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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491131011397

2016

OMB No 1545-0052

## **Return of Private Foundation**

or Section 4947(a)(1) Trust Treated as Private Foundation Do not enter social security numbers on this form as it may be made public.
 Information about Form 990-PF and its instructions is at <a href="www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

Open to Public Inspection

For	caler	ndar year 2016, or tax year beginning 01-01-20	)16 , aı	nd er	nding 12-31-	2016			
		Indation	A Employer identification number						
Number and street (or P.O. hox number if mail is not delivered to street address). Room/suite						41-1794327			
		d street (or P O box number if mail is not delivered to street address) 7 PINE STREET	Room/suite		<b>B</b> Telephone nu	mber (see instruction	ns)		
<u> </u>	, 0 211,	THE STREET			(952) 927-9338	l			
		i, state or province, country, and ZIP or foreign postal code HA, PA 19103	1		<b>C</b> If exemption	application is pendin	g, check here		
<u>-</u>		I black annaly. Tracked with the Control	£		D.1 Famanan an				
G C	теск аг	I that apply ☐ Initial return ☐ Initial return of a☐ Final return ☐ Amended return	former public charity		_	ganizations, check he ganizations meeting	▶ ⊔		
		Address change Name change				k here and attach co			
			fa			ındatıon status was t			
		pe of organization			under sectio	n 507(b)(1)(A), chec	k here 🕨 🗀		
			☑ Cash ☐ Accru	al la	F If the founda	ition is in a 60-month	termination		
of	year <i>(f</i>	rom Part II, col (c), \$ 6,248,019				n 507(b)(1)(B), chec			
Pa	rt I	Analysis of Revenue and Expenses (The total	( ) 5				(d) Disbursements		
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )	(a) Revenue and expenses per books	(b)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)		
	1	Contributions, gifts, grants, etc , received (attach					(cash basis only)		
		schedule)							
	2	Check ► ✓ If the foundation is <b>not</b> required to attach Sch B							
	3	Interest on savings and temporary cash investments	78		78				
	4	Dividends and interest from securities	90,921		90,921				
	5a	Gross rents							
	b	Net rental income or (loss)							
KIE	6a	Net gain or (loss) from sale of assets not on line 10	55,804						
Revenue	b	Gross sales price for all assets on line 6a 334,216							
Re	7	Capital gain net income (from Part IV, line 2)			55,804				
	8	Net short-term capital gain							
	9	Income modifications							
	10a	Gross sales less returns and allowances							
	b	Less Cost of goods sold	<u> </u>						
	C	Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule)							
	12	Total. Add lines 1 through 11	146,803		146,803				
	13	Compensation of officers, directors, trustees, etc	0		0		0		
_	14	Other employee salaries and wages							
ses	15	Pension plans, employee benefits							
ē	16a		<b>06-1</b> 1 745		1 745		0		
and Administrative Expenses	b	Accounting fees (attach schedule) Other professional fees (attach schedule)	1,745	_	1,745				
Ve	, c	, ,							
rati	17 18	Interest	14,756		14,756		0		
J St		Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion	17,730		14,730		-		
Ē	19								
Ad	20	Occupancy	2,232		2,232		0		
nd	22	Printing and publications	2,232		2,232		-		
g a	23	Other expenses (attach schedule)	2,650		2,650		0		
Operating	24	Total operating and administrative expenses.			_,				
era		Add lines 13 through 23	21,383		21,383		0		
Ор	25	Contributions, gifts, grants paid	288,392		,-55		288,392		
	26	Total expenses and disbursements. Add lines 24 and	,				<u>,                                      </u>		
	27	25 Subtract line 36 from line 13	309,775		21,383		288,392		
	27	Subtract line 26 from line 12  Excess of revenue over expenses and	-162,972						
	a	disbursements	-102,972						
	Ь	Net investment income (If negative, enter -0-)			125,420				
	С	Adjusted net income(if negative, enter -0-)							
For	Paper	work Reduction Act Notice, see instructions.		(	Cat No 11289>	( For	m <b>990-PF</b> (2016)		

2,369,468

1.910.367

459,101

2,548,279 -162,972

2,385,307

2,369,468 Form **990-PF** (2016)

15,839

2,369,468 2,369,468

2 3

4

5

6

2.548.279

1.926,206

622,073

2,548,279

2,548,279

6,248,019

Less accumulated depreciation (attach schedule) ▶ \_\_\_

Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Land, buildings, and equipment basis ▶

instructions Also, see page 1, item I)

Other assets (describe > \_

Other liabilities (describe -

Unrestricted . . . . .

Permanently restricted . .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶ \_

Enter amount from Part I, line 27a . . . . . . . .

Other increases not included in line 2 (itemize) -

Temporarily restricted

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule). . . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . . . .

