Form 990-PF

Department of the Treasury

Internal Revenue Service

DLN: 93491316020189 OMB No 1545-0052

2018

Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public.
 Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

| For | caler | ndar year 2018, or tax year beginning 01-01-20 |)18 , ar | nd ending 12-31- | 2018 | |
|-----------------------------|----------|---|------------------------------|---------------------------|---|-------------------------|
| | | undation CLEUTHOLD FAMILY FOUNDATION | | A Employer id | entification numbe | r |
| ٥, | LVLIV | z Elemente (m. 121 i elemente) | | 41-1680986 | | |
| | | d street (or P O box number if mail is not delivered to street address) ERSON AVENUE SOUTH | Room/suite | B Telephone nu | mber (see instruction | ns) |
| | | | | (612) 259-8696 | , | |
| | | n, state or province, country, and ZIP or foreign postal code .IS, MN 55419 | | C If exemption | application is pendin | g, check here |
| G CI | neck al | Il that apply | former public charity | D 1. Foreign or | ganizations, check he | ere 🖂 |
| | | ☐ Final return ☐ Amended return | | | ganizations meeting | |
| | | Address change Name change | | • | k here and attach co | · - |
| H C | neck ty | vpe of organization $lacksquare$ Section 501(c)(3) exempt private | foundation | | ındatıon status was t n 507(b)(1)(A), chec | |
| | Section | n 4947(a)(1) nonexempt charitable trust 🔲 Other taxabl | e private foundation | | | |
| | | ket value of all assets at end from Part II, col (c), | ☑ Cash ☐ Accru | | ition is in a 60-mont n 507(b)(1)(B), chec | |
| | | ►\$ 22,523,064 | be on cash basis) | under section | 1 307(D)(1)(D), Cliec | .Kilele - — |
| Pa | rt I | Analysis of Revenue and Expenses (The total | (a) Barrara and | <u> </u> | | (d) Disbursements |
| | | of amounts in columns (b), (c), and (d) may not necessarily | (a) Revenue and expenses per | (b) Net investment income | (c) Adjusted net income | for charitable purposes |
| | | equal the amounts in column (a) (see instructions)) | books | | | (cash basis only) |
| | 1 | Contributions, gifts, grants, etc , received (attach schedule) | | | | |
| | 2 | Check ► ✓ If the foundation is not required to attach | | | | |
| | _ | Sch B | | | | _ |
| | 3 | Interest on savings and temporary cash investments Dividends and interest from securities | 372,426 | 372,426 | | |
| Revenue | 5a | Gross rents | 372,420 | 372,420 | | |
| | ь | Net rental income or (loss) | | | | |
| | 6a | Net gain or (loss) from sale of assets not on line 10 | 4,513,797 | , | | |
| | b | Gross sales price for all assets on line 6a | | | | |
| | l _ | 17,045,709 | | 4.542.707 | | |
| | 7 8 | Capital gain net income (from Part IV, line 2) | | 4,513,797 | | |
| | 9 | Income modifications | | | | |
| | 10a | Gross sales less returns and allowances | | | | |
| | ь | Less Cost of goods sold | | | | |
| | c | Gross profit or (loss) (attach schedule) | | | | |
| | 11 | Other income (attach schedule) | 23,927 | 23,927 | | |
| | 12 | Total. Add lines 1 through 11 | 4,910,150 | 4,910,150 | | |
| | 13 | Compensation of officers, directors, trustees, etc | 45,000 | 0 | | 45,000 |
| | 14 | Other employee salaries and wages | | | | |
| es | 15 | Pension plans, employee benefits | | | | |
| ens | 16a | Legal fees (attach schedule) | | | | |
| and Administrative Expenses | Ь | Accounting fees (attach schedule) | | | | |
| /e E | С | Other professional fees (attach schedule) | 232,315 | 36,512 | | 195,803 |
| atı | 17 | Interest | 00-1 | 6.335 | | |
| ıstı | 18 | Taxes (attach schedule) (see instructions) | 9,804 | 6,385 | | 0 |
| III | 19 | Depreciation (attach schedule) and depletion | | | | <u> </u> |
| Ad | 20 21 | Occupancy | 3,266 | 0 | | 3,266 |
| pu | 22 | Printing and publications | 3,200 | | | 3,200 |
| ig a | 23 | Other expenses (attach schedule) | 638,766 | 634,989 | | 0 |
| Operating | 24 | Total operating and administrative expenses. | - | | | |
| ber | | Add lines 13 through 23 | 929,151 | 677,886 | | 244,069 |
| Ō | 25 | Contributions, gifts, grants paid | 1,995,000 | | | 1,995,000 |
| | 26 | Total expenses and disbursements. Add lines 24 and 25 | 2,924,151 | 677,886 | | 2,239,069 |
| | 27 | Subtract line 26 from line 12 | 2,324,131 | 077,000 | | 2,239,009 |
| | а | Excess of revenue over expenses and | | | | |
| | Ь | disbursements Net investment income (if negative, enter -0-) | 1,985,999 | | | |
| | C | Adjusted net income (if negative, enter -0-) | | 4,232,264 | | |
| For | | work Reduction Act Notice, see instructions. | <u> </u> | Cat No 11289 | I For | m 990-PF (2018) |

19,979,229

19,979,229

630,569

630,569

19,348,660

19,348,660

19,979,229

22,100,904

22,118,797

784,138

784,138

21,334,659

21,334,659

22,118,797

2

3

4

5

6

19,348,660

1,985,999

21,334,659

21,334,659 Form **990-PF** (2018)

0

22,505,171

22,523,064

| Assets | |
|--------|--|
| • | |

5

6

7

8

9

10a

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

28

29

31

Part III

2

Liabilities

Balances

Fund 26

ŏ

Assets 27

Net 30

b c

Less allowance for doubtful accounts ▶

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > _

Grants payable

Deferred revenue .

Other liabilities (describe -

Unrestricted . . .

Permanently restricted

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) .

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) -

Temporarily restricted

Prepaid expenses and deferred charges

Investments—land, buildings, and equipment basis ▶ _

Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

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

Analysis of Changes in Net Assets or Fund Balances

Less accumulated depreciation (attach schedule)

Receivables due from officers, directors, trustees, and other

disqualified persons (attach schedule) (see instructions)

Investments—U S and state government obligations (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Other notes and loans receivable (attach schedule)

