical areas, ch	arıtable fields, kınds	of institutions, or o	ther
	factors					
Grant	s are only given when there are excess f	<u>unas not required</u>	tor operating Tisda	ale Manor		

Part	XV Supplementary Information (continuation)	nued)			
3_	Grants and Contributions Paid During t		ed for Fut	ture Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient		
а	Paid during the year	1	1		
					1
			İ		
					1
					1
					1
			1		1
			}		į
]
			ļ		1
					}
			i		
]		
					1
			<u> </u>	<u> </u>	
	Total Approved for future payment	1		<u>▶</u> 3a	0
b	Approved for future payment		ļ		
			Ì		
			ŀ		1
				1	
			}		
					<u></u>
	Total			▶ 3h	0

	1 XVI-A Analysis of Income-Producing Ac	tivities				
Ente	r gross amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by sect	on 512, 513, or 514	(0)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1	Program service revenue					(See manuchons)
	a					
	b					
	c			l		
	d			<u> </u>		
	e					
	f					
	g Fees and contracts from government agencies					
2	Membership dues and assessments		<u></u>			
3	Interest on savings and temporary cash investments			14	220	
4	Dividends and interest from securities					
5	Net rental income or (loss) from real estate					
•	a Debt-financed property			,		
	b Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income .					
				 		
8	Gain or (loss) from sales of assets other than inventory					
9	Net income or (loss) from special events	<u> </u>		 		
10	Gross profit or (loss) from sales of inventory					
11	Other revenue a Rental income from Tisdale Rei			16	145,145	L.—.
	b			-		<u> </u>
	c			ļ		
	d			L		
	e					
12	Subtotal Add columns (b), (d), and (e)		0	L	145,365	
					13	145,365
13	Total. Add line 12, columns (b), (d), and (e)					1,10,000
(See	worksheet in line 13 instructions to verify calculations			·		
(See	worksheet in line 13 instructions to verify calculations **EXVI-B** Relationship of Activities to the A	ccomplishm				
(See	worksheet in line 13 instructions to verify calculations	ccomplishme	olumn (e) of Part >	(VI-A contributed	importantly to the	
(See	worksheet in line 13 instructions to verify calculations EXVI-B Relationship of Activities to the A No. Explain below how each activity for which incom	ccomplishme	olumn (e) of Part >	(VI-A contributed	importantly to the	
(See	worksheet in line 13 instructions to verify calculations EXVI-B Relationship of Activities to the A No. Explain below how each activity for which incom	ccomplishme	olumn (e) of Part >	(VI-A contributed	importantly to the	
(See	worksheet in line 13 instructions to verify calculations EXVI-B Relationship of Activities to the A No. Explain below how each activity for which incom	ccomplishme	olumn (e) of Part >	(VI-A contributed	importantly to the	
(See	worksheet in line 13 instructions to verify calculations EXVI-B Relationship of Activities to the A No. Explain below how each activity for which incom	ccomplishme	olumn (e) of Part >	(VI-A contributed	importantly to the	
(See	worksheet in line 13 instructions to verify calculations EXVI-B Relationship of Activities to the A No. Explain below how each activity for which incom	ccomplishme	olumn (e) of Part >	(VI-A contributed	importantly to the	
(See	worksheet in line 13 instructions to verify calculations EXVI-B Relationship of Activities to the A No. Explain below how each activity for which incom	ccomplishme	olumn (e) of Part >	(VI-A contributed	importantly to the	
(See	worksheet in line 13 instructions to verify calculations EXVI-B Relationship of Activities to the A No. Explain below how each activity for which incom	ccomplishme	olumn (e) of Part >	(VI-A contributed	importantly to the	
(See	worksheet in line 13 instructions to verify calculations EXVI-B Relationship of Activities to the A No. Explain below how each activity for which incom	ccomplishme	olumn (e) of Part >	(VI-A contributed	importantly to the	
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(See	worksheet in line 13 instructions to verify calculations EXVI-B Relationship of Activities to the A No. Explain below how each activity for which incom	ccomplishme	olumn (e) of Part >	(VI-A contributed	importantly to the	
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(See	worksheet in line 13 instructions to verify calculations EXVI-B Relationship of Activities to the A No. Explain below how each activity for which incom	ccomplishme	olumn (e) of Part >	(VI-A contributed	importantly to the	
(See	worksheet in line 13 instructions to verify calculations EXVI-B Relationship of Activities to the A No. Explain below how each activity for which incom	ccomplishme	olumn (e) of Part >	(VI-A contributed	importantly to the	
(See	worksheet in line 13 instructions to verify calculations EXVI-B Relationship of Activities to the A No. Explain below how each activity for which incom	ccomplishme	olumn (e) of Part >	(VI-A contributed	importantly to the	
(See	worksheet in line 13 instructions to verify calculations EXVI-B Relationship of Activities to the A No. Explain below how each activity for which incom	ccomplishme	olumn (e) of Part >	(VI-A contributed	importantly to the	
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(See	worksheet in line 13 instructions to verify calculations EXVI-B Relationship of Activities to the A No. Explain below how each activity for which incom	ccomplishme	olumn (e) of Part >	(VI-A contributed	importantly to the	
(See	worksheet in line 13 instructions to verify calculations EXVI-B Relationship of Activities to the A No. Explain below how each activity for which incom	ccomplishme	olumn (e) of Part >	(VI-A contributed	importantly to the	
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(See	worksheet in line 13 instructions to verify calculations EXVI-B Relationship of Activities to the A No. Explain below how each activity for which incom	ccomplishme	olumn (e) of Part >	(VI-A contributed	importantly to the	
(See	worksheet in line 13 instructions to verify calculations EXVI-B Relationship of Activities to the A No. Explain below how each activity for which incom	ccomplishme	olumn (e) of Part >	(VI-A contributed	importantly to the	
(See	worksheet in line 13 instructions to verify calculations EXVI-B Relationship of Activities to the A No. Explain below how each activity for which incom	ccomplishme	olumn (e) of Part >	(VI-A contributed	importantly to the	