Foundations that do not follow SFAS 117, check here ▶ ✓

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

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

12

13

14

15

16

17

18

19 20

21

22

23

24

25

28

29

31 Part III

Liabilities

Balances

Fund 26

ŏ

Assets 27

Net 30

2

3

Page **3** 

	(a) ne kınd(s) of property sold (e g , re nouse, or common stock, 200 shs	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )	
1aSee Additional Data Table					
b					
С					
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain ò	h <b>)</b> r (loss) ) minus (g)
a See Additional Data Table					
b					
c					
d					
e					
Complete only for assets :	showing gain in column (h) and ow	ned by the foundation	on 12/31/69	(	I)
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	( <b>k)</b> s of col (ı) l (յ), ıf any	col (k), but not	h) gain minus less than -0-) <b>or</b> om col (h))
a See Additional Data Table	00 01 12,02,03	3,5,5	. (3),,	,	. , ,
b					
С .					
d					
e					
	ain or (loss) as defined in sections I, line 8, column (c) (see instructi	ons) If (loss), enter -0	)- }	3	55,804
Part V Qualification U	nder Section 4940(e) for Re	educed Tax on Net	Investment In	come	
	vate foundations subject to the sec				
If section 4940(d)(2) applies, lea	•	( )		,	
	section 4942 tax on the distributa qualify under section 4940(e) Do	, ,		?	es 🗌 No
<b>1</b> Enter the appropriate amo	ount in each column for each year,	see instructions before	e making any entrie:	s	
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitab	ole-use assets	<b>(d)</b> Distribution rati (col (b) divided by c	
2015					
2014					
2013					
2012					
2 Total of line 1, column (d)	\ \		2	Ī	
, , ,	for the 5-year base period—divide	the total on line 2 by E			
number of years the found	for the 5-year base period—divide lation has been in existence if less charitable-use assets for 2016 fron	than 5 years			
<b>5</b> Multiply line 4 by line 3			5		
	nt income (1% of Part I, line 27b)		6		
<b>7</b> Add lines 5 and 6			7		
8 Enter qualifying distributio If line 8 is equal to or grea instructions	ns from Part XII, line 4 , ster than line 7, check the box in Pa	art VI, line 1b, and com	8 nplete that part usin		e the Part VI

	If "Yes," attach the statement requir	ed b	y Regulations section 53	4945-5(d)					
<b>6</b> a	Did the foundation, during the year,	rece	eive any funds, directly or	indirectly, to pay premiu	ims on				
	a personal benefit contract?				· 🗌 Yes 🗸				
b	Did the foundation, during the year,	pay	premiums, directly or ind	irectly, on a personal bei	nefit contract?	NO	6b		No
	If "Yes" to 6b, file Form 8870					Ī			
7a	At any time during the tax year, was	the	foundation a party to a p	rohibited tax shelter tran	nsaction? Yes				
b	If yes, did the foundation receive an				∟ Yes 💌	No	7b		
	Information About O		· · · · · · · · · · · · · · · · · · ·		nagers, Highly Paid Er	nplov	vees.		
Pa	and Contractors		,,		g, g ,		, ,		
1	List all officers, directors, trustee	s. f	oundation managers an	d their compensation	(see instructions).				
	Elst all officers, affectors, trastee	.5, 1			(d)				
	(a) Name and address		Title, and average hours per week	(c) Compensation (If not paid, enter	Contributions to employee				
	(a) Hame and dadress	(b) devoted to position		-0-)	benefit plans and deferred	d (e) other allowand		nces	
	Additional Data Table			-	compensation	1			
see	Additional Data Table								
2	Compensation of five highest-pai	d er	nployees (other than th	ose included on line 1		ne, er	nter "	NONE.	"
	(a)		Title, and average		Contributions to				
Na	ame and address of each employee pa	ıd	hours per week	(c) Compensation	employee benefit plans and deferred			se acco allowar	
	more than \$50,000		(b) devoted to position		(d) compensation	(0)	001101	ao.,, a.,	1000
NON	E								
			]						
			1						
			1						
			1						
			1						
Tota	I number of other employees paid over	r ¢ F	<u> </u>	1					
OLA	in number of other employees paid over	ει <b>φ</b> Σ	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· · · · · · · · ·		Г	004	)-PF (	2016
						For	11 3 3	,-PF	/U1b

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional service	ces (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		• 0
Part IX-A Summary of Direct Charitable Activities		_
List the foundation's four largest direct charitable activities during the tax year Include rel		r of Expenses
organizations and other beneficiaries served, conferences convened, research papers produ	uced, etc	
1		
		<del> </del>
2		<del> </del>
2		<del> </del>
2		
3		<del> </del>
		<del> </del>
4		
4		
Part IX-B Summary of Program-Related Investments (see	<u> </u>	
Describe the two largest program-related investments made by the foundation during t	the tax year on lines 1 and 2	Amount
1		
2		+
2		
All other program-related investments. See instructions		
all other program-related investments. See instructions		
<u> </u>		
Total. Add lines 1 through 3		<b>▶</b> 0
		Form <b>990-PF</b> (2016)

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4. . . . . . . . . .

