ر659) Form	990-PI
	Depart	ment of the Treas

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.

: 1

For cale	ndar year 2017 or tax year beginning		, and ending		
	of foundation			A Employer identification	number
	ROBERT WILLIAM AND NIN	A GAYLE SIT			
	NDATION			32-6376048	
	and street (or P O box number if mail is not delivered to street a	address)	Room/suite	B Telephone number	
330	0 IDS CENTER, 80 SOUTH	612-359-25	22		
-	town, state or province, country, and ZIP or foreign p			C If exemption application is pe	
	INEAPOLIS, MN 55402	osiai code		ir exemption application is po	anding, check here
	k all that apply: Initial return	Initial return of a f	former public charity	D 1. Foreign organizations	chack hara
u Onco	Final return	Amended return	ornici public charity	1. Toreign organizations	s, check here
	Address change	Name change	,	Foreign organizations me check here and attach co.	eting the 85% test,
H Choo	k type of organization; X Section 501(c)(3) ex				•
	- · · · · · · · · · · · · · · · · · · ·	Other taxable private found	lation	E If private foundation sta under section 507(b)(1)	
	narket value of all assets at end of year J Accounts		Accrual		
	·	ther (specify)	Accidai	F If the foundation is in a under section 507(b)(1)	
\(\(\)		nn (d) must be on cash bas	ıs.)	under Section 507(b)(1)	(D), CHECK HERE P
Part				(a) Adjusted not	(d) Disbursements
	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received	55,000.		N/A	(Cash basis Only)
2	Check If the foundation is not required to attach Sch. B		· · · · · · · · · · · · · · · · · · ·	N/A	788.2.87
2	Interest on savings and temporary		1 100 A	1 K3 K88 W8	1
	cash investments Dividends and interest from securities	DECEN ARE	139.	<u> </u>	STATEMENT 2
	a Gross rents	VECEIAFD.	133.		
"	Net rental income of (loss)		<u> </u>	a a a	
اء ا	1831	MAY 1 5 20184	191		STATEMENT 1
al 'i	Gross sales price for all.	22.	2		
Revenue 2	\ <u> </u>	OGDEN	14,976.	17.4	
8 8	Net short-term capital gain	VGIDE 1	11,5,0.	13 ·	
9	Income modifications				
10:	Gross sales less returns			· · · · · · · · · · · · · · · · · · ·	11 %
1 .				va .	
- 1	D Less Cost of goods sold Cross profit or (loss)	5,485 , 525,4864		`	
111	' '		-485C3		
12	Total. Add lines 1 through 11	55,163.	15,115.		
13	Compensation of officers, directors, trustees, etc	0.	0.		0.
14	Other employee salaries and wages		<u> </u>		
15	Pension plans, employee benefits				
ام	Legal fees				
<u>د</u> اع	Accounting fees STMT 3	4,200.	0.		4,200.
اد	Other professional fees	1,200.			1,2000
யி ' 9 17	Interest				
9 17 E 18	Taxes				
19	Depreciation and depletion				
Administr 05 19	Occupancy			-	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
취 ₂₁	Travel, conferences, and meetings	•	·		
9 22	Printing and publications	-		-	
100	Other expenses				
Operating 22	Total operating and administrative				
ē a	expenses. Add lines 13 through 23	4,200.	0.		4.200.
리%	Contributions, gifts, grants paid	51,000.	7.8	. W	4,200. 51,000.
	Total expenses and disbursements.		**	* \(\sigma \) \(\s	
٦٠	Add lines 24 and 25	55,200.	0.		55,200.
27		33,200.	. X.3. Dr. 31 W.		111111111111
1 -	Excess of revenue over expenses and disbursements	<37.>		N. C. C.	I Avairii
	Net investment income (if negative, enter -0-)		15,115.		
	Adjusted net income (if negative, enter -0-)			N/A	
723501 0			<u>* '0000</u> 000' 0 M	<u>,</u>	Form 990-PF (2017)

THE ROBERT WILLIAM AND NINA GAYLE SIT 32-6376048 Form 990-PF (2017) FOUNDATION Page 2 Part II * Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only Beginning of year End of year (a) Book Value (b) Book Value (c) Fair Market Value 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Accounts receivable ► Less: allowance for doubtful accounts 4 Pledges receivable ▶ Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans STMT 4 2,385. 2.346. 13 Investments - other 14 Land, buildings, and equipment basis Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 2,385. 2.346 2,410 instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disgualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe > 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31. Balances 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Fund ► X Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ò 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 0. 2,385. 2,346 29 Retained earnings, accumulated income, endowment, or other funds 2,385. 2,34630 Total net assets or fund balances 2,385. 2,346 31 Total liabilities and net assets/fund balances