Part	XVII		n Regarding Trans ganizations	sfers To a	ind Trans	actions	s and Re	elationship	os With N	oncharitable		<u> </u>
1	ın se	•	directly or indirectly eine Code (other than s		-	_	•	_		bed	Yes	No
а	•	_	porting foundation to	a noncharit	able exemp	ot organı	zation of				}	1
	(1)				•	3.				1a(1)		
	(2)	Other assets				•				1a(2)		
b		er transactions										
			a noncharitable exer							1b(1)		
			ets from a noncharita	-	organizatio	n				1b(2)	ļ	
		Rental of facilities Reimbursement a	s, equipment, or other	assets						1b(3)		
		oans or loan gua	_							1b(4) 1b(5)		
		-	ervices or membershi	or fundra	ısına solicita	ations				1b(6)	-	
С			equipment, mailing list	-	-		/ees			1c		
d			the above is "Yes," con					hould always	show the fa	ır market		
			er assets, or services on or sharing arrangeme									
(a) Line	no	(b) Amount involved	(c) Name of nonc	charitable exen	npt organizatioi	n	(d) Des	cription of trans	fers, transactio	ns, and sharing arra	ngemen	its
			<u> </u>									
			 									
	-+											
	-+									·		
			 									
												
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	_+											
	}											
	\dashv											
	-											
	$\neg \uparrow$		 			-						
2a b	desc	cribed in section s	ctly or indirectly affilia 501(c) of the Code (of following schedule	ited with, or ther than se	related to, ection 501(c	one or n	nore tax-e in section	xempt orga 527?	nızatıons	☐ Yes	N	o
		(a) Name of orga	nization	\	(b) Type of orga	anization			(c) Description	on of relationship		
			 									