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . . . . . . . . .

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

1

2

3

4

5

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

1a

1b

2

За 3h

4

5

288,392

288.392

288.392

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(c)

2015

Page 9

282.378

282.378

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-	0-	Г	12	010)
3	X	**		U

**b** Total for prior years

From 2011. . . . **b** From 2012. . . . c From 2013. .

**d** From 2014. . . . .

e From 2015. . . . .

XII, line 4 > \$

indicated below:

1 Distributable amount for 2016 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2016 a Enter amount for 2015 only. . . . . .

Excess distributions carryover, if any, to 2016

f Total of lines 3a through e. . . . . . . .

d Applied to 2016 distributable amount. . . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a) )

**5** Excess distributions carryover applied to 2016 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

6 Enter the net total of each column as

**b** Prior years' undistributed income Subtract line 4b from line 2b . . . . . . . . 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. . . . . . d Subtract line 6c from line 6b Taxable amount —see instructions . . . . . . . . . . . . . e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017 . . . . . 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 2011 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2017.

Subtract lines 7 and 8 from line 6a . .

10 Analysis of line 9 a Excess from 2012. . **b** Excess from 2013. .

c Excess from 2014. . . .

d Excess from 2015. .

e Excess from 2016. . .

4 Qualifying distributions for 2016 from Part

a Applied to 2015, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). . . . . c Treated as distributions out of corpus (Election required—see instructions). . . . . . . . . .

12.909 17,671

6,011

12,909 17.671

6.011

6.014

(a)

Corpus

36,591

6.014

42.605

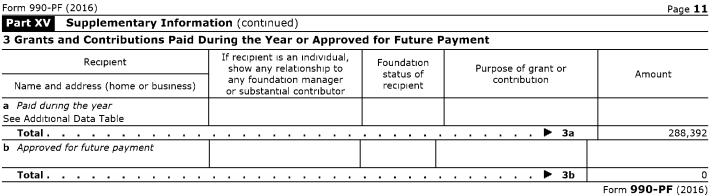
42,605

(b)

Years prior to 2015

Form 990-PF (20	016)
Part XIII	Undi

Form 990-PF (20	016)	
Part XIII	Undistributed Income	(see instructions)



