

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



SCANNED DEC

Form 990-PF

Return of Private Foundation

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

OMB No 1545-0052

Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. 20 2016, and ending For calendar year 2016 or tax year beginning A Employer identification number Name of foundation Hallberg Family Foundation 41-1989115 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) 651-462-4516 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ▶ Forest Lake, MN 55025 ☐ Initial return Initial return of a former public charity **G** Check all that apply: D 1. Foreign organizations, check here ☐ Final return 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 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) ▶ \$ 2033035.99 (Part I, column (d) must be on cash basis.) Fart Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and for charitable (b) Net investment (c) Adjusted net amounts in columns (b), (c), and (d) may not necessarily equal expenses per books purposes income the amounts in column (a) (see instructions).) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 1 145000.00 2 Check ► ☐ if the foundation is **not** required to attach Sch. B 3 Interest on savings and temporary cash investments 3.03 3.03 3.03 Dividends and interest from securities . 4 43705.81 43705.81 43705.81 5a Gross rents . b Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 6a Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 7 916.48 Net short-term capital gain . q Income modifications Gross sales less returns and allowances 10a Less. Cost of goods sold b , ×, ×, Gross profit or (loss) (attach schedule) C 11 Other income (attach schedule) . . 12 Total. Add lines 1 through 11 . 188708.84 44625.32 44139.42 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages . . . 15 Pension plans, employee benefits 16a Legal fees (attach schedule) Accounting fees (attach schedule) Operating and Administrative Other professional fees (attach schedule) Interest 18 Taxes (attach schedule) (see instructions) 1702.95 1702.95 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 90.00 90.00 24 Total operating and administrative Add lines 13 through 23. 1792.95 1792.95 25 Contributions, gifts, grants paid 105550.00 105550.00 26 Total expenses and disbursements. Add lines 24 and 25 107342.95 107342.95 Subtract line 26 from line 12: 27 Excess of revenue over expenses and disbursements 81365.89 **Net investment income** (if negative, enter -0-)

Adjusted net income (if negative, enter -0-)

D,	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End	of year	
	art II	should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash—non-interest-bearing	3784.50	912.2	912.26	
	2	Savings and temporary cash investments	20998.49	41511 2	3 41511.23	
	3	Accounts receivable ▶				
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ▶	1	2444 A 25000		
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)	The state of the s		The second secon	
	7	Other notes and loans receivable (attach schedule) ▶				
		Less allowance for doubtful accounts ▶				
Assets	8	Inventories for sale or use				
SS	9	Prepaid expenses and deferred charges				
4	10a	Investments—U.S. and state government obligations (attach schedule)	1274249.66	1337975 0	1990612 50	
	b	Investments—corporate stock (attach schedule)				
	С	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis ▶	Lanciana de la companio de la compan			
		Less accumulated depreciation (attach schedule) ▶				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)				
	14	Land, buildings, and equipment. basis ▶				
		Less, accumulated depreciation (attach schedule) ▶				
	15	Other assets (describe ►)				
	16	Total assets (to be completed by all filers—see the	ĺ			
		instructions. Also, see page 1, item l)	1299032.65	1380398.54	2033035 99	
	17	Accounts payable and accrued expenses				
S	18	Grants payable				
ij	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
Ë	21	Mortgages and other notes payable (attach schedule)			1	
	22	Other liabilities (describe ►)				
	23	Total liabilities (add lines 17 through 22)	-			
တ္ဆ		Foundations that follow SFAS 117, check here >				
lances		and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted	1299032.65	1380398.54	4	
Ва	25	Temporarily restricted				
ρ	26	Permanently restricted		· · · · · · · · · · · · · · · · · · ·		
Net Assets or Fund Ba		Foundations that do not follow SFAS 117, check here ► □ and complete lines 27 through 31.				
칟	07	•				
S	27 28	Capital stock, trust principal, or current funds	-			
set	29	Paid-in or capital surplus, or land, bldg., and equipment fund Retained earnings, accumulated income, endowment, or other funds			+	
Aŝ	30	Total net assets or fund balances (see instructions)	4000000	4000000		
t l	31	Total liabilities and net assets/fund balances (see	1299032.65	1380398.54		
ž	31	· · · · ·	400000			
D۵	rt III	Analysis of Changes in Net Assets or Fund Balances	1299032.65	1380398.54	37 W. F.	
		I net assets or fund balances at beginning of year—Part II, colu	mn (a) line 30 (mus	t agree with	1	
•				· 1.	100	
2				<u> </u>	1299032.65	
2 Enter amount from Part I, line 27a					81365.89	
_	3 Other increases not included in line 2 (itemize) ►					
4	-	lines 1, 2, and 3		<u> </u>	1380398.54	
'5 3	Decre	eases not included in line 2 (itemize) ► I net assets or fund balances at end of year (line 4 minus line 5)—F	Part II column (h) Iir	5 ne 30 6	122	
	· Olai	The description of fund balances at end of year (line 4 fillings line 5)—f	a.c.n, column (b), III	10 JU 6	1380398.54 Form 990-PF (2016)	
					rorm 330-FF (2016)	

