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Form **990-PF**

Return of Private Foundation

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

OMB No 1545-0052

2016Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

For calendar year 2016 or tax year beginning

, and ending

Name of foundation DR HENRY HOBART RUGER TRUST		A Employer identification number 45-6071291
Number and street (or P O box number if mail is not delivered to street address) PO BOX 838	Room/suite	B Telephone number (see instructions) 701-662-4077
City or town, state or province, country, and ZIP or foreign postal code DEVILS LAKE ND 58301		C If exemption application is pending, check here ☐
G Check all that apply ☐ Initial return ☐ Final return ☐ Address change ☐ Initial return of a former public charity ☐ Amended return ☐ Name change		D 1. Foreign organizations, check here ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ☐
H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ☐
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ► \$ 899,555	J Accounting method ☒ Cash ☐ Accrual ☐ Other (specify)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐
(Part I, column (d) must be on cash basis)		

Part I Analysis of Revenue and Expenses

(The total 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	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received (attach schedule)				
2 Check ☒ if the foundation is not required to attach Sch B				
3 Interest on savings and temporary cash investments	77	77	77	
4 Dividends and interest from securities	20,592	20,592	20,592	
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	7,787			
b Gross sales price for all assets on line 6a	327,635			
7 Capital gain net income (from Part IV, line 2)		7,787		
8 Net short-term capital gain			0	
9 Income modifications				
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule) STMT 1	1,067	1,067	1,067	
12 Total. Add lines 1 through 11	29,523	29,523	21,736	
13 Compensation of officers, directors, trustees, etc	10,000	5,000		5,000
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees (attach schedule) SEE STMT 2	1,220			1,220
b Accounting fees (attach schedule) STMT 3	1,680			1,680
c Other professional fees (attach schedule) STMT 4	11,215	11,215		
17 Interest STMT 5	574	574		
18 Taxes (attach schedule) (see instructions)				
19 Depreciation (attach schedule) and depletion				
20 Occupancy				
21 Travel, conferences, and meetings	1,012			1,012
22 Printing and publications				
23 Other expenses (att sch) STMT 6				
24 Total operating and administrative expenses. Add lines 13 through 23	25,701	16,789	0	8,912
25 Contributions, gifts, grants paid SEE STATEMENT 7	40,267			40,267
26 Total expenses and disbursements. Add lines 24 and 25	65,968	16,789	0	49,179
27 Subtract line 26 from line 12				
a Excess of revenue over expenses and disbursements	-36,445			
b Net investment income (if negative, enter -0-)		12,734		
c Adjusted net income (if negative, enter -0-)			21,736	

For Paperwork Reduction Act Notice, see instructions.

DAA

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P 2

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CASH, OK

Revenue

Operating and Administrative Expenses

SCANNED JUN 01 2017

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash – non-interest-bearing	8,009	3,798	3,798
	2	Savings and temporary cash investments	23,086	25,110	25,110
	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 (att schedule) ▶ Less allowance for doubtful accounts ▶	0		
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments – U S and state government obligations (attach schedule)			
	b	Investments – corporate stock (attach schedule) SEE STMT 8	158,025	156,800	211,169
	c	Investments – corporate bonds (attach schedule)			
	11	Investments – land, buildings, and equipment basis ▶ Less accumulated depreciation (attach sch) ▶			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule) SEE STATEMENT 9	635,501	602,468	659,478
	14	Land, buildings, and equipment basis ▶ Less accumulated depreciation (attach sch) ▶			
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers – see the instructions Also, see page 1, item I)	824,621	788,176	899,555
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶)			
	23	Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. ▶ ☐			
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ▶ ☒			
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	824,621	788,176	
	30	Total net assets or fund balances (see instructions)	824,621	788,176	
	31	Total liabilities and net assets/fund balances (see instructions)	824,621	788,176	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	824,621
2	Enter amount from Part I, line 27a	2	-36,445
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	788,176
5	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30	6	788,176

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Form 990-PF (2016) **DR HENRY HOBART RUGER TRUST****45-6071291**Page **3****Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P – Purchase D – Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	PUBLICLY TRADED SECURITIES	P	VARIOUS	VARIOUS
b	PUBLICLY TRADED SECURITIES	P	VARIOUS	VARIOUS
c	PUBLICLY TRADED SECURITIES	P	VARIOUS	VARIOUS
d	WELLS FARGO			
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 134,541		142,653	-8,112
b 148,053		144,185	3,868
c 44,185		33,010	11,175
d 856			856
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			-8,112
b			3,868
c			11,175
d			856
e			

