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2029 Onn Cervers

Form **990-PF** Department of the Treasury

EXTENDED TO NOVEMBER 15, 29 Return of Private Foundation 2017

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

 \blacktriangleright 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

Name of foundation THE HEGMAN FAMILY FOUNDATION Number and street (or P C) but number of mall an of delivered to street address) 4913 EAST SUNNYSLOPE ROAD City or town, state or province, country, and ZIP or foreign postal code EDINA, MN 55424 6 Check all that apply: Initial return Initial return of a former public charity Amended return Address change Name change H Check type of organizations: Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust Under the taxable private foundation Section 4947(a)(1) nonexempt charitable trust Under the taxable private foundation Section 4947(a)(1) nonexempt charitable trust Under the taxable private foundation Section 4947(a)(1) nonexempt charitable trust Under the taxable private foundation Section 4947(a)(1) nonexempt charitable trust Under the taxable private foundation Section 4947(a)(1) nonexempt charitable trust Under the taxable private foundation Section 4947(a)(1) nonexempt charitable trust Under the taxable private foundation Section 4947(a)(1) nonexempt charitable trust Under section 507(b)(1)(A), check here 1 Fair market value of all assets at end of year I Accounting method: Under section 507(b)(1)(A), check here Under section 507(b)(1)(A), check		out Forn	n 990-PF and its separate i		s.gov/rorms9upr.	Open to Public Inspection
THE HEGMAN FAMILY FOUNDATION Number and states of P O less runting from the of deriveral to seed and descard 4913 ResPT SUNNYSLOPE ROAD Cly or fount, state or province, country, and 2P or foreign postal code Road Road Road Road Road Road Road Road	For calendar year 2016 or tax year beginning			, and ending		
Recombinate 91.3 RAST SUNNYSLOPE ROAD 91.3 RAST SUNNYSLOPE ROAD STATEMENT India return of a former public charity Amended return	Name of foundation				A Employer identification	n number
Recombinate 91.3 RAST SUNNYSLOPE ROAD 91.3 RAST SUNNYSLOPE ROAD STATEMENT India return of a former public charity Amended return	THE HEAMAN EASTLY BOIDS	DAMT	ONT		41 175140)
4913 EAST SUNNYSLOPE ROAD City or town, table or province, country, and ZiP or foreign postal code StDINA, MY 55424 G Check all that apply. Indical return Address change H Check you of organization: Section 4947(a)(1) noneempt character by a Section 497(a)(1) none				Room/suite		<u> </u>
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EDITAL MN 55424 6 Check alt that apply. Initial return Anemoded return Amended return Address change Name change			netal code			
Contribution Con		ioi eigii pe	JSIZI COUC		o ir exemption application is i	bending, check here
Final return			Initial return of a fo	rmer nublic charity	D 1 Foreign organization	s check here
Activate type of organization: Address change Name	··· —			, mor poone on any	L. C. C. G.	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Check type of organization: X Section 501(c)(2) evently private foundation Section 4947(a)(1) nonexempt charactable trivials foundation Fair market value of all sessets at end of year Accounting method: Cash X Accrual from Part II, cot. (c), Inc 15) Uniter (specify) Accounting method: Cash X Accrual first foundation is an a 60-month termination under section 507(b)(1)(B), check here X Accounting method: Cash X Accrual first foundation is an a 60-month termination under section 507(b)(1)(B), check here X Accounting method: Cash					Foreign organizations m check here and attach c	eeting the 85% test, omputation
Section 4947(a)(1) increasenglic characteristic trust. ○ Other isabelic private foundation Increase and a section 507(b)(1)(A), check here					1	
Far market value of all assets at end of year Accounting method:				tion	1 - 1	. []
## An any set of Revenue and Expenses (a) Add (c) Any set of Revenue and Expenses (b) Accounting (d) must be on cash basis.) Part		_			7	• • • • • • • • • • • • • • • • • • • •
S STATEMENT 1 STATEMENT 2 STATEMENT 3 STATEMENT 4 STATEMENT 4 STATEMENT 4 STATEMENT 4 STATEMENT 5 STATEMENT 4 STATEMENT 5 STATEMENT 4 STATEMENT 5 STATEMEN	(from Part II, col. (c), line 16)	Ott	ner (specify)			
The lotal of amounts in columna (2), (2), and (6) may not income by income (2), (2), and (6) may not income (2), and (6), and (6)				pasis.)		
1 Contributions, gifts, grants, etc., received 2 78,780 N/A	Part I Analysis of Revenue and Expenses			(b) Net investment	(c) Adjusted net	(d) Disbursements
Check	necessarily equal the amounts in column (a).)	nay not	expenses per books	income	ıncome	
Interest on awaying and temporary 2. 2. STATEMENT 2	1 Contributions, gifts, grants, etc., received		78,780.		N/A	
## A Dwidends and interest from securities 5a Gross rents 5a Hot gains or deasily from sale of assets not on line 10 13 , 625 .	, = , ·	Sch B				
Sa Gross rents Sa Gross rents Satisfaction come (text) STATEMENT 1	3 Interest on savings and temporary cash investments	ļ			· · · · · · · · · · · · · · · · · · ·	+
B Net rental moome or (loss) STATEMENT 1 STATEMENT 2 STATEMENT 4 STATEMENT 5 STATEMENT 4 STATEMENT 5 STATEMENT 4 STATEMENT 5 STATEMENT 5 STATEMENT 5 STATEMENT 5 STATEMENT 5 STATEMENT 4 STATEMENT 5		ļ	8,589.	8,589.	, ,	STATEMENT 3
6a Net game of closes from sale of asserts not on line 10 97,905.	5a Gross rents	ļ			ļ	ļ
Description of the first content of the first con	b Net rental income or (loss)				ļ <u>.</u>	
Net Short-term capital gain	6a Net gain or (loss) from sale of assets not on line 10		13,625.			STATEMENT 1
Net Short-term capital gain	assets on line 6a . 97, 90	05.		F0 600	 	
Income modifications Income Incom	7 Capital gain net income (from Part IV, line 2)	ŀ	· ·	50,629		+
10a and slowances		ŀ				
D Less Cost of goods sold	Gross sales less returns	}				
C Gross profit or (loss) 11 Other income 1 , 019					<u> </u>	
11 Other income 12 Total. Add lines 1 through 11 13 Compensation of officers, derectors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 16 Accounting fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative 25 expenses. Add lines 13 through 23 26 Contributions, gifts, grants paid 27 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: 2 Excess of revenue over expenses and disbursements 3 N/A 2 N/A 2 N/A 2 N/A 3 N/A 3 N/A 3 N/A 3 N/A 4 N/A 5 N/A						
12 Total Add lines 1 through 11 102,015. 60,239.	, , , , , ,	ŀ	1 019	1 019		STATEMENT 4
13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees C Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses. STMT 6 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)	· ·	··· }				DIIII DIII
14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 6 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)						0.
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25 Contributions, girls, grants paid 26 Total expenses and disbursements. Add lines 24 and 25	9 17 Interest	[PECEIM	
25 Contributions, girls, grants paid 26 Total expenses and disbursements. Add lines 24 and 25	18 Taxes	ļ			1000	
25 Contributions, girls, grants paid 26 Total expenses and disbursements. Add lines 24 and 25	19 Depreciation and depletion	ļ			12 1111 0 5 21	
25 Contributions, girls, grants paid 26 Total expenses and disbursements. Add lines 24 and 25	20 Occupancy	. ,			18 101, 49 5	
25 Contributions, girls, grants paid 26 Total expenses and disbursements. Add lines 24 and 25	Z 21 Travel, conferences, and meetings					
25 Contributions, girls, grants paid 26 Total expenses and disbursements. Add lines 24 and 25	E 22 Printing and publications	.			IL OGUEN,	Ψ !
25 Contributions, girls, grants paid 26 Total expenses and disbursements. Add lines 24 and 25	23 Other expenses STMT	6	204.	<u> </u>	•	25.
25 Contributions, girls, grants paid 26 Total expenses and disbursements. Add lines 24 and 25	版 24 Total operating and administrative					4 25-
25 Contributions, girls, grants paid 26 Total expenses and disbursements. Add lines 24 and 25	expenses. Add lines 13 through 23	.		1,479		
Add lines 24 and 25	25 Contributions, girts, grants paid	. }	101,500.		<u> </u>	101,500.
27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A		l	104 204	1 450		102 025
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A			104,304.	1,4/9	· 	102,825.
b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A			2 200			
C Adjusted net income (if negative, enter -0-)	•	ľ	-2,289.	E0 760		
	· ·	ŀ		50,/00		
		ot Notice	ann instructions			Form QQD-PF (2016)

