

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



# Form 990-PF

#### **Return of Private Foundation**

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

OMB No 1545-0052 20**16** 

Open to Public Inspection

Department of the Treasury

► 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.

For calendar year 2016 or tax year beginning 2016, and ending Name of foundation A Employer identification number Impact Society 41-1905957 Number and street (or P O box number if mail is not delivered to street address) B Telephone number (see instructions) Room/suite 612-760-0500 15430 Fremont Ave. S. City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ▶ Burnsville, MN 55306 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here ightharpoonupAmended return ☐ Final return 2. Foreign organizations meeting the 85% test, ☐ Address change Name change check here and attach computation E If private foundation status was terminated under H Check type of organization: Section 501(c)(3) exempt private foundation ▶□ section 507(b)(1)(A), check here ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation Fair market value of all assets at J Accounting method: ✓ Cash ☐ Accrual F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here end of year (from Part II, col. (c), Other (specify) line 16) ► \$ 153.059 (Part I, column (d) must be on cash basis Part I Analysis of Revenue and Expenses (The total of (d) Disbursements for charitable (a) Revenue and (b) Net investment (c) Adjusted net amounts in columns (b), (c), and (d) may not necessarily equal expenses per books purposes (cash basis only) income the amounts in column (a) (see instructions).) Contributions, gifts, grants, etc., received (attach schedule) 22.155.20 2 Check ► ☐ If the foundation is **not** required to attach Sch. B 3 Interest on savings and temporary cash investments 8.36 932 4 Dividends and interest from securities . . . . 5a Gross rents Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain . . . . 8 g Income modifications 10a Gross sales less returns and allowances Less: Cost of goods sold . . . b Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) . . 22,155,20 940.36 23,095.56 12 Total. Add lines 1 through 11 . 13 Compensation of officers, directors, trustees, etc. and Administrative Expenses 14 Other employee salaries and wages . 15 Pension plans, employee benefits Legal fees (attach schedule) 16a 150 Accounting fees (attach schedule) Other professional ees (attach schedu Interest . . Taxes (attach schedule) see instructions 18 Depreciation (attach softedule and depletion 19 20 Occupancy . . . 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) Operating 24 Total operating and administrative expenses. Add lines 13 through 23 . . . . . . 205 18,216.24 25 Contributions, gifts, grants paid . 18,421.24 18,421,24 18,421,24 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: 3,733.96 Excess of revenue over expenses and disbursements **Net investment income** (if negative, enter -0-) Đ Adjusted net income (if negative, enter -0-) 4.674.32

For Paperwork Reduction Act Notice, see instructions.

Cat. No 11289X

Form 990-PF (2016)



		Balance Sheets Attached schedules and amounts in the description column	Beginning of year	En	d of year	
Ρá	irt II	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value		air Market Value
	1	Cash—non-interest-bearing	24,759.90	28,672	.22	28,672.22
	2	Savings and temporary cash investments				
	3	Accounts receivable ►				-
		Less: allowance for doubtful accounts ▶				· · · · · · · · · · · · · · · · · · ·
	4	Pledges receivable ►				
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) ▶			1	1
		Less: allowance for doubtful accounts ▶				
ts	8	Inventories for sale or use	<u></u>	·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·		
Assets	9	Prepaid expenses and deferred charges				
Ä	10a	Investments – U.S. and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)	104,884.93	124,386	.73	124,386.73
	С	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment: basis ▶	_			
		Less: accumulated depreciation (attach schedule) ▶				
	12	Investments-mortgage loans				
	13	Investments—other (attach schedule)				<del> </del>
	14	Land, buildings, and equipment: basis ▶				
		Less: accumulated depreciation (attach schedule) ▶				
	15	Other assets (describe ►)		<del></del>		
	16	Total assets (to be completed by all filers—see the				
		instructions. Also, see page 1, item l)	129,634.83	153,058	.95	153,058.95
	17	Accounts payable and accrued expenses				
Ş	18	Grants payable				
ij	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				Ţ
Ë	21	Mortgages and other notes payable (attach schedule)				ļ
	22	Other liabilities (describe ► ) <b>Total liabilities</b> (add lines 17 through 22)	<u> </u>	<del> </del>		
	23					1
S		Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.				1
Balances	24	Unrestricted				
<u>ā</u>	25	Temporarily restricted		····		1
ä	26				_	
힏	20	Permanently restricted			<del></del>	
Net Assets or Fund		Foundations that do not follow SFAS 117, check here ► □ and complete lines 27 through 31.				
5	27	Capital stock, trust principal, or current funds				
ş	28	Paid-in or capital surplus, or land, bldg., and equipment fund			$\dashv$	
Se	29	Retained earnings, accumulated income, endowment, or other funds	}- <del></del>			1
As	30	Total net assets or fund balances (see instructions)	129,634.83	153,058	.95	:
et	31	Total liabilities and net assets/fund balances (see		<del> </del>	_	
Z	-	instructions)	129,634.83	153,058	.95	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances				
	Tota	al net assets or fund balances at beginning of year - Part II, colu			_ T	<del></del>
	end-	-of-year figure reported on prior year's return) $\ . \ . \ . \ . \ . \ . \ .$			1	129,634.83
2	Ente	er amount from Part I, line 27a			2	3,733.96
3	Othe	3	19,613.44			
4		lines 1, 2, and 3			4	153,058.95
5	Deci	reases not included in line 2 (itemize) ▶			5	0
6	Tota	reases not included in line 2 (itemize)  all net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), li	ne 30	6	153,058.95