2 Capital gain net income or (net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	7,787
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2015	56,356	965,819	0.058350
2014	65,332	1,027,640	0.063575
2013	46,966	1,014,957	0.046274
2012	42,906	988,836	0.043390
2011	42,649	1,012,277	0.042132

2 Total of line 1, column (d)	2	0.253721
3 Average distribution ratio for the 5-year base period – divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0.050744
4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	4	892,353
5 Multiply line 4 by line 3	5	45,282
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	127
7 Add lines 5 and 6	7	45,409
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.	8	49,179

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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	1	127
c	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	0
3	Add lines 1 and 2	3	127
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	127
6	Credits/Payments		
a	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	
b	Exempt foreign organizations – tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	
8	Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	127
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ☐ Refunded ☐	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>		X
c Did the foundation file Form 1120-POL for this year?	N/A	
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 ☐ \$ _____		
e 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? <i>If "Yes," attach a detailed description of the activities</i>	2	X
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? <i>If "Yes," attach a conformed copy of the changes</i>	N/A	
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	N/A	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>	5	X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	X
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	X
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ☐ ND		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i>	8b	X
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9	X
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	X

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Part VII-A Statements Regarding Activities (continued)

	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	X
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	X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	13	X
14 The books are in care of ► JOHN T TRAYNOR Telephone no ► 701-662-4077 PO BOX 838		
Located at ► DEVILS LAKE ND ZIP+4 ► 58301		
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 ► 15		
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	X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ►		

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly)		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	☐ Yes ☒ No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	☐ Yes ☒ No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	☐ Yes ☒ No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	☐ Yes ☒ No	
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	☐ Yes ☒ No	
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	☐ Yes ☒ No	
b If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	1b
Organizations relying on a current notice regarding disaster assistance check here ► ☐		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016?	N/A	1c
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016?	☐ Yes ☒ No	
If "Yes," list the years ► 20 , 20 , 20 , 20		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement – see instructions.)	N/A	2b
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 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?	☐ Yes ☒ No	
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 foundation had excess business holdings in 2016.)	N/A	3b
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
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?	4b	X

Form 990-PF (2016) **DR HENRY HOBART RUGER TRUST****45-6071291**Page **6****Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)****5a** During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ 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?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☒ Yes ☐ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions)

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No**b** If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

Organizations relying on a current notice regarding disaster assistance check here

☐**5b****X****c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?**N/A** ☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945–5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870

6b**X****7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?☐ Yes ☒ No**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?**N/A****7b****Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1** List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JOHN T TRAYNOR PO BOX 838	DEVILS LAKE ND 58301	TRUSTEE 0.00	10,000	0

2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000

▶**0**

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(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services ▶**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 N/A	
2	
3	
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 N/A	
2	
All other program-related investments See instructions 3	

Total. Add lines 1 through 3 ▶Form **990-PF** (2016)

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	865,018
b	Average of monthly cash balances	1b	40,924
c	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	905,942
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	905,942
4	Cash deemed held for charitable activities. Enter 1½% of line 3 (for greater amount, see instructions)	4	13,589
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	892,353
6	Minimum investment return. Enter 5% of line 5	6	44,618

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	44,618
2a	Tax on investment income for 2016 from Part VI, line 5	2a	127
b	Income tax for 2016 (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	127
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	44,491
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	44,491
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	44,491

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	49,179
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		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	49,179
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	127
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	49,052

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				44,491
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only			1,437	
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2016				
a From 2011				
b From 2012				
c From 2013				
d From 2014				
e From 2015				
f Total of lines 3a through e				
4 Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ 49,179				
a Applied to 2015, but not more than line 2a			1,437	
b Applied to undistributed income of prior years (Election required – see instructions)				
c Treated as distributions out of corpus (Election required – see instructions)				
d Applied to 2016 distributable amount				44,491
e Remaining amount distributed out of corpus	3,251			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,251			
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 instructions				
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)				
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	3,251			
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	3,251			

Part XIV Private Operating Foundations (see instructions 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 for 2016, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "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 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test – enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year – see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))
N/A

