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.

2017

| | | | ocial security numbers on gov/Form990PFtor instr | | | | | Q _r | pen to Public Inspec |
|-----------|----------------------------|---|---|--|----------------|--------------------|------------------------|------------------|--|
| Fo | r cal | endar year 2017 or tax year beginning | | 19 , 2017 , | | ing | | | 12/31,20 |
| | | of foundation | | | | A | Employe | | ication number |
| | | FAMILY FOUNDATION | · | | | | | | 4952607 |
| ١ | lumbe | er and street (or P O box number if mail is not delivere | d to street address) | . — | Room/suit | e B | Telephor | ne numbe | er (see instructions) |
| 1 | PO ' | BOX 0634 | - | | | | | 65 | 1-466-8040 |
| _ | | town, state or province, country, and ZIP or foreign po | stal code | | | -+ | | | 1-400-0040 |
| | · | | | | | С | | on applica | tion is . |
| I | MIL | WAUKEE, WI 53201-0634 | | | • | | pending, c | heck here | |
| | | ck all that apply: X Initial return | Initial return | of a former p | ublic cha | rity | 1 Foreign | organizat | ions, check here > |
| | | Final return | Amended ret | turn | | - | 2 Foreign | organizat | ions meeting the |
| | | Address change | Name change | e | @ / | | | | ere and attach |
| H | Che | ck type of organization. X Section 501 | (c)(3) exempt private f | oundation | . 192 | | | | |
| \prod | s | ection 4947(a)(1) nonexempt charitable trust | Other taxable pr | ivate foundat | ion | | | | status was terminated)(1)(A), check here |
| 1 | Fair | market value of all assets at J Acco | ounting method: X Co | ash 📘 Acc | rual | F | | | n a 60-month termination |
| | end | of year (from Part II, col (c), line | Other (specify) | | | | under sect | ion 507(b |)(1)(B),check here . > |
| | | | column (d) must be on ca | sh basis) | | | | | |
| P | art | Analysis of Revenue and Expenses (The | (a) nevenue and | (b) Net inve | stment | (c) : | Adjusted | net | (d) Disbursement for charitable |
| | | total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in | expenses per books | incom | | (0) / | income | | purposes |
| _ | | column (a) (see instructions)) | | | | | de sus sustantes e e e | A THE ATTER CO. | (cash basis only |
| . | 1 | Contributions, gifts, grants, etc., received (attach schedule). | 5,836,034. | | | | | | 建筑的地面。 |
| 2.241-1 | 2 | attach Sch B | 文冊YSHIAG GENERAL STREET | 黑海海巴伊州山南 | - | W hild | hillipse2.# | est of | AND SECTION OF THE PARTY OF THE |
| اغ | 3 | Interest on savings and temporary cash investments. | 20. | | 20. | | | | LACE AND THE |
| - | 4 | Dividends and interest from securities | 401 010 | 40 | 1 010 | | | | Harter Tari |
| - | 5a | Gross rents | 481,818. | 48 48 | <u>1,818.</u> | Ty tento | | T.BHAT | THE THE PERSON |
| | | Net rental income or (loss) 202, 647 | an interment negrotation | THE THE | | THE TANK | | | |
| 2 | 6a b | Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a | N LITE LESS PRINCES | ガマラナ 地道 | | HIELDE! | | REC | EIVED |
| Š | , | | THE CASE PROPERTY. | and the fire editions | PROMICE AND A | Meno: | | LONG THE | SAME OF PARTY OF |
| Revenue | 7 8 | Capital gain net income (from Part IV, line 2) . | | et en Patrici | FOIL HELF | - Marine minima an | | VÛV : | 2:0≆2018-± ਼ ੀ |
| | 9 | Net short-term capital gain | CONTRACTOR OF THE | THE PLANT | THERE | | | | 温度 五元 |
| | | Gross sales less returns and allowances | SAME AND A | TAPETA TO | | 和的海 | E THE | VOD. | |
| 1 | ь | Less Cost of goods sold . | THE CONTRACTOR OF THE | 在时间 | 能認為斯 | SAUTO | ***** | JUD | LIV, (U) to asset |
| | | Gross profit or (loss) (attach schedule) | | 6年 性液肿增强 | 海和沿位城 | | | | 基础 为于伊朗的数型。 |
| | 11 | Other income (attach schedule) | | | | | | | TO A STATE OF THE |
| | 12 | Total. Add lines 1 through 11 | 6,317,872. | 48 | 1,838. | | | | RECEIPTED AND ADDRESS OF THE PERSON AND ADDR |
| | 13 | Compensation of officers, directors, trustees, etc | | | _ | | | | |
| Ses | 14 | Other employee salaries and wages | | | NONE | | | NONE | |
| ē | 15 | Pension plans, employee benefits | | | NONE | | | NONE | |
| Expense | 16a | Legal fees (attach schedule) | | ļ | | | | | |
| ن | b | Accounting fees (attach schedule) | | | | · | | | |
| | C | Other professional fees (attach schedule) | | | | _ | | | |
| וַנֵּ | 17: | Interest | | | | <u> </u> | | | ļ · · · · · · |
| Ë | 17 18 19 20 21 | Taxes (attach schedule) (see instructions) | 01 157 | | | | | | |
| ٤ | 19 | Depreciation (attach schedule) and depletion. | | | | _ | | | Careford National Section (1994) |
| ₹ | 20 | Occupancy | · · · · · · · · · · · · · · · · · · · | | NONE | | - | NONE | |
| 힐 | د ا 22 | Travel, conferences, and meetings | | | NONE | _ | | NONE | |
| | 23 | Printing and publications Other expenses (attach schedule) STMT . 2 . | 198,095. | 19 | 8,095 <u>.</u> | | | | |
| 듸 | 23 24 | Total operating and administrative expenses. | | | -,000. | | | | |
| era | -4 | Add lines 13 through 23 | 279,252. | 19 | 8,095. | | | NONE | <u> </u> |
| Operating | 25 | Contributions, gifts, grants paid | 859,600 | 利亞尼亞問題 | | 퉦뛖 | E 42431 | | |
| - 1 | 26 | Total expenses and disbursements Add lines 24 and 25 | 1 120 050 | | 8,095. | | | NONE | |
| ┪ | 27 . | Subtract line 26 from line 12 | では、対しては、数値数 | | 新松市 | 2 | | | and the same |
| | | Excess of revenue over expenses and disbursements | 5,179,020. | | 使短数 | | 的严助 | within any of 4x | 地震がはなっていた。 |
| | | Net investment income (if negative, enter -0-) | 康公子郎 北中沿岸 | | 3,743. | J. H. Triff | | HATE | F.Z.E. 24. 11. 1885 |
| . 1 | _ | Adjusted net income (if negative enter -0-). | WALLES THE TOTAL | | | | | | WHAT CHARLES |

