Form **990-PF**

Return of Private Foundation

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

OMB No 1545-0052

Department of the Treasury

Do not enter social security numbers on this form as it may be made public.

		nua service 1 mioritation about 1 offi 350-11 and its se					TO TUBIC INSPECTION	
			1/2016	, and	ending	7/31/2017		
	me of fou				A Employer	r Identification number		
		SON FOUNDATION I street (or PO box number if mail is not delivered to street address)	I Been	-/a.u.ta		44 0050050		
) BOX		Room	n/suite	R Tolenhone	41-6052950 e number (see instruction	ne)	
		state or province, country, and ZIP or foreign postal code			D reacphone	Fildinger (See Man denoi	10)	
	NNEAF		55440-12	99		952-887-313	1	
		ntry name Foreign province/state/county	Foreign post		C If evernot			
_								
G	Check	all that apply 🔲 Initial return 🔲 Initial return	of a former public o	harity	D 1. Foreig	n organizations, check h	ere ▶ 🔲	
)		Final return Amended ret	urn		2. Foreig	n organizations meeting	the 85% test,	
ĺ		Address change Name chang			check	here and attach comput	etion ► 🗌	
<u> </u>	Check	type of organization \boxed{X} Section 501(c)(3) exempt pri	vate foundation	0 U		foundation status was te 07(b)(1)(A), check here	rminated under ►	
Ш	Section	n 4947(a)(1) nonexempt charitable trust 🔲 Other taxa	able private founda	tion 🕺	Section 50	on by typh, check there		
- 1	Fair m	arket value of all assets at J Accounting method	X Cash A	ccrual	E If the four	ndation is in a 60-month	termination	
	end of	year (from Part II, col (c), Other (specify)		,		tion 507(b)(1)(B), check		
	line 16	5) \$ 3,611,823 (Part I, column (d) must be	e on cash basis)					
Р	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and				(d) Disbursements	
		amounts in columns (b), (c), and (d) may not necessarily	expenses per		t investment ncome	(c) Adjusted net	for charitable purposes	
		equal the amounts in column (a) (see instructions))	books			"noonie	(cash basis only)	
	1	Contributions, gifts, grants, etc , received (attach schedule)	2,950,000					
	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	3,103		3,103	3,103		
	5a	Gross rents						
	b	Net rental income or (loss)						
9	6a	Net gain or (loss) from sale of assets not on line 10					-	
Revenue	b	Gross sales price for all assets on line 6a				DE CE	VED	
8	7	Capital gain net income (from Part IV, line 2)				THE RESIDENCE OF	- W	
œ	8	Net short-term capital gain				181 per 2 1	2017 3	
	9	Income modifications				JA UCL 6	<u>**</u>	
	10a	Gross sales less returns and allowances				335	TU	
	b	Less: Cost of goods sold						
	C	Gross profit or (loss) (attach schedule)	<u> </u>					
	11 12	Other income (attach schedule) Total. Add lines 1 through 11	2.052.102		2 102	3.103	<u> </u>	
	13	Compensation of officers, directors, trustees, etc	2,953,103		3,103	3,103	<u> </u>	
nses	14	Other employee salaries and wages						
Ĕ	14-	Pension plans, employee benefits						
ě	15 16a	Legal fees (attach schedule)						
Ú	b	Accounting fees (attach schedule)						
Operating and Administrative Expe	c	Other professional fees (attach schedule)						
E E	17	Interest .	<u> </u>					
五	18	Taxes (attach schedule) (see instructions)						
를	19	Depreciation (attach schedule) and depletion						
튱	20	Occupancy .						
Ž	21	Travel, conferences, and meetings .						
2	22	Printing and publications						
E	23	Other expenses (attach schedule)	6,862		6,862	6,862		
Ē	24	Total operating and administrative expenses.						
ᅙ	ļ	Add lines 13 through 23 .	6,862	L	6,862	6,862	0	
8	25	Contributions, gifts, grants paid	1,191,358	L			1,191,358	
0	26	Total expenses and disbursements. Add lines 24 and 25	1,198,220		6,862	6,862	1,191,358	
	27	Subtract line 26 from line 12						
	а	Excess of revenue over expenses and disbursements .	1,754,883					
	b	Net investment income (if negative, enter -0-) .			0			
	С	Adjusted net income (if negative, enter -0-)				0		

For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2016)

