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

2017

OMB No 1545-0052

Department & the Treasury Internal Revenue Service

► 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

Open to Public Inspection

For ca	lenda	r year 2017 or ta	x year beginnin	g	, 2017	, and ending		1	
		FAMILY FOUR					A	Employer identification num 41-1949696	nber
2910	OT HO:	LLY LANE NO H, MN 55447	ORTH #100				В	Telephone number (see insti	ructions)
PLII	MOUL	n, MN 3344	1-1733				С	If exemption application is	pending, check here
G Ch	neck a	II that apply	Initial return		Initial return of a forr	ner public charity	-	1 Foreign organizations, chec	· * /
			Final return		Amended return			2 Foreign organizations meet	لحا
H Ch	neck tv	pe of organization	Address char		Name change 1(c)(3) exempt private f	foundation 21	ſ)	here and attach computation	in State 65 70 test, Griedk
		ction 4947(a)(1)		rıtable	trust Other taxable	private foundation /	Ε	If private foundation status	
		et value of all assets a		J Acc	counting method. X C	ash Accrual		under section 507(b)(1)(A)	·
•	\$,620.	(Part I	Other (specify) , column (d) must be or	n cash basis.) - /	F	If the foundation is in a 60 under section 507(b)(1)(B)	
Part		nalysis of Re	venue and		(a) Revenue and	(b) Net investmer	nt	(c) Adjusted net	(d) Disbursements
	cc sa	xpenses (The blumns (b), (c), a arrily equal the angle instructions)	and (d) may not nounts in colum	neces-	expenses per books	income		ıncome	for charitable purposes (cash basis only)
	1) s, etc , received (attach sch	edule)	5,000.	i gr, Circles Ali		Marine Commence	;
	2	Check ► if the four	ndation is not required to a	attach Sch B	BAL SPACEST	1			
	3	Interest on savings and te	mporary cash investments						
	4 5	Dividends and interest from Gross rents	m securities		8,032.	8,03	2.	8,032.	
	:	b Net rental income or (loss).			, , , , , , , , , , , , , , , , , , ,		. (4)	* * * * * * * * * * * * * * * * * * *	· · · · · · · · ·
R		Net gain or (loss) from sa Gross sales price for			16,805.	, , , , , , , , , , , , , , , , , , , ,	, 🐇	****	* ***
R E V	٦,	assets on line 6a	ome (from Part IV, Iir	465.		16,80	5		275 485 ± 4
E N	8	Net short-term capital	•		** * * * * * * * * * * * * * * * * * * *	3.4	<u>%</u>	7.	· / // // //
U	9	9 Income modifications 10 a Gross sales less			41484667646	*.	*	& *	**********
		allowances				7			
		Less Cost of goods sold							- 2
	111	Gross profit or (loss) (atta Other income (attach					λ,		<u> </u>
	' '	,	·						
	12		through 11 icers, directors, truste		29,837.	24,83	7.	8,039.	
	14	Other employee sale		ees, etc	0.				
	15	Pension plans, empl	•					IED \	
A	; i	Legal fees (attach so Accounting fees (atta	255	ST 1	3,513.	- DEC		VCD \Q\	3,513.
Ņ	' '	Other professional fees (a	•		3,313.	h		0018 181	3,313.
O I	17	Interest	CEE C	тим о		MA MA	7	1 5018 105	456
O I SERAT	18	Taxes (attach schedule)(see Depreciation (attach		IM Z	156.		<u> </u>		156.
l i		schedule) and deple				/m/	R	EN. Com	
N V		Occupancy . Travel, conferences,	and meetings				عرر		
A E	22	Printing and publicat							
D P	23	Other expenses (atta	ach schedule) EE STATEME	ENT 3	2,651.	2,58	6.		65.
A N D E N S E S	24	Total operating and	administrative						
S	25	expenses. Add lines Contributions, gifts, grants	0004	T 4	6,320. 50,000.	2,58	٠. ا	State of the state	3,734. 50,000.
	26	Total expenses and	disbursements.						
	27	Add lines 24 and 25 Subtract line 26 from			56,320.	2,58	٥.		53,734.
		Excess of revenue of and disbursements	over expenses		-26,483.		, , , , ,		
	1	and dispursements Net investment inco		r -0-)	-20,483.	22,25	1.		
	- 1	C Adjusted net income	· -			ACEBRIT GO. T. P.)	8,039.	