JSA For Paperwork Reduction Act Notice, see instructions
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Form 990-PF (2017)

| | | Attached schedules and amounts in the | Beginning of year | End o | f year |
|--------------------|----------|--|--|--|--|
| L | art II | Balance Sheets description 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 | | 460,177. | 460,177 |
| | | Savings and temporary cash investments | | | |
| | | Accounts receivable > | | STATEMENT OF THE STATE OF THE S | ZZZWWWE ZE WYZE |
| | | Less allowance for doubtful accounts ▶ | | | |
| | | Pledges receivable | Mary Mary House | AFFIRM AND | her merchanical |
| | | Less allowance for doubtful accounts | | | |
| | | Grants receivable | | | |
| | . • | Receivables due from officers, directors, trustees, and other | | | |
| | _ | disqualified persons (attach schedule) (see instructions) | | | |
| | | Other notes and loans receivable (attach schedule) | *************************************** | THE PERSONNEL PROPERTY. | |
| | | Less allowance for doubtful accounts NONE | | | , |
| S | | Inventories for sale or use | | | |
| Assets | _ | Prepaid expenses and deferred charges | | | 1 |
| As | | Investments - U.S. and state government obligations (attach schedule). | | | ` |
| _ | | Investments - corporate stock (attach schedule) | | , | |
| | | Investments - corporate stock (attach schedule) | · · · · · · · · · · · · · · · · · · · | | |
| | 11 | Investments - land, buildings, 1 429 067 | HELTER WITH THE | THE PARTY OF THE PARTY. | THE STATE 3. |
| | | Less accumulated depreciation Q1 157 | principal and the second state of the second s | 1,346,910. | |
| | i | (attach schedule) | | 1,540,510. | 1,210,013 |
| | 12 | Investments - mortgage loans | | 500,000. | 500,000 |
| | 14 | Land, buildings, and | STATE OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND | | energy mineral |
| | | equipment basis Less accumulated depreciation | FUGAR E SAME | A STATE OF THE STA | |
| | | (attach schedule) | | - | <u> </u> |
| | | Other assets (describe ►) Total assets (to be completed by all filers - see the | | | , |
| | l | instructions Also, see page 1, item l) | | 2,307,087. | 5,179,020 |
| _ | <u> </u> | | - " | 2,307,007. | ADMINISTRATION OF |
| | | Accounts payable and accrued expenses | | , | |
| s | | Grants payable | | | |
| ţ. | _ | Deferred revenue | | • | |
| 藚 | | Loans from officers, directors, trustees, and other disqualified persons. | 1 | | |
| Liabilities | | Mortgages and other notes payable (attach schedule) Other liabilities (describe ▶) | | | |
| _ | 22 | Other liabilities (describe | | | |
| | 23 | Total liabilities (add lines 17 through 22) | | NONE | |
| _ | | | | | |
| s | | Foundations that follow SFAS 117, check here Land complete lines 24 through 26, and lines 30 and 31. | | | |
| õ | | | | | |
| alances | 24 | Unrestricted | | <u> </u> | |
| 8 | | Temporarily restricted | | | |
| Net Assets or Fund | 26 | Permanently restricted | · · · · · · · · · · · · · · · · · · · | | 含語道網 |
| Ē | | Foundations that do not follow SFAS 117, check here ► X and complete lines 27 through 31. | ļ | | |
| ō | | • | , | 2,307,087 | |
| Ŋ | 27 | Capital stock, trust principal, or current funds | | 2,301,001 | |
| set | 28 | Paid-in or capital surplus, or land, bldg , and equipment fund | | | |
| As | 29 | Retained earnings, accumulated income, endowment, or other funds | | 2,307,087 | |
| e | 30 | Total net assets or fund balances (see instructions) | | 2,301,001 | |
| Z | 31 | Total liabilities and net assets/fund balances (see | | 2 207 097 | |
| | | Instructions) | | 2,307,087 | Property and the state of the s |
| نا | art III | Analysis of Changes in Net Assets or Fund Ball | Il column (a) line 20 | must agree with | <u> </u> |
| 1 | lota | net assets or fund balances at beginning of year - Part | n, column (a), line 30 (| must agree with | |
| _ | end- | of-year figure reported on prior year's return) | | 2 | 5,179,020. |
| | | | | | 3,1,3,020. |
| | | er increases not included in line 2 (itemize) | | | 5,179,020. |

2,307,087. Form **990-PF** (2017)