| | e the kınd(s) of property sold (e g , arehouse, or common stock, 200 shs | How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) | |
|--|--|--|--|---|--|
| 1 a PUBLICLY TRADED SECU | RITIES | | Р | | |
| b PUBLICLY TRADED SECU | | | P | | |
| c PUBLICLY TRADED PART | | | P | | |
| d | | | · | | |
| e | | | | | |
| | (f) | | (g) | (| h) |
| (e) | Depreciation allowed | | other basis | | r (loss) |
| Gross sales price | (or allowable) | plus expe | ense of sale | (e) plus (f |) minus (g) |
| a 11,89 | 4,245 | | 7,507,488 | | 4,386,757 |
| b 5,15 | 1,464 | | 4,985,494 | | 165,970 |
| c | | | 38,930 | | -38,930 |
| d | | | | | |
| e | | | | | |
| Complete only for assets | s showing gain in column (h) and ow | ned by the foundation o | on 12/31/69 | (| I) |
| (i) F M V as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | Excess | (k) of col (ı) (յ), ıf any | Gains (Col (col (k), but not | h) gain minus less than -0-) or om col (h)) |
| a | | | | | 4,386,757 |
| b | | | | | 165,970 |
| c | | | | | -38,930 |
| d | | | | | |
| e | | | | | |
| | gain or (loss) as defined in sections : rt I, line 8, column (c) (see instructi | ons) If (loss), enter -0 | Part I, line 7 | 3 | 4,513,797 |
| | Jnder Section 4940(e) for Re | | | | |
| (For optional use by domestic p | rivate foundations subject to the sec | ction 4940(a) tax on ne | t investment incom | e) | |
| If section 4940(d)(2) applies, le | eave this part blank | | | | |
| Was the foundation liable for th | e section 4942 tax on the distributant qualify under section 4940(e) Do | | in the base period? | , Ye | es 🔽 No |
| 1 Enter the appropriate an | nount in each column for each year, | see instructions before | making any entries | ; | |
| (a) Base period years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitabl | e-use assets | (d) Distribution rati (col (b) divided by c | |
| 2017 | 2,188,296 | | 24,610,530 | | 0 088917 |
| 2016 | 2,181,254 | | 20,731,075 | | 0 105217 |
| 2015 | 11,658,816 | | 23,088,070 | | 0 504971 |
| 2014 | 9,507,340 | | 38,430,827 | | 0 247388 |
| 2013 | 5,174,777 | | 39,178,429 | | 0 132082 |
| 2 Total of line 1, column (| d) | | 2 | | 1 078575 |
| number of years the four | o for the 5-year base period—divide ndation has been in existence if less ncharitable-use assets for 2018 fron | than 5 years | 0, or by the 3 | | 0 215715 25,354,542 |
| 5 Multiply line 4 by line 3 | | , | 5 | | 5,469,355 |
| | ent income (1% of Part I, line 27b) | | 6 | | 42,323 |
| | | | | | 5,511,678 |
| | ons from Part XII, line 4 , | | | | 2,239,069 |
| | eater than line 7, check the box in Pa | | | g a 1% tax rate Se | |
| | | | | Fc | orm 990-PF (2018) |

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| Pa | Statements Regard | ling Activities for Which | n Form 4720 May Be | Required (continued) | | | |
|----------|---|---|---|---|--------------------|---------|----------|
| Ба | During the year did the foundation p | pay or incur any amount to | | | | Yes | No |
| | (1) Carry on propaganda, or otherw | rise attempt to influence legis | lation (section 4945(e))? | ☐ Yes ✓ | No | | |
| | (2) Influence the outcome of any sp | pecific public election (see sec | tion 4955), or to carry | □ fes ⊡ | NO | | |
| | on, directly or indirectly, any vo | ter registration drive? | | · · · 🗌 Yes 🗸 | No | | |
| | (3) Provide a grant to an individual | for travel, study, or other sim | nılar purposes? | Yes V | No | | |
| | (4) Provide a grant to an organizati | | · - | d | | | |
| | in section 4945(d)(4)(A)? See in | | | · · · · Yes 🗹 | No | | |
| | (5) Provide for any purpose other th | - · · · · · · · · · · · · · · · · · · · | • | | | | |
| L | educational purposes, or for the | | | ∟ Yes 🖭 | No | | |
| D | If any answer is "Yes" to 5a(1)–(5), Regulations section 53 4945 or in a | = | | | 5b | | |
| | Organizations relying on a current n | | | | 30 | | |
| С | If the answer is "Yes" to question 5a | | | | | | |
| | tax because it maintained expenditu | | • | | | | |
| | If "Yes," attach the statement require | | | · · □ Yes □ | No | | |
| = - | | · - | | ume an | | | |
| 5a | Did the foundation, during the year, | | | uilis oii | | | |
| h | a personal benefit contract? Did the foundation, during the year, | | | Yes V | No 6b | | No |
| ь | If "Yes" to 6b, file Form 8870 | pay premiums, directly or mo | ulrectly, on a personal be | enent contract? | 80 | | NO |
| 7a | At any time during the tax year, was | the foundation a party to a | prohibited tay chalter tra | neaction? \square | | | |
| | If yes, did the foundation receive an | | | ∟ tes 🖭 | No 7b | | |
| | Is the foundation subject to the sect | | | | /6 | | |
| , | excess parachute payment during th | | | | | | |
| | <u> </u> | | | Yes 🔽 | No L | | <u> </u> |
| Pa | and Contractors | Officers, Directors, Trus | tees, Foundation Ma | anagers, Hignly Paid En | npioyees | , | |
| | | | | | | | |
| 1 | List all officers, directors, trustee | | | | 1 | | |
| | (a) Name and address | (b) Title, and average hours per week | (c) Compensation (If not paid, enter | (d) Contributions to employee benefit plans and | (e) Expe | | |
| | . , | devoted to position | -0-) | deferred compensation | other a | llowand | ces |
| ee . | Additional Data Table | | | | | | |
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| | | | | | | | |
| 2 | Compensation of five highest-pa | id employees (other than t | hose included on line | 1—see instructions). If nor | ne, enter " | NONE | ." |
| _ \ | Name - and address of angle amounts. | (b) Title, and average | | (d) Contributions to | (a) Funan | | |
| a) | Name and address of each employee more than \$50,000 | hours per week | (c) Compensation | employee benefit plans and deferred | (e) Expen other al | | |
| | | devoted to position | | compensation | | | |
| ON | E | | | | | | |
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| | | | | | | | |
| ota | I number of other employees paid over | er \$50,000 | | | | | (|
| | | | | L | Form 00 | O-DE | (2019 |

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|---|--------------------------------------|---------------------------|
| Part VIII Information About Officers, Directors, Trustees, and Contractors (continued) | Foundation Managers, Highly | Paid Employees, |
| 3 Five highest-paid independent contractors for professional service | es (see instructions). If none, ente | er "NONE". |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | |
| | | |
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| | | |
| | | |
| Total number of others receiving over \$50,000 for professional services | | ▶ 0 |
| Part IX-A Summary of Direct Charitable Activities | | · |
| List the foundation's four largest direct charitable activities during the tax year Include rele organizations and other beneficiaries served, conferences convened, research papers produ | | ber of Expenses |
| 1 | tea, etc | |
| | | |
| | | |
| 2 | | |
| | | |
| | | |
| 3 | | |
| | | |
| | | |
| 4 | | |
| | | |
| Part IX-B Summary of Program-Related Investments (see I | netructions) | |
| Describe the two largest program-related investments made by the foundation during th | <u> </u> | Amount |
| 1 | e day year on mies I and 2 | Amount |
| | | |
| | | |
| 2 | | |
| | | |
| | | |
| All other program-related investments See instructions | | |
| 3 % Total. Add lines 1 through 3 | | 0 |
| Total. Add lines 1 through 3 | | Form 990-PF (2018) |

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

1b

2

3a 3h

4

5

2,239,069

2,239,069

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Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

2

3

4

5

1,183,082

1,183,082

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0

2018

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| _ | _ | • | _ | _ | _ | _ | _ | • | • | ١ | _ | _ | _ | |
|---|---|---|---|-----|---|---|---|---|---|---|---|---|---|--|
| | | | ŀ | : 1 | 1 | 7 | X | П | ŧ | 1 | | Π | | |

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|------|--------|----|------|
| | | | |

b Total for prior years

a From 2013.

b From 2014. c From 2015. . .

d From 2016.

e From 2017.

| 90-PF (20 | 018) | | |
|-----------|----------------------|--------------------|--|
| XIII | Undistributed Income | (see instructions) | |

1 Distributable amount for 2018 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2018 a Enter amount for 2017 only.

Excess distributions carryover, if any, to 2018

f Total of lines 3a through e.

d Applied to 2018 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2018

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2019.

10 Analysis of line 9

a Excess from 2014. . .

c Excess from 2016. . . .

d Excess from 2017. . .

e Excess from 2018. . .

b Excess from 2015. .

(If an amount appears in column (d), the

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2013 not

indicated below:

4 Qualifying distributions for 2018 from Part XII, line 4 🕨 \$ a Applied to 2017, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election required—see instructions).