Part	IV Capital Gains and L	osses for Tax on Investm	nent income				
		ind(s) of property sold (e.g., real estate or common stock, 200 shs MLC Co)		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	<b>(d)</b> Date sold (mo , day, уг)	
1a							
b		<del></del>	<u> </u>				
c		· · · · · · · · · · · · · · · · · · ·					
<u>d</u>	<del></del>		<del></del>				
<u>e</u>							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		n or (loss) (f) minus (g)	
a							
<u>b</u>							
c							
d			· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·	
<u>e</u>							
	Complete only for assets showing	ng gain in column (h) and owned				(h) gain minus	
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any		less than -0-) or om col (h))	
а							
b							
Ç							
d							
<u>e</u>							
2	Capital gain net income or (r		also enter in Pa , enter -0- in Pai		2		
3	If gain, also enter in Part I,	or (loss) as defined in sections line 8, column (c) (see instruc	ctions). If (loss)	, enter -0- in )			
		<u> </u>	<u> </u>	5	3		
Part	V Qualification Under	Section 4940(e) for Redu	iced Tax on N	let Investment	Income		
•	ptional use by domestic priva ion 4940(d)(2) applies, leave t	-	section 4940(a)	tax on het invest	ment income.)		
	he foundation liable for the se s," the foundation does not qu				oase period?	☐ Yes ☐ No	
1	Enter the appropriate amour	nt in each column for each yea	ar; see the instru	ictions before m	akıng any entries.		
Cale	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	s Net value of	(c) f noncharitable-use a	ssets Dis	(d) tribution ratio divided by col. (c))	
	2015		<del></del>		(0) (0)		
	2014			<del></del>	- <del></del>	**	
	2013					· · · · · · · · · · · · · · · · · · ·	
	2012			<del></del> -			
	2011					· · · · · · · · · · · · · · · · · · ·	
 2 3	Total of line 1, column (d)						
3		ion has been in existence if le			l i		
4 -	Enter the net value of nonch	aritable-use assets for 2016 fi	rom Part X, line	5	. 4	<del>~~</del>	
5	Multiply line 4 by line 3 .				. 5	····	
6	Enter 1% of net investment i	ncome (1% of Part I, line 27b	)		. 6		
7	Add lines 5 and 6				. 7		
8	Enter qualifying distributions If line 8 is equal to or greate Part VI instructions.	from Part XII, line 4 r than line 7, check the box in	 Part VI, line 1b		. 8 that part using a 1	1% tax rate. See the	