Part	(a) List and describe the	d Losses for Tax on Investme kind(s) of property sold (e.g., real estatuse, or common stock, 200 shs MLC Co	e,	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
<u>1a</u>	-				_	
b						
<u>c</u>						
<u>d</u>						
<u>е</u>	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		n or (loss) f) minus (g)
<u>a</u>						
<u> </u>						
<u>c</u>						
<u> d</u>						
<u>е</u>	Complete only for accets she	owing gain in column (h) and owned	by the foundation	on 12/21/60		
	Complete only for assets site		1			(h) gain minus t less than -0-) or
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (ı) (ı), ıf any		rom col (h))
а						
b					<u>' </u>	
С					· · · · · · · · · · · · · · · · · · ·	
d						
е					MUTUAL FU	NDS CAPITAL GAINS
2	Capital gain net income o		also enter in Pa , enter -0- in Par		2	916.48
3	If gain, also enter in Part	in or (loss) as defined in sections I, line 8, column (c) (see instruc	ctions). If (loss),			
D					3	430.58
Part		ler Section 4940(e) for Reduvate foundations subject to the				
Wast	s," the foundation does not	section 4942 tax on the distribu qualify under section 4940(e). D	o not complete	this part.		☐ Yes ☐ No
′		ount in each column for each yea	ar; see the instru	ictions before ma	akıng any entries.	
<u> Jale</u>	(a) Base period years endar year (or tax year beginning in	(b) Adjusted qualifying distribution:	s Net value of	(c) noncharitable-use as		(d) ribution râtio livided by col. (c))
	2015			_		
	2014					
	2013					
	2012 2011			·		
2 3	Total of line 1, column (d) Average distribution ratio number of years the found	for the 5-year base period—dividation has been in existence if le	de the total on li ess than 5 years	ne 2 by 5, or by		
5	Multiply line 4 by line 3				. 5	
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b))		. 6	
Ū					1 1	
7	Add lines 5 and 6 .				. 7	

