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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491319032227

2016

OMB No 1545-0052

Return of Private Foundation

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

Open to Public

							znopection
For	caler	ndar year 2016, or tax year beginning 01-01-20)16 , aı	nd er	nding 12-31-	2016	
		ndation CHARITABLE FOUNDATION			A Employer Id	entification numbe	r
NC.	MOUNT	CHARITABLE FOUNDATION			95-4715090		
		street (or P O box number if mail is not delivered to street address) ADY OAK RD NO 200	Room/suite		B Telephone nu	mber (see instructio	ns)
0.	301 311	NOT SAIN NO THE 200			(952) 230-6143	3	
		, state or province, country, and ZIP or foreign postal code A, MN 55343	•		C If exemption	application is pendir	g, check here
					1		▶ ∟
G Ch	neck all	l that apply □ Initial return □ Initial return of a □ Amended return	former public charity		_	ganizations, check h	▶ ∟
		☐ Address change ☐ Name change				rganizations meeting k here and attach co	
H Ch	neck tv	pe of organization Section 501(c)(3) exempt private	foundation			undation status was	
		4947(a)(1) nonexempt charitable trust \Box Other taxable			under sectio	n 507(b)(1)(A), ched	ck nere
[Fai	r mark	et value of all assets at end J Accounting method	☑ Cash ☐ Accru	ıal		ation is in a 60-mont	
		rom Part II, col (c), \$ 184,084 ☐ Other (specify) _			under sectio	n 507(b)(1)(B), ched	ck here
	/.	(Part I, column (d) must	be on cash basis)				
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and	/h\	Net investment	(c) Adjusted net	(d) Disbursements for charitable
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	(0)	income	income	purposes
	1	Contributions, gifts, grants, etc , received (attach					(cash basis only)
	-	schedule)					
	2	Check ► ✓ If the foundation is not required to attach Sch. B.					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	3,543		3,543		
	5a	Gross rents					
	ь	Net rental income or (loss)					
χĘ	6a	Net gain or (loss) from sale of assets not on line 10	8,642				
Revenue	ь	Gross sales price for all assets on line 6a 22,033					
æ	7	Capital gain net income (from Part IV, line 2)			8,642		
	8	Net short-term capital gain					
	9	Income modifications					
	10a b	Gross sales less returns and allowances Less Cost of goods sold	<u> </u>				
	C	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	12,185		12,185		
	13	Compensation of officers, directors, trustees, etc	0		0		(
	14	Other employee salaries and wages					
Ş	15	Pension plans, employee benefits					
Expenses	16a	Legal fees (attach schedule)					
<u>×</u>	ь	Accounting fees (attach schedule)	% J 600		300		300
e) e)	С	Other professional fees (attach schedule)					
Ě	17	Interest					
Administrative	18	Taxes (attach schedule) (see instructions)					
≣	19	Depreciation (attach schedule) and depletion					
Ē	20	Occupancy					
ק ק	21	Travel, conferences, and meetings					
등	22	Printing and publications	48.1				
Ď.	23	Other expenses (attach schedule)	10		0		10
Operating and	24	Total operating and administrative expenses.	640		300		34
ă	25	Add lines 13 through 23	8,100		300		8,100
_	25		8,100				8,100
	26	Total expenses and disbursements. Add lines 24 and 25	8,710	L	300		8,410
	27	Subtract line 26 from line 12					
	a	Excess of revenue over expenses and disbursements	3,475				
	ь	Net investment income (If negative, enter -0-)			11,885		
	c	Adjusted net income(if negative, enter -0-)					
			ı				

162,749

162,749

162.749

162,749

166,224

166,224

166.224 166,224

2

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6

162,749

166,224

166,224 Form 990-PF (2016)

3,475

0

184,084

Investments—land, buildings, and equipment basis ▶ _

Less accumulated depreciation (attach schedule)

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

Foundations that follow SFAS 117, check here ▶

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

Foundations that do not follow SFAS 117, check here ▶

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

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

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

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

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

Analysis of Changes in Net Assets or Fund Balances

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

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Less accumulated depreciation (attach schedule)

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe -

Unrestricted

Temporarily restricted

Permanently restricted .

and complete lines 27 through 31.