Parl		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		or year
i şain		Balance Sheets column 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	14,881.	16,172	
	2	Savings and temporary cash investments	4,409.	3,355	
	3	Accounts receivable			Lei nig h
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable			· 'F' ''
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other	,		
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach sch)			
A S		Less: allowance for doubtful accounts ▶			
š	8	Inventories for sale or use			
A S E T	9	Prepaid expenses and deferred charges .			
Ś	10:	a Investments — U S and state government obligations (attach schedule)			
	1	b Investments — corporate stock (attach schedule)			
	(c Investments — corporate bonds (attach schedule)			
	11	Investments — land, buildings, and equipment basis			
		Less, accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans .			
	13	Investments - other (attach schedule)	358,798.	332,078	. 425,093.
	14	Land, buildings, and equipment. basis ▶			
		Less: accumulated depreciation (attach schedule)			
	15 16	Other assets (describe Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	378,088.	351,605	444,620.
_	17	Accounts payable and accrued expenses	370,000.	331,003	3723
Ī	18	Grants payable .			
A B	19	Deferred revenue	·		
Ī	20	Loans from officers, directors, trustees, & other disqualified persons			
ī	21	Mortgages and other notes payable (attach schedule)			
Ť	22	Other liabilities (describe►)		-	
E		`			
E S	23	· · · · · · · · · · · · · · · · · · ·	0.	0	` ',
		Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31.			
NF	24	Unrestricted .	378,088.	351,605	
E U	25	Temporarily restricted			
D	26	Permanently restricted			
A B S A L T A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
E L T A	27	Capital stock, trust principal, or current funds .			
ŚΝ̈́	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
O E	29	Retained earnings, accumulated income, endowment, or other funds			
RS	30	Total net assets or fund balances (see instructions)	378,088.	351,605	
	31	Total liabilities and net assets/fund balances (see instructions)	378,088.	351,605	
Par	t III	Analysis of Changes in Net Assets or Fund Balanc	es		
1	Tota end-	Il net assets or fund balances at beginning of year — Part II, colu-of-year figure reported on prior year's return)	umn (a), line 30 (must a	agree with	378,088.
2	Ente	er amount from Part I, line 27a		2	
3	Other	increases not included in line 2 (itemize) .			
4	Add	lines 1, 2, and 3		. 4	302/0001
5	Decre	eases not included in line 2 (itemize)		<u> 5</u>	
6	Tota	of net assets or fund balances at end of year (line 4 minus line 5)) - Part II, column (b),	line 30 6	351,605.

rai	(a) List and describe	the kind(s) of property sold (for exampouse; or common stock, 200 shares	ole, real estate,	(b) How acc P — Purch D — Dona	iase	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a	SEE STATEMENT 5			D - Done			
	<u> </u>						
	<u> </u>						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa			(h) Gain or ((e) plus (f) m	
							
!							
			· · -			 	···
							-
<u>`</u>		l ring gain in column (h) and owned l	by the foundation on 12/31.	/69		(I) Cours (Col.	(h)
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	.03	g th	(I) Gains (Col. ain minus col. (k), b an -0-) or L osses (fr	ut not less
	1						
I)						
	;			-			
	1						
			····				
2	Capital gain net income or (ne	t capital loss). — If gain, also	enter in Part I, line 7 ter -0- in Part I, line 7	-	2		16,805.
3	Net short-term capital gain or	(loss) as defined in sections 1222(5	b) and (6):				
	If gain, also enter in Part I, line in Part I, line 8	e 8, column (c) See instructions If	(loss), enter -0-	-	3		7.
Pai	t V - Qualification Under	Section 4940(e) for Reduce	ed Tax on Net Investm	ent Inco	ome		
Was If 'Ye	es,' the foundation doesn't quali	this part blank. Ction 4942 tax on the distributable a fy under section 4940(e). Do not co each column for each year; see the in	mplete this part.	•	d?	Yes	X No
		(b)	(c)	Citation.		(d)	
	(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use as:	sets		Distribution (col (b) divided	
	2016	52,650.	44	9,273.			0.117189
	2015	58,377.		8,114.			0.117196
	2014	58,363.		0,912.			0.097124
	2013	63,598.		8,493.			0.108069
	2012	87,641.	66	6,030.		ī	0.131587
2	Total of line 1, column (d)				2		0.571165
3	Average distribution ratio for the number of years the foundation	5-year base period – divide the total on has been in existence if less than	on line 2 by 5 0, or by the 5 years		3		0.114233
4	Enter the net value of nonchar	itable-use assets for 2017 from Par	t X, line 5		4		443,567.
5	Multiply line 4 by line 3				5		50,670.
				}			30,070.
6	Enter 1% of net investment inc	come (1% of Part I, line 27b)			6		
6 7	Enter 1% of net investment inco	come (1% of Part I, line 27b)			6 7		223.
	Add lines 5 and 6 Enter qualifying distributions fr				7 8		223.

