Form 990-PF

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. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

For calendar year 2017 or tax year beginning Name of foundation A Employer identification number HUNTER FAMILY FOUNDATION INC 27-4376898 Number and street (or P O box number if mail is not delivered to street address) B Telephone number 80 SOUTH 8TH STREET 4924 612-338-2799 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check her MINNEAPOLIS, MN 55402 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust ____ Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method: X Cash Accrual F If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 240,031. (Part I, column (d) must be on cash basis.) ▶\$ Analysis of Revenue and Expenses
(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) Part I (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable purposes (cash basis only) expenses per books income Contributions, gifts, grants, etc., received N/A 2 Check If the foundation is not required to attach Sch B Interest on savings and temporary cash investments 3. 3. STATEMENT Dividends and interest from securities 5a Gross rents D Net rental income or (loss) 68 Net gain or (loss) from sale of assets not on line 10 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income Total. Add lines 1 through 11 12 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees
c Other professional fees VED 17 Interest 18 Taxes MAR 2 X ZU18
19 Depreciation and depletion Taxes 20 Occupiancy Travel, conferences, and meetings 21 22 Printing and publications STMT 2 500. 23 Other expenses 0 0. 24 Total operating and administrative 500. 0. expenses. Add lines 13 through 23 0 25 Contributions, gifts, grants paid 0. 0. 26 Total expenses and disbursements. Add lines 24 and 25 500 0 0. 27 Subtract line 26 from line 12: 2 Excess of revenue over expenses and disbursements <497.b b Net investment income (if negative, enter -0-) з. c Adjusted net income (if negative, enter -D-) $\overline{N/A}$

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions.

| Par | Balance Sheets Attached schedules and amounts in the description | Beginning of year | End of | |
|---|---|--------------------|----------------|---------------------------|
| <u> </u> | Column should be for end-of-year amounts omy | (a) Book Value | (b) Book Value | (c) Fair Market Value |
|] 1 | Cash - non-interest-bearing | 278. | 240,031. | 240,031. |
| 2 | | <u> </u> | | |
| 3 | | | | |
| | Less: allowance for doubtful accounts | | | |
| 4 | Pledges receivable | | | |
| 1 | Less: allowance for doubtful accounts | | | |
| 5 | | | | |
| 6 | ,,,,,,,, | [| 1 | |
| - | disqualified persons | | | |
| 7 | Cities Hotes and Journs (Section) | | 1 | |
| - [| Less: allowance for doubtful accounts | <u> </u> | | |
| 왕 왕 | | | | |
| Assets | Prepaid expenses and deferred charges | | | |
| 110 | a Investments - U.S. and state government obligations | | | |
| | b Investments - corporate stock | | | |
| ł | c Investments - corporate bonds | | | |
| 11 | Investments - land, buildings, and equipment basis | [| 1 | |
| | Less accumulated depreciation | | | |
| 12 | | | | |
| 13 | | | | |
| 14 | Land, buildings, and equipment basis | | į. | 1 |
| \ | Less accumulated depreciation | | | |
| 15 | ` / | <u> </u> | | |
| 16 | Total assets (to be completed by all filers - see the | 070 | 040 031 | 040 021 |
| - _ | instructions. Also, see page 1, item I) | 278. | 240,031. | 240,031. |
| | Accounts payable and accrued expenses | | | |
| 18 و ا ي | ' - | | | |
| § 19 <u>≠</u> 20 | | | | |
| Liabilities 20 21 21 22 22 22 22 22 22 22 22 22 22 22 | , | | | |
| روا ٿ | Other liabilities (describe > | | | |
| |) | | | |
| 23 | Total liabilities (add lines 17 through 22) | 0. | 0. | |
| | Foundations that follow SFAS 117, check here | | | |
| Ì | and complete lines 24 through 26, and lines 30 and 31. | | | |
| 24 25 | - · | | Ì | |
| Ē 25 | Temporarily restricted | | | |
| B 26 | Permanently restricted | | | |
| 26 26 | Foundations that do not follow SFAS 117, check here | | | |
| [] | and complete lines 27 through 31. | | | |
| Net Assets or 27 28 29 30 | . · · · · · · · · · · · · · · · · · · · | 0. | 0. | |
| 28 | Paid-in or capital surplus, or land, bldg., and equipment fund | 0. | 0. | |
| æ 29 | Retained earnings, accumulated income, endowment, or other funds | 278. | 240,031. | |
| 를 30 | Total net assets or fund balances | 278. | 240,031. | |
| | į (| | | |
| 31 | Total liabilities and net assets/fund balances | 278. | 240,031. | |
| Part | III Analysis of Changes in Net Assets or Fund B | alances | | _ |
| 1 Tot | I not accept or fund halomans at hadroning of year. Dort II galarys (a) had | | | |
| | il net assets or fund balances at beginning of year - Part II, column (a), line is st agree with end-of-year figure reported on prior year's return) | 3U | | 278. |
| | er amount from Part I, line 27a | | 1 2 | <497.> |
| | er increases not included in line 2 (itemize) CASH GIFTS | | 3 | 240,250. |
| | lines 1, 2, and 3 | | | 240,230. |
| | reases not included in line 2 (itemize) | | 5 | 0. |
| | I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co | llumn (b), line 30 | 6 | 240,031. |
| | | | | Form 990-PF (2017) |