5 Decreases not included in line 2 (itemize) ►TMV TO COST ADJ ON PROPERTY

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

| Part IV Capital Gain | s and Losses for Tax on Inv | estment Income | (b) How | | | | | |
|--|---|--|--------------|--|--------------|--|--|--|
| | (a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs MLC Co.) | | | | | | | |
| 1 a | | | D - Donation | | | | | |
| b | | | | | | | | |
| C | | | | | | | | |
| d | | | | | | | | |
| е | | | | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | | (h) Gain or (lo ((e) plus (f) min | | | | |
| <u>a</u> | | | | | | | | |
| b | | | | | | | | |
| С | | | | | | | | |
| <u>d</u> | | | | | | | | |
| _ <u>e</u> | | | | | | | | |
| Complete only for assets s | howing gain in column (h) and owned | by the foundation on 12/31/69 | (1) | Gains (Col (h) ga | iin minus | | | |
| (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 | col | (k), but not less t Losses (from co | | | | |
| a | | | | | | | | |
| b | | | | | | | | |
| С | | | | | | | | |
| d | | | | | | | | |
| е | | | | | | | | |
| - | e or (net capital loss) $ \begin{cases} & \text{if } i \end{cases} $ | • | 2 | | | | | |
| _ | | nstructions. If (loss), enter -0- in | | | | | | |
| | <u> </u> | | 3 | | | | | |
| Part V Qualification (| Juder Section 4940(e) for Rec | duced Tax on Net Investment I | ncome | N/ | <u>A</u> | | | |
| | | ibutable amount of any year in the b | ase perio | d ⁷ | Yes N | | | |
| | n't qualify under section 4940(e) | ar; see the instructions before making | ng any en | tries | | | | |
| (a) | | | lig arry cr | (d) | | | | |
| Base period years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitable-use assets | | Distribution ra (col (b) divided by | | | | |
| 2016 | | | | | | | | |
| 2015 | | | | | | | | |
| 2014 | | | | | | | | |
| 2013 | | - | | | | | | |
| 2012 | <u> </u> | | 1 | | | | | |
| | / D | | 2 | | | | | |
| | | | - | | | | | |
| • | • • | ide the total on line 2 by 5 0, or by | 3 | | | | | |
| the number of years the | e foundation has been in existence | e if less than 5 years | - | | | | | |
| 4 Enter the net value of n | noncharitable-use assets for 2017 | from Part X, line 5 | 4 | | | | | |
| 5 Multiply line 4 by line 3 | 3 | | 5 | | | | | |
| 6 Enter 1% of net investn | nent income (1% of Part I, line 27b |) | 6 | | | | | |
| 7 Add lines 5 and 6 | | | 7 | | | | | |
| 8 Enter qualifying distribution of the British is equal to or Part VI instructions | utions from Part XII, line 4 greater than line 7, check the bo | ox in Part VI, line 1b, and complete | that par | t using a 1% ta | ox rate. See | | | |

| Part | | nstru | ctions |) |
|------|--|--------------|---|-------------|
| 1a | Exempt operating foundations described in section 4940(d)(2), check here | 對握 | ورا الارام المالية. المالية المالية ال | 5.H |
| | 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 | | 5,6 | |
| | here ▶ and enter 1% of Part I, line 27b | | | TWP 4 |
| С | All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of | 6 P. 14 . | i i | \$\$.d |
| | Part I, line 12, col (b) | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) | | | <u>ONE</u> |
| 3 | Add lines 1 and 2 | | 5,6 | |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) | | | <u>ONE</u> |
| 5 | Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0 | | 5,6 | <u>75.</u> |
| 6 | Credits/Payments Credits/Payments | | | |
| а | 2017 estimated tax payments and 2016 overpayment credited to 2017 6a | | | |
| b | Exempt foreign organizations - tax withheld at source | | | |
| C | Tax paid with application for extension of time to file (Form 8868) 6c NONE | 型型 | | |
| d | Backup withholding erroneously withheld | التفقيلا | | <u> </u> |
| 7 | Total credits and payments Add lines 6a through 6d ' | | N | <u>ONE</u> |
| 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 | | 5,6 | <u>/5.</u> |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | | |
| 11 | Enter the amount of line 10 to be Credited to 2018 estimated tax ▶ NONE Refunded ▶ 11 | | | |
| | VII-A Statements Regarding Activities | G.A.S | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it | 1a | Yes | No X |
| | participate or intervene in any political campaign? | I a | | |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the | 1ь | i 1 | Х |
| | instructions for the definition | 重 " " | E TA | <u>.e41</u> |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials | 基基 | | |
| | published or distributed by the foundation in connection with the activities. | 1c | · | X |
| | Did the foundation file Form 1120-POL for this year? | Trackers. | Orberthan | <u> </u> |
| а | (1) On the foundation \$ \$ (2) On foundation managers \$ \$ | | | 色 |
| _ | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed | | 翻 | 初月 |
| e | on foundation managers \$ | | | ALVAL. |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 | | X |
| 2 | If "Yes," attach a detailed description of the activities | | profiler of | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of | | | |
| | incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | 3 | | <u>X</u> |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a | | <u>X</u> |
| | 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? | 5 | | X |
| | 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 | | | 調 |
| | By language in the governing instrument, or | | ほぼ | 펣 |
| | • By state legislation that effectively amends the governing instrument so that no mandatory directions that | 当時 | 1515 L | 进汽进 |
| | conflict with the state law remain in the governing instrument? | 6 | X | |
| 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 | 7 | X mining | 76.21 (.33 |
| 8a | Enter the states to which the foundation reports or with which it is registered. See instructions. | | | |
| | <u>MN</u> . | 羅西 | 4.0 | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General | | | -5140 |
| | (or designate) of each state as required by General Instruction G? If "No," attach explanation | 8b | X | 27738148 |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or | ·E.1 | Hater etc. | |
| | 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV If "Yes," | _ | | v |
| | complete Part XIV | 9 | - | X |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their | | | |
| | names and addresses | 10 | X | |
| | | orm 3: | 0-PF | 2017) |

| Part | t 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 | | | ı |
| | meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions | 11 | X | |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified | | | |
| | person had advisory privileges? If "Yes," attach statement. See instructions | 12_ | | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13_ | X | |
| | Website address ► N/A | | | |
| 14 | The books are in care of ▶ U.S. BANK, N.A. Telephone no ▶ (651) 466 | -828 | 2 | |
| | Located at ▶ 101 EAST 5TH STREET, ST. PAUL, MN ZIP+4 ▶ 55101 | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here | | ▶ | |
| | and enter the amount of tax-exempt interest received or accrued during the year | | | |
| 16 | At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority | | Yes | No |
| | over a bank, securities, or other financial account in a foreign country? | 16 | | X |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of | | | |
| | the foreign country | | | |
| Part | 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 |
| 1a | During the year, did the foundation (either directly) | | | |
| | (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? Yes X No | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available for | | | |
| | the benefit or use of a disqualified person)? | | | |
| | (6) Agree to pay money or property to a government official? (Exception Check "No" if the | | | |
| | foundation agreed to make a grant to or to employ the official for a period after | 1 | ' | |
| | termination of government service, if terminating within 90 days) | l l | | |
| ь | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | | | |
| _ | section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions | 1b | | |
| | Organizations relying on a current notice regarding disaster assistance, check here | | | |
| С | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that | | ļ | |
| | were not corrected before the first day of the tax year beginning in 2017? | 1c | <u> </u> | 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)): | | | |
| а | 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 | |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) | 1 | | |
| | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to | <u></u> | | |
| | all years listed, answer "No" and attach statement - see instructions.) | 2b | ļ | X |
| C | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | | | |
| | > | | | |
| 3а | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise | | | |
| | at any time during the year? | 1 | | |
| Ь | 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 | 1 | | |
| | the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the | <u></u> | | |
| | foundation had excess business holdings in 2017.) | 3b | | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | X |
| | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its | <u> </u> | | |
| | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017? | 4b | | X |
| | | Q (| 90-PF | 12017 |