1

		MAN FAMILY FO					4	1-175	1492	Page 3
(a) List and describ	oe the ki	nd(s) of property sold (e.g., or common stock, 200 shs.	real estate,	Income	(b) Ho	w acquired Purchase Donation		acquired lay, yr.)	(d) Date (mo., da	
1a PUBLICALLY TRAD			<u></u> -			P				
b				-						
C							<u>.</u>			
<u>d</u>										
_e					<u> </u>					
(e) Gross sales price	(f) [Depreciation allowed (or allowable)		t or other basis xpense of sale				ain or (loss) s (f) minus (g)	,
a 97,905.				47,27	6.				50,	629.
<u>b</u>										
<u> </u>										
<u>d</u>										
Complete only for assets showing	uain in	column (b) and owned by th	he foundation	on 12/31/69			Caine (C	Col. (h) gain	miniic	
(i) F.M.V. as of 12/31/69		j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (1)			(k), but ı	not less that (from col. (1 -0-) or	
a						,			50,	629.
b										
С										
d										
e										
3 Net short-term capital gain or (loss) If gain, also enter in Part I, line 8, co If (loss), enter -0- in Part I, line 8 Part V Qualification Un (For optional use by domestic private f	der S	ection 4940(e) for	d (6): Reduced	Tax on Net		3 stment Inc	ome	N/A		
If section 4940(d)(2) applies, leave this Was the foundation liable for the section	s part bla	ank.							Vec	X No
If "Yes," the foundation does not qualify 1 Enter the appropriate amount in ea	under :	section 4940(e). Do not cor	nplete this pa	rt		·- ·- ·				
(a) Base period years Calendar year (or tax year beginning		(b) Adjusted qualifying distr		Net value of no	(c)	ıble-use assets		Distrib	(d) ution ratio ided by col. ((c))
2015		8!	5,930.			356,033		· · · · · · · · · · · · · · · · · · ·		1354
2014			7,677.			349,631				0770
2013		118	8,308.			118,619			.99	7378
2012		120	0,580.			124,914				5304
2011		100	0,795.			76,135	•		1.32	<u> 3898</u>
2 Total of line 1, column (d)			. ::		-		2		3.77	8704
3 Average distribution ratio for the 5- the foundation has been in existence			n line 2 by 5,	or by the number	of years	S	3		75	5741
4 Enter the net value of noncharitable	-use ass	sets for 2016 from Part X, li	ine 5				4			076.
5 Multiply line 4 by line 3					•		5		226,	024.
6 Enter 1% of net investment income	(1% of	Part I, line 27b)					6		····	588.