| (a) List and describe 2-story brick wa | | erty sold (for exam | ple, real esta | | l b | How at - Purc - Don | nase | (c) Date (mo., d | acquired lay, yr.) | (d) Date sold (mo., day, yr.) |
|---|--|---|----------------------------------|--------------------------------------|--------------|---------------------------|-------------|---------------------|-------------------------------|---|
| 1a | | | | | | | | | | |
| b NO | NE | | | | | | | | | |
| <u>c</u> | | | | | <u> </u> | | | | | |
| <u>d</u> | | | | | L. | | | | | |
| . e | | | | | Ĺ., | | | | | <u></u> |
| (e) Gross sales price | (f) Depreciati (or allow | | | st or other basis expense of sale | | | | | ain or (loss s (f) minus | |
| <u>a</u> | | | | | { | | | | | |
| C | | | | | | | | | | |
| d | | | | | | | | | | |
| e | | | | | | | | | | |
| Complete only for assets showin | g gain in column (f |) and owned by th | e foundation | on 12/31/69. | | | (1) | Gains (C | ol. (h) gain | minus |
| (i) FMV as of 12/31/69 | (j) Adjuste as of 12/ | | | cess of col. (1) | | | | (k), but r | not less that (from col. (| n -0-) or |
| a | | | | | _ | | | | | |
| b | | | | | _ | | | | | |
| С | | | | | | | | | | |
| d | | | | | | | | | | |
| е | · | | | | | | | | | |
| 2 Capital gain net income or (net ca | pital loss) | lf gain, also enter i lf (loss), enter -0- i | n Part I, line n Part I, line | 7 7 | } | 2 | | | | |
| 3 Net short-term capital gain or (los | • | | | | <u> </u> | | | | | |
| If gain, also enter in Part I, line 8, | | Mono TEEE(0) and | (0). | |) | | | | | |
| If (loss), enter -0- in Part I, line 8 Part V Qualification U | | | | | Ŋ | 3 | | | | |
| If section 4940(d)(2) applies, leave th Was the foundation liable for the sect If "Yes," the foundation doesn't qualify | ion 4942 tax on the under section 494 | O(e). Do not comp | lete this par | t. | | _ | | | | Yes X No |
| 1 Enter the appropriate amount in e | ach column for eac | h year; see the ins | tructions be | fore making any e | ntries | | | | | |
| (a) Base period years Calendar year (or tax year beginnir | g in) Adjust | (b) ed qualifying distri | butions | Net value of no | (c) nchar | ıtable- | | | Distrib (col. (b) div | (d) ution ratio ided by col. (c)) |
| 2016 | | | 0. | | | | 538 | | | .000000 |
| 2015 | | 30 | ,000. | | | | 347 | | | 86.455331 |
| 2014 | | | ,000. | | | | 156. | | | 192.307692 |
| 2013 | | 3.0 | ,000. | | | | 324 · 506 · | | | 92.592593 59.288538 |
| 2012 | | 30 | ,000. | | | | 506. | ` | | 39.400330 |
| 2 Total of line 1, column (d) | | | | | | | | 2 | | 430.644154 |
| 3 Average distribution ratio for the 5 | -vear base period - | divide the total on | line 2 by 5.0 |), or by the numbe | er of v | ears. | | + | | |
| the foundation has been in existen | | | | .,, | u. , | | | 3 | | 86.128831 |
| 4 Enter the net value of noncharitable | e-use assets for 20 | 17 from Part X, lin | e 5 | | | | | 4 | | 118,353. |
| 5 Multiply line 4 by line 3 | | | | | | | | 5 | 1 | 0,193,606. |
| 6 Enter 1% of net investment incom | e (1% of Part I, line | 27b) | | | | | | 6 | | 0. |
| 7 Add lines 5 and 6 | | | | | | | | 7 | 1 | 0,193,606. |
| 8 Enter qualifying distributions from | Part XII, line 4 | | | | | | | 8 | | 0. |
| If line 8 is equal to or greater than See the Part VI instructions. | line 7, check the bo | ox in Part VI, line 1 | b, and comp | lete that part using | g a 1% | % tax r | ate. | | | |