Form 990-PF (2017) CONLEY FAMILY FOUNDATION	7 41-1949696 Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a)), 4940(b), 4940(e), or 4948 – see instructions)
1 a Exempt operating foundations described in section 4940(d)(2), check here and el	nter 'N/A' on line 1.
Date of ruling or determination letter: (attach copy of letter if necess	•
b Domestic foundations that meet the section 4940(e) requirements in Part V,	- <u>1</u> <u>223.</u>
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 Pa	art I, line 12, col. (b)
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable	
foundations only, others, enter -0-)	2 0.
3 Add lines 1 and 2	3 223.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable found	
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less	5 223.
6 Credits/Payments: a 2017 estimated tax pmts and 2016 overpayment credited to 2017	6a 223.
b Exempt foreign organizations — tax withheld at source	6b 223.
c Tax paid with application for extension of time to file (Form 8868)	6c
d Backup withholding erroneously withheld	6d
7 Total credits and payments Add lines 6a through 6d	. 7 223.
	rm 2220 is attached 8
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 overpaid	▶ 10
11 Enter the amount of line 10 to be Credited to 2018 estimated tax .	Refunded > 11
Part VII-A Statements Regarding Activities	
 1 a During the tax year, did the foundation attempt to influence any national, state participate or intervene in any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for politic See the instructions for the definition 	1a X
If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and coor distributed by the foundation in connection with the activities.	opies of any materials published
c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) import (1) On the foundation e Enter the reimbursement (if any) paid by the foundation during the year for political foundation managers. S	managers •\$ 0.
3 Has the foundation made any changes, not previously reported to the IRS, in its go of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a comparation of the incorporation of the incorporation of the incorporation of the incorporation.	overning instrument, articles onformed copy of the changes 3 X
4a Did the foundation have unrelated business gross income of \$1,000 or more	
b If 'Yes,' has it filed a tax return on Form 990-T for this year?	4b N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. <u>5 X</u>
If 'Yes,' attach the statement required by General Instruction T	** ** ** ** ** ** ** ** ** ** ** ** **
 6 Are the requirements of section 508(e) (relating to sections 4941 through 494 By language in the governing instrument, or 	45) satisfied either:
 By state legislation that effectively amends the governing instrument so that no rwith the state law remain in the governing instrument? 	mandatory directions that conflict
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete P	
8 a Enter the states to which the foundation reports or with which it is registered MN	1 See Instructions.
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorne (or designate) of each state as required by <i>General Instruction G?</i> If 'No,' attach explanation	
9 Is the foundation claiming status as a private operating foundation within the for calendar year 2017 or the tax year beginning in 2017? See the instruction	e meaning of section 4942(j)(3) or 4942(j)(5) ns for Part XIV If 'Yes,' complete Part XIV 9 X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' atta and addresses	ach a schedule listing their names
BAA	FORM 330-FF (2017)

	m 990-PF (2017) CONLEY FAMILY FOUNDATION 41-1949	696	Page 5
Pai	rt VII-A Statements Regarding Activities (continued)		T
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
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement. See instructions	12	x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	Х
14	The books are in care of ► RICHARD M. CONLEY Telephone no ► 763	-475-0	123
15	Located at 2910 HOLLY LANE N, STE 100 PLYMOUTH MN ZIP + 4 55447-1 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	73 <u>3</u> N/Ā	N/A
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country		
Pai	rt 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
1 a	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?	o	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No.	l'	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No. Yes X No.	i i	,
	(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.		
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.).		
I	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	1 b	N/A
•	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?	1 c	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)):	-	
i	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 ► 20 _ , 20 _ , 20 _ , 20	o	
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions.)	2 b	N/A
•	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20 , 20 , 20 , 20	~	
3 8	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X N	o	
ŀ	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, Form 4720, to determine if the foundation had excess business holdings in 2017.)	3 b	N/A
4 8	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a	х
 	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?	4 b	X
BAA		Form 99	0-PF (2017)