1	Pane	4

Part :		ıstru	ction	าร)			
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)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check						
	here ▶ ☐ and enter 1% of Part I, line 27b						
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of ) Part I, line 12, col. (b).	•					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)						
3	Add lines 1 and 2						
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)						
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	-					
6	6 Credits/Payments:						
а	2016 estimated tax payments and 2015 overpayment credited to 2016   6a						
b	Exempt foreign organizations—tax withheld at source 6b			i			
c	Tax paid with application for extension of time to file (Form 8868) . 6c						
đ	Backup withholding erroneously withheld 6d	_					
7	Total credits and payments. Add lines 6a through 6d						
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  if Form 2220 is attached						
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						
11	Enter the amount of line 10 to be: Credited to 2017 estimated tax ▶ Refunded ▶ 11						
	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	4-	Yes	No			
	participate or intervene in any political campaign?	1a		~			
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1b		4			
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			i			
	published or distributed by the foundation in connection with the activities.			,			
С	Did the foundation file Form 1120-POL for this year?	<u>1c</u>		1			
d	<ul> <li>d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:</li> <li>(1) On the foundation. ► \$</li> <li>(2) On foundation managers. ► \$</li> </ul>						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	-	20			
_	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 bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	-					
		3		~			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a 4b		4			
ь 5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		~			
3	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		•			
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	1	Ť			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)   Minnesota						
<b>b</b>				1			
D	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	"				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	İ					
	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> </u>	-			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	4.0	مرا				
	names and addresses	10	O-DE	(2242)			

Part	VII-A Statements Regarding Activities (continued)			
	At 11 to 12 to 13 to 15		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		-
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		<b>*</b>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		
14	Website address ►  The books are in care of ► Chris Shaw  Telephone no. ► 61	2-760-	0500	
	The books are in care of ► Chris Shaw  Telephone no. ► 61  Located at ► 15430 Fremont Ave. S. Burnsville, MN  ZIP+4 ►  Section 4047(a)(1) perceive the process of the proc	5530	6	
15	Section 4947 (a)(1) honexempt charitable trusts him grown 390-PF in fied of Form 1041—Oneck here.		•	
	and enter the amount of tax-exempt interest received or accrued during the year		1 1/2 -	- Na
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No •
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of		L	
	the foreign country ▶			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required		1	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):  (1) Engage in the sale or exchange, or leasing of property with a disqualified person?		ĺ	'
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	İ		'
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	<ul><li>(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? □ Yes</li><li>(5) Transfer any income or assets to a disqualified person (or make any of either available for</li></ul>			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	1	]	
	foundation agreed to make a grant to or to employ the official for a period after		1	Ì
ь	termination of government service, if terminating within 90 days.)		ļ	
b	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		<b>'</b>
	Organizations relying on a current notice regarding disaster assistance check here ▶□			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	١.		
2	were not corrected before the first day of the tax year beginning in 2016?	1c	<del> </del>	-
~	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	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?			1
h	If "Yes," list the years ▶ 20, 20, 20, 20  Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			,
5	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions.)	2b		1
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
3a	▶ 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			:
	at any time during the year?			}
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of	-		
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		į	
	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		1
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	- 44		٠ ـ .
		4b orm 99	90-PI	(2016)