Pa	ırt li	Balance Sheets	Attached schedules and amounts in the description column	Beginning of year	End o	f year
		—————————	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 .	1,229,500	313,613	313,613
ı	2	Savings and tempor	rary cash investments	704,685	3,298,210	3,298,210
ı	3	Accounts receivable				
ı		Less allowance for	doubtful accounts			
ı	4	Pledges receivable				
		Less allowance for	doubtful accounts			
	5	Grants receivable		L		
	6	Receivables due fro	om officers, directors, trustees, and other	ļ	Į	
		disqualified persons	s (attach schedule) (see instructions)			
	7	Other notes and loans r	receivable (attach schedule)			
		Less allowance for dou	ibtful accounts			
छ	8	Inventories for sale	or use .			
Assets	9	Prepaid expenses a	and deferred charges			
۲Į	10a	Investments-U.S and	state government obligations (attach schedule)			
Į	b	Investments—corpo	orate stock (attach schedule)			
Į	С	Investments—corpo	orate bonds (attach schedule)			
Į	11	Investments-land, buil	dings, and equipment basis			
		Less accumulated depr	reciation (attach schedule)			
	12	Investments-mortg				
	13	Investments-other	(attach schedule)			
	14	Land, buildings, and eq	uipment basis			
		Less, accumulated depr	reciation (attach schedule)			
	15	Other assets (descr				
	16	Total assets (to be	completed by all filers—see the			
		instructions Also, se	ee page 1, item l)	1,934,185	3,611,823	3,611,823
	17	Accounts payable a	ind accrued expenses .			
S	18	Grants payable				
흥	19	Deferred revenue				
Llabilities	20	Loans from officers, d	rectors, trustees, and other disqualified persons			
甅	21	Mortgages and other	er notes payable (attach schedule) .			
-	22	Other liabilities (des				
	23	Total liabilities (ad	d lines 17 through 22)	0	0	
.			ollow SFAS 117, check here	1		
Ö		and complete lines	s 24 through 26 and lines 30 and 31.	1		
ᇤ	24	Unrestricted				
ब्रु	25	Temporarily restricted	ed .	<u> </u>		
-	26	Permanently restric	ted .			
Net Assets or Fund Balances			do not follow SFAS 117, check here 🕒 🗌	1		
ᄔ		and complete lines		1	Į	
2	27		principal, or current funds .	1,934,185	3,611,823	į
뜅	28	·	irplus, or land, bldg , and equipment fund	<u> </u>		
SS	29	•	ocumulated income, endowment, or other funds			
اچ	30		fund balances (see instructions)	1,934,185	3,611,823	Į
2	31		I net assets/fund balances (see			
		instructions).		1,934,185	3,611,823	
_	rt III		anges in Net Assets or Fund Balances		 -	
1			alances at beginning of year—Part II, column (a)	, line 30 (must agree	1	
_		• •	d on prior year's return)	•	. 1	1,934,185
		amount from Part I,		•	2	1,754,883
			led in line 2 (itemize)		3	
		ines 1, 2, and 3 .		•	4	3,689,068
		eases not included in		4 II. paliuma /h) 1 0:	5	77,245
_6	iotal	net assets or fund ba	alances at end of year (line 4 minus line 5)—Par	t II, column (b), line 30	0 . [6]	3,611,823
						Form 990-PF (2016)

Part	V Capital Gains and	Losses for Tax on Investm	ent Income			
	(a) List and describe the 2-story brick wareho	(c) Date acquii (mo , day, yr				
<u>1a</u>						
<u>b</u>						
<u>c</u>						
<u>d</u> e				 		
_ _	(e) Gross sales price	(f) Depreciation allowed (or allowable)	other basis nse of sale		h) Gain or (loss) plus (f) minus (g)	
a						
<u>b</u> _						
<u>c</u>						
<u>d</u>	_					
<u>e</u>	Complete only for assets sh	owing gain in column (h) and owned	by the foundation	on 12/31/69		
	Complete only for assets sit	(i) Adjusted basis		s of col (i)		ns (Col. (h) gain minus but not less than -0-) or
	(i) FM V as of 12/31/69	as of 12/31/69		(j), if any		sses (from col (h))
a						
b						
с						
<u>d</u>						
_ <u>e</u>						
2	Capital gain net income or	Inot canital loss) 1	also enter in Par	2 1		0
3	Not abort form conital gain	• • •	, enter -0- in Par	ti, line /	2	0
3		or (loss) as defined in sections 12 line 8, column (c) (see instruction		er -O- in 1		
	Part I, line 8	ine o, column (c) (see instruction	13) 11 (1030), 61110	" " " }	3	0
Part		ler Section 4940(e) for Redu	ced Tax on N	et Investment	Income	
Was t	s," the foundation does not o	section 4942 tax on the distributate qualify under section 4940(e) Do	not complete thi	s part		Yes X No
1	Enter the appropriate amo	unt in each column for each year,	see the instruct		g any entries	(d)
Cal	Base period years endar year (or tax year beginning in)			(c) of noncharitable-use as:	(C	Distribution ratio of (b) divided by col (c))
	2015		3,082	1,303		0 915332
	2014 2013	1,191	1,973	1,895 2,195		0 628810 0 544393
	2012		2,823	2,942		0 388446
	2011		3,924	3,371		0 321515
2	Total of line 1, column (d)				2	2 798496
3	_	or the 5-year base period—divide ation has been in existence if less		2 by 5, or by the	3	0 559699
4	Enter the net value of none	charitable-use assets for 2016 from	m Part X, line 5		4	1,400,981
5	Multiply line 4 by line 3				5	784,128
6	Enter 1% of net investmen	t income (1% of Part I, line 27b)			6	0
7	Add lines 5 and 6 .				7	784,128
8	•	ns from Part XII, line 4 ter than line 7, check the box in Pa	art VI, line 1b, ar	nd complete that p	8 art using a 19	1,191,358 % tax rate See the
	Part VI instructions					Form 990-PF (2016)