Form 990-PF (2017) CONLEY FAMILY FOU				49696	Page 6
Part VII-B Statements Regarding Activit		n 4720 May Be Req	uired (continued)		1
5 a During the year, did the foundation pay or incur a	-			. L	Yes No
(1) Carry on propaganda, or otherwise attem	_		∐ Yes ∑	No 🖟	,
(2) Influence the outcome of any specific put on, directly or indirectly, any voter registr		n 4955), or to carry	. Yes X	No S	
(3) Provide a grant to an individual for travel		purposes? .	L	No a	
	•	•] - Y
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? See instructions	i a chamable, etc., organ S	ization described	. Yes X	No No	
(5) Provide for any purpose other than religion	ous charitable scientifi	c literary or] ,	
educational purposes, or for the prevention	on of cruelty to children	or animals?	Yes X	No	
b If any answer is 'Yes' to 5a(1)–(5), did any o described in Regulations section 53.4945 or in a See instructions	f the transactions fail to current notice regarding o	qualify under the exce disaster assistance?	ptions	5 b	N/A
Organizations relying on a current notice rega	ardına disaster assistan	 ce check here	. ▶ [1 200	N/A
, ,	J	•	L		
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respor	the foundation claim ex isibility for the grant?	temption from the	N/A Yes	No	
If 'Yes,' attach the statement required by Reg		5-5(d).		」 <u> </u>	
6 a Did the foundation, during the year, receive a on a personal benefit contract?	ny funds, directly or inc	directly, to pay premium	s . Yes X	No	
b Did the foundation, during the year, pay prem	nums, directly or indirec	ctly, on a personal bene	fit contract?	6b	X
If 'Yes' to 6b, file Form 8870.			_	ni si	R
7a At any time during the tax year, was the foun			action? Yes	No	
b If 'Yes,' did the foundation receive any proces				N/A 7b	
Part VIII Information About Officers, D	irectors, Trustees,	Foundation Manage	gers, Highly Paid	Employee	s,
and Contractors	<u> </u>		-		
1 List all officers, directors, trustees, and foun	T		Ť	Т-	
(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	مسمطاهما	se account, allowances
SEE STATEMENT 6			- component	 	
		l o.	0.		0.
			· · · · · · · · · · · · · · · · · · ·		
				<u> </u>	<u></u>
	}				
	}				
2 Compensation of five highest-paid employees (o	thor than those included	on line 1 - cae instructio	nc) If none enter 'NONE	<u> </u>	
		on line 1 — see histraction	(d)Contributions to		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Expense other a	se account, illowances
NONE			<u> </u>		,
			 	 	
	1			ì	
			-	 	
				<u> </u>	
		_			
Total number of other employees paid over \$50,000)				0

Form **990-PF** (2017)

BAA

Form **990-PF** (2017)

3 Five highest-paid independent contractors for professional services. Se	e instructions. If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
]	
	_	
	4	
	4	
	-	
		
	1	
	_	
	4	
ΦΕΟ 000 formation		
otal number of others receiving over \$50,000 for professional services		
st the foundation's four largest direct charitable activities during the tax year. Include relevant stati- ganizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 N/A		Expenses
2		
3		
4		
Part IX:B Summary of Program-Related Investments (see inst	tructions)	
ditable founding of Frogram Monaton invocation (000 mon		
	the tax year on lines 1 and 2.	Amount
Describe the two largest program-related investments made by the foundation during		Amount
Describe the two largest program-related investments made by the foundation during		Amount
Describe the two largest program-related investments made by the foundation during		Amount
Describe the two largest program-related investments made by the foundation during		Amount
Describe the two largest program-related investments made by the foundation during N/A		Amount
Describe the two largest program-related investments made by the foundation during N/A		Amount
Describe the two largest program-related investments made by the foundation during 1 N/A 2 All other program-related investments See instructions.		Amount
Pescribe the two largest program-related investments made by the foundation during N/A		Amount
Describe the two largest program-related investments made by the foundation during 1 N/A 2 All other program-related investments See instructions.		Amount

Page 8

Par	see instructions.)	eign ioi	inuations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes Average monthly fair market value of securities		450, 333
	Average of monthly cash balances	1 a	450,322.
	Fair market value of all other assets (see instructions)	1 c	
	Total (add lines 1a, b, and c)	1 d	450,322.
	Reduction claimed for blockage or other factors reported on lines 1a and	355	430,322.
·	1c (attach detailed explanation) . 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	450,322.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	6,755.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	443,567.
6	Minimum investment return. Enter 5% of line 5	6	22,178.
Par		tina four	
L	and certain foreign organizations, check here ▼ X and do not complete this part.)		
1	Minimum investment return from Part X, line 6. N/A	1	-
2 a	Tax on investment income for 2017 from Part VI, line 5 . 2a	3.1	
b	Income tax for 2017. (This does not include the tax from Part VI.)	!	
c	Add lines 2a and 2b	2 c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
_ 7_	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
Par	Qualifying Distributions (see instructions)		
1 a	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1 a	53,734.
b	Program-related investments — total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 a	Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required)	3 a	
b	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 .	4	53,734.
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	223.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	53,511.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four qualifies for the section 4940(e) reduction of tax in those years.	ndation	
BAA		F	orm 990-PF (2017)