| Part VII-B Statements Regarding Activities for Which | h Form 4720 May Be | Required (continued) | | |
|---|---|--|-------------------------|----------|
| 5a During the year, did the foundation pay or incur any amount to | | | 海 护 Y | es No |
| (1) Carry on propaganda, or otherwise attempt to influence legisl | ation (section 4945(e))? | Yes X No | | 正 湖 |
| (2) Influence the outcome of any specific public election (se | e section 4955), or to ca | orry on, | | |
| directly or indirectly, any voter registration drive? | | Yes X No | | |
| (3) Provide a grant to an individual for travel, study, or other simil | ar purposes? | X Yes No | | |
| (4) Provide a grant to an organization other than a charitable | | | | |
| section 4945(d)(4)(A)? See instructions | = | [1] | ' [ixxk_p*'// * | |
| (5) Provide for any purpose other than religious, charitable, | | | | |
| purposes, or for the prevention of cruelty to children or anima | | | | 医 |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transact | ons fail to qualify under | the exceptions described in | | 基建 |
| Regulations section 53 4945 or in a current notice regarding disa | ster assistance? See instruct | ions | 5b \ \\ | <u> </u> |
| Organizations relying on a current notice regarding disaster assist | ance, check here | | | 開調 |
| c If the answer is "Yes" to question 5a(4), does the foundati | on claim exemption from | the tax | | 學學 |
| because it maintained expenditure responsibility for the grant? | | | | |
| If "Yes," attach the statement required by Regulations section 53 | 1945-5(d). | | | |
| 6a Did the foundation, during the year, receive any funds, direct | tly or indirectly, to pay p | remiums | 19.42 | 選 基 |
| on a personal benefit contract? | | Yes X No | | |
| b Did the foundation, during the year, pay premiums, directly or indi | rectly, on a personal benefit | contract? | . 6b | X |
| If "Yes" to 6b, file Form 8870 | | | | Y Y |
| 7a At any time during the tax year, was the foundation a party to a p | | | | |
| b If "Yes," did the foundation receive any proceeds or have any net | ncome attributable to the tr | ansaction? | . 7b | |
| Part VIII Information About Officers, Directors, Trus and Contractors | tees, Foundation Ma | nagers, Highly Paid Em | ployees, | |
| 1 List all officers, directors, trustees, foundation managers | and their compensation | See instructions. | | |
| (a) Name and address hours | and average (c) Compensa per week (If not paid | tion (d) Contributions to employee benefit plans | (e) Expense a | |
| devoted | to position enter -0-) | and deferred compensation | other allow | ances |
| | | | | |
| SEE STATEMENT 7 | | | | |
| | | | | |
| | | | | |
| | | | | |
| · · · · · · · · · · · · · · · · · · · | <u> </u> | | | |
| | · | | | |
| 2 Compensation of five highest-paid employees (other | than those included o | on line 1 - see instruction | ons) If non | e enter |
| "NONE." | than those molades t | | | |
| | and average | (d) Contributions to employee benefit | (e) Expense a | account, |
| (a) Name and address of each employee paid more than \$50,000 hours devoted | per week (c) Compense to position | plans and deferred compensation | other allow | vances |
| | | | | |
| NONE | NONE | NONE | NO: | NE |
| 10/12 | | | | |
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| | | | | _ |
| | | | | |
| Total number of other employees paid over \$50,000 | | | | |
| | <u></u> | <u> </u> | NO Form 990 - | |

Form **990-PF** (2017)

3NONE

All other program-related investments. See instructions

| Par | art X Minimum Investment Return (All domestic found see instructions.) | ations must complete this part. Forei | gn founda | ations, |
|-----|--|---|---------------|-------------|
| 1 | Fair market value of assets not used (or held for use) dire | ectly in carrying out charitable, etc., | | |
| | purposes: | | | |
| а | a Average monthly fair market value of securities | | 1a | NONE_ |
| b | b Average of monthly cash balances | | 1b | 405,825. |
| C | c Fair market value of all other assets (see instructions) | | 1c | 4,718,843. |
| d | d Total (add lines 1a, b, and c) | | 1d | 5,124,668. |
| е | | | | |
| | 1c (attach detailed explanation) | 1e | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | | 2 | NONE |
| 3 | | | 3 | 5,124,668. |
| 4 | Cash deemed held for charitable activities Enter 1 1/2% | of line 3 (for greater amount, see | | |
| | instructions) | | 4 | 76,870. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from I | ne 3. Enter here and on Part V, line 4 | 5 | 5,047,798. |
| 6 | Minimum investment return. Enter 5% of line 5 · · · · · · · | | 6 | 252,390. |
| Par | art XI Distributable Amount (see instructions) (Section 49 and certain foreign organizations, check here ▶ and | | dations | |
| 1 | | | 1 | 252,390. |
| 2 a | • | | | |
| b | | /() 2b | | |
| c | | | 2c | _ 5,675. |
| 3 | | | 3 | 246,715. |
| 4 | · · · · · · · · · · · · · · · · · · · | | 4 | NONE |
| 5 | | | 5 | 246,715. |
| 6 | | | 6 | NONE |
| 7 | | | | |
| | line 1 | | 7 | 246,715. |
| Par | art XII Qualifying Distributions (see instructions) | | · · · · · · · | |
| 1 | Amounts paid (including administrative expenses) to accomplis | sh charitable, etc., purposes: | | |
| а | | | 1a | 859,600. |
| b | | | 1b | |
| 2 | | | | |
| _ | purposes | | 2 | NONE |
| 3 | | | | |
| а | | | 3a | NONE |
| b | | 1 | 3b | NONE |
| 4 | • | | 4 | 859,600. |
| 5 | | | | |
| - | Enter 1% of Part I, line 27b. See instructions | | 5 | |
| 6 | | | 6 | 859,600. |
| - | Note: The amount on line 6 will be used in Part V, colu | | | |
| | qualifies for the section 4940(a) reduction of tax in thes | | | |