Page	ť
гаче	

Part	VII-B	Statements Regarding Activities	for W	hich Form	4720 I	May Be R	equire	<b>d</b> (contir	nued)			
5a	During t	he year did the foundation pay or incur a	ny amo	unt to:							İ	
•		y on propaganda, or otherwise attempt to ence the outcome of any specific public						☐ Yes	<b>₩</b> No		i	
		ctly or indirectly, any voter registration dr						☐ Yes	<b>₩</b> No			
	(3) Provide a grant to an individual for travel, study, or other similar purposes?											
		vide a grant to an organization other than an 4945(d)(4)(A)? (see instructions)			_			☐ Yes	<b>☑</b> No			1
		vide for any purpose other than religious, poses, or for the prevention of cruelty to c				ry, or educ		□Yes	<b>₩</b> No			
b		nswer is "Yes" to 5a(1)-(5), did any of the							nbed in			
	Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?						5b					
		ations relying on a current notice regarding					 Ha tav		▶⊔			
С	becaus	nswer is "Yes" to question 5a(4), does t e it maintained expenditure responsibility	for the	grant?					□ No			
<b>C</b> =		" attach the statement required by Regula foundation, during the year, receive any					miume					!
6a		rsonal benefit contract?						Yes	<b>₩</b> No			!
b		foundation, during the year, pay premiun	ns, dire	ctly or indire	ctly, on	a personal	benefit	contract	_	6b		1
		to 6b, file Form 8870.					_	<u></u>				;
		me during the tax year, was the foundation and addition and the foundation receive any proceeds						Yes	_	7b	-	
	ii res,	Information About Officers, Direc									ees.	L
, cir		and Contractors	, .	, :			-0,	<b>.</b>			,	
1	List all	officers, directors, trustees, foundation	n mana	gers and th	eir con	pensation	(see ii	nstructio	ns).			
		(a) Name and address	hou	e, and average rs per week	i (lf n	npensation ot paid,	emplo	Contribution lyee benefit	plans	(e) Expe	nse aco allowar	
Chric	Chaw - 1	5430 Fremont Ave. S.		ed to position or, 1/2 hour	en	ter -0-)	and defe	erred compe	ensation			
	ville, MN			.,		0			0			0
		400 Fox Valley Drive	Directo	or, 1/2 hour	-	0			0			0
Corco	ran, MN	55340				U			· ·			
						•						
2	Compe	ensation of five highest-paid employed	es (oth	er than tho	se incl	uded on li	ne 1—:	see instr	uctions	s). If n	one,	enter
	"NONE			<del>_</del>		,		· · · · · · · · · · · · · · · · · · ·				
	(a) Name a	and address of each employee paid more than \$50,00	00	(b) Title, and a hours per of devoted to p	week	(c) Comper	nsation	(d) Contrib employee plans and compen	benefit deferred	(e) Expe	ense ac allowar	
									<del></del>			
					-			-				
Total	number	of other employees paid over \$50,000 .		<del></del>				L	. ▶			
				<del></del>			<u>-</u> -	· · · · ·		Form 90	O-PF	(2016)

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid En and Contractors (continued)	iployees,
3 Five h	ighest-paid independent contractors for professional services (see instructions). If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
		ļ
otal number	of others receiving over \$50,000 for professional services	
Part IX-A	Summary of Direct Charitable Activities	
	lation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1		
2		
3		
. <del></del>		
4		
Part IX-B	Summary of Program-Related Investments (see instructions)	
Describe the	two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		
2		<u> </u>
All other prog	ram-related investments. See instructions	
3		
Fotol Add lin	es 1 through 3	
I <b>ntal</b> . Ann iin		

Form 9	90-PF (2016)		Page 8
Part	X Minimum Investment Return (All domestic foundations must complete this part. Foreign	ign found	lations,
	see instructions.)		
. 1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	125,000
b	Average of monthly cash balances	1b	15,000
С	Fair market value of all other assets (see instructions)	1c	0
đ	<b>Total</b> (add lines 1a, b, and c)	1d	140,000
е	Reduction claimed for blockage or other factors reported on lines 1a and		_
	1c (attach detailed explanation)	] ]	
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	140,000
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see	1 1	
	instructions)	4	2,100
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	137,900
6	Minimum investment return. Enter 5% of line 5	6	6,895
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations check here ► □ and do not complete this part.)	oundatio	ns
1	Mınımum investment return from Part X, line 6	1	6,895
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016. (This does not include the tax from Part VI.) 2b	1	
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	6,895
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	6,895
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	6,895
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etctotal from Part I, column (d), line 26	1a	18,421.24
b	Program-related investments – total from Part IX-B	1b	<del></del>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	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	18,421.24
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	18,421.24
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whether	the foundation
		For	m 990-PF (2016)