The statements Regarding Activities 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? b 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 materials published or distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ NONE e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ NONE 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 3 Lift "Yes," attach detailed description of the activities 4 Lift "Yes," attach the statement required by General Instruction 7. 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 so that no mandatory directions that conflict with the state law remain in the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument so that no mandatory directions that conflict w	Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 494	iu(e), or 4948—see ins	truction	ons)		
b Domeste foundations that meet the section 4940(e) requirements in Part V, check here ▶ □ and enter 130 of Part I, line 270 c All other domeste foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 170 c All other domeste foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 170 c All other domeste foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 170 c All other domeste foundations enter 2% of line 27b Exempt foreign organizations only Others enter -0-) 2	1a	• • • • • • • • • • • • • • • • • • • •						
here ▶ ☐ and enter 1% of Part I, line 27b	b		-	•	1			
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b) Part I, line 12, col (b) Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) CredistryPayments CredistryPaym	_		v, 0110					
3 Add lines 1 and 2 Subtills A noncome) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 5 if zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 6 if zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 6 if zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 6 if zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 6 if zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 6 if zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 6 if zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 6 if zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 6 if zero or less, enter -0- Tax based on investment income. Subtract line 6 if zero manual context line 6 if zero	С	All other domestic foundations enter 2% of line 27b Exempt foreign organ	ızatıor	s enter 4% of				
Subtle A nacome) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter-0-) Tax based on investment income. Subtract hine 4 from line 3 if zero or less, enter-0- Credits/Payments 2 2016 estimated tax payments and 2015 overpayment credited to 2016 Exempt foreign organizations—Lax withheld at source Tax paid with application for extension of time to file (Form 8868) Exempt foreign organizations—Lax withheld at source Tax paid with application for extension of time to file (Form 8868) Exempt foreign organizations—Lax withheld at source Tax facility for underpayment of estimated tax. Check here ☐ if Form 2220 is attached Exter 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 ower) Tax due, if the total of lines 5 and 8 is more than line 7, enter amount owerpaid Tax due, if the total of lines 5 and 8 is more than line 7, enter amount owerpaid Tax due, if the total of lines 5 and 8, enter the amount overpaid Tax due, if the total of lines 5 and 8, enter the amount overpaid Tax due, if the total of lines 5 and 8, enter the amount overpaid Tax due, if the total of lines 5 and 8, enter the amount overpaid Tax due, if the total of lines 5 and 8, enter the amount overpaid Tax due, if the total of lines 5 and 8, enter the amount overpaid Tax due, if the total of lines 5 and 8, enter the amount overpaid Tax due, if the total of lines 5 and 8, enter the amount overpaid Tax due, if the total of lines 5 and 8, enter the amount overpaid Tax due, if the total of lines 5 and 8, enter the amount overpaid Tax due, if the total of lines 5 and 8, enter the amount overpaid Tax due, if the total of lines 5 and 8, enter the amount overpaid Tax due, if the total of lines 5 and 8, enter the amount overpaid Tax due, if the total of lines 6 and 8 and	2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundation	s only	Others enter -0-)	2_	_	0	
Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6. Credis/Payments a 2016 estimated tax payments and 2015 overpayment credited to 2016 b. Exempt foreign organizations—tax withheld at source 1. Tax paid with application for extension of time to file (Form 8868) b. Backup withholding erroneously withheld 1. Total credits and payments. Add lines 6 at through 6d b. Backup withholding erroneously withheld 1. Total credits and payments. Add lines 6 at through 6d b. Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 1. Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 1. Tax due. If the total of lines 5 and 8 is more than line 7, enter amount overpaid 1. Total credits and payments. Add of lines 5 and 8 is more than line 7, enter amount overpaid 1. Total credits and payments. Add in the 63 lines 5 and 8 is more than line 7, enter amount overpaid 1. Total credits and lines 5 and 8 is more than line 7, enter amount overpaid 1. Total credits and lines 5 and 8 is more than line 7, enter amount overpaid 1. Total credits and lines 5 and 8 is more than line 7, enter amount overpaid 1. Total credits and lines 5 and 8 is more than line 7, enter amount overpaid 1. Total credits and lines 5 and 8 is more than line 7, enter amount overpaid 1. Total credits and lines 5 and 8 is more than line 7, enter amount overpaid 1. Total credits and line 10 lo be Credited to 2017 estimated tax. 1. Total credits and line 10 lo be Credited to 2017 estimated tax. 1. Total credits and line 10 lo be Credited to 2017 estimated tax. 1. Total credits and line 10 lo be Credited to 2017 estimated tax. 1. Total credits and line 10 lo be Credited to 2017 estimated tax. 1. Total credits and line 10 lo be Credited to 2017 estimated tax. 1. Total credits and line 10 lo be Credited to 2017 estimated tax. 1. Total credits and line 10 lo be Credited to 2017 estimated tax. 1. Total credits and line 10 lo be Credited to 2017 estimated tax. 1. Total credits a	3	Add lines 1 and 2 .			3		_0	