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	-sı	ee instr	uctio	ns)	
la	Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1.		che lan		K	
	Date of ruling or determination letter: N/A (attach copy of letter if necessary—see instructions)					
b						
	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-)	2			<u> </u>	
3		3		892	50	
4	· · · · · · · · · · · · · · · · · · ·	4			ļ	
5	, 11 1 1 1	5		892	50	
6	Credits/Payments:				40	
a	2016 estimated tax payments and 2015 overpayment credited to 2016 6a 6a				7.5	
b	Exempt foreign organizations—tax withheld at source 6b				2	
C	Tax paid with application for extension of time to file (Form 8868) . 6c 6c					
_d	Backup withholding erroneously withheld		Carrie (
7		7			<u> </u>	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed INT. 40.00.	_		27	 	
9		\rightarrow		959	50	
10 11	Enter the amount of line 10 to be: Credited to 2017 estimated tax Refunded 1	0				
	VII-A Statements Regarding Activities	<u>.</u>				
\$ 980	During the tax year, did the foundation attempt to influence any national, state, or local legislation or	r did	ıt ** 3**	Yes	No	
	participate or intervene in any political campaign?		1a	+	1	
. *	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see					
	Instructions for the definition)?					
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any ma	ateria		***	35%	
	published or distributed by the foundation in connection with the activities.			F		
С	Did the foundation file Form 1120-POL for this year?		1c		✓	
d	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax important	osed	1 3			
	on foundation managers. ▶ \$		20.00			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		✓	
_	If "Yes," attach a detailed description of the activities.	_		4.8		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articlinconnoration, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	cles	*			
4-	· · · · · · · · · · · · · · · · · · ·		3		✓	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		✓	
ь 5	If "Yes," has it filed a tax return on Form 990-T for this year?		4b	 		
3	If "Yes," attach the statement required by General Instruction T.		- Tan	3845	V	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				3.7	
•	By language in the governing instrument, or					
	 By state legislation that effectively amends the governing instrument so that no mandatory directions 	s th:	at 🗀			
	conflict with the state law remain in the governing instrument?		6		-in-million -	
.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 Pa	art XI		1		
3a	Enter the states to which the foundation reports or with which it is registered (see instructions)			o i	(S. 1964)	
	, , , , , , , , , , , , , , , , , , , ,					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Ge	ener	al 🥀			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	1	See Tree See	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j))(3) c	or 💯 🏖	1		
	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		✓	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing	; the	eir 📗			
	names and addresses	<u> </u>	10			

Fair	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
• •	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		1
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
13	person had advisory privileges? If "Yes," attach statement (see instructions)	12		_ -
10	Website address ► NONE	13	V	
14	***************************************	1-462-	4516	
		5025-0	130	
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			▶ ∟
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authorit	v	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		✓
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country.		,	
Pari	the foreign country ► VII-B Statements Regarding Activities for Which Form 4720 May Be Required		LEF S.A.	My.
L GIL	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	843.1	Yes	No
1a	During the year did the foundation (either directly or indirectly):			8578
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		15.75	
	disqualified person?		118	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V No			*
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			ų.
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after			757 h
	termination of government service, if terminating within 90 days.)	ì	.,,	16
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fall to qualify under the exceptions described in Regulations		لنشك	12. روس
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		✓
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		1	
	were not corrected before the first day of the tax year beginning in 2016?	1c		~ √
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		4.	
а	operating foundation defined in section 4942(j)(3) or 4942(j)(5)): At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and			
u	6e, Part XIII) for tax year(s) beginning before 2016?			
	If "Yes," list the years ▶ 20, 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	20	(2 :7	(* (*)
	▶ 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
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			
4-	foundation had excess business holdings in 2016)	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a	2017	✓ EX:EX
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b	Lind	