Form 990-PF (2017)

| Pa | rt XIII Undistributed Income (see instr | uctions) | | | |
|----|--|---------------|----------------------------|--|-----------------|
| • | Distributable amount for 2017 for Bad VI | (a) Corpus | (b) Years prior to 2016 | (c) 2016 | (d) 2017 |
| • | Distributable amount for 2017 from Part XI, | | | | |
| _ | line 7 | | | | 246,715. |
| | Undistributed income, if any, as of the end of 2017 | | ļ | NONE | 1 |
| | Enter amount for 2016 only, , , , , , , , | | NONE | NOME | |
| | Total for prior years 20,20,20 | | NOME | | 1 |
| | Excess distributions carryover, if any, to 2017 | | | | |
| | From 2012 NONE NONE | | | | |
| | | | } | } | |
| | NONE | | } | | |
| | NOVE | | | | ļ |
| _ | 1102010 | NONE | | | |
| | Total of lines 3a through e | NOME | | | |
| 4 | Qualifying distributions for 2017 from Part XII, line 4 > \$ 859,600. | | | | |
| а | Applied to 2016, but not more than line 2a | | | NONE | <u></u> <u></u> |
| b | Applied to undistributed income of prior years (Election required - see instructions) | | NONE | | |
| c | Treated as distributions out of corpus (Election | | | | |
| | required - see instructions) | NONE | | | |
| d | Applied to 2017 distributable amount | 610 005 | | | 246,715. |
| е | Remaining amount distributed out of corpus | 612,885. | | | NOVE |
| 5 | Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a)) | NONR | | | NONE |
| 6 | Enter the net total of each column as indicated below: | | | | |
| а | Corpus Add lines 3f, 4c, and 4e. Subtract line 5 | 612,885. | | | |
| b | Prior years' undistributed income Subtract | i | NONE | | |
| | line 4b from line 2b | | NONE_ | | |
| С | Enter the amount of prior years' undistributed income for which a notice of deficiency has | | | | |
| | been issued, or on which the section 4942(a) | i | NONE | | |
| | tax has been previously assessed | | NONE | | |
| d | Subtract line 6c from line 6b Taxable | | NONE | | |
| | amount - see instructions | | NONE | | |
| e | 4a from line 2a Taxable amount - see | | | NONE | |
| | instructions | | | NONE | |
| f | Undistributed income for 2017 Subtract lines | | | | |
| | 4d and 5 from line 1 This amount must be | | | | NONE |
| | distributed in 2018 | | | | NONE |
| 7 | Amounts treated as distributions out of corpus | | | | |
| | to satisfy requirements imposed by section | | | | l |
| | 170(b)(1)(F) or 4942(g)(3) (Election may be | NONE | | | ļ |
| _ | required - see instructions) | NONE | | ······································ | |
| 8 | Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions) | NONE | | | |
| 9 | Excess distributions carryover to 2018. | (10 005 | | | |
| | Subtract lines 7 and 8 from line 6a | 612,885. | | | <u> </u> |
| | Analysis of line 9 | | | | ! |
| | Excess from 2013 NONE | | | | |
| | Excess from 2014 NONE | | | } | |
| | Excess from 2015 NONE | | | | |
| | Excess from 2016 NONE | | | | |
| е | Excess from 2017 612,885. | | | | |

| Pa | rt XIV Private Op | erating Foundations | (see instructions a | nd Part VII-A, questi | on 9) | NOT APPLICABLE |
|----------|---|-----------------------------|---------------------------------------|--|--|------------------------------|
| 1 a | If the foundation has | | | | | |
| | foundation, and the ruling | g is effective for 2017, en | ter the date of the ruling | | ▶ | , |
| b | Check box to indicate | = | _ | | | 1942(j)(3) or 4942(j)(5) |
| | | Tax year | | Prior 3 years | | |
| 2 a | Enter the lesser of the ad- | (a) 2017 | (b) 2016 | (c) 2015 | (d) 2014 | (e) Total |
| | justed net income from Part I or the minimum investmen | | (5) 2010 | (6) 2010 | (4) 2014 | |
| | return from Part X for each | | • | | | / / |
| | year listed | | | <u> </u> | | |
| þ | 85% of line 2a | · | | | | |
| C | Qualifying distributions from Part | | | | | / |
| | XII, line 4 for each year listed . | | · · · · · · · · · · · · · · · · · · · | <u> </u> | | <u> </u> |
| d | Amounts included in line 2c not used directly for active conduct | | | İ | | |
| | of exempt activities | | | | | |
| е | Qualifying distributions made | | | | | İ |
| | directly for active conduct of | 1 | | | | |
| | exempt activities Subtract line 2d from line 2c | | | } | | ł |
| 3 | Complete 3a, b, or c for the | | | | | |
| 9 | alternative test relied upon "Assets" alternative test - enter | | | | | i |
| a | 141 | | | | | |
| | (1) Value of all assets (2) Value of assets qualifying | | | // | | |
| | under section | | | | | ! |
| h | 4942(j)(3)(B)(i) "Endowment" alternative test- | - · · - - | | | | |
| | enter 2/3 of minimum invest- | ; | | | | |
| | ment return shown in Part X, | | | | | |
| | line 6 for each year listed | | | | <u> </u> | |
| С | "Support" alternative test - enter | | | | | |
| | (1) Total support other than gross investment income | 1 | | | | |
| | (interest, dividends, rents, | | | | | |
| | payments on securities loans (section 512(a)(5)), | | | ĺ | | ľ |
| | 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 sup- | | , | | | |
| | port from an exempt | | | | | İ |
| | organization | | | | | |
| Pa | | ntary Information (C | Complete this part | only if the founda | tion had \$5.00 | 0 or more in assets at |
| | | uring the year - see | | | | |
| 1 | Information Regarding | | | | | |
| а | | | | e than 2% of the tot | al contributions i | received by the foundation |
| | before the close of an | y tax year (but only if th | iey have contributed i | more than \$5,000). (S | ee section 507(d) |)(2)) |
| | N/A | | | | | |
| <u>_</u> | List any managers of | the foundation who | own 10% or more o | f the stock of a corr | oration for an e | qually large portion of the |
| U | | rship or other entity) of | | | | quality large portion of the |
| | overior only or a partito | iomp or other criticy, or | Transfer the foundation | g g. | | |
| | 27 / 2 | | | | | |
| | N/A Information Regarding | - Contribution Cront | Cift Loon Cahalarah | in oto Programs: | _ | |
| 2 | | - | | | | |
| | | | | | | ons and does not accept |
| | | | • | ants, etc., to individu | ais or organizatio | ons under other conditions, |
| _ | · · · · · · · · · · · · · · · · · · · | c, and d See instruction | | | | |
| а | The name, address, ar | | r email address of the | person to whom app | lications should b | e addressed. |
| | SEE STATEMENT | 9 | | | | |
| ր | The form in which app | olications should be sul | unitted and information | on and materials they | should include. | |
| | SEE ATTACHED S | TATEMENT FOR LI | NE 2 | | | |
| | | | | | | |
| | Any submission deadl | ines: | | | | |
| | | | | | | |
| | N/A | | | | | |
| d | Any restrictions or | imitations on awards | , such as by geogr | aphical areas, charit | able fields, kind | s of institutions, or other |
| _ | factors: | | , , , , , | • | - | |
| | N/A | | | | | |
| | IN / IA | | | | | |