3.263.444 7,599,445

10.522.238

1.144.700 973,128

7,599,445

10,522,238

1.144.700

1.055.987

973.128

(a)

Corpus

23.502.955

1,055,987

24,558,942

3.263.444

21,295,498

(b)

Years prior to 2017

(c)

2017

NONE



| Enter gross | s amounts unless otherwise indicated | Unrelated bu | isiness income | Excluded by section | 512, 513, or 514 | (e) Related or exempt |
|------------------|---|----------------------|----------------------|-----------------------|-----------------------|--|
| _ | n service revenue | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | function income (See instructions) |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| g Fees | and contracts from government agencies | | | | | |
| | ership dues and assessments | | | | | |
| 3 Interes | st on savings and temporary cash nents | | | | | |
| | nds and interest from securities | | | 14 | 372,426 | |
| 5 Net rer | ntal income or (loss) from real estate | | | | | |
| | -financed property | | | | | |
| | lebt-financed property | | | | | |
| | ntal income or (loss) from personal property | | | 14 | 22.027 | |
| | nvestment income | | | 14 | 23,927 | |
| invento | • • | | | 18 | 4,513,797 | |
| 9 Net inc | come or (loss) from special events | | | 10 | 1,313,737 | |
| | profit or (loss) from sales of inventory | | | | | |
| | revenue a | | | | | |
| b | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | al Add columns (b), (d), and (e). | | 0 | | 4,910,150 | |
| | Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu | | | 1 | 3 | 4,910,150 |
| Part XV | I-B Relationship of Activities to the | ne Accomplish | ment of Exemi | pt Purposes | | |
| Line No. ▼ | Explain below how each activity for which the accomplishment of the foundation's explain instructions (| | | | | |
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|-------|--|--|
| | Information Regarding Transfers To and Transactions and Relationships With Noncharitable | |
| | Exempt Organizations | |

| Part XVII | Exempt Organia | zations | | | io ana itolatio | | .c.i.ai itabic | | |
|---------------------|---|----------------------------|----------------------------------|--|--------------------|--------------------------------|---|--|-----------------|
| 1 Did the org | ganization directly or in- than section 501(c)(3) | directly engage | in any of the or in section ! | following with any 527, relating to pol | other organization | n described in sections? | on 501 | Yes | No |
| a Transfers f | from the reporting foun | dation to a nonc | haritable exe | empt organization | of | | | | |
| (1) Cash. | | | | | | | . 1a(1) | | No |
| (2) Other | assets | | | | | | . 1a(2) | | No |
| b Other tran | sactions | | | | | | | | |
| (1) Sales | of assets to a nonchari | table exempt or | ganızatıon. | | | | . 1b(1) | | No |
| (2) Purch | ases of assets from a n | oncharitable ex | empt organız | ration | | | 1b(2) | | No |
| (3) Renta | al of facilities, equipmen | nt, or other asse | ts | | | | 1b(3) | | No |
| (4) Reimb | bursement arrangemen | ts | | | | | . 1b(4) | | No |
| ` ' | s or loan guarantees. | | | | | | . 1b(5) | | No |
| (6) Perfor | mance of services or m | embership or fu | ndraising sol | icitations | | | . 1b(6) | | No |
| _ | facilities, equipment, n | | • | | | | | | No |
| of the goo | ver to any of the above ds, other assets, or serv nsaction or sharing arra | vices given by th | he reporting t | foundation If the f | oundation receive | d less than fair mark | ket value | | |
| /-> 1 N - 1 | /1. \ | | | 1 | (4) D | | | | |
| (a) Line No | (b) Amount involved | (c) Name of non | icnaritable exer | mpt organization | (a) Description or | transfers, transactions, | and snaring arra | ingemen | ts |
| | | | | | | | | | |
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| | | | | | | | | | |
| described | ndation directly or indire in section 501(c) (other complete the following so (a) Name of organization | than section 50 chedule | 01(c)(3)) or ı | • | | | | | |
| | (a) Name of organization | "" | (1 |) Type of Organizatio | | (C) Description | of relationship | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Unde | er penalties of perjury, | I declare that I | have examin | ed this return, incli | uding accompanyi | ng schedules and sta | atements, and | to the | best |
| of m | y knowledge and belief h preparer has any kno | , it is true, corre | | | | | ised on all info | rmatior | of |
| Here | ***** | | | 2019-10-25 | ***** | | May the IRS d return with the prepa | | |
| , | Signature of officer or to | rustee | | Date | Title | | below (see instr)? | ✓ _{Yes} I | □ _{No} |
| | Print/Type preparer's | name Pr | eparer's Sigr | nature | Date | Check if self- employed ▶ □ | PTIN P0028 | 8931 | |
| Paid Preparer | COREY EDMUNDS | | FOTDO | | 2019-10-25 | Chiployed P L | | | |
| Jse Only | | CKERMANN GRA | LESTROM & M | IAYER LLC | | F | Firm's EIN ►20 | -04728 | 26 |
| • | Firm's address ► 33 | 2 MINNESOTA S | | W-900 | | | Phone no (651 | .) 227-9 | 9431 |
| | ST PAUL, MN 55101 | | | | | | | | - |

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, not paid, enter Contributions to (e) other allowances hours per week (b) devoted to position -0-) employee benefit plans and deferred compensation STEVEN C LEUTHOLD DIRECTOR 9,000 1 00 PO BOX 58 BAILEY ISLAND, ME 04003

| DR LINDA LEUTHOLD DONERKIEL | DIRECTOR | 9,000 | 0 | 0 |
|---------------------------------------|----------|-------|---|---|
| 750 COW HORSE DRIVE KUNA, ID 83634 | 1 00 | | | |
| MICHAEL LEUTHOLD | DIRECTOR | 9,000 | 0 | 0 |
| 10201 E GLENN STREET | 1 00 | | | |

| TUCSON, AZ 85749 | | | | |
|---|----------|-------|---|---|
| KURT LEUTHOLD | DIRECTOR | 9,000 | 0 | 0 |
| 1810 OAKVIEW LANE N PLYMOUTH, MN 55441 | 1 00 | | | |
| | | | | |

RUSSELL LEUTHOLD DIRECTOR 9,000

1 00 35102 VINTAGE TRAIL

WAUKEE, IA 50263

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Daid during the year

| a Faid during the year | | | |
|---|------|------------|--------|
| 30 DAYS FOUNDATION 8014 OLSON HIGHWAY 195 GOLDEN VALLEY, MN 55427 | NONE | OPERATIONS | 20,000 |

| GOLDEN VALLEY, MN 55427 | | | |
|--|------|------------|--------|
| ACADEMY OF WHOLE LEARNING 3500 WILLISTON ROAD MINNETONKA, MN 55435 | NONE | OPERATIONS | 10,000 |
| | | | |

| MINNETONKA, MN 55435 | | | |
|---------------------------------------|------|------------|--------|
| ACLUPO BOX 17148 PHOENIX, AZ 85011 | NONE | OPERATIONS | 20,000 |

| ACLUPO BOX 17148 PHOENIX, AZ 85011 | NONE | OPERATIONS | 20,000 |
|---------------------------------------|------|------------|-----------|
| Total | | ▶ 3a | 1,995,000 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| AKSHAYA TRUST 17359 EAST CALEY PLACE AURORA, CO 80016 | NONE | OPERATIONS | 10,000 |
|---|------|------------|--------|
| ALBERT PAINE PAINSDALE UNITED | NONE | OPERATIONS | 7,000 |

| METHODIST CHURCH PO BOX 92 PAINSDALE, MI 49930 | NONE | OPERATIONS | 7,000 |
|--|------|------------|--------|
| ALBERTINI MELANOMA RESEARCH | NONE | OPERATIONS | 10,000 |

| PAINSDALE, MI 49930 | | | |
|--|------|------------|--------|
| ALBERTINI MELANOMA RESEARCH 600 HIGHLAND AVENUE K6/530 CSC MADISON, WI 53792 | NONE | OPERATIONS | 10,000 |

| 600 HIGHLAND AVENUE K6/530 CSC MADISON, WI 53792 | | , |
|---|----------|-----------|
| Total | ▶ 3a | 1,995,000 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

recipient

1,995,000

any foundation manager

or substantial contributor

Name and address (home or business)