102,825.

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

Form **990-PF** (2016)

7 Add lines 5 and 6

8 Enter qualifying distributions from Part XII, line 4

Form 990-PF (2016) THE HEGMAN FAMILY FOUNDATION 41-17 Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se	51492	etio	Page 4
		-	
1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		1,1	75
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%			<u>/5.</u>
of Part I, line 27b			
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			0.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2		1,1	
		<u>,, , , , , , , , , , , , , , , , , , ,</u>	73.
——————————————————————————————————————		1,1	
		<u> </u>	15.
6 Credits/Payments: a 2016 estimated tax payments and 2015 overpayment credited to 2016 6			
c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 6d 6d			
7 Total credits and payments. Add lines 6a through 6d		6,8	RΛ
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8		0,0	<u> </u>
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		5,7	05.
11 Enter the amount of line 10 to be: Credited to 2017 estimated tax		<u> </u>	0.
Part VII-A Statements Regarding Activities			
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
any political campaign?	1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	12		
distributed by the foundation in connection with the activities.			
c 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) imposed during the year.			
(1) On the foundation. \blacktriangleright \$ 0. (2) On foundation managers. \blacktriangleright \$ 0.			
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
managers. ►\$ 0.			
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
If "Yes," attach a detailed description of the activities.			
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	1 /		
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b 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 during the year?	5		<u>X</u>
If "Yes," attach the statement required by General Instruction T.			
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
By language in the governing instrument, or			
 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law 			
remain in the governing instrument?	6	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions)			
MN	_		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	}		
of each state as required by General Instruction G? If "No," attach explanation	. 8b	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		<u>X</u>
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses .	10) DE	X

Pa	art VII-A Statements Regarding Activities (continued)			· cgs o
		Τ	Yes	No
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		х
10		-"-		
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	40		.
40	If "Yes," attach statement (see instructions)	12	- 	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	L
	Website address ► N/A		202	
14	The books are in care of ► MARK E. HEGMAN Telephone no. ► 952-92			
	Located at ► 4913 EAST SUNNYSLOPE RD, EDINA, MN ZIP+4 ►55	1424		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	. []
	and enter the amount of tax-exempt interest received or accrued during the year	N	/ <u>A</u>	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		_X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	1		
	foreign country			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):	1		1
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	1		
	a disqualified person?	1		[
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1		
	(5) Transfer any income or assets to a disqualified person (or make any of either available	1		
	for the benefit or use of a disqualified person)?	1		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			ļ
	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.)			}
h	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1		Ì
-	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			_
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			ŀ
·	before the first day of the tax year beginning in 2016?	1c		x
2		10		
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)):	1		
_				<u> </u>
a	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? Yes X No			ļ
	If 'Yes,' list the years , , , , , , , , , , , , , , , , , , ,	1		
0	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	1		\
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	 		1
	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.			
	<u> </u>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	1		
	during the year? Yes X No			
þ	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after			1
	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 2016.)	3b		<u></u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
p	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 2016?	4b		X
		rm 99 0)-PF	(2016)

Form 990-PF (2016) THE HEGMAN FAMILY FOUND			41-17514	92 Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:]
(1) Carry on propaganda, or otherwise attempt to influence legislation (sect	ion 4945(e))?	Ye	es X No	1 1
(2) Influence the outcome of any specific public election (see section 4955)	; or to carry on, directly or indir	ectly,		1 1
any voter registration drive?		Ye	s X No	
(3) Provide a grant to an individual for travel, study, or other similar purpos	es?	Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization				1 1
4945(d)(4)(A)? (see instructions)		Y	es X No	} }
(5) Provide for any purpose other than religious, charitable, scientific, literal	rv. or educational purposes, or	•		- } - }
			es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify u		••		
section 53.4945 or in a current notice regarding disaster assistance (see ins			N/A 5	ъ 1
Organizations relying on a current notice regarding disaster assistance check				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption	_	. —	I	
	•	¶ŅĀ. L∐ Ye	s No	
If "Yes," attach the statement required by Regulations section 53.49	• •		Ì]]
6a Did the foundation, during the year, receive any funds, directly or indirectly, t	to pay premiums on		(ee)	\
a personal benefit contract?		. L_J Y6	es 🗶 No	.
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	a personal benefit contract?		6	b X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax	x shelter transaction?	. L_J Ye	es X No	
b If Yes, did the foundation receive any proceeds or have any net income attr		<u> </u>	· · · · · · · · · · · · · · · · · · ·	<u>b</u>
Part VIII Information About Officers, Directors, Trus	stees, Foundation Ma	anagers, Highly	y	
Paid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and the	-,	1.00	(4) 0	
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (if not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	enter -0-)	compensation	allowances
MARK E. HEGMAN	PRESIDENT			
4913 EAST SUNNYSLOPE ROAD				
EDINA, MN 55424	1.00	0.	0.	0.
JACQUELINE B. HEGMAN	DIRECTOR			
4913 EAST SUNNYSLOPE ROAD	7			
EDINE MN 55424	1.00	0.	0.	0.
JENNIFER E. HIGGINS	DIRECTOR	† <u>-</u>		
4840 HARRIET AVE SOUTH				
MPLS, MN 55409	1.00	0.	0.	0.
MI 115, MN 33403	1.00			
	-	,	1	
		1		
2 Compensation of five highest-paid employees (other than those i	ncluded on line 1) If none	enter "NONE "	<u> </u>	
2 Compensation of the ingreed paid employees (date) than those i	(b) Title, and average	T TONE	(d) Contributions to	(е) Ехрепѕе
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deterred	(e) Expense account, other allowances
NONE	devoted to position	ļ	compensation	allowances
NONE		1		
		 		