Part	Undistributed Income (see instruction	ons)			<del>,</del>
. 1	Distributable amount for 2016 from Part XI,	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
	fine 7				6,895
2	Undistributed income, if any, as of the end of 2016:				
а	Enter amount for 2015 only				
b	Total for prior years: 20 ,20 ,20				
3	Excess distributions carryover, if any, to 2016:				
а	From 2011				!
b	From 2012 0				
c	From 2013				
ď	From 2014 8,268				
e	From 2015				1
f	Total of lines 3a through e	101,601			1
4	Qualifying distributions for 2016 from Part XII,				
•	line 4: ▶ \$ 18,421				
а	Applied to 2015, but not more than line 2a .			-	
b	Applied to undistributed income of prior years				
U	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election				· · · · · · · · · · · · · · · · · · ·
C	required—see instructions)				
					6,895
	Applied to 2016 distributable amount	11,526			0,055
_e	Remaining amount distributed out of corpus	11,520			6,895
5	Excess distributions carryover applied to 2016				0,695
	(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:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	113,127		· · · · · · · · · · · · · · · · · · ·	
b	Prior years' undistributed income. Subtract				l i
	line 4b from line 2b				
C	Enter the amount of prior years' undistributed				!
	income for which a notice of deficiency has		1		
	been issued, or on which the section 4942(a)				
	tax has been previously assessed			<del> </del>	<u> </u>
d	Subtract line 6c from line 6b. Taxable				!
	amount—see instructions				1
e	Undistributed income for 2015. Subtract line				,
	4a from line 2a. Taxable amount-see				
	instructions				
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	_			1
	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) .	7,406			
9	Excess distributions carryover to 2017.			<del></del>	1
	Subtract lines 7 and 8 from line 6a	105,721			!
10	Analysis of line 9:				<del> </del>
а	Excess from 2012 0				1
b	Excess from 2013				,
c	Excess from 2014 8,268				
d	Excess from 2015				'
e	Excess from 2016				1
					<u> </u>

_	4	,
Page	1	ι

Part	XIV Private Operating Founda	tions (see instru	uctions and Part	VII-A, question 9	)	
1a	If the foundation has received a ruling	or determination	letter that it is a	private operating		
	foundation, and the ruling is effective fo		_			(0) 577 10 10 10 10
b	Check box to indicate whether the four		e operating founda		ection <u>4942()</u>	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	ļ- · · <u> · · · · · · · · · · · · · · ·</u>	Prior 3 years		(e) Total
	investment return from Part X for	(a) 2016	<b>(b)</b> 2015	(c) 2014	(d) 2013	
	each year listed	<u> </u>	<u> </u>			
b	85% of line 2a		<u> </u>	<u> </u>		
С	Qualifying distributions from Part XII, line 4 for each year listed		}	1		
d	Amounts included in line 2c not used directly		<del> </del>	<del></del>	<del></del>	·
ŭ	for active conduct of exempt activities .					
е	Qualifying distributions made directly		1	}		
	for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test-enter:					
	(1) Value of all assets			<u> </u>		
	(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)	<u> </u>	ļ	<u> </u>		<u></u>
	(2) Support from general public and 5 or more exempt					
	organizations as provided in				:	
	section 4942(j)(3)(B)(iii)		<del> </del>			
	(3) Largest amount of support from an exempt organization		İ			
	(4) Gross investment income		<del> </del>			
Part		n (Complete th	his part only if t	he foundation h	ad \$5,000 or m	ore in assets at
	any time during the year-				24 40,000 01 111	ore in about at
1	Information Regarding Foundation					
а	List any managers of the foundation v	who have contribi	uted more than 29	% of the total conti	ibutions received	by the foundation
	before the close of any tax year (but o	nly if they have co	ontributed more th	nan \$5,000). (See s	ection 507(d)(2).)	
b	List any managers of the foundation					rge portion of the
	ownership of a partnership or other er	itity) of which the	foundation has a	10% or greater into	erest.	
2	Information Benevius Contribution	Cremt Cift I or	- Cobalasakia a			
4	Information Regarding Contribution Check here ▶ ☑ if the foundation				argenizations and	does not secont
	unsolicited requests for funds. If the f	oundation makes	gifts grants etc	(see instructions)	o individuals or or	ranizations under
	other conditions, complete items 2a, I		ge, g.ae, etc.	(555	0	gamzanono anaoi
a	The name, address, and telephone nu	<del> </del>	ddress of the pers	on to whom applic	ations should be a	ddressed:
b	The form in which applications should	be submitted an	d information and	materials they sho	uld include:	
С	Any submission deadlines:					
d	Any restrictions or limitations on aw	ards such as h	v deographical a	reas charitable fu	alde kinde of the	titutions or other
ų	factors:		, googiapilicai a	ioas, chantable III	aus, milus Ul 1/15	aranons, or other