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a 2016 estimated tax payments and 2015 overpayment credited to 2016 b Exempt foreign organizations—tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached Tax due. If the total of lines 5 and 6 is more than hine 7, enter amount owerpaid Overpayment. If line 7 is more than the total of lines 5 and 6, enter the amount overpaid File the amount of line 10 to be. Credited to 2017 estimated tax Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interviene in any political campaign? Statements Regarding Activities 1b 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 "Se's to 14 or 16, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities 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 "Se's to 14 or 16, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities Did it spend more than \$100 during the year (either directly or indirectly) for political expenditures (section 4955) imposed during the year (1) On the foundation № \$ NONE Enter the reimbursement (1 any) paid by the foundation during the year for political expenditure tax imposed on foundation managers № \$ NONE Enter the reimbursement (1 any) paid by the foundation during the year for political expenditure tax imposed on foundation managers or previously reported to the IRS, in its governing instrument, and it is			ess, er	nter -0-	5		0	<u> </u>
b Exempt foreign organizations—tax withheld at source Tax pad with application for extension of time to file (Form 8868) Backup withholding erroneously withheld Total credits and payments. Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here	6	•	1 .	I	}			1
to Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d 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 Pax due, if the total of lines 5 and 8 is more than line 7, enter amount owed Pax due, if the total of lines 5 and 8 is more than line 7, enter amount owerpaid Pax due, if the total of lines 5 and 8 is more than line 7, enter amount owerpaid Pax due, if the total of lines 5 and 8 is more than the 7, enter amount owerpaid Pax due, if the total of lines 5 and 8 is more than the 7, enter amount owerpaid Pax due, if the total of lines 5 and 8 is more than 18	_			663	4			
d Backup withholding erroneously withheld 7 Total credits and payments Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Verpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be Credited to 2017 estimated tax. 11 Enter the amount of line 10 to be Credited to 2017 estimated tax. 12 Fit VII.A Statements Regarding Activities 13 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? 12 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? 13 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 and copies of any materials published or distributed by the foundation menagers less in NoNE 10 Did the foundation file Form 1120-POL for this year? 11 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation managers less in NoNE 11 Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers less in NoNE 12 Has the foundation have any changes, not previously reported to the IRS; in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 14 August and the statement required by General Instruction 7. 15 Are the requirements of section 503(e) (relating to sections 4941 through 4945) satisfied either 16 Ay and the frectively amends the governing instrument so that no mandatory di			_		-			
Total credits and payments Add lines 6a through 6d 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 □ Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid □ Overpayment. If line 7 is more than line 7, enter amount owed □ Dung 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? □ 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 1 aor 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities and copies of any materials published or distributed by the foundation monentor with the activities on foundation file Form 1120-POL for this year? □ Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation № \$ NONE (2) On foundation managers ▶ \$ NONE □ Has the foundation happers ▶ \$ NONE (2) On foundation managers ▶ \$ NONE □ The activities on foundation managers ▶ \$ NONE □ The activities of incorporation, or bylaws, or other similar instruments? If "Yes," attach a detailed description of the activities of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes □ The foundation happers □ The activities of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes □ The foundation happers □ The activities □ The propers □ The foundation happers □ The foundation flave or similar instruments? If "Yes," attach a conformed copy of the changes □ The foundation flave unrelated business gross incorporation or more during the year? If "Yes," attach he activates □ The foundation flave or similar instruments of		•	-		-			
Enter any penalty for underpayment of estimated tax. Check here		· · · · · · · · · · · · · · · · · · ·	<u>60</u>		-		662	 -
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MINNESOTA 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? If "No," attach explanation 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)? If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses. 10 X	7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," co	mplete	Part II, col (c), and Part XV		7	X	
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? If "No," attach explanation 1 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)? If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses. 10 X	8a	Enter the states to which the foundation reports or with which it is register	ed (see	e instructions)	•			
(or designate) of each state as required by General Instruction G? If "No," attach explanation 1 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)? If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses. 10 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)? If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses. 10 X	b	· · · · · · · · · · · · · · · · · · ·		•	eral		<u> </u>	<u> </u>
or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X				•		_8b	X	<u> </u>
"Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	9			_		<u> </u>	 	
Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses. 10 X			(see I	nstructions for Part XIV)	? If	1	1	
names and addresses						9	├ ─	 X
	10	• • • • • • • • • • • • • • • • • • • •	res," a	ttach a schedule listing	their	40	1	U
		names and addresses .	<u> </u>				<u> </u>	