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest
N/A

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed
JOHN T TRAYNOR 701-662-4077
PO BOX 838 DEVILS LAKE ND 58301

b The form in which applications should be submitted and information and materials they should include
SEE ATTACHED APPLICATION

c Any submission deadlines
VARIOUS

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors
SEE STATEMENT 10

Part XV **Supplementary Information** *(continued)***3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year SEE STATEMENT 11				40,267
Total			▶ 3a	40,267
b Approved for future payment N/A				
Total			▶ 3b	

Enter gross amounts unless otherwise indicated

(See worksheet in line 13 instructions to verify calculations)

Line No.

Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)

N/A

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Statement 1 - Form 990-PF, Part I, Line 11 - Other Income

Description	Revenue per Books	Net Investment Income	Adjusted Net Income
WELLS FARGO	\$ 1,067	\$ 1,067	\$ 1,067
TOTAL	\$ 1,067	\$ 1,067	\$ 1,067

Statement 2 - Form 990-PF, Part I, Line 16a - Legal Fees

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
LEGAL SERVICES	\$ 1,220	\$	\$	\$ 1,220
TOTAL	\$ 1,220	\$ 0	\$ 0	\$ 1,220

Statement 3 - Form 990-PF, Part I, Line 16b - Accounting Fees

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
TAX PREPERATION	\$ 1,680	\$	\$	\$ 1,680
TOTAL	\$ 1,680	\$ 0	\$ 0	\$ 1,680

Statement 4 - Form 990-PF, Part I, Line 16c - Other Professional Fees

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
INVESTMENT FEES	\$ 11,215	\$ 11,215	\$	\$
TOTAL	\$ 11,215	\$ 11,215	\$ 0	\$ 0

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Statement 5 - Form 990-PF, Part I, Line 18 - Taxes

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
FEDERAL INCOME TAX	\$ 49	49	\$	\$
FOREIGN TAXES PAID	525	525		
TOTAL	\$ 574	\$ 574	\$ 0	\$ 0

Statement 6 - Form 990-PF, Part I, Line 23 - Other Expenses

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
EXPENSES	\$	\$	\$	\$
OFFICE EXPENSE				
INVESTMENT EXPENSES				
TOTAL	\$ 0	\$ 0	\$ 0	\$ 0

Statement 7 - Form 990-PF, Part I, Line 25 - Noncash Contributions, Gifts, Grants

Amount	Noncash Description	FMV Explanation	Book Value Amount	Book Value Explanation	Date
10,067					12/22/16
100					12/22/16
100					12/22/16
2,000					12/22/16
1,000					12/22/16
3,000					12/22/16
100					12/22/16
2,000					12/22/16
2,000					12/22/16
2,000					12/22/16
2,000					12/22/16
100					12/22/16
3,000					12/22/16
3,000					12/22/16

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Statement 7 - Form 990-PF, Part I, Line 25 - Noncash Contributions, Gifts, Grants
(continued)

Amount	Noncash Description	FMV Explanation	Book Value Amount	Book Value Explanation	Date
100					12/22/16
500					12/22/16
1,000					12/22/16
500					12/22/16
500					12/22/16
1,000					12/22/16
100					12/22/16
100					12/22/16
3,000					12/22/16
1,000					12/22/16
2,000					12/22/16

Statement 8 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
	\$	\$		\$
AFFILIATED MANAGERS GROUP, INC	2,098	3,953	COST	4,940
ALPHABET INC	3,267	3,267	COST	5,403
AMERIPRISE INFL INC	4,429	5,023	COST	4,992
APPLE INC	7,570	7,388	COST	12,624
BERKSHIRE HATHAWAY INC	4,695	5,037	COST	8,149
BLACKROCK INC	2,504	2,504	COST	3,044
BOEING CO	5,211	5,419	COST	7,940
CELANESE CROP	4,309	4,245	COST	5,984
CISCO SYSTEMS INC	4,852	5,254	COST	7,102
CITIGROUP INC	4,948	5,680	COST	7,013
CME GROUP INC	3,820	3,751	COST	6,344
COGNIZANT TECH SOLUTION CRP		5,015	COST	4,819
COMCAST CORP CLASS A	3,852	4,136	COST	6,974
CUMMINS INC	5,619	3,325	COST	3,553
CVS HEALTH CORP	3,164	2,885	COST	4,892
DIAGO PLC ADR	2,381	3,576	COST	3,742
EATON CORP	2,212	2,595	COST	3,220
GILEAD SCIENCES INC	1,391	1,391	COST	2,220