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|--|--------------------------|---------------------|----------|-------|---------------|----------------|---------------|--------------|---|
| Part VI Excise Tax Based on Investment Income (Section 4 | | | or 4 | 948 | - see II | nstru | ctio | ns) | |
| 1a Exempt operating foundations described in section 4940(d)(2), check here 🕨 💹 ar | nd enter "N/A" on I | line 1. | | Ì | | | | | |
| Date of ruling or determination letter: (attach copy of letter if | necessary-see in | nstructions) | |] . | _ | | | | |
| b Domestic foundations that meet the section 4940(e) requirements in Part V, check here | and e | nter 1% | | 1 | | | | 0. | |
| of Part I, line 27b | | ì | | | | | | | |
| c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter | r 4% of Part I, line | e 12, col. (b). 🗦 | | | | | | | |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only | y; others, enter -0 | -) | | 2 | | | | 0. | |
| 3 Add lines 1 and 2 | | | | 3 | | | | 0. | |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only | ly, others, enter -0 |)-) | | 4 | | | | 0. | |
| 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | | | | 5 | | | | 0. | |
| 6 Credits/Payments: | | | | | | | | | |
| a 2017 estimated tax payments and 2016 overpayment credited to 2017 | 6a | | 0. | | | | | ì | |
| b Exempt foreign organizations - tax withheld at source | 6b | | 0. | | | | | | |
| c Tax paid with application for extension of time to file (Form 8868) | 6c | | 0. | | | | | | |
| d Backup withholding erroneously withheld | 6d | | 0. | | | | | ŧ | |
| 7 Total credits and payments. Add lines 6a through 6d | | | | 7 | | | | 0. | |
| 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is | attached | | | 8 | | | | 0. | |
| 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | | ▶ | 9 | | | | 0. | |
| 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpai | d | | • | 10 | | | | | |
| 11 Enter the amount of line 10 to be: Credited to 2018 estimated tax | | Refunde | d 🖊 | 11 | | | | | |
| Part VII-A Statements Regarding Activities | | | | | | | | | |
| 1a During the tax year, did the foundation attempt to influence any national, state, or local le | egislation or did it | participate or inte | ervene | ın | | | Yes | No | |
| any political campaign? | - | | | | Ī | 1a | | X | |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political pu | rposes? See the II | nstructions for th | e defin | ition | 1 | 1b | | X | |
| If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copi | - | | | | 1 | 1 | | | |
| distributed by the foundation in connection with the activities. | , | | | | 1 | l | | | |
| c Did the foundation file Form 1120-POL for this year? | | | | | 1 | 1c | | X | |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during | the year: | | | | <u> </u> | | | | |
| (1) On the foundation. > \$ 0 • (2) On foundation manage | | | 0. | | 1 | 1 | | | |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expi | | sed on foundation | | | | ì | | | |
| managers. ▶ \$ 0. | | | • | | | - 1 | | | |
| 2 Has the foundation engaged in any activities that have not previously been reported to the | ne IRS? | | | | - 1 | 2 | | Х | |
| If "Yes," attach a detailed description of the activities. | | | | | 1 | - | | | |
| 3 Has the foundation made any changes, not previously reported to the IRS, in its governi | no instrument, art | ticles of incorpora | ition. o | r | - 1 | l | | , | |
| bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | ing mondimond and | alongo or moorpore | | • | - 1 | 3 | | х | |
| 4a Did the foundation have unrelated business gross income of \$1,000 or more during the | vear? | | | | 1 | 48 | | X | |
| b If "Yes," has it filed a tax return on Form 990-T for this year? | , , , , | | | N | /A | 4b | | | |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year | ear? | | | | · } | 5 | | X | |
| If "Yes," attach the statement required by General Instruction T | , u. | | | | 1 | - | | <u> </u> | |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfie | d either | | | |] | - 1 | | l | |
| By language in the governing instrument, or | 4 011.101. | | | | 1 | Ì | | 1 | |
| By state legislation that effectively amends the governing instrument so that no manda | atory directions th | at conflict with th | e state | law | 1 | ì | | | |
| remain in the governing instrument? | atory an action to | ac dominor man an | o otato | 1411 | 1 | 6 | X | ĺ | |
| 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," co | omniete Part II. co | ol (c) and Part X\ | , | | } | 7 | X | | |
| The state of the s | mpioto i are ii, co | n. (o), and i are A | • | | } | - | | | |
| 8a Enter the states to which the foundation reports or with which it is registered. See instru | ctions - | | | | 1 |] | | | |
| FL | | | | |) |] | | | |
| b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the | e Attorney Genera | al (or decionate) | | |] |) | | | |
| of each state as required by General Instruction G? If "No," attach explanation | o Automoy Gollele | ar (or avaignate) | | | 1 | 8b | x | | |
| 9 Is the foundation claiming status as a private operating foundation within the meaning of | f section 4949/iV/ | 3) or 4942/i)/5) fo | or cale | ndar | } | | - | | |
| year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," (| | | or value | iiuai | } | 9 | | x | • |
| 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a set | only letter the | man and add | | | } | 10 | | X | D |
| Tarachia dabatantan danah dan dan mg tilo tax your in 185, attach a sch | recure institut their ha | ines and addresses | | | 1 | <u> </u> | | | |