Part III Analysis of Changes in Net Assets or Fund Balan	1000

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30	- 11-	
(must agree with end-of-year figure reported on prior year's return)	1	2,385.
2 Enter amount from Part I, line 27a	2	<37.>
3 Other increases not included in line 2 (itemize)	3	0.
4 Add lines 1, 2, and 3	4	2,348.
5 Decreases not included in line 2 (itemize) ► PRIOR PERIOD ADJUSTMENT	5	2.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	2,346.

55,200.

8 Enter qualifying distributions from Part XII, line 4

See the Part VI instructions.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

THE ROBERT WILLIAM AND NINA GAYLE SIT FOUNDATION 32-6376048 Form 990-PF (2017) Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions 1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. Date of ruling or determination letter: _ (attach copy of letter if necessary-see instructions) b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1% of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 3 3 Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 4 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-6 Credits/Payments: 0 a 2017 estimated tax payments and 2016 overpayment credited to 2017 ٥. b Exempt foreign organizations - tax withheld at source 6b 0. c Tax paid with application for extension of time to file (Form 8868) 6с 0. 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 9 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 11 Enter the amount of line 10 to be: Credited to 2018 estimated tax Refunded Part VII-A Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in X any political campaign? 1a 1b b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the 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? 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation 0. 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 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A b if "Yes," has it filed a tax return on Form 990-T for this year? 4b 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T 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? 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV

8a Enter the states to which the foundation reports or with which it is registered. See instructions.

year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV

of each state as required by General Instruction G? If "No," attach explanation

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)

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

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

10 X Form **990-PF** (2017)

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FOUNDATION 32-6376048 Page 5 Form 990-PF (2017) Part VII-A Statements Regarding Activities (continued) Yes No 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of X section 512(b)(13)? If "Yes," attach schedule. See instructions 11 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? X If "Yes," attach statement. See instructions 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 N/A Website address 14 The books are in care of ▶ ROBERT W. SIT Telephone no. ▶952-924-4196 Located at ▶ 6124 WESTRIDGE BLVD, EDINA, MN ZIP+4 ▶55436 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here N/A and enter the amount of tax-exempt interest received or accrued during the year No Yes 16 At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, 16 securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the Part VII-B: Statements Regarding Activities for Which Form 4720 May Be Required Yes No File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year, did the foundation (either directly or indirectly): Yes X No (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) Yes X No a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No (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 Yes X No 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 Yes X No 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 Organizations relying on a current notice regarding disaster assistance, check here c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017? 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 b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach N/A statement - see instructions.) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? b If "Yes," did it have excess business holdings in 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, N/A Form 4720, to determine if the foundation had excess business holdings in 2017.) 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 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 2017?

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Form 990-PF (2017) FOUNDATION			32-63760	48 Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be Ro	equired (contin	ued)	
5a During the year, did the foundation pay or incur any amount to:				Yes No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	☐ Ye	es 🗶 No 📗	
(2) Influence the outcome of any specific public election (see section 4955); or	to carry on, directly or indire	ctly,		
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes'		Y€	es 🗶 No 🧖	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
4945(d)(4)(A)? See instructions			es 🗶 No 🚆	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo	or		
the prevention of cruelty to children or animals?			ıs 🛚 X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		n Regulations		
section 53.4945 or in a current notice regarding disaster assistance? See instru			N/A	5b
Organizations relying on a current notice regarding disaster assistance, check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr				
expenditure responsibility for the grant?	N	[/A	s L No	
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			Ŕ	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on		ছে ৾	
a personal benefit contract?		Y6	s X No	6b X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		-	6b X
If "Yes" to 6b, file Form 8870.	haltau tuawaaatua nO		s X No .	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		14		7b
Part VIII Information About Officers, Directors, Truste		nagers Highly	147 11	/U
Paid Employees, and Contractors	es, i outladion mai	lagers, riigiliy		
1 List all officers, directors, trustees, and foundation managers and the	eir compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense
(a) Name and address	hòurs per week devoted to position	(If not paid, enter -0-)	and deferred compensation	accó unt, other all⇔wances
ROBERT WILLIAM SIT	TRUSTEE	<u> </u>		
6124 WESTRIDGE BLVD				
EDINA, MN 55436	1.00	0.	0.	0.
		, , ,		
		<u> </u>		
2 Compensation of five highest-paid employees (other than those incl		enter "NONE."	(d) Contributions to	(a) Eypones
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expense account, other
	devoted to position		compensation	allowances
NONE				
		 		