				ļ								
				·								
				 								
			clare that I have examined this re						nowledge and be	lief, it is true,		
Sign Here		Dollis	tion of preparer (other than taxpa	/	2.14.16	. /	' 11. A	wledge Idn agemu	ent	May the IRS discuss with the preparer sho (see instructions)?	wn beloy	
	Siğ	Prot/Type prepare			Date	litle		Date Date	·	PTIN	===	=
Paid		Pnnt/Type prepare	i s naille	riepaiers	s signature			Date	Chec self-e	k I if PIN		
Prepa		Firm's name ▶							Firm's EIN			
Use C	nıy	Firm's address							Phone no			
										Form 99 ()-PF	(2015)

Part I, Line 11 (990-PF) - Other Income

1	145,145	145,145	0
	Revenue		
	and Expenses	Net Investment	Adjusted
Description	per Books	Income	Net Income
Rental income from Tisdale Retirement Home	145,145	145,145	

Part I, Line 16b (990-PF) - Accounting Fees

	0		0	0
Description	Revenue and Expenses per Books	Net Investment	Adjusted Net	Disbursements for Charitable Purposes (Cash Basis Only)
1 Alerus Financial	0			0

Part I, Line 16c (990-PF) - Other Professional Fees

	100	100	0	0
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes (Cash Basis Only)
1 Accounting Fees	100	100		Ó

Part I, Line 18 (990-PF) - Taxes

	477	0	0	0
	Revenue			Disbursements
	and Expenses	Net Investment	Adjusted	for Charitable
Description	per Books	Income	Net Income	Purposes
1 Income tax	477			

Part I, Line 23 (990-PF) - Other Expenses

		115,055	115,055	0	0
		Revenue and			Disbursements
	i	Expenses	Net Investment	Adjusted Net	for Charitable
	Description	per Books	Income	Income	Purposes
1	Utilities	30,421	30,421		
2	Insurance	15,323	15,323		
3	Repairs & Maintenance	44,978	44,978		
4	Resident Manager	4,843	4,843		
5	Real Estate Taxes	9,705	9,705		
6	Real Estate Management Fee	8,619	8,619		
7	Admin, Advertising, Promotion	1,166	1,166		

Part II, Line 13 (990-PF) - Investments - Other

			1,024	1,624	1.624
		Basis of	Book Value	Book Value	FMV
Asset Des	scription	Valuation	Bed of Year	End of Vear	End of Voor
111 - 17 - 17 - 17 - 17 - 17 - 17 - 17			50.00	ווים סורים	בומטו כי
- Capital Credits from Utili	ities		1 624	1 621	1 601
			101	1,071	1,024

TISDALE FOUNDATION 6/0 ALERUS FINANCIAL

Part II, Line 14 (990-PF) - Land, Buildings, and Equipment

	1,671,857	0	0	1,671,857	1,671,857	730,900
		Accumulated	Accumulated			
	Cost or	Depreciation	Depreciation	Book Value	Book Value	FMV
Asset Description	Other Basis	Beg of Year	End of Year	Beg of Year	End of Year	End of Year -
1 Tisdale Manor, Bldg & Land	1,671,857			1,671,857	1,671,857	730,000

Part II, Line 15 (990-PF) - Other Assets

TISDALE FOUNDATION 0/0 ALERUS FINANCIAL

	5,171	2,315	2,315
	Book Value	Book Value	FMV End
Asset Description	Beg of Year	End of Year	of Year
1 Amount due from IMM	5 171	2315	2315

Part VIII, Line 1 (99047) - Compensation of Officers, Directors, Trustees and Foundation Managers

)	
	O Bed X							AgHs	AgHs		Expanse
Name	if Business	Sheet	Ğ	SSB	State ZpOode	FaegnCartry	Tile	Perweek	Compansation	Benefits	Account
Aeus Frand	×	X 2200 SOctumbard	GardForkes	CZ (2820)	98201		Trustice	500	3341		•
Rate Arderson		Dayon Sale Bark	Daykon	9	98 <u>2</u> 25		Advisory	80	0		