Page **11**

| Part XV Supplementary Information | continued) | | | |
|---|----------------------------|----------------------|----------------------------------|----------|
| 3 Grants and Contributions Paid Durin Recipient Name and address (home or business) | g the Year or Appr | oved for F | uture Payment | |
| Recipient | show any relationship to | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | contribution | |
| a Paid during the year | | | | |
| | | | | |
| SEE STATEMENT 15 | | | | 859,600. |
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| Total | | | ≥ 3a | 859,600. |
| b Approved for future payment | | | | |
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| | <u></u> | L | | |
| Total | | | ▶ 3b | |

JSA 7E1491 1 000 Form 990-PF (2017)

| Part XVI | -A Analysis of Income-Produ | ucing Acti | ivities | | | |
|--------------|---|---------------|--------------------------|----------------|-----------------------------------|---------------------------------------|
| Enter gross | amounts unless otherwise indicated | Unrela (a) | ated business income (b) | Excluded by | / section 512, 513, or 514 (d) | (e) Related or exempt |
| - | n service revenue | Business code | Amount | Exclusion code | Amount | function income (See instructions) |
| _ | | | | | | |
| | | | | - | | |
| . — | | | | - | | |
| | | - | | | | |
| f | | *** | | | | |
| g Fees | and contracts from government agencies | | | | | |
| 2 Member | rship dues and assessments | | | | | |
| 3 Interest o | on savings and temporary cash investments • | <u> </u> | | 14 | 20. | |
| | ds and interest from securities | | | | | |
| | al income or (loss) from real estate | | | | | |
| | -financed property | | | 16 | 202,647. | |
| | debt-financed property | - | | 1 10 | 202,647. | |
| | al income or (loss) from personal property | | | | <u> </u> | |
| | oss) from sales of assets other than inventory | | | | | |
| | one or (loss) from special events · · · | | | | | |
| | rofit or (loss) from sales of inventory | | | | | |
| - | evenue a | | | | | |
| | <u> </u> | ! | | | | |
| c | | | | | | |
| d | | | | | | |
| е | | | , . | | | |
| | Add columns (b), (d), and (e) | | | | 202,667. | |
| | dd line 12, columns (b), (d), and (e) | | | | ¹³ | 202,667. |
| Part XVI- | B Relationship of Activities | | accomplishment of E | warment Draw | | |
| Line No. ▼ | Explain below how each activit accomplishment of the foundation | | | | | • |
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| · · · · · · | | | NOT APPLICABL | ıΕ | | |
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| Part | XVII | | nation R pt Orgai | egaro nizatio | ling Tran ons | sfers to and T | ransactio | ons and | Relations | ships With None | charit | able | |
|--------|--------|------------------|----------------------|------------------|---------------------------------------|------------------------------|---|----------------|--------------------|-----------------------------|----------------------|------------|------------------|
| 1 | Did th | | | | | gage in any of th | e fallowing | with an | v other orga | nization described | $\overline{}$ | Yes | No |
| • | | | | | | | | | | lating to political | | - 55 | .,,, |
| | | ızations? | , , , , , , , , | 11.01, | | o Honoi Oigome | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 000 | 011 027, 70 | idining to pointion | , | , | |
| | _ | | a renouting | a found | ation to a | noncharitable exe | mat argani | zation of | | | | | |
| | | | | - | 1 | | | | | | 30/31 | | Х |
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| | · · | | 1 | | · · · · · · | • • • • • • • • • | | | | | 18(2) | | ^ |
| | | transaction | l . | | | | | | | | | 1 1 | v |
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| | | | | | | | | | | should always shov | | | |
| | | | | | | | | | | lation received less | | | |
| | | | | r | · · · · · · · · · · · · · · · · · · · | | | | | , other assets, or s | | | |
| (a) Li | ne no | (b) Amoun | involved | (c) | Name of non | charitable exempt orga | nization | (d) Desi | cription of transf | ers, transactions, and sha | ing arra | ngema | nts |
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| 2a | Is the | foundation | directly of | or indi | ectly affilia | ated with, or rela | ted to, one | or mor | e tax-exemp | t organizations | | | _ |
| | | | | | | | | | | | Y | as X | No |
| | | ," complete | | | | | | | | | | | |
| | | (a) Name o | f organizatio | n | | (b) Type of or | ganization | L | | (c) Description of relation | ship | | |
| | | | | | | | | | | | | | |
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| | | | | | | | | | | to the best of my knowled | e and t | selief, li | is true |
| Sign | | CI, and complete | Deciaration of | рефини | torner man taxp | ever) is based on all inform | ianun di woich p | Probetet uns s | MA KIDMINGS | [ss. | | | |
| _ | | / VN | ~~ * | | | 11/14/20 | 18 | TRUS' | ree | I | 5 diseve oparer 1 | | reiurn below7 |
| Here | Sig | nature of offici | r or trustee | | | Oate | | Title | | See instruction | ns. X | Yes | No |
| | | | | | | | | | | <u> </u> | | | |
| | | Print/Type | reparer's nai | me | | Preparer's signature | 10 | | Date | Check X if | PTIN | | |
| Paid | | JOSEPI | J. CA | STRI | ANO | 1 | let | | 11/14/2 | 2018 self-employed | P012 | 5160 |)3 |
| Prep | arer | Firm's name | | | | SECOOPERS LI | P | | | Firm's EIN > 13- | 4008 | 324 | |
| Use | Only | Firm's addr | | 0 GR | | | · | | | | | | |
| | | | | TTSB | | PA | 152 | 219 | | Phone no 412-3 | 55-6 | 000 | |
| | | | | | | | | | | Fo | rm 99 | 0-PF | 2017 |
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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/Form990for the latest information. OMB No 1545-0047