Total number of other employees paid over \$50,000	· · · · · · · · · · · · · · · · · · ·		<u> </u>	0

Form **990-PF** (2017)

THE ROBERT WILLIAM AND NINA GAYLE SIT FOUNDATION

Form 990-PF (2017) FOUNDATION	32-6376	5048 <u>Page</u> 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "	NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	_	
		
	-	
	 	
	1	
	<u> </u>	
Total number of others receiving over \$50,000 for professional services		0
Rart IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produc	al information such as the sed, etc.	Expenses
1 N/A	34, 54,	
2		
3		
4		
Part IV-R Common of Decrees Deleted Investments		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on line.	nes 1 and 2	Amount
1 N/A	130 1 4110 21	7
2		
		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	-	0.
Total Title miles Tanadgi U		orm 990-PF (2017)

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Part X.** Minimum Investment Return (All domestic foundations must complete this pa	art. Foreign foundations, see	instructions.)
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	**************************************	
a Average monthly fair market value of securities	1a	4,525.
b Average of monthly cash balances	1b	
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d	4,525.
e Reduction claimed for blockage or other factors reported on lines 1a and	0.	
1c (attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	4,525.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	68.
Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,457.
6 Minimum investment return. Enter 5% of line 5	6	223.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	ng foundations and certain	
foreign organizations, check here and do not complete this part.)		223.
1 Minimum investment return from Part X, line 6	1 5 1 1	
2a Tax on investment income for 2017 from Part VI, line 5	151.	
b Income tax for 2017. (This does not include the tax from Part VI.)		1 - 1
c Add lines 2a and 2b	2c	<u> </u>
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	72.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	72.
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		72.
Part XII Qualifying Distributions (see instructions)		
Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	55,200.
b Program-related investments - total from Part IX-B	1b	0.
Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
Amounts set aside for specific charitable projects that satisfy the:		
a Suitability test (prior IRS approval required)	3a	_
b Cash distribution test (attach the required schedule)	3b	
Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	55,200
Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
income. Enter 1% of Part I, line 27b	5	151
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	55,049.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether	— 	
4040(a) reduction of the in those years	roundation qualified for the	

Part XIII Undistributed Income (see instructions)

Form 990-PF (2017)