Part	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 meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11	Yes	No 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		Χ
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► http://donaldson.com/en/about/community/foundation.html			
14	The books are in care of ▶ Paul Way Telephone no ▶ 952-887	3131		
	Located at ► 1400 W 94th St, Bloomington, MN ZIP+4 ► 55431			
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		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		<u> </u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If			
Dord	"Yes," enter the name of the foreign country			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required		Vac	
4.	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 X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No]
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(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			Ì
	termination of government service, if terminating within 90 days)			
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)?	1b	N/A	
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2016?	1c		X
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))	İ		
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? Yes Verification No.			
b	If "Yes," list the years 20 , 20 , 20, 20	1		
D	(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		X
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, 20, 20	1		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			ľ
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or	1		
	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	ł		
	of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	- <u>-</u> -		
4-	foundation had excess business holdings in 2016)	3b	N/A	
4a h	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?.	<u>4a</u>		×
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		×
	The first section of the first			

Form 9	90-PF (2016)	DONALDSON FOUNDATION							_	41-60	052950	_P	age 6
Par	t VII-B	Statements Regarding Activities			4720 N	/lay Be R	equire	d (co	ontin	rued)			
5a		e year did the foundation pay or incur any on propaganda, or otherwise attempt to i			section	4945(e))?			Yes	X No	,		ı
		nce the outcome of any specific public ele		see section 4	955), or	to carry or	١,		N	[V] N.	1		
		ly or indirectly, any voter registration drive de a grant to an individual for travel, study		er cimilar nur	, nagas?	•	•	片	Yes Yes	X No	1		
		de a grant to an individual for traver, study de a grant to an organization other than a		•	•		l in	L	162	[V] MC	'		!
		on 4945(d)(4)(A)? (see instructions)	CHAIRC	ible, etc , orga		ii described			Yes	X No	,		
		de for any purpose other than religious, ch ses, or for the prevention of cruelty to chi			terary, o	or education	nal		Yes	X No	.		
b		swer is "Yes" to 5a(1)–(5), did any of the t		-	-		-		cribe	d ın			
	-	ons section 53 4945 or in a current notice	_	-		•	ructions	5)?		. [7]	5b	N/A	
С	If the ans	tions relying on a current notice regarding wer is "Yes" to question 5a(4), does the fo it maintained expenditure responsibility fo	oundati	on claim exer			(Yes	► ∐ □ No			
	If "Yes," a	attach the statement required by Regulation	ons sec	ction 53 4945						_			
6a		oundation, during the year, receive any fur onal benefit contract?	nds, dır	ectly or indire	ctly, to	pay premiu	ms		Yes	X No			
b		onal benefit contract? oundation, during the year, pay premiums,	directi	v or indirectly	on a n	ersonal her	nefit cor			[V] MO	6b	}	X
D		o 6b, file Form 8870	uncon	y or maneouy	, on a p	ersonal ber	ieni coi	iti act	. :		0.5		_^_
7a	At any time	e during the tax year, was the foundation a pa	arty to a	prohibited tax	shelter t	ransaction?			Yes	X No			
b		lid the foundation receive any proceeds o								11 = 1		N/A	
Par		nformation About Officers, Directorn Contractors	ors, II	rustees, Fo	undati	on Mana	gers, I	нıgn	Iy P	aid En	ipioye	es,	
1		fficers, directors, trustees, foundation	manaq	ers and their	compe	ensation (s	ee inst	ructi	ons)				
		(a) Name and address	(b) Titl	le, and average ars per week ted to position	(c) Co (lf (mpensation not paid, nter -0-)	(d) empl	Contri oyee b ferred	bution enefit	s to plans	(e) Expe	ense acc allowan	
SEE	ATTACHED)				0							
)						
							}						
2	Compens	sation of five highest-paid employees (other t	han those in	cluded	on line 1–	-see ins	struc	tions	s). If no	ne, ent	er	
		nd address of each employee paid more than \$50,000	<u>-</u>	(b) Title, and a hours per v devoted to p	/eek	(c) Compe	nsation	emp plans	oloyee	deferred	(e) Expe	ense acc allowan	
NON	Ξ												
							·						
							·						
								 					
							·		-				<u>.</u>

Form **990-PF** (2016)

	nformation About Officers, Directors, Trustees, Foundation Managers, Hig nd Contrac <u>tors (continued)</u>	ghly Paid Employees,
	est-paid independent contractors for professional services (see instructions). If non	ne, enter "NONE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of ser	
NONE		
,		
		
·		
,		
Total number of	others receiving over \$50,000 for professional services	
Part IX-A	Summary of Direct Charitable Activities	
	s four largest direct charitable activities during the tax year. Include relevant statistical information such as the numb other beneficianes served, conferences convened, research papers produced, etc	ber of Expenses
1 SEE ATTAC	HED	
2		
2		
3		
4		
~		
Part IX-B	Summary of Program-Related Investments (see instructions)	
	rgest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		
2		
All other program :	stated investments. See instructions	
3	elated investments. See instructions	
·		
Total. Add lines 1	through 3 .	▶ (
		Form 990-PF (2016