Part	VII-B	Statements Regarding Activities	for W	hich Form	4720 I	May Be H	equire	d (contir	nued)		
5a	During the	e year did the foundation pay or incur a	ny amo	unt to:							
		on propaganda, or otherwise attempt to						Yes	✓ No		
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on,										
	directly or indirectly, any voter registration drive?										
	(3) Provid	de a grant to an individual for travel, stu	dy, or o	ther similar i	ourpose	es?		☐ Yes	✓ No		
		de a grant to an organization other than									
		n 4945(d)(4)(A)? (see instructions)						☐ Yes	 ✓ No		
	(5) Provid	de for any purpose other than religious,	, charita	able, scientifi	c, litera	ary, or educ	cational				
		ses, or for the prevention of cruelty to o						☐Yes	☑ No		
b	If any ans	wer is "Yes" to 5a(1)-(5), did any of the	transa	ctions fail to	qualify	under the	exception	ons descr	ıbed in	1.5	
		ns section 53.4945 or in a current notice								5b	
	Organizat	tions relying on a current notice regardii	ng disa	ster assistan	ce ched	ck here .		:	▶ □	3.94	1993
С		wer is "Yes" to question 5a(4), does t					the tax				洲田
	because i	t maintained expenditure responsibility	for the	grant?				☐ Yes	✓ No		
	If "Yes," a	attach the statement required by Regula	tions se	ection 53.49 ⁴	15–5(d).	,					
ба		oundation, during the year, receive any					emiums				
	on a pers	onal benefit contract?						Yes	✓ No		
b	Did the fo	oundation, during the year, pay premiun	ns, dire	ctly or indired	ctly, on	a personal	benefit	contract	?	6b	✓
	If "Yes" to	o 6b, file Form 8870									73
7a		e during the tax year, was the foundation a						Yes Yes	✓ No		
b		did the foundation receive any proceeds								7b	
Par	VIII	Information About Officers, Direc	tors, T	rustees, F	ounda	tion Man	agers,	Highly F	Paid E	mployee	s,
		and Contractors									
1	List all of	fficers, directors, trustees, foundation								r	
		(a) Name and address		e, and average is per week		mpensation not paid,		Contribution: iyee benefit		(e) Expense	
		(-)		ed to position	`en	ter -0-)		erred compe		other allov	vances
Euger	ne Hallberg										
Fores	t Lake, MN	55025	Chairm	an		0			0		0
Denis	e Hallberg	Tetrault									
Fores	t Lake, MN	55025	Directo	r		0			0		0
Dana	Hallberg										
	t Lake, MN		Directo	<u>r</u>		0			0		0
Melis	sa Windchio	d									
	el Hallberg		Directo			0			0	\	0
2	"NONE."	sation of five highest-paid employee	es (oth	er than thos	se incii	uaea on 11	ne 1—:	see instr	uctions	s). IT none	enter
	(a) Name and	address of each employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to pe	veek	(c) Compe	nsation	(d) Contribution of the complex of the compens of t	benefit leferred	(e) Expense other allov	
INCN											
									i		
			· [
· · · · ·											
											
otal	number of	other employees paid over \$50,000 .		· · · · ·				· · ·	. ▶		

(b) Type of service	(c) Compensation
year Include relevant statistical information such as the number of	
year Include relevant statistical information such as the number of	
year Include relevant statistical information such as the number of	
year Include relevant statistical information such as the number of	
year Include relevant statistical information such as the number of	
year Include relevant statistical information such as the number of	
year Include relevant statistical information such as the number of	
year Include relevant statistical information such as the number of	
year Include relevant statistical information such as the number of	
year Include relevant statistical information such as the number of	
year Include relevant statistical information such as the number of	
year Include relevant statistical information such as the number of	F
year Include relevant statistical information such as the number of ch papers produced, etc	·
produced, etc	Expenses
	<u> </u>
1. 124	
ents (see instructions)	
on during the tax year on lines 1 and 2	Amount
	}
	
	ents (see instructions)

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreign	ign foundatio	ons,
	see instructions.)	1	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:	اعدا	404000000
а	Average monthly fair market value of securities	1a 1b	1843680.00
þ	Average of monthly cash balances		2349.00
C	Fair market value of all other assets (see instructions)	1c	31255.00
d	Total (add lines 1a, b, and c)		1877284.00
е	1c (attach detailed explanation)		
_	To (attach detailed explanation)	2	
2	Acquisition indebtedness applicable to line 1 assets	3	1877284.00
3	Subtract line 2 from line 1d	3	18//284.00
4	instructions)	4	20150.00
_	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	28159.00 1849125.00
5	Minimum investment return. Enter 5% of line 5	6	92456.00
6 (3 27	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f		92436.00
Part	and certain foreign organizations check here ► and do not complete this part.)	oundations	
	Minimum investment return from Part X, line 6	1	92456.00
1	Tax on investment income for 2016 from Part VI, line 5	9.8.	
2a b	Income tax for 2016. (This does not include the tax from Part VI.)		
	Add lines 2a and 2b	2c	893.00
с 3	Distributable amount before adjustments Subtract line 2c from line 1	3	91563.00
4	Recoveries of amounts treated as qualifying distributions	4	01000.00
5	Add lines 3 and 4	5	91563.00
6	Deduction from distributable amount (see instructions)	6	01000.00
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
•	line 1	7	91563 00
			