7 EAST BEALL ST SUITE 100 BOZEMAN, MT 59715

Total .

| a Paid during the year | | | |
|---|------|------------|--------|
| ALLIANCE FOR SUSTAINABILITY 2801 21ST AVE S SUITE 100 MINNEAPOLIS, MN 55407 | NONE | OPERATIONS | 5,000 |
| AMERICAN VET MED FOUNDATION 1931 N MEACHAM RD STE 100 SCHAUMBURG IL 60173 | NONE | OPERATIONS | 10,000 |

| MINNEAPOLIS, MN 33407 | | | |
|--|------|------------|--------|
| AMERICAN VET MED FOUNDATION 1931 N MEACHAM RD STE 100 SCHAUMBURG, IL 60173 | NONE | OPERATIONS | 10,000 |
| AMERICAN PRAIRIE RESERVE | NONE | OPERATIONS | 10,000 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year AMICUSVOA7625 METRO BLVD NONE **OPERATIONS** 5.000

| ANIMAL WELFARE INSTITUTE 900 PENNSYLVANIA AVE SE WASHINGTON, DC 20027 | NONE | OPERATIONS | 5,000 |
|---|------|------------|-------|
| MINNEAPOLIS, MN 55439 | | | |

| WASHINGTON, DC 20027 | | | |
|---|------|---------------|-------|
| ANIMALS IN DISTRESS 2201 WEST BOISE AVE BOISE, ID 83706 | NONE | WATER PROJECT | 5,000 |

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

| Name and address (nome or business) | or substantial contributor | ' | | |
|-------------------------------------|----------------------------|---|------------|-------|
| a Paid during the year | | | | |
| AQUABILITY3218 W OVERLAND ROAD | NONE | | OPERATIONS | 5,000 |

| AQUABILITY3218 W OVERLAND ROAD BOISE, ID 83705 | NONE | OPERATIONS | 5,000 |
|---|------|------------|--------|
| ARIZONA OPEN LAND TRUST 3127 N CHERRY AVENUE TUCSON, AZ 85719 | NONE | OPERATIONS | 10,000 |

| BOISE, ID 83705 | | | |
|---|------|------------|--------|
| ARIZONA OPEN LAND TRUST 3127 N CHERRY AVENUE TUCSON, AZ 85719 | NONE | OPERATIONS | 10,000 |
| ARIZONAS CHILDREN'S ASSOCPARENT CONNECTION | NONE | OPERATIONS | 10,000 |

| TUCSON, AZ 85719 | | | |
|---|------|------------|--------|
| ARIZONAS CHILDREN'S ASSOCPARENT CONNECTION 3716 E COLUMBIA STREET TUCSON, AZ 85714 | NONE | OPERATIONS | 10,000 |

| Total | | > 3a | 1,995,000 |
|--|------|--------------------|-----------|
| CONNECTION 3716 E COLUMBIA STREET TUCSON, AZ 85714 | | | |
| CONNECTION | NONE | OFERATIONS | 10,000 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year | | | |
|---|------|------------|-------|
| BIG BROTHERSBIG SISTERS OF SW IDAHO 110 NORTH 27TH ST | NONE | OPERATIONS | 7,000 |
| IIU NORIA 271A SI | | | |
| POICE ID 92701 | | | |

| BOISE, ID 83702 | | | |
|--|------|------------|-------|
| BIG BROTHERSBIG SISTERS OF TUCSON 160 E ALAMEDA ST | NONE | OPERATIONS | 2,000 |
| THECON AT 05701 | | | |

| BIG BROTHERSBIG SISTERS OF TUCSON 160 E ALAMEDA ST TUCSON, AZ 85701 | NONE | OPERATIONS | 2,000 |
|--|------|-----------------------|--------|
| BORN FREE | NONE | IDAHO ANIMAL TRAPPING | 15,000 |

| 160 E ALAMEDA ST TUCSON, AZ 85701 | | | |
|--|------|-----------------------------------|--------|
| BORN FREE 2300 WISCONSIN AVE NW 100 B | NONE | IDAHO ANIMAL TRAPPING CAMPAIGN | 15,000 |

| BORN FREE 2300 WISCONSIN AVE NW 100 B WASHINGTON, DC 20007 | NONE | IDAHO ANIMAL TRAPPING CAMPAIGN | 15,000 |
|--|------|-----------------------------------|--------|

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of

| | | | |
|-------------------------------------|----------------------------|-----------|------|
| a Paid during the year | | | |
| Name and address (home or business) | or substantial contributor | recipient | |

| 610 EAST 42ND STREET GARDEN CITY, ID 83714 | | | |
|---|------|------------|--------|
| BOYS & GIRLS CLUB KUNA COUNTY | NONE | OPERATIONS | 20,000 |

| <u>'</u> | | | |
|---|------|------------|--------|
| BOYS & GIRLS CLUB OF TUCSON PO BOX 40217 TUCSON, AZ 85717 | NONE | OPERATIONS | 10,000 |
| CAN DO CANTNEC | NONE | OPERATIONS | 30,000 |

| TUCSON, AZ 85717 | | | |
|---|------|------------|--------|
| CAN DO CANINES 9440 SCIENCE CENTER DRIVE NEW HOPE, MN 55428 | NONE | OPERATIONS | 20,000 |

| · · | | | | l |
|---|------|--|------------|-----------|
| CAN DO CANINES 9440 SCIENCE CENTER DRIVE NEW HOPE, MN 55428 | NONE | | OPERATIONS | 20,000 |
| Total | | | ▶ 3a | 1,995,000 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

| Name and address (home or business) | or substantial contributor | , conprons | | |
|--|----------------------------|------------|------------|--------|
| a Paid during the year | | | | |
| CATCH INC503 S AMERICANA BLVD BOISE, ID 83702 | NONE | | OPERATIONS | 10,000 |
| CENTED FOR BIOLOGICAL DIVERSITY | NONE | | OPERATIONS | 50,000 |

| CENTER FOR BIOLOGICAL DIVERSITY PO BOX 710 TUCSON, AZ 85702 | NONE | OPERATIONS | 50,000 |
|---|------|------------|--------|
| CENTER FOR SCIENCE IN THE PUBLIC INTEREST | NONE | OPERATIONS | 7,000 |

| CENTER FOR SCIENCE IN THE PUBLIC INTEREST 1220 L STREET NW STE 300 WASHINGTON, DC 20005 OPERATIONS 7,000 | TUCSON, AZ 85/02 | | | |
|--|--------------------------------------|------|------------|-------|
| | INTEREST 1220 L STREET NW STE 300 | NONE | OPERATIONS | 7,000 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

recipient

1,995,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

| a Paid during the year | | | |
|---|------|----------------|--------|
| CHILD LANGUAGE CENTER INC 202 E SPEEDWAY TUCSON, AZ 85705 | NONE | WINGS ON WORDS | 10,000 |
| CHILDREN'S CHANCE | NONE | OPERATIONS | 25,000 |

| 1617 INDEPENDENCE AVE N GOLDEN VALLEY, MN 55427 | NONE | OPERATIONS | |
|--|------|------------|--|
| CHIMP HAVEN | NONE | OPERATIONS | |