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

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) ▶ _____

11

12

13

14

15 16

17

18

19

20 21

22

23

24

25

26

28 29

31

Part III

2 3

Liabilities

Balances

Fund

ō

Assets 27

Net 30

Capital Gain	s allu Lusses iui	iax oii tiivest	inent Income			
	(a) e the kınd(s) of prope arehouse, or common			(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a VANGUARD 500 INDEX	CL INV					
b CAPITAL GAINS DIVID	ENDS			Р		
С						
d						
e						
(e) Gross sales price		(f) eciation allowed r allowable)	Cost or	(g) other basis ense of sale	Gain o	h) ir (loss)) minus (g)
a	20,000			13,39:	1	6,609
b	2,033					2,033
С						
d						
e						
Complete only for asse	ets showing gain in co	lumn (h) and ow	ned by the foundation	on 12/31/69	1	1)
(i) F M V as of 12/31/6	so Ad	(j) ljusted basis of 12/31/69	Excess	(k) of col (ı) (յ), ıf any	Gains (Col (col (k), but not	h) gain minus less than -0-) or om col (h))
a				,		6,609
ь						2,033
С						
d						
е						
3 Net short-term capita	ne or (net capital loss al gain or (loss) as def Part I, line 8, column 	ined in sections 1	If (loss), enter -0- in I 1222(5) and (6) ons) If (loss), enter -0	· I	3	8,642
Part V Qualification	Under Section 4	940(e) for Re	educed Tax on Net	Investment In	icome	
(For optional use by domestic	private foundations s	subject to the sec	ction 4940(a) tax on ne	et investment incor	ne)	
If section 4940(d)(2) applies,	leave this part blank				_	_
Was the foundation liable for If "Yes," the foundation does	not qualify under sect	tion 4940(e) Do	not complete this part			es 🔽 No
1 Enter the appropriate	amount in each colum	in for each year,	see instructions before	making any entrie		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifyin	g distributions	(c) Net value of noncharitab		(d) Distribution rat (col (b) divided by c	
2015	1	10,798		188,602		0 057253
2014		7,724		192,238		0 040179
2013		7,031		178,775		0 039329
2012		10,696		166,563		0 064216
2011		2,675		171,253		0 015620
2 Total of line 1, column	(d)			2		0 216597
3 Average distribution ra number of years the fo4 Enter the net value of	undation has been in	existence if less	than 5 years	, or by the		0 043319 178,160
5 Multiply line 4 by line 3	3			5		7,718
6 Enter 1% of net invest	ment income (1% of F	Part I, line 27b)		6		119
7 Add lines 5 and 6 .				7		7,837
8 Enter qualifying distrib If line 8 is equal to or o				8 oplete that part usi	ng a 1% tax rate Se	8,410 e the Part VI
instructions					E,	orm 990-PF (2016)

Form 990-PF (2016)		Page 7
Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional service	ces (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		• 0
Part IX-A Summary of Direct Charitable Activities		_
List the foundation's four largest direct charitable activities during the tax year Include rel		r of Expenses
organizations and other beneficiaries served, conferences convened, research papers produ	uced, etc	
1		
		
2		
2		
2		
3		
		
4		
4		
Part IX-B Summary of Program-Related Investments (see	<u> </u>	
Describe the two largest program-related investments made by the foundation during t	the tax year on lines 1 and 2	Amount
1		
2		+
2		
All other program-related investments. See instructions		
all other program-related investments. See instructions		
<u> </u>		
Total. Add lines 1 through 3		▶ 0
		Form 990-PF (2016)

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

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

Amounts set aside for specific charitable projects that satisfy the

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

2

3

4

5

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

1b

2

За 3h

4

5

8.410

119

8,291

Form 990-PF (2016)

Page 9

8.789

8,493

Form **990-PF** (2016)

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

b Total for prior years

XII, line 4 🕨 \$

indicated below:

a From 2011.
b From 2012.
c From 2013.
d From 2014.
e From 2015.