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Statement 8 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments (continued)

Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
GOLDMAN SACHS GROUP INC	\$ 3,149		COST	\$
HAIN CELESTIAL GROUP INC	2,748	2,748	COST	2,615
HSBC ADR	4,414		COST	
JOHNSON CONTROLS INC	3,001		COST	
JPMORGAN CHASE & CO	4,644	5,705	COST	9,664
LAS VEGAS SANDS CORP	3,327	4,921	COST	4,593
MANULIFE FINANCIAL CORP	2,659	4,482	COST	5,595
MCKESSON CORP	3,583	3,404	COST	3,511
MERCK & CO INC		4,116	COST	4,533
MICROSOFT CORP	4,986	6,836	COST	9,756
MONSANTO CO	5,744	5,430	COST	5,366
NESTLE SA REGISTERED SHARES ADR	2,487		COST	
ORACLE CORPORATION	2,775		COST	
PNC FINANCIAL SERVICES GROUP	4,446	5,140	COST	6,550
ROCHE HOLDINGS LTD	4,230	5,859	COST	5,078
SCHLUMBERGER LTD	5,357	5,006	COST	5,457
SUNCOR ENERGY INC	5,554	5,399	COST	6,538
TARGET CORP	3,718	3,430	COST	4,334
THERMO FISHER SCIENTIFIC INC	2,490	2,515	COST	4,092
TJX COM INC	2,945	1,078	COST	2,780
TOTAL S.A. ADR	4,677	4,433	COST	4,689
UNION PACIFIC CORP	5,170	4,659	COST	7,154
UNITED HEALTH GROUP INC	3,586	3,524	COST	8,322
UNITED PARCEL SERVICE	2,608	2,083	COST	3,210
WALT DISNEY CO	3,405	1,588	COST	4,377
TOTAL	\$ 158,025	\$ 156,800		\$ 211,169

Statement 9 - Form 990-PF, Part II, Line 13 - Other Investments

Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
AQR MANAGED FUTURES STRATEGY FUND	\$ 8,757	26,852	COST	\$ 24,450
ASG GLOBAL ALTERNATIVES FUND	16,214	18,667	COST	16,851
BARCLAYS BANK PLC IPATH BLOOMBERG	15,802		COST	

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Statement 9 - Form 990-PF, Part II, Line 13 - Other Investments (continued)

Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
BLACKROCH GLOBAL LONG/SHORT	\$ 22,911	\$ 32,660	COST	\$ 32,191
CREDIT SUISSE COMMODITY RETURN FD		16,155	COST	18,557
EATON VANCE GLOBAL MACRO ABSOLUTE	8,871	27,492	COST	27,218
FIDELITY ADVISORS EMERGING MARKETS	34,393	43,021	COST	43,623
ISHARES CORE S&P SMALL CAP	31,685	24,538	COST	40,431
ISHARES MSCI EMERGING MARKETS	54,108		COST	
ISHARES S&P MID-CAP 400 GROWTH	28,166	22,111	COST	36,987
ISHARES S&P MIDCAP 400 VALUE	30,197	22,756	COST	39,207
JPMORGAN HIGH YIELD FUND	19,880	38,874	COST	38,625
NEUBERGER BERMAN LONG SHORT FUND	32,176	22,510	COST	22,475
SPDR DJ WILSHIRE INTERNATIONAL REAL	33,312	15,993	COST	15,587
THE MERGER FUND	7,179	15,517	COST	15,517
T ROWE PRICE INSTITUTIONAL FLOAT	6,822	15,494	COST	15,495
T ROWE PRICE REAL ESTATE FUND		23,639	COST	25,704
VANGUARD FTSE DEVELOPED MARKETS ETF	83,130	44,387	COST	44,286
VANGUARD EMERGING MARKETS ETF	5,174	19,811	COST	24,974
VANGUARD INFLATION PROTECTED SEC FD		8,351	COST	8,128
VANGUARD INTERMEDIATE TERM B	60,349	89,402	COST	87,722
VANGUARD REIT VIPER	22,947	7,467	COST	15,268
VANGUARD SHORT TERM BOND ETF	113,428	66,771	COST	66,182
TOTAL	\$ 635,501	\$ 602,468		\$ 659,478