ter gross	amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by section	512, 513, or 514	(e) Related or exemp
Program	n service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	( <b>d)</b> Amount	function income (See instructions
<b>g</b> Fees a Membe	and contracts from government agencies rship dues and assessments					7
	ds and interest from securities.					90,92
	tal income or (loss) from real estate					,
<b>b</b> Not de	financed property					
	ntal income or (loss) from personal property					
Gain o	nvestment income					55,80
	ome or (loss) from special events					33,00
Gross p	profit or (loss) from sales of inventory					
Other n	evenue <b>a</b>					
_						
	·					
е			0		0	,
e Subtota <b>Total.</b> /	al Add columns (b), (d), and (e)		0	13	0 <b>3</b>	,
e Subtota <b>Total.</b> ee worksh	Al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  neet in line 13 instructions to verify calculation	115 )				,
e Subtota <b>Total.</b> ee worksh	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  neet in line 13 instructions to verify calculation.  Belationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's ex	e Accomplish	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3	146,803
e Subtota Total. , ee worksh art XVI ine No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  neet in line 13 instructions to verify calculation.  B Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's exinstructions )	e Accomplish income is reporte empt purposes (	ment of Exempled in column (e) of other than by prov	pt Purposes Part XVI-A contribu Inding funds for such	3	146,803
e Subtota Total. , ee worksh art XVI ine No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  neet in line 13 instructions to verify calculation.  B Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's exinstructions )  USED TO FUND THE CHARITABLE CONTRIBU	e Accomplish Income is reporte empt purposes ( TIONS MADE BY	ment of Exempled in column (e) of other than by proven THE FOUNDATION	ot Purposes  Part XVI-A contribu  Iding funds for such	3	146,80
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eSubtota Total. , e worksh art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  neet in line 13 instructions to verify calculation.  B Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's exinstructions )  USED TO FUND THE CHARITABLE CONTRIBU	e Accomplish Income is reporte empt purposes ( TIONS MADE BY TIONS MADE BY	ment of Exempled in column (e) of other than by provement of the FOUNDATION THE FOUNDATION	ot Purposes  Part XVI-A contribu  Iding funds for such	3	146,80
e Subtota Total. , ee worksh art XVI ine No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  neet in line 13 instructions to verify calculation.  B Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's exinstructions )  USED TO FUND THE CHARITABLE CONTRIBU	e Accomplish Income is reporte empt purposes ( TIONS MADE BY TIONS MADE BY	ment of Exempled in column (e) of other than by provement of the FOUNDATION THE FOUNDATION	ot Purposes  Part XVI-A contribu  Iding funds for such	3	146,80
eSubtota Total. , e worksh art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  neet in line 13 instructions to verify calculation.  B Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's exinstructions )  USED TO FUND THE CHARITABLE CONTRIBU	e Accomplish Income is reporte empt purposes ( TIONS MADE BY TIONS MADE BY	ment of Exempled in column (e) of other than by provement of the FOUNDATION THE FOUNDATION	ot Purposes  Part XVI-A contribu  Iding funds for such	3	146,80
eSubtota Total. , e worksh art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  neet in line 13 instructions to verify calculation.  B Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's exinstructions )  USED TO FUND THE CHARITABLE CONTRIBU	e Accomplish Income is reporte empt purposes ( TIONS MADE BY TIONS MADE BY	ment of Exempled in column (e) of other than by provement of the FOUNDATION THE FOUNDATION	ot Purposes  Part XVI-A contribu  Iding funds for such	3	146,80
e Subtota Total. , ee worksh art XVI ine No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  neet in line 13 instructions to verify calculation.  B Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's exinstructions )  USED TO FUND THE CHARITABLE CONTRIBU	e Accomplish Income is reporte empt purposes ( TIONS MADE BY TIONS MADE BY	ment of Exempled in column (e) of other than by provement of the FOUNDATION THE FOUNDATION	ot Purposes  Part XVI-A contribu  Iding funds for such	3	146,80
e Subtota Total. , ee worksh art XVI ine No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  neet in line 13 instructions to verify calculation.  B Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's exinstructions )  USED TO FUND THE CHARITABLE CONTRIBU	e Accomplish Income is reporte empt purposes ( TIONS MADE BY TIONS MADE BY	ment of Exempled in column (e) of other than by provement of the FOUNDATION THE FOUNDATION	ot Purposes  Part XVI-A contribu  Iding funds for such	3	146,80
e Subtota Total. , ee worksh art XVI ine No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  neet in line 13 instructions to verify calculation.  B Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's exinstructions )  USED TO FUND THE CHARITABLE CONTRIBU	e Accomplish Income is reporte empt purposes ( TIONS MADE BY TIONS MADE BY	ment of Exempled in column (e) of other than by provement of the FOUNDATION THE FOUNDATION	ot Purposes  Part XVI-A contribu  Iding funds for such	3	146,80
e Subtota Total. , ee worksh art XVI ine No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  neet in line 13 instructions to verify calculation.  B Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's exinstructions )  USED TO FUND THE CHARITABLE CONTRIBU	e Accomplish Income is reporte empt purposes ( TIONS MADE BY TIONS MADE BY	ment of Exempled in column (e) of other than by provement of the FOUNDATION THE FOUNDATION	ot Purposes  Part XVI-A contribu  Iding funds for such	3	146,80
e Subtota Total. , ee worksh art XVI ine No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  neet in line 13 instructions to verify calculation.  B Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's exinstructions )  USED TO FUND THE CHARITABLE CONTRIBU	e Accomplish Income is reporte empt purposes ( TIONS MADE BY TIONS MADE BY	ment of Exempled in column (e) of other than by provement of the FOUNDATION THE FOUNDATION	ot Purposes  Part XVI-A contribu  Iding funds for such	3	146,803

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

Part XVI	Exempt Organi	zations				•			
1 Did the or (c) of the	rganization directly or in Code (other than section	directly engage ii in 501(c)(3) orga	n any of the nizations) o	following with any or in section 527, re	other organization	in described in section organizations?	501	Yes	No
	from the reporting foun					_			
<b>(1)</b> Cash	1						1a(1)		No
(2) Other assets							1a(2)		No
<b>b</b> Other transactions									
<b>(1)</b> Sale	s of assets to a nonchar	ıtable exempt org	janızatıon.				1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization							. 1b(2)		No
(3) Rental of facilities, equipment, or other assets.							. 1b(3)		No
· · ·									No
							1b(5)		No
` '	rmance of services or m		-				1b(6)		No
_	of facilities, equipment, r	-	•				<u>1c</u>		No
	swer to any of the above ods, other assets, or ser								
	insaction or sharing arra								
/> 1 No. 1	(In) A	l (-) N	la t - la la	1	(4) December of	h	4 -1		
(a) Line No	(b) Amount involved	(c) Name of nonc	naritable exe	mpt organization	(a) Description or	transfers, transactions, an	a snaring arra	ingemen	its
	indation directly or indire	•	· ·	•			Пу	<b>☑</b> N	
	I in section 501(c) of the	•	n section 50	)1(c)(3)) or in secti	ion 52//		. ∐Yes	<b>I</b> ▼I N	10
<b>b</b> If "Yes," o	complete the following s (a) Name of organization		1 0	<b>b)</b> Type of organizatio	n	(c) Description of	ralationshin		
	(a) Name of organization	211	,	b) Type of organization	11	(c) Description of	relationship		
	der penalties of perjury, ny knowledge and belief								
	ch preparer has any kno		ct, and com	piete Declaration c	n preparer (other	than taxpayer) is base	u on an imo	rmation	1 01
Here L	****	-		2017-05-03	*****		the IRS discu		
	<u> </u>				— <u> </u>		the preparer		
'	Signature of officer or t	rustee		Date	<b>/</b> Title	(see	ınstr )? 🗹	Yes ⊔ N	10
	Print/Type preparer's	name Pre	parer's Sigi	nature	Date	PTI	 N		
	7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7		5			Check if self-	P0017	2524	
	BJ HOFFMAN				2017-05-03	employed ▶ □		2327	
Paid			2017-0						
Prepare		RIN COOPERMAN	& COMPAN	/ LLP	•	Fire	n's EIN ▶22	-24280	 165
Use Only	•	100 1EV BOUREY	DD 26711 7	000		1111	2111 7 22	203	
	Firm's address ► 18	300 JFK BOULEVA	KD ZOTH FL	LOOK			, <u>.</u>		4055
	PH	HILADELPHIA, PA	19103			Pho	one no (215	) 545-4	4800
	1					1			