| GOLDEN VALLEY, MN 55427 | | | |
|--|------|------------|--------|
| CHIMP HAVEN 13600 CHIMPANZEE PLACE KEITHVILLE LA 71047 | NONE | OPERATIONS | 10,000 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year COALITION FOR SONORAN DESERT NONE OPERATIONS 25 000

| PROTECTION 300 EAST UNIVERSITY BLVD SUITE 120 TUCSON, AZ 85705 | NONE | OI ENATIONS | 23,000 |
|--|------|-------------|--------|
| COMMUNITY FOOD BANK TUCSON | NONE | OPERATIONS | 35,000 |

| 10C3ON, AZ 03703 | | | |
|--|------|------------|--------|
| COMMUNITY FOOD BANK TUCSON 3003 SOUTH COUNTRY CLUB ROAD TUCSON, AZ 85713 | NONE | OPERATIONS | 35,000 |
| COMPATIBLE TECHNOLOGIES | NONE | OPERATIONS | 40,000 |

| TUCSON, AZ 85713 | | | |
|--|------|------------|--------|
| COMPATIBLE TECHNOLOGIES INTERNATIONAL 800 TRANSFER ROAD SUITE 6 ST PAUL, MN 55114 | NONE | OPERATIONS | 40,000 |

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

Maria and address (home or business)

| Name and address (nome or business) | or substantial contributor | · | | |
|--|----------------------------|---|------------|-------|
| a Paid during the year | | | | |
| CONSERVATION MINNESOTA 1101 WEST RIVER PKWY STE 250 | NONE | | OPERATIONS | 5,000 |

| MINNEAPOLIS, MN 55415 | | | |
|--|------|------------|-------|
| COPPER COUNTRY AUDUBON SOCIETY PO BOX 124 HOUGHTON, MI 49931 | NONE | OPERATIONS | 6,000 |

| COPPER COUNTRY AUDUBON SOCIETY PO BOX 124 HOUGHTON, MI 49931 | NONE | OPERATIONS | 6,000 |
|--|------|------------|-------|
| COPPER COUNTRY HISTORY MUSEUM 534 ISLE ROYALE STREET LAURIUM, MI 49913 | NONE | OPERATIONS | 2,000 |

| | PO BOX 124 HOUGHTON, MI 49931 | | | |
|---|--|------|------------|-------|
| , | COPPER COUNTRY HISTORY MUSEUM 534 ISLE ROYALE STREET LAURIUM, MI 49913 | NONE | OPERATIONS | 2,000 |
| | | | | |

| COPPER COUNTRY HISTORY MUSEUM 534 ISLE ROYALE STREET LAURIUM, MI 49913 | NONE | OPERATIONS | 2,00 |
|--|------|------------|-----------|
| Total | | ▶ 3a | 1,995,000 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

| Name and address (home or business) | or substantial contributor | Todipient | | |
|-------------------------------------|----------------------------|-----------|------------|-------|
| a Paid during the year | | | | |
| COPPER HARBOR TRAILS CLUB | NONE | | OPERATIONS | 5,000 |

| COPPER HARBOR TRAILS CLUB PO BOX 37 COPPER HARBOR, MI 49918 | NONE | OPERATIONS | 5,000 |
|---|------|------------|-------|
| COPPER RANGE HISTORICAL SOCIETY 44 TRIMOUNTAIN AVE PO BOX 148 | NONE | OPERATIONS | 2,000 |

| COPPER HARBOR, MI 49918 | | | |
|---|------|------------|-------|
| COPPER RANGE HISTORICAL SOCIETY 44 TRIMOUNTAIN AVE PO BOX 148 SOUTH RANGE, MI 49963 | NONE | OPERATIONS | 2,000 |
| DASSEL-COKATO HISTORICAL SOCIETY | NONE | OPERATIONS | 2,000 |

| SOUTH RANGE, MI 49963 | | | |
|--|------|------------|-------|
| DASSEL-COKATO HISTORICAL SOCIETY 175 FOURTH STREET SW COKATO, MN 55321 | NONE | OPERATIONS | 2,000 |

| DASSEL-COKATO HISTORICAL SOCIETY 175 FOURTH STREET SW COKATO, MN 55321 | NONE | OPERATIONS | 2,000 |
|--|------|------------|-----------|
| Total | | ▶ 3a | 1,995,000 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of

| Name and address (home or business) | any foundation manager or substantial contributor | recipient | |
|-------------------------------------|--|-----------|--|
| a Paid during the year | | | |

| DEFENDER OF WILDLIFE | NONE | OPERATIONS | 7,000 |
|----------------------|------|------------|-------|
| 1130 17TH STREET NW | | | |
| WASHINGTON, DC 20036 | | | |
| | | | |

| WASHINGTON, DC 20036 | | | | |
|---|------|--|------------|-------|
| DOWNEAST INSTITUTE 39 WILDFLOWER LANE BEALS, ME 04611 | NONE | | OPERATIONS | 5,000 |
| · · · · · · · · · · · · · · · · · · · | | | | |

| DOWNEAST INSTITUTE 39 WILDFLOWER LANE BEALS, ME 04611 | NONE | OPERATIONS | 5,000 |
|---|------|---------------|--------|
| EARTH WORKS 1612 K ST NW SUITE 808 | NONE | MINING REFORM | 20,000 |

| EARTH WORKS NONE MINING REFORM 20,000 MINING REFORM | SEALS, ME 04611 | | | |
|--|------------------------|------|---------------|--------|
| | 1612 K ST NW SUITE 808 | NONE | MINING REFORM | 20,000 |

Total .

Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NONE GLOBAL WARMING 65,000 FARTHJUSTICE 50 CALIFORNIA STREET SUITE 500

SAN FRANCISCO, CA 94109

| SAN FRANCISCO, CA 94111 | | | |
|---|------|------------|--------|
| EL RIO FOUNDATION839 W CONGRESS TUCSON, AZ 85745 | NONE | OPERATIONS | 35,000 |
| ELECTRONIC FRONTIER FOUNDATION 815 EDDY STREET | NONE | OPERATIONS | 15,000 |

1,995,000

▶ 3a

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year | | | |
|--|------|------------|--------|
| ENGLISH LEARNING CENTER 2315 CHICAGO AVE S MINNEAPOLIS, MN 55405 | NONE | OPERATIONS | 10,000 |

| MINNEAPOLIS, MN 55405 | | | |
|--|------|--------------|--------|
| FAMILY CARE FOUNDATION PO BOX 1039 SPRING VALLEY, CA 91979 | NONE | ESPOIR CONGO | 55,000 |
| FAMILY PLANNING ASSOCIATION OF | NONE | OPERATIONS | 8,000 |

| PO BOX 1039 SPRING VALLEY, CA 91979 | | | |
|--|------|------------|-------|
| FAMILY PLANNING ASSOCIATION OF MAINE | NONE | OPERATIONS | 8,000 |
| PO BOX 587 | | | |

| · | | | |
|--|------|------------|-------|
| FAMILY PLANNING ASSOCIATION OF MAINE PO BOX 587 AUGUSTA, ME 04332 | NONE | OPERATIONS | 8,000 |
| | | | |

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager

Name and address (home or business)

Total .