Part	Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)	gn founda	tions, .
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	1,422,316
b	Average of monthly cash balances	1b	
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	1,422,316
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	<u> </u>	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1,422,316
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see		
	instructions)	4	21,335
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,400,981
6	Minimum investment return. Enter 5% of line 5	6	70,049
Part	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	70,049
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016 (This does not include the tax from Part VI)	7	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	70,049
4	Recoveries of amounts treated as qualifying distributions	4	· · · · · · · · · · · · · · · · · · ·
5	Add lines 3 and 4	5	70,049
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,		
	<u>line 1</u>	7	70,049
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	1,191,358
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	
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	1,191,358
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		.,,
-	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,191,358
-	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating who		
	qualifies for the section 4940(e) reduction of tax in those years		

Part	XIII Undistributed Income	(see instructions	i)			
_1	Distributable amount for 2016 from	n Part XI,	(a) Corpus	(b) Years pnor to 2015	(c) 2015	(d) 2016
_	line 7	Ì			ļ	70,049
2	Undistributed income, if any, as of the	end of 2016				
a	Enter amount for 2015 only				0	ļ
b	· · · · ——	20, 20				
3	Excess distributions carryover, if a	1				
a	From 2011	931,489	i		ł	i
b	From 2012	996,815			1	
С	From 2013	1,085,274			į.	ł
d	From 2014	1,073,469			Į.	
е	From 2015	1,128,887			ł	į .
f	Total of lines 3a through e .		5,215,934			
4	Qualifying distributions for 2016 from					
	line 4 ▶ \$ 1,191,358	•				
а	Applied to 2015, but not more than					
b	Applied to undistributed income of	prior years	i			i '
	(Election required—see instruction	ıs)				
С	Treated as distributions out of corprequired—see instructions)	ous (Election	ľ		i I	
d	Applied to 2016 distributable amou	unt .				70,049
е	Remaining amount distributed out	,	1,121,309			,
5	Excess distributions carryover app	· · · · · · · · · · · · · · · · · · ·	.,			
	(If an amount appears in column (r				
	amount must be shown in column					
6	Enter the net total of each columnindicated below:	` ' '				
9	Corpus Add lines 3f, 4c, and 4e S	Subtract line 5	6,337,243			
a	Prior years' undistributed income	r	0,337,243		 	
þ	line 4b from line 2b	Subtract		0		
C	Enter the amount of prior years' ur	ndistributed				
	income for which a notice of defici-	ency has	ĺ			
	been issued, or on which the secti	on 4942(a)				
	tax has been previously assessed					
d	Subtract line 6c from line 6b Taxal	ble				
	amount—see instructions .					
е	Undistributed income for 2015 Su	btract line				
	4a from line 2a Taxable amount—	-see				
	instructions				0	
f	Undistributed income for 2016 Su	btract lines				
	4d and 5 from line 1 This amount	must be	}			
	distributed in 2017					o
7	Amounts treated as distributions o	ut of corpus				
	to satisfy requirements imposed by	y section				
	170(b)(1)(F) or 4942(g)(3) (Electio	n may be				
	required—see instructions).	•	Į			
8	Excess distributions carryover from	n 2011 not				
	applied on line 5 or line 7 (see inst		931,489			ĺ
9	Excess distributions carryover t	· · · · · · · · · · · · · · · · · · ·				
	Subtract lines 7 and 8 from line 6a	· ·	5,405,754			
10	Analysis of line 9	İ				
а	Excess from 2012	996,815				
b	Excess from 2013 .	1,085,274				
c	Excess from 2014	1,073,469	į			
ď	Excess from 2015	1,128,887		ł		
e	Excess from 2016	1,121,309		į		

Part XV Supplementary Information (conting Grants and Contributions Paid During	nued)			~,	- Tugo
3 Grants and Contributions Paid During	the Year or Approve	ed for Fut	ture Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	ı	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution		
a Paid during the year SEE ATTACHED	or substantial contributor	recipient			1,191,358
Total	·	<u> </u>	<u> </u>	3a	1,191,358
b Approved for future payment			·		
Total			·	3b	C