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or status of Amount any foundation manager contribution Name and address (home or business) recipient or substantial contributor a Paid during the year 360 Communities 501c3 Local Housing, Mission \$4,038 Burnsville, MN 55306 Campus Faith Clubs 501c3 Missions \$500 Lakeville, MN Youth Front 501c3 Mission \$1000 Kansas City, MO Ryan Benish Private \$200.92 Transportation Needs Minneapolis, MN Tim Malespy Private \$1260 **Housing Costs** Minneapolis, MN **Hope 4 Moms** 501c3 **Housing Costs** \$875 Minneapolis, MN Molly DaBruzzi Private **Utility Payments** \$1000 St. Paul, MN Juan Rosa Private \$2680.97 Housing Albert Lea, MN International Families 501c3 Mission \$500 Lakeville, MN **Monservant Hernandez Cevantes** Private Water Heater \$1,161.35 Bellingham Food Bank 501c3 Local Food Bank \$5000 Bellingham, WA 18,216.24 За Approved for future payment Total

nter gross amounts unless otherwise indicated.	Unrelated bus	(b)	Excluded by sectio	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions.)
a	_				
b					
c					
d					
e					
f		· · · · · · · · · · · · · · · · · · ·			
g Fees and contracts from government agence	es				
2 Membership dues and assessments					
3 Interest on savings and temporary cash investment	ts				
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
<b>b</b> Not debt-financed property					
6 Net rental income or (loss) from personal proper					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventor					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue: a					
b					
C					
d					
e					
	— <del> </del>		<del> </del>		
12 Subtotal Add columns (b) (d) and (e)	_ 1				
12 Subtotal. Add columns (b), (d), and (e)	•	<del></del>	<u> </u>	13	
13 Total. Add line 12, columns (b), (d), and (e) .				13	
<b>13 Total.</b> Add line 12, columns (b), (d), and (e) . See worksheet in line 13 instructions to verify calcula				13	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcula Part XVI-B Relationship of Activities to th	tions.) e Accomplishme	ent of Exem	ot Purposes		importantly to th
I3 Total. Add line 12, columns (b), (d), and (e) . See worksheet in line 13 instructions to verify calcula Part XVI-B Relationship of Activities to the	tions.) e Accomplishme	ent of Exem	ot Purposes		importantly to th
I3 Total. Add line 12, columns (b), (d), and (e) . See worksheet in line 13 instructions to verify calcula Part XVI-B Relationship of Activities to the	tions.) e Accomplishme	ent of Exem	ot Purposes		importantly to thructions.)
<ul> <li>13 Total. Add line 12, columns (b), (d), and (e)</li> <li>See worksheet in line 13 instructions to verify calcula</li> <li>Part XVI-B Relationship of Activities to the</li> </ul>	tions.) e Accomplishme	ent of Exem	ot Purposes		importantly to thructions.)
<ul> <li>13 Total. Add line 12, columns (b), (d), and (e)</li> <li>See worksheet in line 13 instructions to verify calcula</li> <li>Part XVI-B Relationship of Activities to the</li> </ul>	tions.) e Accomplishme	ent of Exem	ot Purposes		importantly to th
I3 Total. Add line 12, columns (b), (d), and (e) . See worksheet in line 13 instructions to verify calcula Part XVI-B Relationship of Activities to the	tions.) e Accomplishme	ent of Exem	ot Purposes		importantly to th
I3 Total. Add line 12, columns (b), (d), and (e) . See worksheet in line 13 instructions to verify calcula Part XVI-B Relationship of Activities to the	tions.) e Accomplishme	ent of Exem	ot Purposes		importantly to th
I3 Total. Add line 12, columns (b), (d), and (e) . See worksheet in line 13 instructions to verify calcula Part XVI-B Relationship of Activities to the	tions.) e Accomplishme	ent of Exem	ot Purposes		importantly to th