| | or substantial contributor | | |
|---|----------------------------|------------|--------|
| a Paid during the year | | | |
| FEED MY STARVING CHILDREN 401 93RD AVE NW COON RAPIDS, MN 55433 | NONE | OPERATIONS | 30,000 |
| | | | |

recipient

| FREEBORN COUNTY HUMANE SOCIETY 101 JAMES AVENUE ALBERT LEA, MN 56007 | NONE | OPERATIONS | 10,000 |
|--|------|------------|--------|
| FRESH ENERGY | NONE | OPERATIONS | 6,000 |

| ALBERT LEA, MN 56007 | | | |
|---|------|------------|-------|
| FRESH ENERGY 408 SAINT PETER STREET STE 220 ST PAUL, MN 55102 | NONE | OPERATIONS | 6,000 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager

recipient

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

or substantial contributor

Name and address (home or business)

| a Paid during the year | | | |
|---|------|------------|--------|
| FRIENDS OF CASCO BAY 43 SLOCUM DRIVE SOUTH PORTLAND, ME 04106 | NONE | OPERATIONS | 8,000 |
| FRIENDS OF CAVE CREEK CANYON | NONE | OPERATIONS | 12,000 |

| FRIENDS OF CAVE CREEK CANYON PO BOX 16126 PORTAL, AZ 85362 | NONE | OPERATIONS | 12,00 |
|--|------|------------|-------|
| FRIENDS OF CHILDREN PORTLAND | NONE | OPERATIONS | 5,00 |

| PO BOX 16126 PORTAL, AZ 85362 | | | |
|---|------|------------|-------|
| FRIENDS OF CHILDREN PORTLAND 44 NE MORRIS STREET PORTLAND, OR 97212 | NONE | OPERATIONS | 5,000 |

| FRIENDS OF CHILDREN PORTLAND 44 NE MORRIS STREET PORTLAND, OR 97212 | NONE | OPERATIONS | 5,000 |
|---|------|------------|-----------|
| Total | | ▶ 3a | 1,995,000 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

| Name and address (home or business) | any foundation manager or substantial contributor | recipient | |
|-------------------------------------|--|-----------|--|
| a Paid during the year | | | |
| | | | |

| FRIENDS OF SAX-ZIMM BOG PO BOX 3585 | NONE | OPERATIONS | 53,000 |
|--|------|------------|--------|
| DULUTH, MN 55803 | | | |

| 2020111,1111 30003 | | | |
|---|------|------------|--------|
| FRIENDS OF THE MISSISSIPPI 101 EAST 5TH STREET SUITE 2000 ST PAUL, MN 55101 | NONE | OPERATIONS | 28,000 |

| 101 EAST 5TH STREET SUITE 2000 ST PAUL, MN 55101 | NONE | OFERATIONS | 20,000 |
|---|------|------------|--------|
| GLEN CANYON INSTITUTE 429 EAST 100 SOUTH | NONE | OPERATIONS | 36,000 |

| ST PAUL, MN 55101 | | | |
|---|------|------------|--------|
| GLEN CANYON INSTITUTE 429 EAST 100 SOUTH SALT LAKE CITY, UT 84111 | NONE | OPERATIONS | 36,000 |

| Total | | ▶ 3a | 1,995,000 |
|--|-------|------------|-----------|
| 429 EAST 100 SOUTH SALT LAKE CITY, UT 84111 | | | |
| GLEN CANYON INSTITUTE | INONE | OPERATIONS | 36,00 |

Recipient If recipient is an individual, show any relationship to status of recontribution Spaid During the Year or Approved for Future Payment

Recipient If recipient is an individual, show any relationship to status of contribution

Purpose of grant or contribution

any foundation manager

Name and address (home or husiness)

702 H STREET NW SUITE 300 WASHINGTON, DC 20001

Total .

| Name and address (nome or business) | or substantial contributor | · | | |
|---|----------------------------|---|------------|--------|
| a Paid during the year | | | | |
| GRANDPARENTS AS PARENTS INC 22048 SHERMAN WAY 217 CANOGA PARK, CA 91303 | NONE | | OPERATIONS | 14,000 |
| GRATIOT LAKE CONSERVANCY PO BOX 310 MOHAWK, MI 49950 | NONE | | OPERATIONS | 6,000 |
| GREENPEACE | NONE | | OPERATIONS | 15,000 |

recipient

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

| | or substantial contributor | | |
|--|----------------------------|------------|-------|
| a Paid during the year | | | |
| GREYHOUND RESCUE OF IDAHO 146 N MIDDLETON ROAD PMB 125 NAMPA, ID 83651 | NONE | OPERATIONS | 3,000 |
| | | | |

5,000

1,995,000

| · | | |
|--|------|------------|
| GUIDING EYES FOR THE BLIND 611 GRANITE SPRINGS ROAD YORKTOWN HEIGHTS, NY 10598 | NONE | OPERATIONS |

or substantial contributor

Name and address (home or business)

Total .

| 611 GRANITE SPRINGS ROAD YORKTOWN HEIGHTS, NY 10598 | | | · |
|--|------|------------|-----|
| HARMONY AND HOPE HORSE HAVEN PO BOX 173 | NONE | OPERATIONS | 5,0 |

| YORKTOWN HEIGHTS, NY 10598 | | | |
|---|------|------------|------|
| HARMONY AND HOPE HORSE HAVEN PO BOX 173 RODEO, NM 88056 | NONE | OPERATIONS | 5,00 |

| HARMONY AND HOPE HORSE HAVEN | NONE | OPERATIONS | 5,000 |
|------------------------------|------|------------|-------|
| PO BOX 173 | | | |
| RODEO, NM 88056 | | | |
| | | | |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

| a Paid during the year | | | |
|--|------|------------|--------|
| HEARTGIFT LOUISIANA 5500 PRYTANIA 306 | NONE | OPERATIONS | 10,000 |

| EW ORLEANS, LA /0461 | | |
|--|------|------------|
| ERITAGE RADIO SOCIETY INC 19 COUSINS ST ARMOUTH ME 04096 | NONE | OPERATIONS |

or substantial contributor

Name and address (home or business)

| HERITAGE RADIO SOCIETY INC 219 COUSINS ST YARMOUTH, ME 04096 | NONE | OPERATIONS | 5,1 |
|--|------|------------|-----|
| HOUGHTON COUNTY HIS SOCIETY | NONE | OPERATIONS | 5,0 |

| YARMOUTH, ME 04096 | | | |
|---|------|------------|-----|
| HOUGHTON COUNTY HIS SOCIETY PO BOX 127 | NONE | OPERATIONS | 5,0 |

| * | | | |
|--|------|------------|-------|
| HOUGHTON COUNTY HIS SOCIETY PO BOX 127 LAKE LINDEN, MI 49945 | NONE | OPERATIONS | 5,000 |

.000

| HOUGHTON COUNTY HIS SOCIETY | NONE | OPERATIONS | 1 |
|-----------------------------|------|------------|-------------|
| PO BOX 127 | | | |
| LAKE LINDEN, MI 49945 | | | |
| | | | |

| LAKE LINDEN, MI 49945 | | | |
|-----------------------|------|----------------|-----------|
| Total | | > 3a | 1,995,000 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year HUMANE FARMING ASSOCIATION NONE **OPERATIONS** 55,000 36 WOODLAND AVENUE SAN RAFAEL, CA 94901

| HUMANE SOCIETY OF SOUTHERN ARIZONA 3450 N KELVIN BLVD TUCSON, AZ 85716 | NONE | OPERATIONS | 5,000 |
|--|------|---------------------------|-------|
| HUMANE SOCIETY OF THE UNITED STATES | NONE | FACTORY FARMING AWARENESS | 5,000 |

| Total | | | | | 1,995,000 |
|-------|--|------|--|----------------------------|-----------|
| | STATES 700 PROFESSIONAL DRIVE GAITHERSBURG, MD 20879 | NONE | | TACTORT FARMLING AWARENESS | 3,000 |
| 1 | HUMANE SOCIETY OF THE UNITED | NONE | | FACTORY FARMING AWARENESS | 5,000 |
| ı | TUCSON, AZ 63716 | | | | |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| STATES 700 PROFESSIONAL DRIVE GAITHERSBURG, MD 20879 | NONE | ADOPT A CLASSROOM | 20,000 |
|--|------|-------------------|--------|
| IDAHO FOODBANK WAREHOUSE | NONE | BACKPACK PROGRAM | 22,500 |