| P | art 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 | 1 | 1 | |
| | section 512(b)(13)? If "Yes," attach schedule. See instructions | 11 | <u> </u> | X |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? | 1 | |) |
| | If "Yes," attach statement. See instructions | 12 | <u> </u> | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | X | L |
| | Website address ► N/A | | | |
| 14 | The books are in care of ► ROBERT W. HORSTMAN Located at ► 80 S EIGHTH ST, SUITE 4924, MINNEAPOLIS, MN ZIP+4 ► 55 | | 799 | |
| 4- | · · · · · · · · · · · · · · · · · · · | 402 | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here | N7 | /A | ٠ |
| 16 | and enter the amount of tax-exempt interest received or accrued during the year At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, | | Yes | No |
| 10 | securities, or other financial account in a foreign country? | 16 | 103 | X |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the | -10 | | - |
| | foreign country | ł | | |
| Pa | art 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 |
| 18 | a 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? | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | |
| | a disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | 1 1 | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | 1 | | |
| | (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 X No | l | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" | į į | | |
| | 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 X No | ļ l | | |
| | b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | | | |
| ٠ | section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A | 16 | | |
| | 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 | 1 1 | | ١. |
| | before the first day of the tax year beginning in 2017? | 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)): | | | , |
| a | At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning | } | | |
| | before 2017? | } | | |
| | If "Yes," list the years \blacktriangleright ,,,,, | 1 1 | | |
| 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 | 1 | | |
| | 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 | | |
| | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | | | |
| 2. | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | | |
| Jä | during the year? Wes X No | | | |
| H | of "Yes," did it have excess business holdings in 2017 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 2017.) N/A | 3b | | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 48 | | X |
| | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that | <u> </u> | | |
| | had not been removed from jeopardy before the first day of the tax year beginning in 2017? | 4 <u>b</u> | | X |
| | | | | |

| rorm | 99 | U-l | 1 | (20 | " |
|------|----|-----|---|-----|---|
| | = | 1/ | 7 | ~ | 7 |

| Form 990-PF (2017) HUNTER FAMILY FOUNDATION | | | 27-43768 | 398 | | Page 6 |
|--|---|---|--|------------|---------------------------|-----------------------|
| Part VII-B Statements Regarding Activities for Which I | Form 4720 May Be I | Required (contin | ued) | | - | |
| 5a During the year, did the foundation pay or incur any amount to: (1) Carry on propaganda, or otherwise attempt to influence legislation (section (2) Influence the outcome of any specific public election (see section 4955); or | | | es 🗓 No | | Yes | No |
| any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes | Y | es X No es X No | | | | |
| (4) Provide a grant to an organization other than a charitable, etc., organizatio 4945(d)(4)(A)? See instructions (5) Provide for any purpose other than religious, charitable, scientific, literary, | es 🛣 No | | | | | |
| the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und section 53.4945 or in a current notice regarding disaster assistance? See instri | · · · · · · · · · · · · · · · · · · · | - | es X No N/A | 5b | | |
| Organizations relying on a current notice regarding disaster assistance, check if the answer is "Yes" to question 5a(4), does the foundation claim exemption for expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d). | here rom the tax because it mainta | | es No | | | |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | | <u></u> | es 🗓 No | 6b | | X |
| If "Yes" to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax s b If "Yes," did the foundation receive any proceeds or have any net income attribu | | Y | es X No N/A | 7b | | |
| Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors | | nagers, Highl | | 70 | | |
| 1 List all officers, directors, trustees, and foundation managers and t | heir compensation. | | | | | |
| (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 | acc acc | Experient, liowar | ense other ices |
| SEE STATEMENT 3 | | 0. | 0. | | | 0. |
| | | } | | | | |
| | | | | | | |
| | | | | | - | |
| 2 Compensation of five highest-paid employees (other than those inc | luded on line 1). If none, | enter "NONE." | L | | | |
| (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 | acc |) Expe ount, llowar | other |
| NONE | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Total number of other employees hald over \$50,000 | | | | | | 0 |