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (b) (c) (d) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 0 600 SHS ADIENT PLC Р 2016-10-31 2016-11-03 Р 625 SHS THE ADT CORPORATION 2015-01-01 2016-05-02 550 SHS MERITAGE HOMES CORP Р 2011-01-10 2016-11-07 1200 SHS MINDRAY MED INTL LTD Р 2015-01-01 2016-03-04 700 SHS QUALCOMM INC COM Р 2015-01-01 2016-11-21 1850 ARRIS INTERNATIONAL PLC COM Ρ 2015-01-01 2016-11-14 Ρ 121 SHS PENTAIR PLC 2014-03-12 2016-08-19 375 SHS THE ADT CORPORATION Р 1996-01-01 2016-05-02 305 SHS PERRIGO CO PLC Ρ 2013-12-19 2016-12-20 2000 SHS AFFYMETRIX INC Р 2009-01-23 2016-04-01 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 27 28 -1 26,250 25,491 759 17,283 13,677 3,606 33,540 39,375 -5,835 46,892 42,955 3,937 50,909 3,218 54,127 7,931 9,679 -1,74815,750 12,405 3,345 25,884 47,379 -21,495 28,000 6,527 21,473 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (i) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any -1 759 3,606 -5,835 3,937 3,218 -1,7483,345 -21,495 21,473

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (b) (c) (d) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 400 360 SHS COMMERCE BANCSHARES INC. Ρ 2000-01-01 2016-12-18 800 SHS MERITAGE HOMES CORP Ρ 2010-12-30 2016-11-10 0 250 SHS JOHNSON CONTROLS INT Р 1996-01-01 2016-09-15 179 SHS PENTAIR PLC Р 1996-01-01 2016-08-19 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Cost or other basis Gain or (loss) Depreciation allowed (f) (or allowable) (a) plus expense of sale (h) (e) plus (f) minus (a)

	· , , , , , , , , , , , , , , , , , , ,	1371	( ) ( ) ( ) ( )
39,165		4,780	34,385
27,623		18,304	9,319
11		7	4

11		7	4			
11,733		6,896	4,837			
Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I						

	11,733		6,896	4,837						
F	orm 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I									
	Complete only for assets show	Gains (Col (h) gain minus								
Γ	(i) F M V as of 12/31/69	Adjusted basis	Excess of sol (1)	col (k), but not less than -0-) or						

Torin 33011 Turc 17 Cupitur	Camis and E055C5 for Tax on	Investment Income Colum	1191
Complete only for assets show	ving gain in column (h) and owned b	Gains (Col (h) gain minus	
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col(ı) <b>(k)</b> over col(յ), ıf any	col (k), but not less than -0-) or (I) Losses (from col (h))

Complete only for assets show	Gains (Col (h) gain minus			
(i) F M V as of 12/31/69	Adjusted basis <b>(j)</b> as of 12/31/69	Excess of col(ı) <b>(k)</b> over col( <u>J</u> ), ıf any	col (k), but not less than -0-) or (I) Losses (from col (h))	
			34,385	

(I) Losses (from col (h))	Excess of col(ı) <b>(k)</b> over col(յ), ıf any	Adjusted basis <b>(j)</b> as of 12/31/69	(i) F M V as of 12/31/69
34,385			
0.210			