Form 990-PF (2017)

Part XIII Undistributed Income (see inst	ructions)	N/A		
	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2017: a Enter amount for 2016 only				
b Total for prior years: 20 , 20 , 20	50 /43000 HW			
3 Excess distributions carryover, if any, to 2017:		FERT WAR IT		
a From 2012				
b From 2013				
c From 2014				
d From 2015				
e From 2016 .				
f Total of lines 3a through e				
4 Qualifying distributions for 2017 from Part	M'	5 -0.38; 1 -2.3 -3.5		
XII, line 4. ► \$				
			The color of the color	
a Applied to 2016, but not more than line 2a		, M) + 1 / 8, 4	20	
 Applied to undistributed income of prior years (Election required – see instructions) 				
 Treated as distributions out of corpus (Election required — see instructions) 				
d Applied to 2017 distributable amount		('KK: // k		
e Remaining amount distributed out of corpus	····	. I (,2,	* * * * * * * * * * * * * * * * * * * *	i Yay w
5 Excess distributions carryover applied to 2017			* **	* * * 7 **
(If an amount appears in column (d), the				
same amount must be shown in column (a).)				
6 Enter the net total of each column as				
indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	the ex secondarion seems where we			
	***	× × × × × × × × × × × × × × × × × × ×		
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
income for which a notice of deficiency has been issued, or on which the section 4942(a)				
tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable	2 3 3 3 3 1 ·			(3) (2) (3)
amount — see instructions.				
e Undistributed income for 2016. Subtract line 4a from				
line 2a Taxable amount — see instructions.	W , 12 m , 14 M		,	
f Undistributed income for 2017 Subtract lines				u
4d and 5 from line 1. This amount must be				
distributed in 2018 .				
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Electión may be required – see instructions).				
may be required — see instructions;	·		78.5-8	
8 Excess distributions carryover from 2012 not				
applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9:	The State of the S		And Maria	
a Excess from 2013				
b Excess from 2014				
		Mithe (Site		park Williams
c Excess from 2015				
d Excess from 2016				fi fi
e Excess from 2017				
BAA				Form 990-PF (2017)

Form 990-PF (2017) CONLEY FAMILY FOU	JNDATION			41-1949696	5 Page 10
Part XIV Private Operating Foundat	ions (see ınstru	ctions and Part	VII-A, question	9)	
1 a If the foundation has received a ruling or dete is effective for 2017, enter the date of the	ruling			<u>.</u> ` ►[12/31/08
b Check box to indicate whether the foundat	ion is a private ope	rating foundation de	escribed in section	X 4942(j)(3) or/	4942(j)(5)
2 a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year Prior 3 years				(e) Total
investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
each year listed .	8,039.	10,427.	11,230.	/12,568.	42,264.
b 85% of line 2a	6,833.	8,863.	9,546.	10,683.	35,925.
c Qualifying distributions from Part XII, line 4 for each year listed	53,734.	52 <u>,6</u> 50.	58,37 <u>7</u> .	58,363.	223,124.
d Amounts included in line 2c not used directly for active conduct of exempt activities					0.
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	53,734.	52,650.	58,377.	58,363.	223,124.
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter:		272 622	404.050	470 000	1 600 101
(1) Value of all assets	351,603.	378,088.	424,052.	478,388.	1,632,131.
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	332,035.	358,798.	407,961.	455,825.	1,554,619.
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	•				
Pärt:XV Supplementary Information	(Complete this	part only if the	foundation had	\$5,000 or more	in
assets at any time during th	e year – see ins	tructions.)		4 -,	
1 Information Regarding Foundation Manag	jers:			 -	
a List any managers of the foundation who have close of any tax year (but only if they have NONE	e contributed more the contributed more t	an 2% of the total co han \$5,000) (See s	ntributions received t section 507(d)(2))	by the foundation befo	ore the
b List any managers of the foundation who own a partnership or other entity) of which the	10% or more of the s	stock of a corporation	n (or an equally large	portion of the owners	ship of
NONE	iounualion nas a re	of greater intere	31		
2 Information Regarding Contribution, Grant, C	Gift, Loan, Scholarsh	ip, etc., Programs:			
Check here ► X if the foundation only ma requests for funds. If the foundation makes	kes contributions to p	reselected charitable	e organizations and d janizations under of	oes not accept unsol ther conditions, com	icited iplete items
2a, b, c, and d See instructions.			-linedian all - 147		
a The name, address, and telephone number or	email address of the	person to wnom app	dications should be a	adaressed	
b The form in which applications should be s	submitted and inforr	nation and material	s they should include	 de	
c Any submission deadlines:					
46		unal one na latin de d	do fields turneds of	additional as all a	factors
d Any restrictions or limitations on awards, s	uch as by geograph	ncai areas, charitat	ne neius, kinas of II	isitutions, or other	iaciois.