| | NTER FAMILY FOUNDATION INC | 27-4 | 1376898 Page 7 |
|--|--|--|------------------|
| Paid Emplo | n About Officers, Directors, Trustees, Founda byees, and Contractors (continued) | | |
| | ndent contractors for professional services. If none, ente | er "NONE." | |
| (a) Name and | daddress of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | | |
| | | | |
| | | | |
| | | <u> </u> | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Total number of others receiving | over \$50,000 for professional services | | • 0 |
| | of Direct Charitable Activities | | |
| List the foundation's four largest number of organizations and other | direct charitable activities during the tax year. Include relevant statis er beneficiaries served, conferences convened, research papers proi | stical information such as the duced, etc. | Expenses |
| 1 N/A | | | |
| | | | |
| | | | |
| 2 | | | |
| | | | |
| | | - | |
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| | | | |
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| 4 | | | |
| | | | |
| Part IX-B Summary of | f Program-Related Investments | | |
| 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 | | | - <u>-</u> |
| | | | |
| | | | |
| All other program-related investm | ents. See instructions. | | |
| ³ | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Tetal Add ince 1 through 2 | | | |

| P | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four | ndations | , 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 | 0. |
| | Average of monthly cash balances | 1b | 120,155. |
| C | Fair market value of all other assets | 10 | 0. |
| d | Total (add lines 1a, b, and c) | 1d | 120,155. |
| e | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) 1e 0. | ٠ ، | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 120,155. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 1,802. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 118,353. 5,918. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 5,918. |
| P | art XI Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private operating foundations an foreign organizations, check here ☐ and do not complete this part.) | id certain | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 5,918. |
| 2a | Tax on investment income for 2017 from Part VI, line 5 | | |
| b | Income tax for 2017. (This does not include the tax from Part VI.) |) j | |
| C | Add lines 2a and 2b | 2c | 0. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 5,918. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 5,918. |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0. |
| 7_ | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 5,918. |
| P | art XII Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | . 1 | 0 |
| | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 0. |
| | 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: | | |
| | Suitability test (prior IRS approval required) | 3a | |
| | Cash distribution test (attach the required schedule) | 3b | 0. |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 | 4 | |
| 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 | .] | Λ |
| 6 | , | 5 6 | 0. |
| U | Adjusted qualifying distributions. Subtract line 5 from line 4 | | |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years. | juaimes to | n the section |