| IDAHO FOODBANK WAREHOUSE 3562 SOUTH TK AVENUE BOISE, ID 83705 | NONE | BACKPACK PROGRAM | 22,500 |
|---|------|------------------|--------|
| IDAHO SUICIDE PREVENTION HOT LINE 1607 W JEFFERSON STREET | NONE | OPERATIONS | 5,000 |

| Total | | ▶ 3a | 1,995,000 |
|---|------|------------|-----------|
| IDAHO SUICIDE PREVENTION HOT LINE 1607 W JEFFERSON STREET BOISE, ID 83702 | NONE | OPERATIONS | 5,000 |
| BOISE, ID 63703 | | | |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| | NONE | OPERATIONS | 0.000 |
|---|------|------------|--------|
| IDAHO YOUTH RANCH 5465 WEST IRVING STREET BOISE, ID 83706 | NONE | OPERATIONS | 25,000 |
| | | | |

| MUSTANG PO BOX 998 HOT SPRINGS, SD 57747 | | | |
|--|------|------------|-------|
| INSTITUTE OF RANGE AND AMERICAN | NONE | OPERATIONS | 9,000 |
| ' | | | |

| PO BOX 998 HOT SPRINGS, SD 57747 | | | |
|--|------|------------|-------|
| INTERCULTURAL CENTER FOR STUDY OF DESERTS & OCEANS PO BOX 44208 THICSON AZ 85733 | NONE | OPERATIONS | 3,000 |

| 1101 31 111103, 35 377 17 | | | |
|---|------|------------|-----------|
| INTERCULTURAL CENTER FOR STUDY OF DESERTS & OCEANS PO BOX 44208 TUCSON, AZ 85733 | NONE | OPERATIONS | 3,000 |
| Total | | ▶ 3a | 1,995,000 |

Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year 17AAK WALTON LEAGUE OF AMERICA NONE OPERATIONS 7,000 MINNESOTA DIVISION 2233 UNIVERSITY AVE W STE 339

| ST PAUL, MN 55114 | | | |
|---|------|------------|--------|
| KATIE'S KROPSPO BOX 1841 SUMMERVILLE, SC 29484 | NONE | OPERATIONS | 15,000 |
| KBEM RADIO1555 JAMES AVENUE N | NONE | OPERATIONS | 5,000 |

| SUMMERVILLE, SC 29484 | | | |
|--|------|------------|-------|
| KBEM RADIO1555 JAMES AVENUE N MINNEAPOLIS, MN 55411 | NONE | OPERATIONS | 5,000 |

1,995,000

▶ 3a

| • | | | |
|-------------------------------|------|------------|-----|
| KBEM RADIO1555 JAMES AVENUE N | NONE | OPERATIONS | 5,0 |
| MINNEAPOLIS.MN 55411 | | | |

Total . .

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year KEWEENAW COMMUNITY FOREST NONE **OPERATIONS** 77,000 COMPANY 13992 SMITH FISHERIES ROAD

| MOHAWK, MI 49950 | | | |
|--|------|------------|-------|
| KEWEENAW COUNTY HISTORICAL SOCIETY 670 LIGHTHOUSE ROAD EAGLE HARBOR, MI 49950 | NONE | OPERATIONS | 7,000 |

| 670 LIGHTHOUSE ROAD EAGLE HARBOR, MI 49950 | | | |
|--|------|------------|--------|
| KEWEENAW LAND TRUST 801 NORTH LINCOLN DR STE 306 HANCOCK, MI 49930 | NONE | OPERATIONS | 23,000 |

| LAGLE HARBON, MI 49930 | | | |
|--|------|------------|--------|
| KEWEENAW LAND TRUST 801 NORTH LINCOLN DR STE 306 HANCOCK, MI 49930 | NONE | OPERATIONS | 23,000 |
| | | | |

Total . .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager

or substantial contributor

Name and address (home or business)

| a Paid during the year | | | |
|--|------|------------|--------|
| KINSHIP UNITEDWARM BLANKETS 5105 TOLLVIEW DR 155 ROLLING MEADOWS, IL 60008 | NONE | OPERATIONS | 3,000 |
| LIVE THEATER WORKSHOP | NONE | OPERATIONS | 10,000 |

recipient

| LIVE THEATER WORKSHOP 5317 SPEEDWAY BLVD TUCSON, AZ 85712 | NONE | OPERATIONS | 10, |
|---|------|------------|-----|
| LOVE ONE ANOTHER | NONE | OPERATIONS | 20, |

| TUCSON, AZ 85712 | | | |
|---|------|------------|--------|
| LOVE ONE ANOTHER 7220 YORK AVENUE S 610 EDINA, MN 55435 | NONE | OPERATIONS | 20,000 |

| LOVE ONE ANOTHER 7220 YORK AVENUE S 610 EDINA, MN 55435 | NONE | OPERATIONS | 20,000 |
|---|------|------------|-----------|
| Total | | ▶ 3a | 1,995,000 |

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year MAINE PBS1450 LISBON STREET NONE **OPERATIONS** 11,000 LEWISTON, ME 04240

Total . .

| MALPAI BORDERLANDS GROUP PO BOX 3536 DOUGLAS, AZ 85607 | NONE | OPERATIONS | 5,000 |
|---|------|------------|--------|
| MCPAWS REGIONAL ANIMAL SHELTER PO BOX 1375 MCCALL. ID 83638 | NONE | OPERATIONS | 10,000 |

▶ 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount

| Name and address (home or business) | show any relationship to any foundation manager or substantial contributor | status of recipient | contribution | |
|-------------------------------------|--|------------------------|--------------|---|
| | I | ı | ı | 1 |

| , | or substantial contributor | | |
|--------------------------|----------------------------|------------|--------|
| a Paid during the year | | | |
| MEALS FROM THE HEARTLAND | NONE | OPERATIONS | 10,000 |

| 357 LINCOLN STREET DES MOINES, IA 50265 | | | |
|---|------|------------|--|
| MERRYSPRING30 CONWAY ROAD CAMDEN, ME 04843 | NONE | OPERATIONS | |

| _ = = : : = = ; = : = = = = = = = = = = = | | | |
|--|------|------------|--------|
| MERRYSPRING30 CONWAY ROAD CAMDEN, ME 04843 | NONE | OPERATIONS | 5,000 |
| MINNESOTA CENTER FOR ENVIRONMENTAL ADVOCACY | NONE | OPERATIONS | 22,000 |

| MINNESOTA CENTER FOR ENVIRONMENTAL ADVOCACY 26 E EXCHANGE ST STE 206 ST PAUL, MN 55101 | NONE | OPERATIONS | 22,000 |
|---|------|------------|--------|
| | | | |

| Total | | | 1,995,000 |
|---|------|------------|-----------|
| ENVIRONMENTAL ADVOCACY 26 E EXCHANGE ST STE 206 ST PAUL, MN 55101 | | | , |
| MINNESOTA CENTER FOR | NONE | OPERATIONS | 22,000 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

recipient

5,000

1,995,000

any foundation manager

or substantial contributor

Name and address (home or business)

| | or substantial continuator | | |
|--|----------------------------|------------|-------|
| a Paid during the year | | | |
| MINNESOTA ZOO 13000 ZOO BOULEVARD APPLE VALLEY, MN 55124 | NONE | OPERATIONS | 4,000 |

| MINNESOTA LAND TRUST 2356 UNIVERSITY AVE WEST STE 240 ST PAUL, MN 55114 | NONE | OPERATIONS | |
|---|------|------------|--|
| | | | |