	-	1		
		<u> </u>	<u> </u>	
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)	
Total number of other employees paid over \$50,000			. ▶	0
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Part VIII Information About Officers, Directors, Trustees, Foundatio Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "N	ONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produce	information such as the d, etc.	Expenses
1 NONE		
2		0.
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines	s 1 and 2.	Amount
1 NONE		
2		0.
All other program-related investments. See instructions. 3		
Total. Add lines 1 through 3		0.
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LP	Minimum Investment Return (All domestic foundations must complete this part. For	eign fou	ndations, se	e 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	284,393.
þ	Average of monthly cash balances		1b	19,237
C	Fair market value of all other assets		1c	·· ·····
d	Total (add lines 1a, b, and c)		1d	303,630
e	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation)	0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0
3	Subtract line 2 from line 1d		3	303,630
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	-	4	4,554
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4		5	299,076
6_	Minimum investment return. Enter 5% of line 5		6	14,954
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foun- foreign organizations check here ☐ and do not complete this part.)	dations ar	nd certain	
1	Minimum investment return from Part X, line 6		1	14,954
2a		175.		
b	Income tax for 2016. (This does not include the tax from Part VI.)		1	
C	Add lines 2a and 2b		2c	1,175
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	13,779
4	Recoveries of amounts treated as qualifying distributions		4	0
5	Add lines 3 and 4		5	13,779
6	Deduction from distributable amount (see instructions)	• •	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1		7	13,779
P	art 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	102,825
b	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:		[]	
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	102,825
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		5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	102,825
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the fo	undation	qualifies for th	e section

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,				
line 7				13,779.
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only			0.	
b Total for prior years:				
S. Freeze distributions are serviced to 2016.		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011 100,800. b From 2012 114,805.				
b From 2012 114,805. c From 2013 114,281.				
d From 2014 77,861.				
e From 2015 68,928.				
f Total of lines 3a through e	476,675.			
4 Qualifying distributions for 2016 from	470,013.			
Part XII, line 4: ►\$ 102,825.				
a Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				13,779.
e Remaining amount distributed out of corpus	89,046.			
5 Excess distributions carryover applied to 2016	0.			0.
(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	565,721.			
b Prior years' undistributed income. Subtract				
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			<u> </u>	
amount - see instructions		0.		
e Undistributed income for 2015. Subtract line			<u></u>	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2016. Subtract		····	·	
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				0.
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)	0.	· · · · · · · · · · · · · · · · · · ·		
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7	100,800.			
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a	464,921.			
O Analysis of line 9:				
a Excess from 2012 114,805.				
b Excess from 2013 114, 281.				
c Excess from 2014 77,861.				
d Excess from 2015 68,928.				
e Excess from 2016. 89,046.		····	L	Form 990-PF (2016)

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Part XIV Private Operating F			II-A, question 9)	N/A	
1 a If the foundation has received a ruling of			-		
foundation, and the ruling is effective fo	<u>-</u>	•	▶ ـ	· ··· · · · · · · · · · · · · · · · ·	
b Check box to indicate whether the found		ng foundation described		4942(j)(3) or4	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	41,0045	Prior 3 years	T (1) 0040	4.3.7
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a				.,	
 Qualifying distributions from Part XII, 					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the		<u> </u>			
alternative test relied upon: a "Assets" alternative test - enter:				1	
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization		Ì			
(4) Gross investment income		<u> </u>			
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or m	nore in assets
at any time during t				*** ,	
1 Information Regarding Foundation	n Managers	·	· 		
a List any managers of the foundation wh	_	than 2% of the total con	tributions received by the	foundation before the cl	ose of any tax
year (but only if they have contributed n	nore than \$5,000). (See s	section 507(d)(2).)	and anone received by and	Touridation boloro tito of	ooo or arry wax
SEE STATEMENT 9					
b List any managers of the foundation wh	o own 10% or more of th	ne stock of a corporation	(or an equally large porti	on of the ownership of a	partnership or
other entity) of which the foundation ha	s a 10% or greater intere	st.	tor an equally large port	on or the emicromp or a	partitoromp of
NONE					
2 Information Regarding Contributi	on Grant Gift Loan	Scholarchin etc. D	rograme:		· · · · · · · · · · · · · · · · · · ·
Check here ► X if the foundation o				not accent unsolveited rec	nugete for funde. If
the foundation makes gifts, grants, etc.	(see instructions) to indr	viduals or organizations	under other conditions, c	omplete items 2a. b. c. ar	nd d.
a The name, address, and telephone num					
a The hame, address, and telephone ham	Jei of e-mail address of	are person to whom app	ncations should be addre	3350.	
b The form in which applications should b	e submitted and informa	tion and materials they s	hould include;		
c Any submission deadlines:					
		· · · · · · · · · · · · · · · · · · ·			
d Any restrictions or limitations on awards	, such as by geographic	al areas, charitable fields	, kınds of institutions, or	other factors:	