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Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

SEE ATTACHED APPLICATION

Form 990-PF, Part XV, Line 2c - Submission Deadlines

Description

VARIOUS

Statement 10 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

NEEDY MEDICAL STUDENTS AT THE UNIVERSITY OF NORTH DAKOTA,
GRAND FORKS, ND (75%).
DEVILS LAKE PARK DISTRICT RECEIVES THE REMAINING 25%.

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Statement 11 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the
Year

Name		Address		Relationship	Status	Purpose	Amount
Address							
DEVILS LAKE PARK BOARD		PO BOX 446				MAINTAIN & IMPROVE PUBLIC PARKS	10,067
DEVILS LAKE ND 58301			GOVT				
HOUDA ABDELRAHMAN		4278 RUSSET AVE S.	INDIVIDUAL			ASSIST IN MEDICAL EDUCATION	100
FARGO ND 58104							
NATASHA GARCIA		3810 BERKELEY DR. #7	INDIVIDUAL			ASSIST IN MEDICAL EDUCATION	100
GRAND FORKS ND 58202							
JASON REARDON		3750 RUEMMELE RD #411	INDIVIDUAL			ASSIST IN MEDICAL EDUCATION	2,000
GRAND FORKS ND 58301							
ELIZABETH BLAIR		5050 40TH AVE S #138	INDIVIDUAL			ASSIST IN MEDICAL EDUCATION	1,000
FARGO ND 58104							
BROCK DAVIDSON		2733 47TH ST S #120	INDIVIDUAL			ASSIST IN MEDICAL EDUCATION	3,000
FARGO ND 58104							
JENNIFER GLATT		20206 UTAH DRIVE	INDIVIDUAL			ASSIST IN MEDICAL EDUCATION	100
BISMARCK ND 58503							
KELSEY LAMBRECHT		2907 43RD AVE NE #320	INDIVIDUAL			ASSIST IN MEDICAL EDUCATION	2,000
BISMARCK ND 58503							
AMY BORYS		1302 CHESTNUT ST	INDIVIDUAL			ASSIST IN MEDICAL EDUCATION	2,000
GRAND FORKS ND 58201							
NATALIE BITTNER CRAWFORD		2124 4TH AVE N	INDIVIDUAL			ASSIST IN MEDICAL EDUCATION	2,000
GRAND FORKS ND 58203							
ERIN FOLLMAN		715 N 40TH ST #101H	INDIVIDUAL			ASSIST IN MEDICAL EDUCATION	2,000
GRAND FORKS ND 58203							
EMILY SCHWARTZ		GRANDDAUGHTER	INDIVIDUAL			ASSIST IN MEDICAL EDUCATION	100
FARGO ND 58102		374 5TH ST N #304	INDIVIDUAL			ASSIST IN MEDICAL EDUCATION	3,000
KATRINA FOSTER							
FARGO ND 58104		5992 59TH AVE S	INDIVIDUAL			ASSIST IN MEDICAL EDUCATION	3,000
ELISE DICK		3553 13TH AVE N #308	INDIVIDUAL			ASSIST IN MEDICAL EDUCATION	3,000
GRAND FORKS ND 58203							
JACOB GREENMYER		305 N 52ND ST #7	INDIVIDUAL			ASSIST IN MEDICAL EDUCATION	100
GRAND FORKS ND 58203							
ALEXANDER HORN		3700 RUEMMELE AVE #111	INDIVIDUAL			ASSIST IN MEDICAL EDUCATION	500
GRAND FORKS ND 58201							
BROOKE LENTZ		3220 5TH AVE N #3	INDIVIDUAL			ASSIST IN MEDICAL EDUCATION	1,000
GRAND FORKS ND 58203							