e e i	LVAI	 Analysis of Income-Producing Ac 					
		s amounts unless otherwise indicated		isiness income	Excluded by sect	ion 512, 513, or 514	- (0)
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1	Prog	ram service revenue		<u> </u>			(Sec insudedons)
	a _				ļ		
	b _				 		
	с _						
	<u> </u>		 				
	f –						
	 g F	ees and contracts from government agencies					<u> </u>
2	_	bership dues and assessments					,
3		est on savings and temporary cash investments			01	3,103	
4	Divid	ends and interest from securities					
5	Net r	ental income or (loss) from real estate:	., ,	t to it was	, k- π, +	海門 人口子 礼	智能性性 50%
		Debt-financed property	L				
		lot debt-financed property .					
6		ental income or (loss) from personal property	<u> </u>		<u></u>		
7		r investment income .	<u></u>		-		
8		or (loss) from sales of assets other than inventory		ļ <u>.</u>			
9		ncome or (loss) from special events			 		
10		s profit or (loss) from sales of inventory					
11	b b	r revenue. a	 				
	c –					 	
	d –				 		<u></u>
	е		1	ľ	ľ		
12	e Subte	otal Add columns (b), (d), and (e)	MINERAL H	0	JENY-COMMI	3,103	C
		otal Add columns (b), (d), and (e) l. Add line 12, columns (b), (d), and (e)	CONTRACTOR L	. 0		3,103	3,103
13 (See	Total work	l. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations	s)				
13 (See Par	Total works	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A	s) Accomplishm	ent of Exempt	Purposes	13	
13 (See Par Lin	Total works it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon	(S) (Accomplishm) ne is reported in c	ent of Exempt	Purposes	13	3,103
13 (See Par Lin	Total works	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A	(S) (Accomplishm) ne is reported in c	ent of Exempt	Purposes	13	3,103
13 (See Par Lin	Total works it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon	(S) (Accomplishm) ne is reported in c	ent of Exempt	Purposes	13	3,103
13 (See Par Lin	Total works it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon	(S) (Accomplishm) ne is reported in c	ent of Exempt	Purposes	13	3,103
13 (See Par Lin	Total works it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon	(S) (Accomplishm) ne is reported in c	ent of Exempt	Purposes	13	3,103
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13 (See Par Lin	Total works it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon	(S) (Accomplishm) ne is reported in c	ent of Exempt	Purposes	13	3,103
13 (See Par Lin	Total works it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon	(S) (Accomplishm) ne is reported in c	ent of Exempt	Purposes	13	3,103
13 (See Par Lin	Total works it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon	(S) (Accomplishm) ne is reported in c	ent of Exempt	Purposes	13	3,103
13 (See Par Lin	Total works it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon	(S) (Accomplishm) ne is reported in c	ent of Exempt	Purposes	13	3,103
13 (See Par Lin	Total works it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon	(S) (Accomplishm) ne is reported in c	ent of Exempt	Purposes	13	3,103
13 (See Par Lin	Total works it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon	(S) (Accomplishm) ne is reported in c	ent of Exempt	Purposes	13	3,103
13 (See Par Lin	Total works it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon	(S) (Accomplishm) ne is reported in c	ent of Exempt	Purposes	13	3,103
13 (See Par Lin	Total works it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon	(S) (Accomplishm) ne is reported in c	ent of Exempt	Purposes	13	3,103
13 (See Par Lin	Total works it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon	(S) (Accomplishm) ne is reported in c	ent of Exempt	Purposes	13	3,103
13 (See Par Lin	Total works it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon	(S) (Accomplishm) ne is reported in c	ent of Exempt	Purposes	13	3,103
13 (See Par Lin	Total works it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon	(S) (Accomplishm) ne is reported in c	ent of Exempt	Purposes	13	3,103
13 (See Par Lin	Total works it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon	(S) (Accomplishm) ne is reported in c	ent of Exempt	Purposes	13	3,103
13 (See Par Lin	Total works it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon	(S) (Accomplishm) ne is reported in c	ent of Exempt	Purposes	13	3,103
13 (See Par Lin	Total works it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon	(S) (Accomplishm) ne is reported in c	ent of Exempt	Purposes	13	3,103
13 (See Par Lin	Total works it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon	(S) (Accomplishm) ne is reported in c	ent of Exempt	Purposes	13	3,103
13 (See Par Lin	Total works it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon	(S) (Accomplishm) ne is reported in c	ent of Exempt	Purposes	13	3,103
13 (See Par Lin	Total works it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon	(S) (Accomplishm) ne is reported in c	ent of Exempt	Purposes	13	3,103