a Excess from 2013 b Excess from 2014 c Excess from 2015 d Excess from 2016 e Excess from 2017 55, 128.	_		(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
2 Understand internal time, also of the world abort 5 Enter amount for 2216 only a Total for prior years: 3 Excess distributions carryover, if any, to 2017: a From 2018 b From 2018 c From 2016 c From 2017 c From 2016 c From 2016 c From 2016 c From 2016 c From 2017 c From 2017 c From 2018 c From 2016 c From 2017 c	1					72.
Enter amount for 2016 only 1 Total for prior years; 2 Total for prior years; 3 Total for prior years; 3 Total for prior years; 4 Total for prior years; 5 Total for prior years; 5 Total for prior years; 6 Total for prior years; 7 Total for these St fortugh is 7 Total for prior years; 7 Total for these St fortugh is 7 Total for prior years; 8 Total for the st fortugh is 8 Total for prior years; 9 Total for prior years; 9 Total for prior years; 1 Total of the st fortugh is 9 Total for prior years; 1 Total of years in the st fortugh is 9 Total for prior years; 1 Total of years in the st fortugh is 9 Total for prior years; 1 Total of years in color will, the summer prior years; 1 Total for years in color will, the summer prior years; 1 Total for years in color will, the summer prior years; 1 Total for years in color will, the summer prior years; 1 Total for years in color will, the summer prior years; 1 Total for years in years years; 1 Total for years;	2	*****	7 7 7 8 8 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1		KING A TATE OF	
3 Excess distributions carryover, if any, to 2017: a From 2018 b From 2019 b From 2019 b From 2015 36 , 259 . e From 2016 1 Table of times 3 through P 4 Dualyang distributions for 2017 from Part XII, line 4 ≥ 8 55 , 200 . a Applied to undestributed mome of proy years (Election required - see instructions) c Treated as distributions of or Corpus (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2017 distributiable amount electrom required - see instructions) d Applied to 2017 distributiable amount flexibility of the animal animal distributed of corpus b bias and place of the province of the animal animal distribution out of corpus b bias and place of the place of t		• •			0.	
3 Excess distributions carryover, if any, to 2017: a from 2012 b from 2013 c from 2014 d from 2015 36, 259. e from 2016 36, 316. 1 Tatal of lines 8th through e PS 55, 200 Park 11, line 4 => 55, 200 Park 24, posted to undestributed more of prior years (Election required - see instructions) 0.		-				1 1/1/2 Wall of the second
From 2013 From 2015 From 2015 From 2016 36, 316. Froat 30 may be a start brough a 72,575. From 2016 A pulled to 2016, but not more than line 32 Applied to 2016, but not more than line 32 Freated and startburbons out of corpus (Election required - see instructions) Freated and startburbons out of corpus (Election required - see instructions) Freated and startburbons out of corpus (Election required - see instructions) Freated and startburbons out of corpus (Election required - see instructions) Freated and startburbons out of corpus (Election required - see instructions) Freated and startburbons out of corpus (Election required - see instructions) Freated and startburbons out of corpus (Election required - see instructions) Freated and startburbons out of corpus (Election required - see instructions) 6 Eater the net total of each column as indicated below. 1 Corpus Add lines 4, 4c, and 4c substanct lines 4 from line 20 Enter the amount of the which a notice of definition that section 4942(a) tax has been previously assessed 6 Subtract line 6 from line 6, 1 Rabela amount - see instructions • Undistributed moome for 2015, Subtract line 4 from line 2. Taxable amount - see instructions • Undistributed moome for 2015, Subtract line 4 from line 6 amount - see instructions • Undistributed moome for 2015, Subtract line 4 from line 8. This amount must be destinated and strend in 2018 7 Amounts treated as distributions out of corpus in startly requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 0 . 1 227, 703. 1 227, 703. 1 227, 703. 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Ī			0.		Zan o
From 2014 From 2015	3	Excess distributions carryover, if any, to 2017:	Aller Sir Sir	. A		
From 2015 From 2015 36 , 250 36 , 316 72 , 575 36 316 72 , 575 36 316 72 , 575 36 316 72 , 575 36 316 36 , 316 72 , 575 36 36 , 316 72 , 575 36 36 , 316 36 , 326 36 , 316 36 , 326 36 , 316 36 , 326 36 36 , 326 36 , 326 36 , 326 36 , 326 36 , 326 36 , 326 36 , 326 36 , 326 36 , 326 36 , 326 36 , 326 36 , 326 36 , 326 36 , 326 36 , 326 36 , 326 36 , 326 36 36 , 326 36 36 36 36 36 36 36	٤	From 2012				
From 2016 36, 259. From 2016 36, 316. Tetal of hies 3a through e Coulying distributions for 2017 from Part XII, line 4: № \$ S55, 200. Applied to 2016, but not more than line 2a Applied to undistributed mores of prior years (Election required - see instructions) Ci Teated as distributions out of corpus (Election required - see instructions) Applied to 2017 distributible amount Company As the most of the prior years Company As the most of the prior years Company As the mask As, and 44 spicharation B Prior years' undistributed income, Subtract line 4 from line 20. Company As the mask As, and 44 spicharation B Prior years' undistributed income for which a nobe of definency has been issued, or on which the somon 4947(a) tax has been prevously Abultiact line 6c from line 6b. Taxable Clindistributed income for 2016, Subtract line 4 from line 2a. Taxable amount - see instructions Clindistributed income for 2016, Subtract line 4 from line 2a. Taxable amount - see instructions Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b) (1)(f) or 4947(a)(3) (Election may be required - see instructions Excess distributions carryover to 2018, Subtract lines 4 and 5 from line 6. Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b) (1)(f) or 4947(a)(3) (Election may be required - see instructions Excess from 2015 Excess from 2015 Excess from 2015 Excess from 2015 Excess from 2017 Excess	t	From 2013				
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23581 01-03-18 Form 990-PF (2017)	_	Excess from 2017 55, 128.				Form 990-PF (2017)