Page **11**

3 Grants and Contributions Paid During the Y	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Purpose of grant or contribution	Amount
a Paid during the year				
		İ		ļ
]]		
		1		1
		1		
]		1
		1		
Total .			> 3a	1
b Approved for future payment				
		1		Ì
		1		
		, ,		
		1		
]]		
	1			
	1	}		ł
		[
Total	<u> </u>	<u> </u>		
i Viai	• •			1

Enter gross	s amounts unless otherwise indicated	Unrelat	ed busii	ness incom	ne _	Excluded	d by se	ection 512,	513, or 514	.	(e)
•	•	(a) Business code		(b) Amount		(c) Exclu- sion		(d) Amo		fu	lated or exempt inction income see instructions)
1 Prog	ram service revenue:		<u> </u>			code				, (5)	
a			ļ								<u> </u>
b						<u></u>					
°			ļ				 				
d			ļ								
e										<u> </u>	
1							<u> </u>			_	
-	and contracts from government agencies		ļ				<u> </u>			 	
	bership dues and assessments	ļ	<u> </u>				_			4	
	st on savings and temporary cash investments		 				<u> </u>			- 	
	lends and interest from securities ental income or (loss) from real estate:			. Asi	100			*********			<u>8,032.</u>
	-financed property	%3, , , , , ,	Wije.	- K-R &	. db. V	, 1 m; 100m;	»		***./	1.3%	
	debt-financed property	-									
	intal income or (loss) from personal property						├			 	
	r investment income		1				├─-			+	
	or (loss) from sales of assets other than inventory		 				<u> </u>			 	16 005
	ncome or (loss) from special events		-				<u> </u>			+	16,805.
	s profit or (loss) from sales of inventory		-							+	 -
	r revenue	* * * .	#4·	7//	, J.	. >>	3	///	77	See See	, y
а		******	* "	* 30* %	- 75					7,, 4	J× /%×
b		 	-				_		·	†	
c											
d											
е											
	otal. Add columns (b), (d), and (e)	~ () / N				, , , , , , , , , , , , , , ,					24,837.
	l. Add line 12, columns (b), (d), and (e)								13		24,837.
	sheet in line 13 instructions to verify calculati	<u> </u>									
Part XVI	-B Relationship of Activities to the	e Accompl	ishme	ent of Ex	empt	t Purpe	oses	<u> </u>			
Line No. ▼	Explain below how each activity for which is accomplishment of the foundation's exempt	ncome is rep t purposes (o	orted in ther tha	column (ean by provi	e) of P ding fu	art XVI- unds for	A cor such	ntributed purpos	l importai es). (See	ntly to tl instruc	he tions) —————
<u> N/A</u>											
										_	
	<u></u>										
											
	 					-			 .		
											
			-					_			
											
	 			_							
			_	_				-			
					_						·
				-							
						-		-			
								_			
											
											-
											

Form 990-PF (2017) CONLEY FAMILY FOUNDATION 41-1949696 Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