(j) as of 12/31/69	(k) over col (j), if any	
		34,385
		9,319

	54,505
	9,319
	4

4,837

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If Expense account, (d) (e) other allowances hours per week not paid, enter Contributions to (b) devoted to position -0-) employee benefit plans and deferred compensation HARVEY KAPLAN DIRECTOR 35 00 6566 FRANCE AVENUE SO SUITE 701 EDINA, MN 55435 MARJORIE KAPLAN DIRECTOR 0 35.00 6566 FRANCE AVENUE SO SUITE 701 EDINA, MN 55435 HELEN KAPLAN ۵ SECRETARY 40 00 139 W 85TH STREET 5 NEW YORK, NY 10024 LAURA KAPLAN DIRECTOR 0 35 00 2828 SUNSET BLVD MINNEAPOLIS, MN 55416 RACHEL KAPLAN PRESIDENT 0 0 5 00 1714 W BYRON CHICAGO, IL 60613 BOB RIESMAN DIRECTOR 0 0 35 00 1714 W BYRON CHICAGO, IL 60613 LEAH KAPLAN VICE PRESIDENT 0 0 40 00 2117 PINE STREET PHILADELPHIA, PA 19103 ROSS KAPLAN **TREASURER** 0 2 00 2828 SUNSET BLVD MINNEAPOLIS, MN 55416 DIRECTOR JON SMOLLEN 0 35 00 2117 PINE STREET

PHILADELPHIA, PA 19103

orm 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total ontributions received by the foundation before the close of any tax year (but only if they have contributed more nan \$5,000).
HARVEY KAPLAN
MARJORIE KAPLAN
HELEN KAPLAN
LAURA KAPLAN
RACHEL KAPLAN
BOB RIESMAN
LEAH KAPLAN
ROSS KAPLAN

JON SMOLLEN

Form 990PF Part XV Line 3 - Grant	s and Contributions Paid	During the	Year or Approved for Future	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
ALLIANCE OF HOPE FOR SUICIDE LOSS SURVIVORS POBOX 7005 EVANSTON, IL 60201		NC	JEWISH COMMUNITY	2,500
AMERICAN FOUNDATION FOR SUICIDE PREVENTION(AFSP) 120 WALL STREET 29TH FLOOR NEW YORK, NY 10005		NC	JEWISH SOCIAL SERVICES	2,500
AMERICAN FRIENDS OF MAGEN DAVID ADOM(AFMDA) 352 SEVENTH AVE SUITE 400 NEW YORK, NY 10001		NC	MEDICAL	3,500
AMERICAN JEWISH WORLD SERVICE 45 WEST 36TH STREET 11TH FLOOR NEW YORK, NY 10018		NC	JEWISH CULTURAL	9,000
ANSHE EMET SYNAGOGUE 371 NORTH BROADWAY CHICAGO, IL 60613		NC	JEWISH RELIGIOUS ORGANIZATION	2,500
ANTI-DEFAMATION LEAGUE 605 THIRD AVENUE NEW YORK, NY 10158		NC	JEWISH SOCIAL SERVICES	4,500
ARK 6450 NORTH CALIFORNIA AVENUE CHICAGO, IL 60645		NC	JEWISH SOCIAL SERVICES	12,500
AVODAH 4707 N BROADWAY 3RD FLOOR CHICAGO, IL 60640		NC	JEWISH EDUCATION	7,500
AZ CENTER FOR THE BLIND 3040 SOUTH 45TH STREET PHOENIX, AZ 85040		NC	MEDICAL	1,000
B & BD FIREFIGHTERS HALL & MUSEUM 664 22ND AVE NE MINNEPOLIS, MN 55418		NC	EMERGENCY FOOD AND SHELTER	250
BETH EL SYNAGOGUE 5225 BARRY STREET MINNEAPOLIS, MN 55416		NC	JEWISH RELIGIOUS ORGANIZATION	28,423
BROWN UNIVERSITY PO BOX 1877 PROVIDENCE, RI 029121877		NC	EDUCATION	1,000
BZBI SYNAGOGUE 300 S 18TH STREET PHILADELPHIA, PA 19103		NC	JEWISH RELIGIOUS ORGANIZATION	12,155
CARING KIND (ALZHEIMER'S) 360 LEXINGTON AVENUE NEW YORK, NY 10017		NC	MEDICAL	5,000
CBST CONGREGATION BEIT SIMCHAT TORAH 130 WEST 30TH ST NEW YORK, NY 10014		NC	JEWISH RELIGIOUS ORGANIZATION	3,000
Total				288,392