Part	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	المنتف	-
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	107342.95
b	Program-related investments—total from Part IX-B	1b	
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	
	Cash distribution test (attach the required schedule)	3b	
‡	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	107342.95
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	
ಕ	Adjusted qualifying distributions. Subtract line 5 from line 4	6	107342.95
	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
	qualified for the decition for the first taken and be yeard.		

Part	XIII Undistributed Income (see instruction	ons)		N/A	
1	Distributable amount for 2016 from Part XI,	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
	line 7	95 8 1 (A. 16 A. 16 A	iroganiani A n eroj	THE WAR STATE	7
2	Undistributed income, if any, as of the end of 2016.				
а	Enter amount for 2015 only		FARRIS PART	5	
b	Total for prior years: 20,20,20		The state of the s		
3	Excess distributions carryover, if any, to 2016:				
а	From 2011				
b	From 2012				
C	From 2013				
d	From 2014				
e	From 2015				
T 4	Total of lines 3a through e	E words a sireal of a could consider			
4	Qualifying distributions for 2016 from Part XII, line 4: ▶ \$				
_					
a b	Applied to 2015, but not more than line 2a. Applied to undistributed income of prior years	1980 1980 1980 1980 1980 1980 1980 1980	y, r	25V 25 3 3 5	
b	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election	C-86 ## 1.8822 6.22. #	185		
Ū	required—see instructions)				
d	Applied to 2016 distributable amount	* * * * * * * * * * * * * * * * * * * *		F 1970.	, , , , , , , , , , , , , , , , , , ,
e	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2016	· · · · · · · · · · · · · · · · · · ·		7.45) HO 1997 18 18 18 18	<u></u>
-	(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				
b	Prior years' undistributed income Subtract				,持于各種合作的。
	line 4b from line 2b			MEDIN ARABA	46-20-20-20-20-20-20-20-20-20-20-20-20-20-
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable amount—see instructions				
_	Undistributed income for 2015. Subtract line			· · · · · · · · · · · · · · · · · · ·	
ę	4a from line 2a. Taxable amount—see				
	Instructions				
f	Undistributed income for 2016. Subtract lines		AND AND DESCRIPTION	常 。 以为"是人?"	. 22 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -
•	4d and 5 from line 1. This amount must be				
	distributed in 2017				
7	Amounts treated as distributions out of corpus	28 8 1 318 7 8 8 1 3 8 1 3			
	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				emeta fi
10	Analysis of line 9:				
а	Excess from 2012				
b	Excess from 2013				
С	Excess from 2014				
d	Excess from 2015				
е	Excess from 2016		24 34 900343400305	9-70-22-79-6-25	

	0-11 (2010)			1 // A	O) N / /	Page 10
Part					9) N/A	
1a	If the foundation has received a ruling					
	foundation, and the ruling is effective fo		_			(2)
b	Check box to indicate whether the four		operating founda		ection [_] 4942(j)	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
	each year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4 for each year listed			_	<u>.</u> .	
ď	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly					
	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					
	(2) Value of assets qualifying under				-	
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-enter 2/3			 	<u> </u>	
	of minimum investment return shown in Part X, line 6 for each year listed					
С	"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)					1
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income					
Part	XV Supplementary Information	on (Complete th	is part only if t	he foundation h	ad \$5,000 or me	ore in assets at
	any time during the year-	see instruction	ıs.)			
1	Information Regarding Foundation	Managers:				
а	List any managers of the foundation					by the foundation
	before the close of any tax year (but o	only if they have co	ontributed more th	nan \$5,000). (See s	ection 507(d)(2).)	
	E. C. Hallberg	<u>. </u>				
b	List any managers of the foundation					rge portion of the
	ownership of a partnership or other en	ntity) of which the	foundation has a	10% or greater into	erest.	
N	lone				. <u>.</u>	
2	Information Regarding Contribution			. •		
	Check here ► ☐ if the foundation					
	unsolicited requests for funds. If the f		gıfts, grants, etc.	(see instructions) t	o individuals or or	ganızations under
	other conditions, complete items 2a, I					···
а	The name, address, and telephone nu	mber or e-mail ad	dress of the perso	on to whom applic	ations should be a	ddressed:
Ha	Ilberg Family Foundation E. C. Hallberg	PO Box 130 Fore	est Lake, MN 5502	5 651-462-4615		
	The form in which applications should				uld include:	
				•		
Let	ter Form, Purpose and Amount of Funds	Requested				
	Any submission deadlines:		· · · · · · · · · · · · · · · · · · ·		······································	
Nor	•					
	Any restrictions or limitations on aw	ards, such as by	geographical ar	eas, charitable fie	elds, kinds of inst	itutions, or other
	factors:	•	•			·
Unit	rad States Area					