Total. Add line 12, columns (b), (d), and (e) . see worksheet in line 13 instructions to verify calcula Part XVI-B Relationship of Activities to the	tions.) e Accomplishme	ent of Exem	ot Purposes		importantly to th
Total. Add line 12, columns (b), (d), and (e) . see worksheet in line 13 instructions to verify calcula Part XVI-B Relationship of Activities to the	tions.) e Accomplishme	ent of Exem	ot Purposes		importantly to th
Total. Add line 12, columns (b), (d), and (e) . see worksheet in line 13 instructions to verify calcula Part XVI-B Relationship of Activities to the	tions.) e Accomplishme	ent of Exem	ot Purposes		importantly to thructions.)
Total. Add line 12, columns (b), (d), and (e) . see worksheet in line 13 instructions to verify calcula Part XVI-B Relationship of Activities to the	tions.) e Accomplishme	ent of Exem	ot Purposes		importantly to thructions.)
I3 Total. Add line 12, columns (b), (d), and (e) . See worksheet in line 13 instructions to verify calcula Part XVI-B Relationship of Activities to the	tions.) e Accomplishme	ent of Exem	ot Purposes		importantly to thructions.)
I3 Total. Add line 12, columns (b), (d), and (e) . See worksheet in line 13 instructions to verify calcula Part XVI-B Relationship of Activities to the	tions.) e Accomplishme	ent of Exem	ot Purposes		importantly to thructions.)
I3 Total. Add line 12, columns (b), (d), and (e) . See worksheet in line 13 instructions to verify calcula Part XVI-B Relationship of Activities to the	tions.) e Accomplishme	ent of Exem	ot Purposes		importantly to thructions.)
I3 Total. Add line 12, columns (b), (d), and (e) . See worksheet in line 13 instructions to verify calcula Part XVI-B Relationship of Activities to the	tions.) e Accomplishme	ent of Exem	ot Purposes		importantly to thructions.)
I3 Total. Add line 12, columns (b), (d), and (e) . See worksheet in line 13 instructions to verify calcula Part XVI-B Relationship of Activities to the	tions.) e Accomplishme	ent of Exem	ot Purposes		importantly to thructions.)
Total. Add line 12, columns (b), (d), and (e) . see worksheet in line 13 instructions to verify calcula Part XVI-B Relationship of Activities to the	tions.) e Accomplishme	ent of Exem	ot Purposes		importantly to thructions.)
I3 Total. Add line 12, columns (b), (d), and (e) . See worksheet in line 13 instructions to verify calcula Part XVI-B Relationship of Activities to the	tions.) e Accomplishme	ent of Exem	ot Purposes		importantly to thructions.)
Total. Add line 12, columns (b), (d), and (e) . see worksheet in line 13 instructions to verify calcula Part XVI-B Relationship of Activities to the	tions.) e Accomplishme	ent of Exem	ot Purposes		importantly to thructions.)
Total. Add line 12, columns (b), (d), and (e) . see worksheet in line 13 instructions to verify calcula Part XVI-B Relationship of Activities to the	tions.) e Accomplishme	ent of Exem	ot Purposes		importantly to thructions.)
<ul> <li>13 Total. Add line 12, columns (b), (d), and (e)</li> <li>See worksheet in line 13 instructions to verify calcula</li> <li>Part XVI-B Relationship of Activities to the</li> </ul>	tions.) e Accomplishme	ent of Exem	ot Purposes		importantly to thructions.)
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcula Part XVI-B Relationship of Activities to th	tions.) e Accomplishme	ent of Exem	ot Purposes		importantly to thructions.)
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcula Part XVI-B Relationship of Activities to th	tions.) e Accomplishme	ent of Exem	ot Purposes		importantly to thructions.)
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcula Part XVI-B Relationship of Activities to th	tions.) e Accomplishme	ent of Exem	ot Purposes		importantly to thructions.)