| Part XIII .Undistributed Income (see | | | | · · · · · · · · · · · · · · · · · · · |
|---|---------------|----------------------------|-------------|---------------------------------------|
| | (a) Corpus | (b) Years prior to 2016 | (c) 2016 | (d) 2017 |
| 1 Distributable amount for 2017 from Part XI, | | | | F 010 |
| line 7 | | | | 5,918. |
| 2 Undistributed income, if any, as of the end of 2017 | j | | | 1 |
| a Enter amount for 2016 only | | | 0. | |
| b Total for prior years: | } | 0. | | |
| 3 Excess distributions carryover, if any, to 2017: | | | | |
| a From 2012 29,975. | İ | | | |
| b From 2013 29,984. | j | | | |
| c From 2014 29,992. | | | | |
| d From 2015 29,983. | | | | |
| e From 2016 | - 440 004 | | | |
| f Total of lines 3a through e | 119,934. | | | |
| 4 Qualifying distributions for 2017 from | j | | | |
| Part XII, line 4: ►\$ 0. | | | 0 | |
| a Applied to 2016, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior | } | 0 | | |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | 0. |] | | |
| (Election required - see instructions) d Applied to 2017 distributable amount | | | | 0. |
| ··· | 0. | | | |
| Remaining amount distributed out of corpus Excess distributions carryover applied to 2017 | 5,918. | | | 5,918. |
| (If an amount appears in column (d), the same amount must be shown in column (a)) | 3,510. | | | 3,510. |
| 6 Enter the net total of each column as indicated below: | } | | | |
| & Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 114,016. | | | |
| b Prior years' undistributed income. Subtract | 114,010. | | | |
| line 4b from line 2b | | 0.1 | | |
| 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 | | 0. | | |
| d Subtract line 6c from line 6b. Taxable | | | | |
| amount - see instructions | | 0. | ı | l |
| e Undistributed income for 2016. Subtract line | | | | |
| 4a from line 2a. Taxable amount - see instr. | { | | 0. | l |
| f Undistributed income for 2017, Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | ļ | | | |
| be distributed in 2018 | | | | 0. |
| 7 Amounts treated as distributions out of | } | | | |
| corpus to satisfy requirements imposed by | l | ĺ | | |
| section 170(b)(1)(F) or 4942(g)(3) (Election | _ (| l | | |
| may be required - see instructions) | 0. | | | · |
| 8 Excess distributions carryover from 2012 | | | | |
| not applied on line 5 or line 7 | 24,057. | | | : |
| 9 Excess distributions carryover to 2018. | 00.050 | } | | |
| Subtract lines 7 and 8 from line 6a | 89,959. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2013 29,984. b Excess from 2014 29,992. | Í | | | |
| b Excess from 2014 c Excess from 2015 29,983. | | | | |
| d Excess from 2016 | Ì | 1 | | |
| e Excess from 2017 | | | ı | |

| Part XIV Private Operating F | PAMILY FOUN | | -A guestion 9) | N/A | 3/6898 Page 10 |
|---|--|--|-----------------------------|--|---|
| 1 a If the foundation has received a ruling of | | | 7, 4000,017 07 | | |
| foundation, and the ruling is effective for | | | | | |
| b Check box to indicate whether the found | | • | n section | 4942(j)(3) or 4 | 942(1)(5) |
| 1 | Tax year | l loundation described i | Prior 3 years | 1 4342())(3) 01 4 | 342())(0) |
| 2 a Enter the lesser of the adjusted net | (a) 2017 | (b) 2016 | (c) 2015 | (d) 2014 | (e) Total |
| income from Part I or the minimum | (4)2011 | (8)2010 | (6) 20 10 | (4)2011 | (0).000 |
| investment return from Part X for | |] | |) | , |
| each year listed | | ļ ———— | | | |
| b 85% of line 2a | | · | | / | |
| Qualifying distributions from Part XII, line 4 for each year listed | | | | | |
| d Amounts included in line 2c not | | | | | |
| used directly for active conduct of | | | | | į. |
| exempt activities | | | | X . | (|
| e Qualifying distributions made directly | | | | | |
| for active conduct of exempt activities. | | | / | | ļ |
| Subtract line 2d from line 2c | | | | ĺ | |
| 3 Complete 3a, b, or c for the | | | 1 | | † — — — — — — — — — — — — — — — — — — — |
| alternative test relied upon: a "Assets" alternative test - enter: | | | | | ļ |
| (1) Value of all assets | | | 1 | Į | |
| (2) Value of assets qualifying under section 4942(i)(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 Info | rmation (Comple | te this part only i | f the foundation | had \$5,000 or m | ore in assets |
| at any time during the | | | | • | |
| 1 Information Regarding Foundation | n Managers: | | | | |
| a List any managers of the foundation who year (but only if they have contributed m | have contributed more ore than \$5,000). (See s | than 2% of the total contr ection 507(d)(2).) | ibutions received by the | foundation before the clo | se of any tax |
| IONE | . , , | , , | | | |
| b List any managers of the foundation who other entity) of which the foundation has | | | or an equally large portion | on of the ownership of a p | artnership or |
| IONE | 3 | | | | |
| 2 Information Regarding Contribution | on, Grant, Gift. Loan. | Scholarship, etc., Pro | ograms: | | |
| Check here X if the foundation of the foundation makes gifts, grants, etc., | nly makes contributions t | to preselected charitable o | organizations and does r | ot accept unsolicited requ | uests for funds. If |
| a The name, address, and telephone numb | | | | | |
| , , , , , | | | | | |
| b The form in which applications should be | e submitted and informat | tion and materials they sh | ould include: | | |
| c Any submission deadlines: | | | | | |
| A Any restrictions or limitations on supplied | ough on hy consequent | Jarona, obarrtable fields | undo of motify to a | Min and 4 and 4 and 5 | |
| d Any restrictions or limitations on awards | , such as by geographica | u areas, charllable fields, l | kinus of institutions, or (| omer factors: | |
| | | | | | |