Part XV Supplementary Information (continued)						
3 Grants and Contributions Paid During t	he Year or Approve	ed for Fut	ture Payment			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount		
Name and address (home or business)	or substantial contributor	recipient	Contribution	<u> </u>		
a Paid during the year						
SEE ATTACHED SCHEDULES						
Total			▶ 3a			
b Approved for future payment						
			ļ			
į						
			,			
1		İ				
Total			D 05			

a. Paid during the year	<u>Purpose</u>	<u>Amount</u>
Ordway Center for the Performing Arts 345 Washington Street St Paul, MN 55102	Theatre	5,000.00
Youth Service Bureau 244 North Lake Street Forest Lake, MN 55025	Youth Development	6,000.00
Union Gospel Mission 77 9th Street East St Paul, MN 55164	Holiday Meals Summer Camp	1,050.00
Saint Peters Catholic Church 1250 South Shore Drive Forest Lake, MN 55025	Gold Plate Dinner	500.00
Saint Peters Catholic Church 1250 South Shore Drive Forest Lake, MN 55025	Annual Fundraiser	500.00
Boy Scouts of America 393 Marshall Avenue St Paul, MN 55102	Scouting Program	300.00
Grace Alliance Church 432 11th Avenue Forest Lake, MN 55025	Annual Fundraiser	1,500.00
Wyoming Area Creative Arts Community Inc 5521 East Viking Blvd Wyoming, MN 55092	Annual Fundraiser	11,000.00
Faith Luthern Church 886 North Shore Drive Forest Lake, MN 55025	Youth Program	1,000.00
Shelter Box USA 8374 Market Street #203 Lakewood Ranch, FL 34202	Shelter Box Program	1,000.00
Masquers Theatre Company PO Box 446 Forest Lake, MN 55025	Theatre	3,000.00

a. Paid during the year	<u>Purpose</u>	<u>Amount</u>
Chanhassen Athletic Foundation 8450 Mission Hills Lane Chanhassen, MN 55317	Little League Baseball Program	2,500.00
Linwood Covenant Church 6565 Viking Blvd. NE Wyoming, MN 55092	Youth Program Annual Fundraiser	3,500.00
Billy Graham Association 1 Billy Graham Parkway Charlotte, NC 28201	2016 Celebration	500.00
Forest Lake Safety Camp 210 Lake Street Forest Lake, MN 55025	Bike Safety Camp	500.00
Ecumen Parmly Lifepointes 28210 Old Towne Road Chisago City, MN 55013	Annual Fundraiser	1,000.00
Wyoming Fire Relief Associaton PO Box 188 Wyoming, MN 55092	Annual Stagecoach City Celebration	2,500.00
Community Scholarship Fund PO Box 308 Wyoming, MN 55092	Education scholarship	20,000.00
Forest Lake Senior Party Committee 1532 11th Ave SE Forest Lake, MN 55025	Graduation Celebration	250.00
National Child Safety Council Wyoming Police Depart PO Box 188 Wyoming, MN 55092	Child safety and drug prevention	500.00
Youth Performing Arts PO Box 141 Forest Lake, MN 55025	Youth Performing Arts	3,750.00