(a) Business	(h)	(c)		(e)
code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
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		-	13	23,235
to the Accom	plishment of	Exempt Pu	rposes	
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			importantly to the accomp	lishment of
n by providing funds	for such purposes).			
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	come is reported in c	to the Accomplishment of	to the Accomplishment of Exempt Pu	15 1,019. 18 13,625. 19 23,235. 10 to the Accomplishment of Exempt Purposes Come is reported in column (e) of Part XVI-A contributed importantly to the accomp

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Debt or organization directly or indevently engines in any of the following with any other organization described in section 501(c) of the 6006 (other than section 501(c)) organizations or in section 527 (classified by the section of the section 501(c)) organization organization of the section 501(c) organization organization organizations. 15(1) X 15(2) X 15(2) X 15(2) X 15(2) X	Part XVII	Information Re Exempt Organ		sfers To a	and Transactions	and Relations	hips With Noncha	ritabl	е	<u> </u>
the Code (other than section 501(c)(3) organizations) or in section 527, celluling to policial organizations? (1) Cash (2) Other assets b Other transactions: (1) Sales of assets to a noncharitable exempt organization (1) Sales of assets to a noncharitable exempt organization (2) Purchases of dasets from a noncharitable exempt organization (3) Perilal of facilities, equipment, or other assets (3) Learns or loan guarantees (4) Perilal and of sections or membership or fundrassing solicitations (5) Learns or loan guarantees (6) Performance of services or membership or fundrassing solicitations (7) Sales of a learn of the above is "refs, complete the following schedule. Column (3) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation denended less than fair market value on any transaction or sharing arrangement, show in column (4) the value of the goods, other assets, or services given by the reporting foundation. If the foundation denended less than fair market value on any transaction or sharing arrangement, show in column (6) the value of the goods, other assets, or services growth. (a) Amount involved (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of relationship N/A (e) Promotion of prelationship Linear services of the Code (other than section 50 I(c)(3)) or in section 52?? (a) If Yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship Linear services of the code of pariation (d) Description of relationship Promotion of the code of the code of the pariation of the section	1 Did the o	rganization directly or indi	rectly engage in any	of the following	g with any other organizati	on described in sect	ion 501(c) of		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash (2) Other assets to the concharitable exempt organization (1) Sales of assets to a noncharitable exempt organization (1) Sales of assets from a noncharitable exempt organization (1) Sales of assets from a noncharitable exempt organization (2) Pruchases of assets from a noncharitable exempt organization (3) Reflat of facilities, equipment or other assets (4) Remainurament arrangements (5) Loans or float guarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or individual services or							• •	Ì		
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b Other transactions: (1) Sales of assets for an anoncharitable evempt organization (2) Perchases of assets from a noncharitable evempt organization (3) Rehal of Rachites, equipment, or other assets (4) Rembu scenarior anagements (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (7) It has been considered to any of the above it were following schedule. Column (b) should always show the fair market value of the goods, other assets, or services received. (8) Loans or loan guarantees (8) Performance of services or membership or fundrasing solicitations (9) Amount myoked (10) Same of organization (11) Description of transfers, transactions, and dharing errangements N/A (12) Learner (13) Learner (14) Description of transfers, transactions, and dharing errangements N/A (14) Description of relationship N/A (15) If Yes, complete the following schedule. (16) Learner (16) Learner (16) Learner (16) Amount myoked (17) Same of organization (18) Learner (18)	(1) Cast	ı						1a(1)		X
(1) Sales of assets to an anotherable exempt organization (2) Purchases of assets from a noncharable exempt organization (3) Renal of facilities, equipment, or other assets (4) Remodurement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (7) Ferrina considerable exempt organization (8) Loans or loan guarantees (8) Performance of services or membership or fundrasing solicitations (9) The answer to any of the above is "ser, complete the following schedule. Column (a) should always show the fair market value of the goods, other assets, or services premium. Another assets in a fair market value in any transaction or sharing arrangement, show in column (a) the value of the goods, other assets, or services premium. Another assets in a fair market value in any transaction or sharing arrangement, show in nonlinear to the proofs, other assets, or services premium. Another arrangement in the premium of the premiu	(2) Othe	er assets						1a(2)		X
(2) Perchases of assists from a noncharable exempt organization (3) Rental of Eachies, equipment, or other assets (4) Rembursement arrangements (5) Loans or loan guistanties (6) Performance of services or membership or fundrasing solicitations (7) Rembursement arrangements (8) Performance of services or membership or fundrasing solicitations (8) Performance of services or membership or fundrasing solicitations (9) Performance of services or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (4) the value of the poods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (4) the value of the poods, other assets, or services received. (a) Lee no (b) Amount involved (c) Name of noncharitable exempt organization (d) cescription of transfers, transactions, and sharing arrangement, show in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? (a) If Yes, 'complete the following schedule. (b) Amount involved (c) Name of organization (e) Type of organization (e) Description of relationships (c) Name of organization (e) Type of organization (e) Description of relationships (e) Description of relationships N/A (i) Under people is people; i desire that I have supplied to people is people. In the people is people in the	b Other tra	nsactions:								
(a) Renal of facilities, equipment, or other assets (b) Loans or loan guarantees (c) Performance of services or membership or fundrasing solicitations (d) Performance of services or membership or fundrasing solicitations (e) Performance of services or membership or fundrasing solicitations (e) Performance of services or membership or fundrasing solicitations (e) Sharing of facilities, equipment, making lists, other assets, or paid employees (e) I was serviced spire by the reporting foundation. If the foundation creaved less than fair market value in any transaction or sharing arrangement, show in column (g) the value of the goods, other assets, or services scienced. (a) I was on (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of readers, transactions, and sharing arrangements N/A (a) Same of organization (b) Type of organizations (e) Description of relationships N/A (a) Same of organization (b) Type of organization (e) Description of relationships N/A (a) Same of organization (b) Type of organization (e) Description of relationships N/A Sign set beind, if the profit, find complete Description of organization (e) Description of relationships Print's complete the following schedule. Oate Title Print's name ► CLIFTONLARSONALLEN LIP Firm's address ► 220 SOUTH SIXTH STREET, SUITE 300	(1) Sale	s of assets to a noncharita	ble exempt organiza	ttion				1b(1)		