| Part XV Supplementary information | | | | |
|--|--|----------------------|----------------------------------|-------------|
| 3 Grants and Contributions Paid During the | Year or Approved for Future | Payment | | |
| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| | | | | |
| NONE | | | | |
| NONE | | | | |
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| | | | | |
| Total | | | ▶ 3a | 0 |
| Approved for future payment | | | | |
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| MONT | | | | |
| NONE | | | | |
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| Total | | · | ▶ 3b | 0 |

| Enter gross amounts unless otherwise indicated. | Unrelated | business income | | ed by section 512, 513, or 514 | (e) |
|--|-------------------------|---------------------|--|--------------------------------|-----------------------------------|
| 1 Program service revenue: | (a) Business code | (b) Amount | Exclu- sion code | (d) Amount | Related or exempt function income |
| ā | | | | | |
| _ | - - | | ++ | | |
| · | - | | + | | |
| d | - | | + | | |
| | - | | - | | |
| e | - | | + + | | |
| g Fees and contracts from government agencies | - | | + | | <u> </u> |
| 2 Membership dues and assessments | | | - | | |
| 3 Interest on savings and temporary cash | | | - | | |
| investments | | | 1 | | 3. |
| 4 Dividends and interest from securities | | | | | |
| 5 Net rental income or (loss) from real estate: | | | | | |
| a Debt-financed property | - | | ++ | | |
| b Not debt-financed property | | | ╀──┼ | | |
| 6 Net rental income or (loss) from personal | + - | | ╀──┼ | | |
| property | | | 1 (| | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other | | | | | |
| than inventory | | | 1 (| | |
| 9 Net income or (loss) from special events | | | 1 | | |
| 10 Gross profit or (loss) from sales of inventory | | | 1-1 | | |
| I1 Other revenue: | | | + + | | |
| a | | | 1 [| ļ | |
| b | - | | +-+ | | |
| c | - | | +-+ | | |
| d | - | | ++ | | |
| e | - | | 1 1 | | |
| 2 Subtotal. Add columns (b), (d), and (e) | - | 0. | 1 1 | 0. | 3. |
| 3 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 3. |
| See worksheet in line 13 instructions to verify calculations.) | | | | | |
| Part XVI-B Relationship of Activities | to the Accom | plishment of E | kempt | Purposes | |
| Line No. Explain below how each activity for which inc | | | contribu | ted importantly to the accom | plishment of |
| the foundation's exempt purposes (other tha | n by providing funds | for such purposes). | | | |
| BANK INTEREST EARNED | | | | | |
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| Fart | VAII | Exempt Organ | | 31 0 13 10 8 | ing ir | ansacuo | IIS a | na Relations | snips with Nont | , i ai itable | , | |
|---|--|--|---------------------------|-------------------------|----------|-------------------------|----------|------------------------|-------------------------------|----------------|------------------|-----|
| 1 D | d the or | | | of the following | n with a | ny other org | nızatı | on described in se | ction 501(c) | | Yes | No |
| | Did the organization directly or indirectly engage in any of the following with any other organizatio (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | | | | | | 0.001 00 1(0) | | | | |
| | a Transfers from the reporting foundation to a noncharitable exempt organization of: | | | | | | | | l i | | | |
| | (1) Cash | | | | | | | 1a(1) | | X | | |
| • | !) Other | | | | | | | | | 1a(2) | | X |
| • | • | sactions: | | | | | | | | | | |
| | | of assets to a noncharita | ble exempt organiza | tion | | | | | | 1b(1) | | X |
| | • | nases of assets from a no | | | | | | | | 1b(2) | | X |
| | | al of facilities, equipment, | | ŭ | | | | | | 1b(3) | | X |
| • | • | bursement arrangements | | | | | | | | 1b(4) | | Х |
| • | (5) Loans or loan guarantees | | | | | | | | | 1b(5) | | X |
| (6) Performance of services or membership or fundraising solicitations | | | | | | | | 1b(6) | | Х | | |
| • | • | f facilities, equipment, ma | • | • | | | | | | 10 | | X |
| d if | the ansv | ver to any of the above is | "Yes," complete the | following sche | dule. Co | lumn (b) she | ould ah | ways show the fail | r market value of the go | ods, other ass | ets, | |
| | | s given by the reporting fo | | | | | | | | | | |
| CC | olumn (d | I) the value of the goods, | other assets, or serv | ices received. | | | | | | | | |
| (a)Line | no | (b) Amount involved | (c) Name of | noncharitable | exempt | organizatioi | | (d) Descripti | on of transfers, transactions | and sharing an | angeme | nts |
| | | | | N/A | | | | | | | | |
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| | | idation directly or indirect | | | or more | tax-exempt | organı | zations described | | | 177 | ٦ |
| | | 501(c) (other than sectio | . , | ction 5277 | | | | | | Yes | LA | No |
| b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description | | | | | | (a) Description of role | tionohin | | | | | |
| | | (a) Name of org | Janization | | (D) Tyl | De of organiz | alion | | (c) Description of rela | uonsnip | | |
| | | N/A | | | | | | | | | | |
| | | | | | <u> </u> | | | | | | | |
| | | <u> </u> | | | | | | | | | | |
| | | | | | <u> </u> | | | | | | | |
| | Under | penalties of perjury, I declare | that I have examined this | s return, includin | g accomp | anying schedu | les and | statements, and to the | he best of my knowledge | | | |
| Sign | | Under penalties of perury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief. It is true correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge | | | | | | | | | iscuss prepar | er |
| Here | | kn | | | 1 | 1/201 | 18 | CFO |) | shown below | | No |
| | Sign | Signature of officer or trustee Date Title | | | | | | | | 168 | | |
| | | Print/Type preparer's name Preparer's signature C | | | | | | | Check if F | PTIN | | _ |
| | | Tropardi S Sig | | | | | | | self- employed | | | |
| Paid | | | | | | | | | | | | |
| Prep | arer | Firm's name ▶ | | | | | | | Firm's EIN ▶ | | | |
| Use | Only | | | | | | | | | | | |
| | | Firm's address > | | | | | | | T | | | |
| | | | | | | | | | Phone no. | | _ | |