•				1, 6 4, 5	Yes No
describe	organization directly or indirectly d in section 501(c) of the Code to political organizations?	engage in any of the following wi (other than section 501(c)(3) organ	th any other organization nizations) or in section 527,		103
a Transfer	s from the reporting foundation	to a noncharitable exempt organiz	ation of:		,, , , , ,
(1) Cash			••	1 a (1)	X
(2) Othe	er assets			1 a (2)	X
b Other tra	ansactions:			1.18	4) 1\$]
(1) Sale	s of assets to a noncharitable e	xempt organization		1 b (1)	X
(2) Purd	hases of assets from a nonchar	itable exempt organization.		1 b (2)	X
(3) Rent	tal of facilities, equipment, or otl	ner assets		1 b (3)	X
(4) Rein	nbursement arrangements			1 b (4)	$\frac{1}{x}$
(5) Loar	ns or loan guarantees			1 b (5)	$\frac{1}{x}$
• •	ormance of services or members			1 b (6)	X
		lists, other assets, or paid employ	ees	1 c	$\frac{x}{x}$
. 3		,, parap,			<u> </u>
d If the an the goods any trans	swer to any of the above is 'Yes s, other assets, or services given b saction or sharing arrangement,	s,' complete the following schedule by the reporting foundation. If the four show in column (d) the value of the	i. Column (b) should always show the fair indation received less than fair market value in the goods, other assets, or services receive	market valu า ed	e of
(a) Line no.		e of noncharitable exempt organization	(d) Description of transfers, transactions, and		ements
N/A					·
<u> </u>					
		······································			
		· · · · · · · · · · · · · · · · · · ·			
describe	indation directly or indirectly affilial d in section 501(c) of the Code (complete the following schedule	ted with, or related to, one or more ta (other than section 501(c)(3)) or in	ix-exempt organizations i section 527? .	Yes	XNo
	Name of organization	(b) Type of organization	(c) Description of rel	ationship	
N/A		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(-)		
,					
	,				
Under po	enalties of perjury, I declare that I have exa	mined this return, including accompanying sci	hedules and statements, and to the best of my knowledg	e and belief, it is	s true.
Sign correct,	and complète Déclaration of preparer (other	er than taxpayer) is based ŏn all information o	of which preparer has any knowledge PRESIDENT & CEO	May the IR: this return	S discuss with the
Signat	rure of officer or trustee	Date	Title	See instruc	ctions
	Print/Type preparer's name	Preparer's signature	1 Tosts	PTIN	-3 NO
	7				224
Paid	DANA J. ZAHLER	DANA J. ZAHLER	S/14/1X self-employed	P012592	224
reparer	Firm's name PETERSON,		TD. Firm's EIN 4117	06837	
Jse Only	Firm's address 750 BOONE			\	1.0
	MINNEAPOI	IS, MN 55427	Phone no (763) 545-71	
BAA				Form 990-	-PF (2017)

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

Department of the Treasury Internal Revenue Service

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

2017

Employer identification number

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

CONLEY FAMILY FOUNDATION		41-1949696
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 pri	vate foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the Genera	Rule or a Special Rule.	
Note. Only a section 501(c)(7), (8), or (10) orga	anization can check boxes for both the General Rule and a	Special Rule See instructions
General Rule		
X For an organization filing Form 990, 990-EZ property) from any one contributor. Comple	7, or 990-PF that received, during the year, contributions to the Parts I and II. See instructions for determining a contribu- tion.	aling \$5,000 or more (in money or utor's total contributions
Special Rules		
under sections 509(a)(1) and 170(b)(1)(A)(vi).	1(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% sup that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, ne year, total contributions of the greater of (1) \$5,000 or (20-EZ, line 1. Complete Parts I and II.	16a, or 16b, and that
For an organization described in section 50 during the year, total contributions of more purposes, or for the prevention of cruelty to	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received than \$1,000 <i>exclusively</i> for religious, charitable, scientific, to children or animals. Complete Parts I, II, and III.	from any one contributor, iterary, or educational
during the year, contributions exclusively for \$1,000 If this box is checked, enter here the charitable, etc., purpose. Don't complete an	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received or religious, charitable, etc., purposes, but no such contribute total contributions that were received during the year for many of the parts unless the General Rule applies to this organole, etc., contributions totaling \$5,000 or more during the year	ions totaled more than an <i>exclusively</i> religious, nization because
Caution. An organization that isn't covered by t 990-PF), but it must answer 'No' on Part IV, lin Part I, line 2, to certify that it doesn't meet the	he General Rule and/or the Special Rules doesn't file Sche e 2, of its Form 990, or check the box on line H of its Form filing requirements of Schedule B (Form 990, 990-EZ, or 99	dule B (Form 990, 990-EZ, or 990-EZ or on its Form 990-PF, 0-PF)

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

	B (Form 990, 990-EZ, or 990-PF) (2017)	Page	1 of 1 of Part
Name of org	anization Y FAMILY FOUNDATION		r Identification number
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RICHARD M. & SHARON A. CONLEY 2910 HOLLY LANE NORTH PLYMOUTH, MN 55447	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Omplete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash

(Complete Part II for noncash contributions)

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

Page

1 to

1 of Part II

Name of organization.
CONLEY FAMILY FOUNDATION

Employer identification number

41-1949696

Rart 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	(c) FMV (or estimate) (See instructions.)	(d) Date received						
	N/A	\$							
(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						
		\$							
BAA	Sche	 edule B (Form 990, 990-E	Z, or 990-PF) (2017						

of Part III

Name of organization Employer identification number CONLEY FAMILY FOUNDATION 41-1949696 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once. See instructions.) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held N/A (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4