(4) Rembursement arrangements (5) Loans or loan guarantees (8) Performance of services or membership or fundraising solicitations (8) Performance of services or membership or fundraising solicitations (8) Performance of services or membership or fundraising solicitations (8) Performance of services or membership or fundraising solicitations (8) It it is answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services occurred. (a) User a reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (g) the value of the goods, other assets, or services received. (a) User a reporting foundation of meeting of the value of the goods, other assets, or services received. (a) User a reporting foundation of meeting or individual and the properties of the goods, which are a reporting for a related to, one or more tax-exempt organization. (b) Amount involved (c) Name of romarization asset one Solici(s) or in section Solici(s) or in	(2) Puro	chases of assets from a no	ncharitable exempt	organization				1b(2)	<u> </u>	
(6) Performance of servoces or membership or fundratising solicitations E. Sharing of facilities, equipment, mailing lists, other assets, or paid employees 4 If the answer to any of the above is Yes, Complete the following schedule. Column (a) the value of the goods, other assets, or services received. (a) Line no. (b) Amount involved (c) Name of noncharidable exempt organization (d) Description of transfers, transactions, and sharing arrangement, show in Solicin (d) the value of the goods, other assets, or services received. N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 50 t(c) of the Code (other than section 50 t(c)(3)) or in section 52?? D. If Yes, Complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A West No.	(3) Rent	al of facilities, equipment,	or other assets					1b(3)	L	
(6) Performance of services or membership or fundrations seets, or paid employees d if the answer to any of the above is Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line Per (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements. N/A 2a Is the foundation directly or indirectly afflicted with, or related to, one or more tax-exempt organization in section 501(c) of the Code (other than section 501(c) of the Section 501(c) of the Code (other than section 501(c) of the Code (other than section 501(c) of the Code (other than section 501(c)	(4) Rein	nbursement arrangements						1b(4)	ļ	
c. Sharing of facilities, equipment, making lists, other assets, or paid employees d. If the answer to any of the above is "Yes," complete the following schedule. Column (6) should always show the fair market value of the goods, other assets, or services received. (a) Line no. (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a. Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? (a) Nime of organization (b) Type of organization (c) Description of relationship N/A Sign have been in the finite prepare that if have exempted than backgroup between the finite prepare that make that if have exempted than backgroup between the finite prepare in the prepare of the finite prepare in the prepare of the finite prepare in the prepare of the proper in the prepare of the prepare is signature of officer or trustee Pendifype preparer's signature LORI PETERSON Firm's RIM > 220 SOUTH SIXTH STREET, SUITE 300	(5) Loar	ns or loan guarantees				•		1b(5)		
d If the answer to any of the above is "es", complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line rice (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? b If "es," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign Node people of people of the pollowing schedule. Check If PTIN self- Check If				-	• •		•	1b(6)	 	
or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Amount involved (c) Rame of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A									<u> </u>	X
(a) Inne no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 50 t(c) of the Code (other than section 50 t(c)(3)) or in section 527? b if Yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under peoplith of peoplith, indicated with have exemed the return, including accompanying schedules and statements, and to the best of my knowledge in section 1 to the Description of relationship N/A	or service	es given by the reporting f	oundation. If the fou	ndation receiv	• •				sets,	
N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? Yes										
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? Yes X No If Yes, complete the following schedule.	(a) Line no	(b) Amount involved	(c) Name o		exempt organization	(d) Description	of transfers, transactions, and	sharing a	rrangeme	nts
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes				N/A		<u> </u>				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes		·-···				<u></u>				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes		·——-				 				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes		····								
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes			 							
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes						 				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes						-				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes						<u> </u>				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes						 				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes						 				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes			l		——————————————————————————————————————					
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes						 				
(a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penaltits of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is trile, portet, and comprete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge return with the preparer shown below (see inst;)? No Signature of officer or trustee Date Title	ın section	501(c) of the Code (other	r than section 501(c			izations described		Yes	X] No
Sign Here		(a) Name of org	anization		(b) Type of organization		(c) Description of relations	ship		
Sign Here Signature of officer or trustee Date Title		N/A								
Sign Here Signature of officer or trustee Date Title	·				<u> </u>					
Sign Here Signature of officer or trustee Date Title	· · · · · · · · · · · · · · · · · · ·					<u> </u>				
Sign Here Signature of officer or trustee Date Title										
Sign Here Signature of officer or trustee Date Title	·—									
Paid Print/Type preparer's name Preparer's signature Date Check if PTIN self- employed Proparer Use Only Print/Type preparer's name Preparer's signature Date Check if PTIN Self- employed Print's address ► 220 SOUTH SIXTH STREET, SUITE 300	Sign Here	elief, it is trife, correct, and con	notete Declaration of pr	reparer (other than	n taxpayer) is based on all inform	nation of which prepare	r has any knowledge ret	úrn with th <u>own</u> belov	ne prøpar v (see ins	er T
Paid Preparer Use Only Correct Peterson Poogga Po	Sigi			Dancert			Charle 5 5 5 5			
Preparer Use Only Firm's name ► CLIFTONLARSONALLEN LLP Firm's address ► 220 SOUTH SIXTH STREET, SUITE 300		Print/Type preparer's na	ime	Preparer's si	gnature	Date				
Use Only Firm's address ► 220 SOUTH SIXTH STREET, SUITE 300				DVSILLE	CIPA .	5/34/2017				
	-						Firm's EIN > 41-0	/467	49	
		l .			-	300	Phone no 612-3	76-4	1500	