2017

Employer identification number

| KS FAMILY FOUNDATION | ON | 81-4952607 |
|---|---|---|
| Organization type (check on | ne): | |
| 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 four | ndation |
| | 501(c)(3) taxable private foundation | |
| Check if your organization is | covered by the General Rule or a Special Rule. | |
| | 7), (8), or (10) organization can check boxes for both the General Rule and | d a Special Rule See |
| General Rule | | |
| | n filing Form 990, 990-EZ, or 990-PF that received, during the year, contri or property) from any one contributor. Complete Parts I and II. See instruc contributions | |
| Special Rules | | |
| regulations under 13, 16a, or 16b, a | n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 3 sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 9 nd that received from any one contributor, during the year, total contributi of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line | 90 or 990-EZ), Part II, line ions of the greater of (1) |
| contributor, during | n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that the year, total contributions of more than \$1,000 exclusively for religious onal purposes, or for the prevention of cruelty to children or animals. Com | s, charitable, scientific, |
| contributor, during contributions total during the year for General Rule appl | n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that the year, contributions exclusively for religious, charitable, etc., purposes ed more than \$1,000. If this box is checked, enter here the total contributer an exclusively religious, charitable, etc., purpose. Don't complete any of the ies to this organization because it received nonexclusively religious, charitation and the year | , but no such tions that were received he parts unless the able, etc., contributions |
| 990-EZ, or 990-PF), but it me | at isn't covered by the General Rule and/or the Special Rules doesn't file S ust answer "No" on Part IV, line 2, of its Form 990, or check the box on ling o certify that it doesn't meet the filing requirements of Schedule B (Form S | ne H of its Form 990-EZ or on its |

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

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

Name of organization Employer identification number KS FAMILY FOUNDATION 81-4952607

| Part I | Contributors (see instructions). Use duplicate copies | of Part I if additional space is ne | eeded. |
|------------|--|-------------------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | KS FAMILY HOLDINGS CORPORATION 2815 JOPPA AVENUE MINNEAPOLIS, MN 55416 | \$\$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 2 | BEDEK HABAYIS 2815 JOPPA AVENUE MINNEAPOLIS, MN 55416 | \$ 46,854. | Person X Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 3 | KS FAMILY HOLDINGS CORPORATION 2815 JOPPA AVE MINNEAPOLIS, MN 55416 | \$\$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| - | | | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | | Person Payroll Noncash (Complete Part II for noncash contributions) |

KS FAMILY FOUNDATION

Employer identification number 81-4952607

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 | (c) FMV (or estimate) (See instructions.) | (d) Date received |
|---------------------------|--|---|----------------------|
| 1_ | 625 YANKEE DOODLE ROAD (1,800,000) 3380 DODD ROAD (1,275,000) 635 YANKEE DOODLE ROAD (1,225,000) | \$ <u>4,300,000</u> . | 09/18/2017 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | <u> </u> | |
| (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 |
| | | <u></u> | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | | \$ | |

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E ii

| | NET | INVESTMENT | INCOME | 1 1 1 1 1 | 20. | | 20. | |
|---|-----|------------|-------------|---|-----------------|-----------------------------|-------|--|
| CASH INVESTMENTS | | | ເດ | 1 1 1 1 1 1 1 | 20. | 1 6 8 1 1 1 1 1 1 1 1 1 1 1 | 20. | |
| FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS | | | | | | | TOTAL | |
| FORM 990PF, PART I - | | | DESCRIPTION | 1 | INTEREST INCOME | | | |

STATEMENT

FORM 990PF, PART I - OTHER EXPENSES

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STATEMENT

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| NET INVESTMENT INCOME | | 198,014. 81. |
|---|------|--|
| REVENUE AND EXPENSES PER BOOKS | | 198,014. 81. |
| DESCRIPTION | | RENT AND ROYALTY EXPENSES US BANK CHECKING ACCOUNT FEES |

198,095.

198,095.

TOTALS

KS FAMILY FOUNDATION

INVESTMENTS - LAND, BUILDINGS, EQUIPMENT

| | | | FIXED AS | FIXED ASSET DETAIL | | ACC | UMULATED DEPR | ACCUMULATED DEPRECIATION DETAIL | II |
|-------------------|------------------|----------------------|-----------|--------------------|--|----------------------|---------------|---------------------------------|-------------------|
| ASSET DESCRIPTION | METHOD/ CLASS | BEGINNING BALANCE | ADDITIONS | DISPOSALS | ENDING BALANCE | BEGINNING BALANCE | ADDITIONS | DISPOSALS | ENDING BALANCE |
| 625 YANKEE DOODLE | M39 | | 885,889 | | 885,889. | | 39,033. | | 39,033. |
| 635 YANKEE DOODLE | M39 | | 199,077. | | 199,077 | | 18,224 | | 18,224 |
| 3380 DODD ROAD | M39 | | 343,101 | | 343,101. | | 23,900. | | 23,900 |
| TOTALS | | | | | 1,428,067 | | | | 81,157 |
| | | | | | 11 11 11 11 11 11 11 11 11 11 11 11 11 | | | | |

| FOUNDATION |
|------------|
| FAMILY |
| KS |

| | COST/ FMV | CORF | 1 1 1 1 |
|---|--------------|-------------|---|
| FORM 990PF, PART II - OTHER INVESTMENTS | | DESCRIPTION | 1 |