Form 990-PF (2017) FOUNDAT					376048 Page 10
Part XIV Private Operating F	oundations (see in:	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter that	it is a private operating			
foundation, and the ruling is effective fo	or 2017, enter the date of t	he ruling	▶		
b Check box to indicate whether the foun	dation is a private operation	ig foundation described i	n section	4942(j)(3) or	4942(j)(5) /
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years] /
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not				/	
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the			/		
alternative test relied upon:	1				
a "Assets" alternative test - enter:					
(1) Value of all assets			/		
(2) Value of assets qualifying under section 4942(i)(3)(B)(i)]	<i>\</i> {		
b "Endowment" alternative test - enter					
2/3 of minimum investment return		I			
shown in Part X, line 6 for each year		l //			
listed		//			
c "Support" alternative test - enter:		//			
 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		9			
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization					<u> </u>
(4) Gross investment income			<u> </u>		
Part XV Supplementary Info			f the foundation	had \$5,000 or mo	ore in asse t s
at any time during	the year-see instr	uctions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wi	ho have contributed more	than 2% of the total cont	ributions received by the	e foundation before the cl	ose of any tax
year (but only if they have contributed	more than \$5,000). (See s	ection 507(d)(2).)			
ROBERT WILLIAM SIT					
b List any managers of the foundation w	ho own 10% or more of th	e stock of a corporation	or an equally large port	ion of the ownership of a	partnership or
other entity) of which the foundation ha					
NONE					
2 Information Regarding Contribut	tion, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		_
Check here ▶ ☐ If the foundation				not accept unsolicited rec	quests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	ther or email address of th	e person to whom applic	ations should be addres	ssed:	
ROBERT SIT					
3300 IDS CENTER, 80	SOUTH 8TH ST	TREET. MINN	EAPOLIS, MN	55402	
b The form in which applications should					
N/A	So Saprintion and intollina	aon ana matemate mey s			
c Any submission deadlines:					
N/A					
d Any restrictions or limitations on award	ds, such as by geographic	al areas, charitable fields	, kınds of ınstitutions, oi	other factors:	
AWARDS MUST GO TOWAR	DS EDUCATION	N AND HEALT	HCARE		

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3 Grants and Contributions Paid During the Ye	ear or Approved for Future I	Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
Paid during the year				
			BLOOM'S SHIRLEY	
BLOOM EARLY LEARNING & CHILD CARE		PC	ROBINSON SCHOLARSHIP	
PLYMOUTH, MN 55447			FUND	1,000
UNITED PRESBYTERIAN CHURCH IN THE USA		PC	OPEN DOORS OPEN	
WESTMINSTER PRESBYTERIAN CHURCH			FUTURES CAMPAIGN	
L200 MARQUETTE AVE MINNEAPOLIS, MN 55403				50,000
Total			▶ 3a	51,00
b Approved for future payment			- 54	-,-
Approved to Halard payment				
NONE				
Total	· <u></u> -		▶ 3b	rm 990-PF (20

Form 990-PF (2017)

FOUNDATION

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nter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)	
-	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income	
1 Program service revenue:	code		1000			
a	— 		+			
b	_		\vdash		· · · · · · · · · · · · · · · · · · ·	
4						
d	1 1					
e	_		†			
g Fees and contracts from government agencies	_ _		†			
Membership dues and assessments	1					
Interest on savings and temporary cash		·				
investments						
Dividends and interest from securities			14	139.		
Net rental income or (loss) from real estate:		· Vasa Allia	B-7 s		· Wai · Alik	
a Debt-financed property						
b Not debt-financed property						
Net rental income or (loss) from personal						
property						
Other investment income						
Gain or (loss) from sales of assets other					<u> </u>	
than inventory			18	24.		
Net income or (loss) from special events						
Gross profit or (loss) from sales of inventory						
Other revenue:		-				
a						
b						
U						
c	_					
С	_					
d	_	0.	1	163.		
d e	_	0.	3	163.	4.60	
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)		0.	1		4.60	
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations	3.)			13	0 163	
e Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI B Relationship of Activities	s to the Accor	mplishment of Ex	empt	13 Purposes	163	
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THE ROBERT WILLIAM AND NINA GAYLE SIT Form 990-PF (2017) FOUNDATION 32-6376048 Page 13 Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations** No Yes Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash (2) Other assets 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) 1b(2) (2) Purchases of assets from a noncharitable exempt organization 1b(3) (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements 1b(4) X 1b(5) (5) Loans or loan guarantees Х 1b(6) (6) Performance of services or membership or fundraising solicitations c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (a) Line no (b) Amount involved N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No Yes in section 501(c) (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule. (c) Description of relationship (a) Name of organization (b) Type of organization