Part	XVII		n Regarding Tran	sfers To and	Transactio	ns and R	elationship	s With I	lonchari	tabl	е	
, 1	ın se	ne organization d	directly or indirectly of e Code (other than s								Yes	No
а	, ,						10(1)					
	(1) Cash					-	1a(1) 1a(2)		7			
		ther assets . r transactions:							}	14(2)		_
b			a noncharitable eve	mnt organizatio	n				.	1b(1)		•
	· · ·							-	1b(2)		~	
	· · ·						1b(3)		<b>V</b>			
							1b(4)		1			
	3					1b(5)		1				
		_	ervices or membersh							1b(6)		<b>V</b>
С	• •		quipment, mailing lis		-				-	1c		1
		•	of the above is "Yes		-				-		fair m	arket
_	value	of the goods, of	ther assets, or servi	ces given by the	reporting for	oundation.	If the found	ation rece	ived less t	than	fair m	narket
(a) Line		(b) Amount involved		haritable exempt orga			otion of transfer					
						<u> </u>						
					<del></del>				<del></del>			
						<u> </u>						
									. <u>.</u>			
				,								
-												
2a b	desc	ribed in section 5	ectly or indirectly af 501(c) of the Code (c following schedule	other than sectio	n 501(c)(3))	or in sectio	n 527?		🗆		• 🗷	No
		(a) Name of organ	ization	(b) Type of organization		(c) Description of relation		n of relations	onship			
				! <del> </del>	<del></del>							
				<u> </u>							<del></del> -	
		<del></del>							<del></del>		···-	
	1 11-4	- A	Acalam that I have average	ad this yet we walked we		achadulas and		to the best of	mu kanulada	o and	ballof i	t in taxo
Sign		er penaltiègio perjury, ect, and complete Decl	declare that I have examine pration of preparer (other th						<del></del>			
_				101	2117	rector			May the IR: with the pr	S discu enarer	iss this shown	return below
Here			otoo	Date 1	- 1 - Title		<del>. ` </del>	<del></del> -	(see instruc			
	Sign	nature of officer or true Print/Type preparer		<u> </u>	<del> </del>	,	Date	<del></del>	D1	ΓIN		
Paid		Fill viype preparer	o naltie	Preparer's signatu	AI ♥		Date		k ∐ #	1114		
Prep		-				·	<u> </u>		employed			
Use (	Only					···		Firm's EIN	<u> </u>			
		Firm's address ▶			<del></del>			Phone no	For	m <b>9</b> 9	0-PF	(2016)

## Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

### **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

2016

**Employer identification number** 

Impact Society			41-1905957	
Organization type (chec	k one):			
Filers of:	Section:			
Form 990 or 990-EZ	☐ 501(c)(	) (enter number) organization		
	☐ 4947(a)(1) nor	nexempt charitable trust <b>not</b> treated as a priva	ate foundation	
	527 political o	organization		
Form 990-PF	√ 501(c)(3) exer	✓ 501(c)(3) exempt private foundation		
	4947(a)(1) nor	nexempt charitable trust treated as a private fo	oundation	
	_			
	☐ 501(c)(3) taxa	able private foundation		
General Rule  For an organizar or more (in mon	tion filing Form 990, 99	nization can check boxes for both the General  90-EZ, or 990-PF that received, during the yea ny one contributor. Complete Parts I and II. Se	r, contributions totaling \$5,000	
Special Rules				
regulations und 13, 16a, or 16b,	er sections 509(a)(1) ar and that received fron	on 501(c)(3) filing Form 990 or 990-EZ that mend 170(b)(1)(A)(vi), that checked Schedule A (Form any one contributor, during the year, total conform 990, Part VIII, line 1h, or (ii) Form 990-EZ	orm 990 or 990-EZ), Part II, line ontributions of the greater of (1)	
contributor, dur	ng the year, total contr	on 501(c)(7), (8), or (10) filing Form 990 or 990-Eributions of more than \$1,000 exclusively for re r the prevention of cruelty to children or animal	ligious, charitable, scientific,	
contributor, dur contributions to during the year <b>General Rule</b> a	ing the year, contribution taled more than \$1,000 for an exclusively religion pplies to this organizat	on 501(c)(7), (8), or (10) filing Form 990 or 990- ions exclusively for religious, charitable, etc., p 0. If this box is checked, enter here the total co- ious, charitable, etc., purpose. Don't complete tion because it received nonexclusively religious.	ourposes, but no such ontributions that were received eany of the parts unless the us, charitable, etc., contributions	
		the General Rule and/or the Special Rules doe n Part IV, line 2, of its Form 990; or check the		

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).

Name of organization Impact Society Employer identification number 411905957

Part I	Contributors (See instructions). Use duplicate cop	ies of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Bell Lumber & Pole Co.  778 First Street NW PO Box 120786  New Brighton, MN 55112	\$\$	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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person Payroll Moncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ \$	Person