a. Paid during the year	<u>Purpose</u>	<u>Amount</u>
Trolling For The Troops Minnesota Veteran Outdoor Program PO Box 953 St Cloud, MN 56302	Veterans Fishing	6,450.00
St Croix Festival Theatre 210 North Washington Street St Croix Falls, WI 54024	Annual Fundraiser	1,000.00
Gideons International PO Box 140800 Nashville, TN 37214	Bible Program	2,000.00
Chisago Lake Arena PO Box 472 Lindstrom, MN 55045	Athletic Equipment	11,000.00
Scandia-Marine Lions Foundation PO Box 263 Scandia, MN 55073	Veterans Memorial	500.00
The Education Foundation of The Forest Lake Area 6100 North 210th Street Forest Lake, MN 55025	Annual Fundraiser	4,000.00
Forest Lake High School 6100 210th Street N Forest Lake, MN 55025	Athletic Equipment	5,000.00
Stacy Lions Club PO Box 1 Stacy, MN 55079	Easter Festival	500.00
Crazy Horse Memorial Foundation 12151 Avenue of the Chiefs Crazy Horse, SD 57730	Fundraiser for Construction	2,000.00
Refuge Network Family Pathways 6413 Oak Street North Branch, MN 55056	Domestic Violence	250.00

a. Paid during the year	<u>Purpose</u>	<u>Amount</u>
Covenant Pines Ministries 43696 245th Place McGregor, MN 55760	Annual Fundraiser Bible Camp	1,000.00
Family Pathways 6413 Oak Street North Branch, MN 55056	Annual Fundraiser	500.00
Salvation Army 2445 Prior Avenue N Roseville, MN 55113	Assistance to Individuals	750.00
Wyoming Lions Club 25924 Grafton Avenue Wyoming, MN 55092	Santa Days Celebration	250.00
Hosanna Lutheran Church 9300 Scandia Trail N Forest Lake, MN 55025	Youth Program	1,000.00
Crossroads Church 17445 North Dame St NE Forest Lake, MN 55025	Youth Program	1,000.00
Forest Lake Area Community Scholarship Foundation PO Box 67 Forest Lake, MN 55025	Annual Fundraiser	2,500.00
	Total	105,550.00

Pa	rt X	VI-A Analysis of Income-Producing Ac	ctivities			N/A	
Ente	er gro	oss amounts unless otherwise indicated.			Excluded by section 512, 513, or 514		
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions.)
1	Pro	ogram service revenue:					
	а						
	b						
	С						
	d						
	e						
	T						
_		Fees and contracts from government agencies					
2		mbership dues and assessments					
3		erest on savings and temporary cash investments	ļ				
4		idends and interest from securities				VVVV *********************************	
5		rental income or (loss) from real estate:	Mary Carlotte		****		
		Debt-financed property				1711	<u> </u>
,		Not debt-financed property					 -
,		rental income or (loss) from personal property				·,·	
9		ner investment income	-				<u> </u>
3 9		n or (loss) from sales of assets other than inventory through the control of the					
10		oss profit or (loss) from sales of inventory					
11			<u> </u>				
• •	b						
	C						
	d						
	e						
12	Sub	ototal Add columns (b), (d), and (e)					
		4 4 4 4 4 5 4 5 4 6 5 4 6 5 6 6 6 6 6 6				13	
		ksheet in line 13 instructions to verify calculation	ıs.)				
Pai	rt X'	VI-B Relationship of Activities to the A	ccomplishm	ent of Exempt	Purposes	•	
	e No ▼	Explain below how each activity for which accomplishment of the foundation's exempt pur	income is reporposes (other that	orted in column in by providing fund	(e) of Part XVI ds for such purpo	-A contributed in oses). (See instruc	nportantly to the tions)
							
							· · · · · · · · · · · · · · · · · · ·
							
			· · · · · · · · · · · · · · · · · · ·				
							
		 					
	-						
							
							
							