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Statement 11 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name		Address		Relationship	Status	Purpose	Amount
Address							
LOGAN RICHARDS		7431 WOLF CIRCLE					
GRAND FORKS ND 58201	N/A	INDIVIDUAL				ASSIST IN MEDICAL EDUCATION	500
EMILY SHAWKAT		612 UNIVERSITY AVE					
GRAND FORKS ND 58203	N/A	INDIVIDUAL				ASSIST IN MEDICAL EDUCATION	500
TUCK ZIMMER		1031 THAMES CT					
GRAND FORKS ND 58203	N/A	INDIVIDUAL				ASSIST IN MEDICAL EDUCATION	1,000
ALEXANDER FIFE		1020 4TH AVE N #3					
GRAND FORKS ND 58203	N/A	INDIVIDUAL				ASSIST IN MEDICAL EDUCATION	100
DANIEL HOY		207 STATE STREET #108					
GRAND FORKS ND 58203	N/A	INDIVIDUAL				ASSIST IN MEDICAL EDUCATION	100
SHANALEE MOUNTAN		2750 S 38TH ST #328					
GRAND FORKS ND 58201	N/A	INDIVIDUAL				ASSIST IN MEDICAL EDUCATION	3,000
BRUCH PEHL		5050 40TH AVE S #138					
FARGO ND 58104	N/A	INDIVIDUAL				ASSIST IN MEDICAL EDUCATION	1,000
KELSEY GLADEN		1348 13TH ST W					
WEST FARGO ND 58078	N/A	INDIVIDUAL				ASSIST IN MEDICAL EDUCATION	2,000
TOTAL							40,267

Federal Statements**Taxable Interest on Investments**

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>US Obs (\$ or %)</u>
WESTERN STATE BANK	\$ 17				
WELLS FARGO	60				
TOTAL	\$ 77				

Taxable Dividends from Securities

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>US Obs (\$ or %)</u>
WELLS FARGO	\$ 20,592				
TOTAL	\$ 20,592				

Other Investment Income

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>
WELLS FARGO	\$ 1,067			
TOTAL	\$ 1,067			

APPLICATION FOR GRANT

Please complete and return application to:

Dr. Henry Hobart Ruger Trust
John T. Traynor, Trustee
P.O. Box 838
Devils Lake, ND 58301-0838

INFORMATION

The Henry Hobart Ruger Trust was established under the provisions of the Last Will and Testament of Rosa C. Ruger, daughter of Dr. Ruger. The beneficiaries of the Trust include medical students at the University of North Dakota.

Applicants are requested to complete the following form and submit it to the Trustee. Additional information may be requested by the Trustee and applicants may be asked to attend a personal interview at a time and place convenient to the applicant and the Trustee.

Students who have received a grant in the past from the Ruger Trust are not disqualified from receiving additional grants from the Trust.

Once you have completed the application, please either mail it to the address above or else email it to Andrea Miller, whose email address is andrea@traynorlaw.com.

1. Name: _____
2. Mailing Address: _____
3. E-mail Address: _____
4. Telephone number(s): _____
5. Year in medical school (1st, 2nd, etc.): _____
6. Pre-med education (start with high school graduation and list pre-med education giving majors, minors and other pertinent data): _____

7. Pre-med grade point: _____

Please list any honors received whether related to the medical field or otherwise:

8. Give other activities in the medical field, any articles you may have written, subject of the articles, and whether published:

9. Describe financial need for grant: _____

10. Give career objectives: _____

11. What specialty are you considering?: _____

12. Personal data (please give whatever personal data you choose): _____

13. State, in your own words, why you would like a grant and the reasons you believe you should be considered: _____

14. Are you interested in practicing your profession in a rural setting in North Dakota?

_____ Please explain your response. _____

15. Please list at least three references, by submitting name, address and telephone number of each reference:

16. Please describe summer activities during your pre-medical and medical school years:

17. Describe any experiences that you have had in the medical field other than the courses of instruction:

18. Indicate any para-medical training that you may have received: _____

*Thank you for your interest.
We will be in contact with you once the grant awards have been decided.*

NOTICE OF AVAILABILITY OF ANNUAL RETURN

NOTICE IS HEREBY GIVEN, that the Annual Return of the Dr. Henry Hobart Ruger Trust is available in the office of the Trustee, John T. Traynor, 509 5th St. NE, Suite 1, Devils Lake, North Dakota.

DATED this 11th day of May, 2016.

John T. Tryanor, Trustee
509 5th St. NE, Suite 1
PO Box 838
Devils Lake, ND 58301-0838
TIN: 45-6071291