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2016

Employer identification number Name of the organization 41-1751492 THE HEGMAN FAMILY FOUNDATION 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 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA 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) (2016)

Employer identification number

THE HEGMAN FAMILY FOUNDATION

41-1751492

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 contribution
1	MARK AND JACQUELINE HEGMAN 4913 EAST SUNNYSLOPE ROAD EDINA, MN 55424	\$\$.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

THE HEGMAN FAMILY FOUNDATION

41-1751492

EGMAN FAMILY FOUNDATION	41-	-1751492
Noncash Property (See instructions). Use duplicate copies of Part I	Il if additional space is needed.	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
2,000 SHARES OF ORACLE CORP. STOCK	_	
		11/14/16
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	 \$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	 \$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	Noncash Property (See instructions). Use duplicate copies of Part (b) Description of noncash property given (b) Description of noncash property given	Noncash Property (See instructions). Use duplicate copies of Part III if additional space is needed. (b) Description of noncash property given 2,000 SHARES OF ORACLE CORP. STOCK (c) FMV (or estimate) (See instructions) (b) Description of noncash property given (c) FMV (or estimate) (See instructions) (d) FMV (or estimate) (See instructions) (e) FMV (or estimate) (See instructions) (c) FMV (or estimate) (See instructions) (d) Description of noncash property given (e) FMV (or estimate) (See instructions) (c) FMV (or estimate) (See instructions)

Name of orga	nization		Employer identification number
THE HE	GMAN FAMILY FOUNDATION		41-1751492
Part III	Exclusively religious, charitable, etc., contribute the year from any one contributor. Complete coll	imps (a) through (e) and the follow	in section 501(c)(7), (8), or (10) that total more than \$1,000 for
	completing Part III, enter the total of exclusively religious, completing Part III of additional s	hantable, etc., contributions of \$1,000 or	less for the year (Enterthis info once) -\$
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_			
-			
_			
		(e) Transfer of gift	:
	Transferee's name, address, and	Relationship 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) Furpose of gift	(c) Ose of gift	(a) Description of non-girt is not
-			
-			
-			
ii		(e) Transfer of gift	
	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee
-			
-			
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I			
.			
-			
ļ		(e) Transfer of gift	t
-	Transferee's name, address, and	Relationship of transferor to transferee	
-			
-			
(a) No.			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
 -	-		
-			
		(e) Transfer of gif	t
	Transference	Polationship of transferor to transferoe	
	Transferee's name, address, and	Relationship of transferor to transferee	
i -			
-			

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to **A**mount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient LIFE CENTER INNER CITY CHRISTIAN NONE 501(C)(3) GENERAL MINISTRIES 1812 PARK AVENUE MINNEAPOLIS MN 55404 500. MINNESOTA CONSERVATION VOLUNTEER NONE 501(C)(3) GENERAL 500 LAFAYETTE ROAD ST PAUL MN 55155 100. MINNESOTA LANDSCAPE ARBORETUM NONE GENERAL. 501(C)(3) 3675 ARBORETUM DRIVE 4 000. CHASKA MN 55318 MINNESOTA OVARIAN CANCER ALLIANCE NONE 501(C)(3) GENERAL 4604 CHICAGO AVENUE 10,000. MINNEAPOLIS, MN 55407 MOUNT OLIVET LUTHERAN CHURCH NONE 501(C)(3) RELIGIOUS 12235 OLD ROCKFORD ROAD PLYMOUTH MN 55441 27,000. NC LITTLE MEMORIAL HOSPICE NONE 501(C)(3) MEDICAL 7019 LYNMAR LANE EDINA MN 55435 4,300. OUTING MN VOLUNTEER LIBRARY NONE 501(C)(3) GENERAL 6300 WOODS BAY DRIVE 750. OUTING MN 56662 PI BETA PHI FOUNDATION NONE 501(C)(3) GENERAL 1154 TOWN & COUNTRY COMMONS DRIVE 1,000. TOWN & COUNTRY MO 63017 PLYMOUTH CHRISTIAN YOUTH CENTER NONE 501(C)(3) GENERAL 2519 LYNDALE AVENUE MINNEAPOLIS MN 55411 33,250. PROJECT FOR PRIDE AND LIVING NONE 501(C)(3) GENERAL 1035 EAST FRANKLIN AVENUE MINNEAPOLIS MN 55404 2,000. Total from continuation sheets 96 400