| FORM 990-PF INTEREST ON SAVI | INGS AND TEM | PORARY CASH | INVESTMENTS | STATEMENT 1 | | | |
|--------------------------------|------------------------------|---------------------------------|-----------------------------|-------------------------------|--|--|--|
| SOURCE | (A REVE PER B | NUE NET | (B) INVESTMENT INCOME | (C) ADJUSTED NET INCOME | | | |
| US BANK | | 3. | 3. | | | | |
| TOTAL TO PART I, LINE 3 | | 3. | 3. | | | | |
| FORM 990-PF | OTHER E | XPENSES | | STATEMENT 2 | | | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST MENT INCOM | | | | | |
| STATE FILING FEES BANK FEES | 200. 300. | | 0. | 0. | | | |
| TO FORM 990-PF, PG 1, LN 23 | 500. | | 0. | 0. | | | |

| FORM 990-PF PART VIII - LIST TRUSTEES AND | OF OFFICERS, D. FOUNDATION MANAGE | STATEMENT 3 | | |
|---|-----------------------------------|---------------|---------------------------------|---------|
| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | | EMPLOYEE BEN PLAN CONTRIB | EXPENSE |
| ANDREW M HUNTER III 4924 IDS CENTER, 80 S 8TH ST MINNEAPOLIS, MN 55402 | PRESIDENT & DI | RECTOR 0. | 0. | 0. |
| CAROLE T HUNTER 4924 IDS CENTER, 80 S 8TH ST MINNEAPOLIS, MN 55402 | VICE PRESIDENT 1.00 | & DIRECTOR 0. | 0. | 0. |
| ROBERT W HORSTMAN 4924 IDS CENTER, 80 S 8TH ST MINNEAPOLIS, MN 55402 | SECRETARY & TR | EASURER 0. | 0. | 0. |
| ASHLEY L HUNTER 4924 IDS CENTER, 80 S 8TH ST MINNEAPOLIS, MN 55402 | DIRECTOR 1.00 | 0. | 0. | 0. |
| LACEY H WISMER 4924 IDS CENTER, 80 S 8TH ST MINNEAPOLIS, MN 55402 | DIRECTOR 1.00 | 0. | 0. | 0. |
| JOCELYN H HORNBLOWER 4924 IDS CENTER, 80 S 8TH ST MINNEAPOLIS, MN 55402 | DIRECTOR 1.00 | 0. | 0. | 0. |
| TOTALS INCLUDED ON 990-PF, PAGE 6, | PART VIII | 0. | 0. | 0. |