Sign Here	and be	penalties of perjury, I declare that I have examined this clief, it is true, correct, and complete Declaration of pregative actives of officer or trustee			as any knowledge	May the IRS discuss this return with the preparer shown below? See instr X Yes No
Paid		Print/Type preparer's name CHRIS MESKIMEN	Preparer's signature Clies Machiner	Date 5/11/18	self- employed	PTIN P01314196
Prepa Use C		Firm's name ► DELOITTE TAX	LLP		Firm's EIN ► 8	6-1065772
		Firm's address ► 50 SOUTH SI: MINNEAPOLIS	XTH STREET , MN 55402		Phone no. 61	2-397-4000
						Form 990-PF (2017

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

2017

THE ROBERT WILLIAM AND NINA GAYLE SIT 32-6376048 FOUNDATION Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributors Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (II) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: 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)

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Name of organization THE ROBERT WILLIAM AND NINA GAYLE SIT FOUNDATION

Employer identification number

32-6376048

(b) Name, address, and ZIP + 4 ROBERT WILLIAM SIT	(c) Total contributions	(d) Type of contribution
ROBERT WILLIAM SIT		
5124 WESTRIDGE BLVD 3DINA, MN 55436	\$55,000.	Person X Payroll X Noncash X (Complete Part II for noncash contributions)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	-	Person Payroll Noncash (Complete Part II for noncash contributrions.)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	- \$ - \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	\$	Person Payroll Oncash Complete Part II for noncash contributions)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contri b ution
	- - \$	Person Payroll Noncash Complete Part II for
	Name, address, and ZIP + 4 (b) Name, address, and ZIP + 4 (b)	Name, address, and ZIP + 4 (b) Name, address, and ZIP + 4 (c) Total contributions \$ (b) Name, address, and ZIP + 4 (c) Total contributions

Name of organization
THE ROBERT WILLIAM AND NINA GAYLE SIT FOUNDATION

Employer identification number

32-6376048

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.						
(a) No. from Part I	(b) Description of noncash property given						
1	2,684.583 SHS SIT MID CAP GROWTH FUND	-					
		\$ 55,000.	12/18/17				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		\$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		\$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		- - - - - - - - - - - - - - - - -					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		*					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		- - - - - - - - - -					

FORM 990-PF	(GAIN OR	(LOSS)	FROM S	ALE OF	ASSE	TS		ST	ATEMEN	T 1
(A) DESCRIPTION OF	PROPERTY	<i>t</i>				MANN ACQUI		DA'		DATE	SOLD
SIT TAX FREE INDISTRIBUTION	NCOME FUR	ND - CA	PITAL G	AIN	1	DONAT	ED				
GRO	B) OSS PRICE		OR	EXPE	D) NSE OF ALE		(E) EPRE		GAIN	(F)	oss
	2,230.		0.		0	•		0.		2	,230.
(A) DESCRIPTION OF					_	MANN ACQUI	RED			DATE	SOLD
GRO	NCOME FUR DSS PRICE	(C) E AT	(EXPE	D)		ED (E) EPRE	c.	GAIN	(F)	oss
	52,794.		55,000.		0	•		0.		<2	,206.>
CAPITAL GAINS I								-			0.
FORM 990-PF	DI	VIDENDS	AND IN	rerest	FROM	SECUR	ITIE:	S	STA	TEMEN	т 2
SOURCE		ross Mount		NS	(A REVE PER B		NET	(B) INVES T INCO		(C ADJU NET I	STED
SIT MID CAP GRO FUND SIT TAX FREE	HTWC	2.		0.		2.			2.		
INCOME FUND		137.		0.		137.		1	37.		
TO PART I, LINE	E 4	139.		0.		139.		1	39.		

FORM 990-PF	ACCOUNTI		STATEMEN'T 3	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
DELOITTE TAX	4,200.	0.		4,200.
TO FORM 990-PF, PG 1, LN 16B	4,200.	0.		4,200.

FORM 990-PF OTHER		STATEMENT 4	
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
SIT TAX FREE INCOME FUND	COST	2,346.	2,410.
TOTAL TO FORM 990-PF, PART II, LINE 1	3	2,346.	2,410.