Distributable amount for 2016 from Part XI, line 7
 Undistributed income, if any, as of the end of 2016

a Enter amount for 2015 only.

Excess distributions carryover, if any, to 2016

a Applied to 2015, but not more than line 2a

b Applied to undistributed income of prior years (Election required—see instructions).
c Treated as distributions out of corpus (Election required—see instructions).
d Applied to 2016 distributable amount.
e Remaining amount distributed out of corpus

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

6 Enter the net total of each column as

9 Excess distributions carryover to 2017.

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. . . .

Subtract lines 7 and 8 from line 6a

same amount must be shown in column (a))

(a)

Corpus

0

(b)

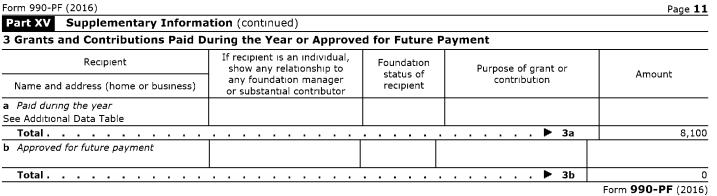
Years prior to 2015

(c)

2015

8,114

8.114



ter gross	amounts unless otherwise indicated	Unrelated bus	iness income	Excluded by section	512, 513, or 514	(e) Related or exempt
. Program	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
	•					
-						
_	and contracts from government agencies					
	ship dues and assessments store sto					
ınvestr	ments			14		
	ds and interest from securities			14	3,543	
	tal income or (loss) from real estate					
	ebt-financed property					
	ntal income or (loss) from personal property					
Other in	vestment income.					
	r (loss) from sales of assets other than			_		
	ory			18	8,642	
	rofit or (loss) from sales of inventory					
	evenue a					
<i>-</i>						
с						
d						
c d e 2 Subtota 3 Total. / ee worksh	Add Ine 12, columns (b), (d), and (e)	ns)		13	12,185	
c d e Subtota Total. / ee worksh	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculations. Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplishr income is reported	ment of Exempled in column (e) of	pt Purposes Feart XVI-A contribut	ted importantly to	12,185
c d e Subtota Total. / ee worksh art XVI ine No.	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio B Relationship of Activities to th Explain below how each activity for which	ns) e Accomplishr income is reported	ment of Exempled in column (e) of	pt Purposes Feart XVI-A contribut	ted importantly to	12,18
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d e 2 Subtota 3 Total. / ee worksh art XVI	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculations. Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplishr income is reported	ment of Exempled in column (e) of	pt Purposes Feart XVI-A contribut	ted importantly to	12,18
d e 2 Subtota 3 Total. / ee worksh art XVI	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculations. Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplishr income is reported	ment of Exempled in column (e) of	pt Purposes Feart XVI-A contribut	ted importantly to	12,18
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d e 2 Subtota 3 Total. / ee worksh art XVI	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculations. Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplishr income is reported	ment of Exempled in column (e) of	pt Purposes Feart XVI-A contribut	ted importantly to	12,185