TOTALS

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601 W COMPANIES MINNESOTA LLC

| FMV | !!!! | 500,000. | .000,005 | |
|------------|---|----------|----------|--|
| BOOK VALUE | 1 | .000,000 | .000,005 | |

ENDING

ENDING

81-4952607

FORM 990PF, PART VII-A - NEW SUBSTANTIAL CONTRIBUTORS ______

NAME AND ADDRESS

KS FAMILY HOLDINGS CORPORATION 2815 JOPPA AVENUE MINNEAPOLIS, MN 55416

KS FAMILY HOLDINGS CORPORATION 2815 JOPPA AVE MINNEAPOLIS, MN 55416

KS FAMILY FOUNDATION

81-4952607

FORM 990PF, PART VII-A, LINE 11 - TRANSFERS TO CONTROLLED ENTITIES

NAME:

601W COMPANIES LLC

ADDRESS:

601 WEST 26TH STREET NEW YORK, NY 10001

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:

MARK KUTOFF

ADDRESS:

2815 JOPPA AVE

MINNEAPOLIS, MN 55416

TITLE:

PRESIDENT

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 5

OFFICER NAME:

DANIEL KUTOFF

ADDRESS:

2815 JOPPA AVE

MINNEAPOLIS, MN 55416

TITLE:

SECOND VICE PRESIDENT

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:

FRANK SILVERBERG

ADDRESS:

2815 JOPPA AVE

MINNEAPOLIS, MN 55416

TITLE:

FIRST VICE PRESIDENT

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:

MARK SILVERBERG

ADDRESS:

2815 JOPPA AVE

MINNEAPOLIS, MN 55416

TITLE:

SECRETARY

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME: MAIER KUTOFF

ADDRESS:

2815 JOPPA AVE

MINNEAPOLIS, MN 55416

TITLE:

TREASURER

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 5

OFFICER NAME:

GERALD GOLDFEDER

ADDRESS:

2815 JOPPA AVE

MINNEAPOLIS, MN 55416

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:

DENA SEIF

ADDRESS:

2815 JOPPA AVE

MINNEAPOLIS, MN 55416

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:

BAILA SILVERBERG

ADDRESS:

2815 JOPPA AVE

MINNEAPOLIS, MN 55416

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

RECIPIENT NAME: MAIER KUTOFF ADDRESS:

2815 JOPPA AVE, MN 55416 FORM, INFORMATION AND MATERIALS: CONTACT FOUNDATION

KS FAMILY FOUNDATION 81-4952607 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: BEDEK HABAYIS **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 15,000. RECIPIENT NAME: NCSY ADDRESS: 113 WASHINGTON ST BRIGHTON, MA 02135 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC RECIPIENT NAME: TORAH ACADEMY ADDRESS: 2800 JOPPA AVE S MINNEAPOLIS, MN 55416 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

PC

90,000.

KS FAMILY FOUNDATION 81-4952607 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: CONGREGATION BAIS YISROEL ADDRESS: 4221 SUNSET BLVD MINNEAPOLIS, MN 55416 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 104,000. RECIPIENT NAME: MINNEAPOLIS COMMUNITY KOLLEL ADDRESS: 2930 INGLEWOOD AVE S MINNEAPOLIS, MN 55416 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 243,000. RECIPIENT NAME: YESHIVA OF MINNEAPOLIS ADDRESS: 3115 OTTAWA AVE S MINNEAPOLIS, MN 55416 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING

AMOUNT OF GRANT PAID 160,000.

FOUNDATION STATUS OF RECIPIENT:

KS FAMILY FOUNDATION 81-4952607 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: CONGREGATION OHR TORAH ADDRESS: 48 EDGEMOUNT ROAD EDISON, NJ 08817 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 5,000. RECIPIENT NAME: YESHIVA OF MIAMI ADDRESS: 17131 NE 6TH AVENUE MIAMI, FL 33162 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC RECIPIENT NAME: BAIS YAAKOV HIGH SCHOOL ADDRESS: 4221 SUNSET BLVD ST. LOUIS PARK, MN 55416 RELATIONSHIP: NONE PURPOSE OF GRANT:

AMOUNT OF GRANT PAID

56,000.

PC

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

KS FAMILY FOUNDATION 81-4952607 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ------RECIPIENT NAME: YESHIVA HIGH SCHOOL OF CLEVELAND ADDRESS: 25400 FAIRMOUNT BLVD BEACHWOOD, OH 44122 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC RECIPIENT NAME: HEBREW THEOLOGICAL COLLEGE ADDRESS: 7315 N. CARPENTER ROAD SKOKIE, IL 60077 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 3,600. RECIPIENT NAME: MIKVAH MINNEAPOLIS ADDRESS: 4624 MINNETONKA BLVD ST LOUIS PARK, MN 55416 RELATIONSHIP: NONE PURPOSE OF GRANT:

STATEMENT 13

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

KS FAMILY FOUNDATION 81-4952607 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: CAMP NAGEELA MIDWEST ADDRESS: 3542 W PETERSON AVE CHICAGO, IL 60659 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 5,000. RECIPIENT NAME: MIR YESHIVA RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 50,000. RECIPIENT NAME: SHA'ARIM - GATEWAYS TO LEARNING ADDRESS: 2851 HEDBERG DR MINNETONKA, MN 55305 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

15,000.

KS FAMILY FOUNDATION 81-4952607 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

LEV YISRAEL SCHOLARSHIP FOR ADVANCED JEWISH LEARNING

ADDRESS:

2815 JOPPA AVE

MINNEAPOLIS, MN 55416-4103

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIPS

FOUNDATION STATUS OF RECIPIENT:

Ι

AMOUNT OF GRANT PAID 5,000.

TOTAL GRANTS PAID:

859,600.

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RENT AND ROYALTY SUMMARY

| PROPERTY | TOTAL INCOME | DEPLETION/ DEPRECIATION | OTHER EXPENSES | ALLOWABLE NET INCOME |
|--|----------------------------------|-------------------------------|-------------------------------|-------------------------------|
| 3380 DODD ROAD 625 YANKEE DOODLE RO 635 YANKEE DOODLE RO | 132,341. 217,381. 132,096. | 23,900. 39,033. 18,224. | 59,592. 94,786. 43,636. | 48,849. 83,562. 70,236. |
| TOTALS | 481,818. | 81,157. ======= | 198,014. | 202,647. |