2017 .	FEDERAL STATEMENTS	PAGE 1		
CLIENT 5	CONLEY FAMILY FOUNDATION	41-1949696		
5/14/18		09:13AM		
STATEMENT 1 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES				
	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME \$ 3,513.	\$ 3,513.		
	TOTAL \$ 3,513. \$ 0. \$ 0	. \$ 3,513.		
STATEMENT 2 FORM 990-PF, PART I, LINE 18 TAXES				
	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED	(D) CHARITABLE		
	PER BOOKS INCOME NET INCOME TOTAL \$ 156. \$ 0. \$ 0.	\$ 156.		
STATEMENT 3 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES				
BANK SERVICE CHARGE FILING FEES INVESTMENT FEES	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME \$ 40. 25. 25. 2,586. \$ 2,586. TOTAL \$ 2,651. \$ 2,586. \$ 0.	(D) CHARITABLE PURPOSES \$ 40. 25.		
STATEMENT 4 FORM 990-PF, PART I, LINE 25				
CONTRIBUTIONS, GIFTS, AND GR CASH GRANTS AND ALLOCATIONS				
DONEE'S NAME: DONEE'S ADDRESS:	MINNEAPOLIS FOUNDATION 800 IDS CENTER 80 SOUTH EIGHTH ST			
ORGANIZATIONAL STATUS OF DO AMOUNT GIVEN:	MINNEAPOLIS MN 55402	\$ 42,500.		
DONEE'S NAME: DONEE'S ADDRESS:	WATERSTONE 2925 PROFESSIONAL PLACE STE 201 COLORADO SPRINGS CO 80904	·		
ORGANIZATIONAL STATUS OF DO AMOUNT GIVEN:		7,500.		
	TOTAL	\$ 50,000.		

•

1

\sim	_
-71	
/ L	

FEDERAL STATEMENTS

PAGE 2

CLIENT 5

CONLEY FAMILY FOUNDATION

41-1949696

5/14/18

09 13AM

STATEMENT 5 FORM 990-PF, PART IV, LINE 1 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

ITEM		(A) DE	SCRIPTION		(B) H ACOUII	OW RED	(C) DATE _ACQUIRED_	(D) DATE SOLD
1	9.503 GATE	WAY FUND			PURCHA	SED	VARIOUS	4/17/20:
2	305.00 CSX	CORP			PURCHA	SED	8/20/2007	11/27/20
3	45 NORFOLK	SOURTHERN	CO		PURCHA	SED	8/20/2007	11/27/20:
4	310.00 POW	ERSHARES W	ATER RESOUR	RCE	PURCHA	SED	11/13/2007	11/27/203
5	56.47 PIMC	O ALL ASSE	r instl cl		PURCHA	SED	9/14/2017	11/27/203
6	287.28 PIM	ICO ALL ASSI	ET INSTL CI	L	PURCHA	SED	VARIOUS	11/27/20
7	15 SCHWAB	US AGGREGA'	TE BONDETF		PURCHA	SED	11/19/2015	7/24/20:
8	1046.22 PI	MCO ALL AS	SET INSTL (CL	PURCHA	SED	VARIOUS	11/27/20
				4	4-5		 .	(-)

	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)
	GROSS	DEPREC.	COST	GAIN	FMV	ADJ. BAS.	EXCESS	GAIN
ITEM	SALES	ALLOWED	<u>BASIS</u>	(LOSS)	12/31/69	12/31/69	(I) - (J)	(LOSS)
1	300.		298.	2.				\$ 2.
2	15,460.		4,390.	11,070.				11,070.
3	5,737.		2,364.	3,373.				3,373.
4	9,231.		6,550.	2,681.				2,681.
5	689.		684.	5.				5.
6	3,504.		3,569.	-65.				-65.
7	785.		774.	11.				11.
8	12,759.		13,031.	-272.				<u>-272.</u>
							TOTAL	\$ 16,805.

STATEMENT 6 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOU PER WEEK DEVO	RS COMPEN-	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
RICHARD MICHAEL CONLEY 2910 HOLLY LANE NORTH PLYMOUTH, MN 55447	CEO 15.00	\$ 0.	\$ 0.	\$ 0.
SHARON ANN CONLEY 2910 HOLLY LANE NORTH PLYMOUTH, MN 55447	COO 8.00	0.	0.	0.
CHARLES DARTH 5761 OAKVIEW LANE NORTH PLYMOUTH, MN 55442	TRUSTEE 1.00	0.	0.	0.
CURTIS EDWARD LANGE 2730 MERIDIAN DRIVE ROBBINSDALE, MN 55442	TRUSTEE 1.00	0.	0.	0.
KAREN HOLTMEYER 215 BARRY AVENUE SOUTH, #120 WAYZATA, MN 55391	TRUSTEE 1.00	0.	0.	0.
	T	OTAL \$ 0.	\$ 0.	<u>\$ 0.</u>