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
CHALLAH FOR HUNGER 201 S CAMAC ST FLOOR 2 PHILADELPHIA, PA 19107		NC	EMERGENCY FOOD AND SHELTER	2,500	
CITY MEALS ON WHEELS 355 LEXINGTON AVENUE NEW YORK, NY 10017		NC	EMERGENCY FOOD AND SHELTER	1,000	
CONGREGATION OR TZION 9090 E BAHIA DR 106 SCOTTSDALE, AZ 85260		NC	JEWISH RELIGIOUS ORGANIZATION	914	
CREATIVE GROWTH ART CENTER 355 24TH ST OAKLAND, CA 94612		NC	JEWISH CULTURAL	2,500	
CURE ALZHEIMERS FUND 34 WASHINGSTONST SUITE 200 WELLESLEY, MA 02481		NC	MEDICAL	5,000	
DOCTORS WITHOUT BORDERS USA 333 7TH AVE NEW YORK, NY 10001		NC	MEDICAL	2,000	
FISHER CENTER FOR ALZHEIMERS RESEARCH FOUNDATION 110 EAST 42ND ST 16TH FLOOR NEW YORK, NY 10017		NC	MEDICAL	2,500	
FRIENDS OF YERMIN ORDE 4340 EAST WEST HIGHWAY 202 BETHESDA, MD 20814		NC	JEWISH COMMUNITY	1,500	
HEBREW IMMIGRATION AID 1300 SPRING ST SUITE 500 SILVER SPRING, MD 20910		NC	JEWISH SOCIAL SERVICES	7,500	
HMJDS 4330 CEDAR LAKE ROAD ST LOUIS PARK, MN 55416		NC	JEWISH EDUCATION	25,000	
INNOVATION AFRICA 520 8TH AVE 15TH FLOOR NEW YORK, NY 10018		NC	JEWISH COMMUNITY	2,500	
INSTITUTE OF SOUTHERN JEWISH LIFE 4915 I-55100 JACKSON, MS 39206		NC	JEWISH CULTURE	2,500	
JCHAI 274 S BRYN MAWR AVE BRYN MAWR, PA 19010		NC	JEWISH SOCIAL SERVICES	1,500	
JEVS HUMAN SERVICES 1845 WALNUT STREET 7TH FLOOR PHILADELPHIA, PA 19103		NC	JEWISH COMMUNITY ORGANIZATION	1,500	
JEWISH CHILDREN FAMILY SERVICES (JCFS) 5801 W 115TH STREET SUTIE 103 OVERLAND PARK, KS 66211		NC	JEWISH SOCIAL SERVICES	1,000	
Total				288,392	

Form 990PF Part XV Line 3 - Grant	s and Contributions Paid	During the `	Year or Approved for Future	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
JEWISH COMMUNITY ACTION 2375 UNIVERSITY AVE STE 150 ST PAUL, MN 55114		NC	JEWISH COMMUNITY ORGANIZATION	1,000
JEWISH COMMUNITY OF OTTAWA DEVELOPMENT FOUNDATION 21 NADOLNY SACHS PRIVATE OTTAWA, ONTARIO CA		NC	JEWISH COMMUNITY ORGANIZATION	20,000
JEWISH COMMUNITY RELATIONS COUNCIL (JCRC) 12 N 12TH ST SUITE 480 MINNEAPOLIS, MN 55403		NC	JEWISH COMMUNITY ORGANIZATION	4,400
JEWISH COUNCIL ON URBAN AFFAIRS 610 S MICHIGAN AVE CHICAGO, IL 60605		NC	JEWISH SOCIAL SERVICES	2,500
JEWISH FAMILY SERVICES OF KC 5801 W 115TH STREET SUTIE 103 OVERLAND PARK, KS 66211		NC	JEWISH SOCIAL SERVICES	3,000
JEWISH FEDERATION OF CHICAGO 30 S WELLS STREET ROOM 3134 CHICAGO, IL 60606		NC	JEWISH COMMUNITY ORGANIZATION	8,500
JEWISH FEDERATION OF MINNEAPOLIS 13100 WAYZATA BLVD SUITE 200 MINNETONKA, MN 55305		NC	JEWISH COMMUNITY ORGANIZATION	2,500
JEWISH FEDERATION OF PHILADELPHIA 2100 ARCH STREET PHILADELPHIA, PA 19103		NC	JEWISH COMMUNITY ORGANIZATION	15,000
JEWISH GENETIC DISEASES CENTER 12701 NO SCOTTSDALE RD 201 SCOTTSDALE, AZ 85254		NC	MEDICAL	10,000
JEWISH LEARNING VENTURE 7607 OLD YORK ROAD MELROSE PARK, PA 19027		NC	JEWISH EDUCATION	1,500
JEWISH NATIONAL FUND 42 EAST 69TH STREET NEW YORK, NY 10021		NC	JEWISH CULTURAL	4,500
JEWISH RELIEF AGENCY 225 E CITY AVE SUITE 103 BALA CYNWYD, PA 19004		NC	JEWISH SOCIAL SERVICES	1,500
JOINT DISTRIBUTION COMMITTEE PO BOX 4124 NEW YORK, NY 10163		NC	JEWISH SOCIAL SERVICES	6,000
JR MASTERMAN HOME AND SCHOOL ASSOCIATION 1699 SPRING GARDEN STREET PHILADELPHIA, PA 19130		NC	EDUCATION	10,000
KENESSETH ISRAEL SYNAGOGUE 4330 W 28TH ST ST LOUIS PARK, MN 55416		NC	JEWISH RELIGIOUS ORGANIZATION	1,000