÷	art XVI	11	Exempt Organiz				and managet		is and it	ciucio	iisiiips with itoli	ciidi itabi	_		
1				directly enga							n described in sectio organizations?	n 501		Yes	No
а	Transfer	s from	m the reporting foun	dation to a n	oncha	arıtable ex	empt organizatio	on d	of				ヿ		
												. 1a(1)		No
	(2) Oth	ner as	ssets									. 1a(2)		No
b	Other tra	ansad	tions										П		
	(1) Sale	es of	assets to a nonchari	table exemp	t orga	inization.						. 1b(1)		No
	(2) Pur	chase	es of assets from a n	oncharitable	exem	npt organiz	zation					. 1b(2)		No
	` '		f facilities, equipmer	•								. 1b(3)		No
			sement arrangemen					•				. 1b(No
			loan guarantees.									. 1b(No
	` '		nce of services or m	•		-						. 1b(- 1		No
	-					•							_		No
d	of the go	oods,	other assets, or serv	vices given b	y the	reporting	foundation If th	ne f	oundation	receive	ways show the fair m d less than fair mark	et value			
	in any tr	ansa	ction or sharing arra	ngement, sh	ow in	column (d) the value of the	he	goods, oth	er asse	ts, or services receiv	ed			
(a)	Line No	(I) Amount involved	(c) Name of	nonch	arıtable exe	mpt organization	l	(d) Descri	ption of	transfers, transactions,	and sharing a	ırrar	ngemen	ts
			•	,							·				
													—		
	T - +1					1 - 4 -	4				£		—		
Za			tion directly or indire				•			_		. 🗆 Ye	_	☑ N	_
			section 501(c) of the	•	tnan	section 50)1(c)(3)) or in se	ecti	on 52//.			. Ц Y Є	s	I ⊻ I N	0
b	It "Yes,"		plete the following so (a) Name of organization			1 4	b) Type of organiza	ation	n I		(c) Description	of relationshi	n		
			(a) Name or organization	// I		,	b) Type of organiza	atioi			(c) Description	or relations in			
											ng schedules and sta				
c:		,	rreparer has any kno		orrect	, and com	piete Deciaratio	оп о	or preparer	(other	than taxpayer) is ba	sed on all II	пог	matior	1 01
	9"		***				2017-10-30		\ ***	***	M	ay the IRS di	scus	s this r	eturn
П	ere								—) —			ıth the prepa	_		
		Sıgı	nature of officer or ti	rustee			Date		▼ Title	9	(s	ee instr)?	<u> </u>	es 🗆 N	lo
			Print/Type preparer's	name	Pren	arer's Sigi	nature		Date			TIN			
		'	, pe preparer s	u.iic	ep	_, c, <i>5 5</i> 191			Date		Check if self-			672	
			TODD A IACKCON								employed ▶ 🔲	P00	J92	6/2	
Pā	aid		TODD A JACKSON												
Pr	epare	r 🖡	ırm's name ► RSM	US LLP							1		_		
	e Onl										F	irm's EIN ▶	42-	07143	325
			ırm's address ► 80	1 NICOLLET	MALL	SUITE 11	00								
			МТ	NNEAPOLIS,	MN I	55402					P	hone no (6	12)	332-4	4300
			1711	, 0113,							l				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	any foundation manager or substantial contributor	recipient						
a Paid during the year								
BOUNTIFUL BASKET FOOD SHELF 1600 BAVARIA RD CHASKA, MN 55318	NONE	PC	SUPPORT OF PUBLIC PROGRAMS	50				
CHILDREN OF THE NIGHT 14530 SYLVAN STREET VAN NUYS, CA 91411	NONE	PC	SUPPORT OF PUBLIC PROGRAMS	500				
DANA-FARBER CANCER INSTITUTE INC 450 BROOKELINE AVENUE BOSTON, MA 02215	NONE	PC	MEDICAL RESEARCH	500				
DOWN SYNDROME ASSOC OF MN (DSAMN) 656 TRANSFER ROAD SAINT PAUL, MN 55114	NONE	PC	MEDICAL RESEARCH	3,000				
FEED MY STARVING CHILDREN 401 93RD AVENUE NW COON RAPIDS, MN 55433	NONE	PC	SUPPORT OF PUBLIC PROGRAMS	1,000				
Total				8,100				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year FIONA'S HOPEDSAMN NONE PC SUPPORT OF PUBLIC PROGRAMS 1.000 656 TRANSFER ROAD SAINT PAUL, MN 55114 NONE PC 500 HALO FOUNDATION SUPPORT OF PUBLIC PROGRAMS 1600 GENESSEE 528 KANSAS CITY MO 64102 50 250