41-1751492

THE HEGMAN FAMILY FOUNDATION

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient SCHUBERT CLUB 501(C)(3) GENERAL NONE 302 LANDMARK CTR, 75 W 5TH STREET 100. ST PAUL MN 55102 UNIVERSITY OF MINNESOTA FOUNDATION NONE 501(C)(3) GENERAL 200 OAK STREET SE #500 MINNEAPOLIS MN 55455 12,000. WILD AND FREE WILDLIFE PROGRAM NONE 501(C)(3) GENERAL 10033 OLD HIGHWAY 18 BRAINERD MN 56401 400, YOUTH FRONTIERS NONE 501(C)(3) GENERAL 6009 EXCELSIOR BLVD 1,000. MINNEAPOLIS, MN 55416 Total from continuation sheets

	GAIN OR	(LOSS)	FROM SALE	OF AS	SETS		STATEMENT	1
(A) DESCRIPTION OF PROP	ERTY				NNER UIRED	DATI ACQUII		SOLD
PUBLICALLY TRADED S	ECURITIES			PURC	HASED			
(B) GROSS SALES PRIC	COS	C) T OR BASIS	(D) EXPENSE SALE		(E)	e. ((F) GAIN OR LO	SS
97,9	05.	84,280.	•	0.		0.	13,	625.
CAPITAL GAINS DIVID	ENDS FROM	PART IV						0.
TOTAL TO FORM 990-P	F, PART I,	LINE 6A					13,	625.
FORM 990-PF INTERE	ST ON SAVI	NGS AND	TEMPORARY	CASH	INVEST	MENTS	STATEMENT	2
	ST ON SAVI	R	TEMPORARY (A) EVENUE R BOOKS	NET	INVESTA (B) INVESTA INCOME		(C) ADJUSTE NET INCO	D
FORM 990-PF INTERE SOURCE RAYMOND JAMES	ST ON SAVI	R	(A) EVENUE	NET	(B) INVESTN		(C) ADJUSTE	D
SOURCE		R	(A) EVENUE R BOOKS	NET	(B) INVESTN	ÆNT	(C) ADJUSTE	D
SOURCE 	NE 3	R PE	(A) EVENUE R BOOKS	NET	(B) INVESTN INCOME	4ENT 2. 2.	(C) ADJUSTE	D ME
SOURCE RAYMOND JAMES TOTAL TO PART I, LI FORM 990-PF	NE 3	R PE	(A) EVENUE R BOOKS 2. 2. TEREST FF	NET	(B) INVESTN INCOME URITIES	4ENT 2. 2.	(C) ADJUSTE NET INCO STATEMENT (C) T- ADJUS	D ME 3
SOURCE 	NE 3 DIVIDEND GROSS	S AND IN CAPI GAI DIVID	(A) EVENUE R BOOKS 2. 2. TEREST FF	NET ROM SEC	(B) INVESTM INCOME URITIES NET S MENT	(B)	(C) ADJUSTE NET INCO STATEMENT (C) I- ADJUS ME NET IN	D ME 3

FORM 990-PF	OTHER I	NCOME	STATEMENT 4		
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME		
ROYALTY INCOME ROYALTY EXPENSES		5,005. -3,986.			
TOTAL TO FORM 990-PF, PART I,	LINE 11	1,019.	1,019	•	
FORM 990-PF	ACCOUNTING FEES		STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
ACCOUNTING FEES	2,600.	1,300	•	1,300.	
TO FORM 990-PF, PG 1, LN 16B	2,600.	1,300	•	1,300.	
FORM 990-PF	OTHER EXPENSES			STATEMENT 6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
MN AG FILING FEE WIRE TRANSFER FEES	25. 179.	0 179		25. 0.	
TO FORM 990-PF, PG 1, LN 23	204.	179	•	25.	
RM 990-PF CORPORATE STOCK			STATEMENT 7		
DESCRIPTION	<u>-</u>	В	OOK VALUE	FAIR MARKET VALUE	
ALTRIA GROUP INC - 1,000 SHS CHEVRON CORPORATION - 325 SHS COCA-COLA STOCK - 250 SHS JPMORGAN CHASE - 1,000 SHS KINDER MORGAN - 877 SHS WELLS FARGO - 700 SHS			41,697. 38,790. 0. 56,042. 36,426. 38,231.	67,620. 38,253. 0. 86,290. 18,163. 38,577.	
TOTAL TO FORM 990-PF, PART II	, LINE 10B		211,186.	248,903.	

INVESTMENTS	·	STATEMENT	8
VALUATION METHOD	BOOK VALUE	FAIR MARKE	T
COST			
COST	36,460. 40,562.	11,8° 37,60	
13	77,022.	49,5	35.
- LINE 1A		STATEMENT	9
	COST	VALUATION METHOD BOOK VALUE COST 36,460. 40,562. 77,022.	VALUATION METHOD BOOK VALUE FAIR MARKED VALUE COST 36,460. 11,80. COST 40,562. 37,60. 13 77,022. 49,50.

NAME OF MANAGER

MARK E. HEGMAN JACQUELINE B. HEGMAN