							
				 -		· · · · · · · · · · · · · · · · · · ·	
			-				
							

Form **990-PF** (2016)

	(-	- · - /								, . .
Part	XVII		n Regarding Tran ganizations	sfers To and Trans	actions and F	Relationsh	ips With	Nonchari	table	
1	in sec	ne organization of	directly or indirectly e	engage in any of the fo section 501(c)(3) organ					Yes	No
а		· · · · · · · · · · · · · · · · · · ·	porting foundation to	a noncharitable exem	pt organization			[la(1)	✓
b		ther assets .r transactions:						ت پ غد		✓
	(2) P	urchases of asse	ets from a noncharita	mpt organization . ible exempt organization	on]	b(1) b(2)	√
	(4) R	eimbursement a	rrangements	r assets				[1	b(3) b(4)	√
	(6) P	erformance of se	ervices or membersh	ip or fundraising solicit	ations			[1	b(5) b(6)	√
c d	If the	answer to any	of the above is "Yes	its, other assets, or pai s," complete the follow ces given by the report	ng schedule. (Column (b)	should alv	vays show		
(a) Line	value		on or sharing arrange	ement, show in column aritable exempt organization	(d) the value o		other ass	ets, or serv	ices receiv	/ed.
									 	
							<u></u>	<u>. </u>		
	descr	ribed in section 5		iliated with, or related ther than section 501(c			pt organiz 		Yes 🗌 N	10
		(a) Name of organ		(b) Type of organi	zation		(c) Description	on of relationsh	nip	
						·				
		· · · · · · · · · · · · · · · · · · ·								
Sign	correc	r penalties of perjup lot, and complete Decl	declare that I have examined aretten of preparer (other that	d this return, including accompa n taxpayer) is based on all infor	anying schedules and mation of which prepa	statements, and arer has any kno	to the best of wledge	May the IRS	and belief, it is discuss this re parer shown be	etum
		ature of officer or trus		Date	Title	T Day	····	(see instruction	ons)? [Yes [
Paid Prepa	arer	Print/Type preparer Ronald L. Holt, (_	Preparer's Signature	<u></u>	Date 11/9/20	Chec self-e	k I If	N P 0040 895	8
Jse (Ronald L. Holt, Ltd PO Box 256 Shafer, I	MN 55074			Firm's EIN Phone no		-1308345 257-4190	

(ENT ENSON PEQUESTED)

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Employer identification number

41-1989115

▶ 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

Hallberg Family Foundation 41-1989115				41-1989115		
Organization type (check one):						
Filers o	f:	Section:				
Form 990 or 990-EZ		☐ 501(c)(☐ 501(c)() (enter number) organization			
		☐ 4947(a)(1) non	exempt charitable trust not treated as a private for	undation		
		☐ 527 political o	rganization			
Form 99	90-PF	√ 501(c)(3) exem	npt private foundation			
		☐ 4947(a)(1) non	exempt charitable trust treated as a private founda	tion		
		☐ 501(c)(3) taxal	ole 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.						
Genera	l 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 331/3 % 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	ı: An organization tha	it isn't covered by t	he General Rule and/or the Special Rules doesn't fi	le 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).

Name of organization Employer identification number
Hallberg Family Foundation 41-1989115

Part I	Contributors (See instructions). Use duplicate co	opies of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Hallberg Marine, Inc PO Box 277 Wyoming, MN 55092	\$ 20,000.00	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Hallberg, Inc Po Box 277 Forest Lake, MN 55025	\$ 55,000.00	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Hallberg Family Limited Partnership PO Box 130 Forest Lake, MN 55025	\$ 40,000.00	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	E. C. Hallberg PO Box 130 Forest Lake, MN 55025	\$ 20,000 00	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Michael Hallberg 2124 St Clair Avenue St Paul, MN 55105	\$\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Denise Hallberg 20154 Farnham Lane N Forest Lake, MN 55025	\$ 5000.00	Person