Form 99	0-PF (2	016) DONALD	SON FOUNDATION	I					41-60	52950	Pa	ge 13
Part 1	XVII		Regarding Trans	sfers To a	ınd Transactio	ns and R	elationship	os Wit				
a b	in ser politic Trans (1) C (2) C Othe (1) S (2) P (3) R (4) R (5) L (6) P	ction 501(c) of the cal organizations' sfers from the repeash other assets in transactions ales of assets to urchases of asset ental of facilities, reimbursement aroans or loan guar erformance of se	rectly or indirectly elected (other than so conting foundation to continuous from a noncharital equipment, or other trangements	mpt organizable exempt assets	c)(3) organization cable exempt organization organization ising solicitations	ns) or in secondization of			scribed	1a(1) 1a(2) 1b(1) 1b(2) 1b(3) 1b(4) 1b(5) 1b(6)	Yes	
d	If the value	answer to any of the of the goods, other	he above is "Yes," con er assets, or services of or sharing arrangeme	mplete the fogiven by the	llowing schedule. reporting foundation	Column (b) son. If the four	ndation receiv	ed less	than fair mark	ket	<u> </u>	
(a) Line		(b) Amount involved	(c) Name of nonc				scription of trans			anng arrar	ngemer	its
	desc	ribed in section 50	tly or indirectly affilia 01(c) of the Code (of following schedule					nızatıor	ns	Yes	□ N	lo
		(a) Name of organ	ızatıon		(b) Type of organizatio	n		(c) Des	scription of relation	onship		
Sign Here	correc		lare that I have examined this re on of preparer (other than taxpa	ayer) is based on a	all information of which pre	parer has any kno President		nowledge a	May the If	RS discuss reparer shouctions)?		<u>~</u>
Paid Prepai Use O	rer	Print/Type preparer's Firm's name Firm's address ▶			s signature		Date	Firm's E		PTIN		

Firm's address 🕨

Phone no

Schedule B

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

Schedule of Contributors

OMB No 1545-0047

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. Name of the organization Employer identification number

Organiz	ation type (check one)		•	
Filers o	f:	Sec	tion:	
Form 99	0 or 990-EZ		501(c)() (enter number) organization	
			4947(a)(1) nonexempt charitable trust not treated as a private found	lation
			527 political organization	
Form 99	0-PF	X	501(c)(3) exempt private foundation	
			4947(a)(1) nonexempt charitable trust treated as a private foundation	n
			501(c)(3) taxable private foundation	
				, <u>, , , , , , , , , , , , , , , , , , </u>
	nly a section 501(c)(7),		by the General Rule or a Special Rule . (10) organization can check boxes for both the General Rule and a	Special Rule See
General	Rule			
		opert	m 990, 990-EZ, or 990-PF that received, during the year, contribution y) from any one contributor Complete Parts I and II See instructions is	
Special	Rules			
	regulations under section 13, 16a, or 16b, and that	ons 50 at rec	d in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % (9(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or served from any one contributor, during the year, total contributions of the one (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Com	990-EZ), Part II, line the greater of (1)
	contributor, during the y	ear, t	d in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receptal contributions of more than \$1,000 exclusively for religious, charities, or for the prevention of cruelty to children or animals. Complete the	able, scientific,
	contributor, during the y contributions totaled mo during the year for an e	ear, one the exclusion of the exclusion	d in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receiventributions exclusively for religious, charitable, etc., purposes, but notes \$1,000. If this box is checked, enter here the total contributions the vely religious, charitable, etc., purpose. Don't complete any of the particular process of the particular process of the particular process of the year.	no such at were received irts unless the

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file 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)

					•
Schedule I	B (Form 9	90. 990	-EZ. or	990-PF)	(2016)

Page	2
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Name of organization and the second s			Employer identification number	
Part I	Contributors (See instructions) Use duplicate co	pies of Part I if additional space	s needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1	Donaldson Company, Inc 1400 W 94th Street Bloomington MN 55431 Foreign State or Province Foreign Country	\$ 2,950,000	Person X Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)	

Itemized Information Schedule Attached to Treasury Form 990-PF Return for the Period August 1, 2016 - July 31, 2017

THE DONALDSON FOUNDATION 1400 West 94th Street Bloomington, Mn 55431 41-6052950

Part I

Line 23-Other Expenses

	0//31/1/
Minnesota Annual Report filing fee	25
Scholarship program management fees	6,630
Misc expenses	207_
Total Other Expenses	6,862

Part VIII

Line 1- Officers, Directors					
Name:	Title	Address	Compensation	Benefits	Account
Paul Way	President	1400 W. 94th Street., Mpls., Mn 55431	NONE	NONE	NONE
Nathalye Blok	Secretary	1400 W. 94th Street., Mpls., Mn 55431	NONE	NONE	NONE
Jeff Jones	Treasurer	1400 W. 94th Street., Mpls ,Mn 55431	NONE	NONE	NONE
Jeremy Beuch	Director	1400 W 94th Street , Mpls ,Mn 55431	NONE	NONE	NONE
Jon Buchberger	Director	1400 W. 94th Street., Mpls., Mn 55431	NONE	NONE	NONE
Sarah Kerber	Director	1400 W. 94th Street , Mpls., Mn 55431	NONE	NONE	NONE
John Knop	Director	1400 W. 94th Street., Mpls., Mn 55431	NONE	NONE	NONE
Cassie Light	Director	1400 W. 94th Street., Mpls ,Mn 55431	NONE	NONE	NONE
Danielle Mueller	Director	1400 W. 94th Street., Mpls., Mn 55431	NONE	NONE	NONE
Emily Nykiel	Director	1400 W. 94th Street , Mpls., Mn 55431	NONE	NONE	NONE
Hong Zhu	Director	1400 W. 94th Street., Mpls., Mn 55431	NONE	NONE	NONE