KANSAS CITT, NO 04102				
MINNEWASHTA ELEMENTARY PTO 26350 SMITHTOWN RD EXCELSIOR, MN 55331	NONE	PC	SUPPORT OF PUBLIC PROGRAMS	
MISERICORDIA HOME 6300 NORTH RIDGE AVE	NONE	PC	SUPPORT OF PUBLIC PROGRAMS	-

EXCELSIOR, MN 55331				
MISERICORDIA HOME 6300 NORTH RIDGE AVE CHICAGO, IL 60660	NONE	PC	SUPPORT OF PUBLIC PROGRAMS	
	· · · · · · · · · · · · · · · · · · ·			

MISERICORDIA HOME 6300 NORTH RIDGE AVE CHICAGO, IL 60660	NONE	PC	SUPPORT OF PUBLIC PROGRAMS	
REECE'S RAINBOW PO BOX 4024	NONE	PC	SUPPORT OF PUBLIC PROGRAMS	

3a

6300 NORTH RIDGE AVE CHICAGO, IL 60660				
REECE'S RAINBOW PO BOX 4024 GAITHERSBURG, MD 20885	NONE	PC	SUPPORT OF PUBLIC PROGRAMS	

	GO, IL 60660	
REECE'S RAINBOW PO BOX 4024 NONE PC SUPPORT OF PUBL. GAITHERSBURG, MD 20885		RAMS

500

,				
REECE'S RAINBOW PO BOX 4024 GAITHERSBURG, MD 20885	NONE	PC	SUPPORT OF PUBLIC PROGRAMS	
Total				8,100

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

a Paid during the year				
SMILE TRAIN PO BOX 96231	NONE	PC	SUPPORT OF PUBLIC PROGRAMS	

or substantial contributor

3a

VASHINGTON, DC 20090				
ST JOSEPH'S 41 EAST 1ST STREET	NONE	PC	SUPPORT OF PUBLIC PROGRAMS	

ST JOSEPH'S 41 EAST 1ST STREET WACONIA, MN 55387	NONE	PC	SUPPORT OF PUBLIC PROGRAMS	

Total				0.100
VACONIA, MN 55387				
TOUSETTO TEAST IST STREET	INONE	' C	SOLLOKE OF LODGIC LICOCKAINS	1

WACONIA, MN 55387		
Total	 	8,100

500

250

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TY 2016 Accounting Fees Schedule							
_							
	Namo	POYRI IPY	V CHA	DITABLE F∩LI	NDATION		
Name: ROXBURY CHARITABLE FOUNDATION							
EIN: 95-4715090							
Category	Amo	ount		Investment Income	Adjusted I Income		Disbursements for Charitable Purposes
ACCOUNTING FEES		600		300			300

Name: ROXBURY CHARITABLE FOUNDATION

Name of Dand	End of Year Book
Name of Bond	Value

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VANGUARD TOTAL BOND MARKET INDEX

35,990

37,308

DLN: 93491319032227

End of Year Fair

Market Value

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TY 2016 Investments Corporat	o Stock School	dula

Name: ROXBURY CHARITABLE FOUNDATION

EIN: 95-4715090		
Name of Stock	End of Year Book Value	End of Year Fair Market Value
DODGE AND COX INTERNATIONAL STOCK FUND	23,244	19,952
HOOD RIVER SMALL-CAP GROWTH FUND	11,493	19,920
THIRD AVENUE VALUE FUND	13,585	11,129
VANGUARD 500 INDEX FUND	30,129	45,577
VANGUARD TOTAL INTERNATIONAL STOCK INDEX FUND	9,996	7,741
WINTERGREEN FUND INVESTOR CLASS	21,262	21,932

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TY 2016 Other Expenses Schedule							
Name:	ROXBURY CHAP	RITABLE FOUNDA	TION				
EIN: 95-4715090							
Other Expenses Schedule							
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
CA FRANCHISE TAX BOARD REGISTRATION	10	0		10			