Total . 3a 288,392

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
KESHET 284 ARMORY ST JAMAICA PLAIN, MA 02130		NC	JEWISH COMMUNITY ORGANIZATION	2,500
MET COUNCIL ON JEWISH POVERTY 120 BROADWAY 7TH FLOOR NEW YORK, NY 102710015		NC	JEWISH RELIGIOUS ORGANIZATION	1,000
MINNESOTA ZOO 13000 ZOO BLVD APPLEVALLEY, MN 55124		NC	CULTURAL ENRICHMENT	1,000
NATIONAL MUSEUM OF AMERICAN JEWISH HISTORY 101 S INDEPENDENCE MALL E PHILADELPHIA, PA 19106		NC	JEWISH CULTURAL	1,500
NECHAMA 4330 CEDAR LAKE RD MINNEAPOLIS, MN 54416		NC	EMERGENCY FOOD AND SHELTER	2,500
NEW ISRAEL FUND PO BOX 96712 WASHINGTON, DC 200777438		NC	JEWISH COMMUNITY ORGANIZATION	9,000
NEW YORK CARES 65 BROADWAY 19TH FLOOR NEW YORK, NY 10006		NC	COMMUNITY SOCIAL SERVICES	3,000
NEW YORK PUBLIC THEATER 425 LAFAYETTE STREET NEW YORK, NY 10003		NC	CULTURAL EDUCATION	400
ORA ACADEMY 600 EAST AVENUE ROCHESTER, NY 14607		NC	EDUCATION	500
PACE CENTER 8161 NORMANDALE BLVD ST PAUL, MN 55437		NC	EDUCATION	100
PJ LIBRARY 67 HUNT STREET SUITE 100 AGAWAM, MA 01001		NC	JEWISH CULTURAL ENRICHMENT	2,500
PLANNED PARENTHOOD 434 WEST 33RD STREET NEW YORK, NY 10001		NC	MEDICAL	1,000
SABES JCC 4330 S CEDAR LAKE ROAD MINNEAPOLIS, MN 55416		NC	JEWISH COMMUNITY ORGANIZATION	750
SHALVA POBOX 46375 CHICAGO, IL 606460375		NC	JEWISH SOCIAL SERVICES	2,500
SOUTHWEST HIGH SCHOOL 3414 W 47TH ST MINNEAPOLIS, MN 55410		NC	EDUCATION	750
Total				288,392

Form 990PF Part XV Line 3 - Grant	ts and Contributions Paid	During the	Year or Approved for Future I	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
TEMPLE OF AARON 616 S MISSISSIPPI RIVER BVD ST PAUL, MN 55116		NC	RELIGIOUS	1,000
THE BLAKE SCHOOL ANNUAL FUND 511 KENWOOD PARKWAY MINNEAPOLIS, MN 55403		NC	EDUCATION	1,000
THE BLUE CARD 171 MADISON AVE SUITE1405 NEW YORK, NY 10016		NC	JEWISH CULTURAL	2,500
TIMESLIPS CREATIVE STORYTELLING 4461 N LAKE DR MILWAUKEE, WI 53211		NC	EDUCATION	1,000
USHOLOCAUST MEMORIAL MUSEUM 100 RAOUL WALLENBURG PL SW WASHINGTON, DC 20024		NC	JEWISH CULTURAL	1,500
UJA- FEDERATION OF NY 130 EAST 59TH STREET NEW YORK, NY 10022		NC	JEWISH COMMUNITY ORGANIZATION	6,000
YESHIVA TIFERES NAFTOLI 8998 ROUTE 18 OLD BRIDGE, NJ 08857		NC	JEWISH RELIGIOUS EDUCATION	250
Total				288,392

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491131011397						
TY 2016 Accounting Fees Schedule						
_						
	Name: KAPLA	N FAMILY FOUNDATI	ON			
	<b>EIN:</b> 41-1794327					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
ACCOUNTING FEES	1,7	45 1,745		0		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491131011397
TY 2016 Investments Corporat	e Stock Sche	dule

Name: KAPLAN FAMILY FOUNDATION

FTN: 41-1794327

11 175 1527			
Name of Stock	End of Year Book Value	End of Year Fair Market Value	
VARIOUS CORPORATE STOCK	2,287,054	6,165,605	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491131011397	
TY 2016 Other Decreases Schedule				
Name:	KAPLAN FAMII	Y FOUNDATION		
EIN:	41-1794327			
De	escription		Amount	
COST ADJUSTMENTS			15,839	

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TY 2016 Other Expenses Schedule					
Name:	ame: KAPLAN FAMILY FOUNDATION				
<b>EIN:</b> 41-1794327					
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
STATE FILING FEES	25	25		0	
OFFICE SUPPLIES	1,276	1,276		0	

1,349

1,349

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TY 2016 Taxes Schedule						
Name: KAPLAN FAMILY FOUNDATION EIN: 41-1794327						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
FEDERAL TAXES	14,756	14,756		0		