| ST PAUL, MN 55114 | | | |
|--|------|------------|--------|
| MOBILE MEALS OF TUCSON 4803 EAST 5TH STREET 209 TUCSON, AZ 85711 | NONE | OPERATIONS | 11,000 |

| ST PAUL, MIN 55114 | | | |
|--|------|------------|-------|
| MOBILE MEALS OF TUCSON 4803 EAST 5TH STREET 209 TUCSON, AZ 85711 | NONE | OPERATIONS | 11,00 |
| | | | |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| NATIONAL STUTTERING ASSOCIATION 119 W 40TH STREET 14TH FL NEW YORK, NY 10018 | NONE | OPERATIONS | 10,000 |
|--|------|------------|--------|
| NATURAL RESOURCES DEFENSE COUNCIL | NONE | OPERATIONS | 60,000 |

| NEW TORK, NT 10010 | | | |
|--|------|------------|--------|
| NATURAL RESOURCES DEFENSE COUNCIL 40 W 20TH ST NEW YORK, NY 10011 | NONE | OPERATIONS | 60,000 |
| NATURE CONSERVANCY COSTA RICA | NONE | OPERATIONS | 5,000 |

| 40 W 20TH ST NEW YORK, NY 10011 | | | |
|---|------|------------|-------|
| NATURE CONSERVANCY COSTA RICA 245 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22204 | NONE | OPERATIONS | 5,000 |

| Total | | ▶ 3a | 1,995,000 |
|---|------|------------|-----------|
| NATURE CONSERVANCY COSTA RICA 245 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22204 | NONE | OPERATIONS | 5,000 |
| ··=·· · · · · · · · · · · · · · · · · · | | | |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager

or substantial contributor

Name and address (home or business)

Total .

| NATURE CONSERVANCY HAWAII 923 NUUANU AVE HONOLULU, HI 96816 | NONE | OPERATIONS | 5,000 |
|---|------|------------|-------|
| a Paid during the year | | | |
| | | | |

recipient

| 1101101010 | | | |
|--|------|------------|--------|
| NATURE CONSERVANCY IDAHO 116 FIRST AVENUE NORTH HAILEY, ID 83333 | NONE | OPERATIONS | 5,000 |
| NATURE CONSERVANCY MAINE | NONE | OPERATIONS | 10.000 |

| HAILEY, ID 83333 | | | |
|---|------|------------|--------|
| NATURE CONSERVANCY MAINE 14 MAINE ST STE 401 BRUNSWICK ME 04011 | NONE | OPERATIONS | 10,000 |

| · | | | |
|--|------|------------|--------|
| NATURE CONSERVANCY MAINE 14 MAINE ST STE 401 BRUNSWICK, ME 04011 | NONE | OPERATIONS | 10,000 |
| | | | |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

| | or substantial contributor | | |
|--|----------------------------|------------|--------|
| a Paid during the year | | | |
| NATURE CONSERVANCY MINNESOTA 1101 WEST RIVER PKWY STE 200 | NONE | OPERATIONS | 10,000 |

| MINNEAPOLIS, MN 55415 | | | |
|--|------|------------|-------|
| NATURE CONSERVANCY UTAH 559 EAST SOUTH TEMPLE | NONE | OPERATIONS | 7,000 |
| SALT LAKE CITY LIT 84102 | | | |

| NATURE CONSERVANCY UTAH 559 EAST SOUTH TEMPLE SALT LAKE CITY, UT 84102 | NONE | OPERATIONS | 7,000 |
|--|------|------------|--------|
| NEPAL SOCIAL SERVICE FUND | NONE | OPERATIONS | 10,000 |

| SALT LAKE CITY, UT 84102 | | | |
|---|------|------------|--------|
| NEPAL SOCIAL SERVICE FUND 77461 297TH STREET CLARKS GROVE, MN 56016 | NONE | OPERATIONS | 10,000 |

| Total | | ▶ 3a | 1,995,000 |
|--|-------|----------------|-----------|
| 77461 297TH STREET CLARKS GROVE, MN 56016 | NONE | OPERATIONS | 10,000 |
| I NEPAL SOCIAL SERVICE FUND | INONE | I OPERATIONS I | 10,000 |

Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NORTHEAST WILDERNESS TRUST NONE **OPERATIONS** 10,000 17 STATE STREET SUITE 302

| MONTPELIER, VT 05602 | | | |
|---|------|------------|--------|
| NE SUSTAINABLE ELYPO BOX 625 ELY, MN 55731 | NONE | OPERATIONS | 22,000 |
| NORTHERN JAGUAR PROJECT | NONE | OPERATIONS | 7,000 |

1,995,000

▶ 3a

TUCSON, AZ 85745

Total . .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of

| Name and address (home or business) | or substantial contributor | recipient | | |
|-------------------------------------|----------------------------|-----------|------------|--------|
| a Paid during the year | | | | |
| NORWEGIAN LUTHERAN CHURCH | NONE | | OPERATIONS | 10,000 |

| HISTORICAL SOCIETY 608 ELM ST CALUMET, MI 49913 | | | |
|---|------|------------|-------|
| PAINSDALE MINE & SHAFTPO BOX 332 | NONE | OPERATIONS | 5,000 |

| <u>'</u> | | | |
|---|------|------------|--------|
| PAINSDALE MINE & SHAFTPO BOX 332 PAINSDALE, MI 49955 | NONE | OPERATIONS | 5,000 |
| PETS FOR THE ELDERLY FOUNDATION 530 E HUNT HWY STE 103 PMB 472 | NONE | OPERATIONS | 25,000 |

1,995,000

| PAINSDALE, MI 49955 | | | , |
|---|------|------------|--------|
| PETS FOR THE ELDERLY FOUNDATION 530 E HUNT HWY STE 103 PMB 472 SAN TAN VALLEY, AZ 85143 | NONE | OPERATIONS | 25,000 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

recipient

1,995,000

| a Paid during the year | | | |
|---|------|------------|--------|
| PLANNED PARENTHOOD ARIZONA 4751 N 15TH STREET PHOENIX, AZ 85014 | NONE | OPERATIONS | 15,000 |
| PLANNED PARENTHOOD OF IDAHO | NONE | OPERATIONS | 10,000 |

| PLANNED PARENTHOOD OF IDAHO 2001 E MADISON STREET SEATTLE, WA 98122 | NONE | OPERATIONS | |
|---|------|------------|--|
| POPULATION MEDIA CENTER | NONE | OPERATIONS | |

any foundation manager

or substantial contributor

Name and address (home or business)

| 2001 E MADISON STREET SEATTLE, WA 98122 | | | |
|--|------|------------|-------|
| POPULATION MEDIA CENTER 30 KIMBALL AVENUE SUITE 302 | NONE | OPERATIONS | 5,000 |

| SEATTLE, WA 98122 | | | |
|--|------|------------|------|
| POPULATION MEDIA CENTER 30 KIMBALL AVENUE SUITE 302 SOUTH BURLINGTON, VT 05403 | NONE | OPERATIONS | 5,00 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year | | | |
|--|------|------------|-------|
| PORTLAND CHILDREN'S MUSEUM 4015 SOUTHWEST CANYON ROAD PORTLAND, OR 97221 | NONE | OPERATIONS | 5,000 |
| | | | |

| , | | | |
|--|------|------------|-------|
| PRESERVATION ALLIANCE OF MINNESOTA 416 LANDMARK CENTER 75 W 5TH STREET ST PAUL, MN 55102 | NONE | OPERATIONS | 6,000 |
| | | | |

| STREET ST PAUL, MN 55102 | | | |
|-----------------------------|------|------------|--------|
| RED CROSS5380 FRANKLIN RD | NONE | OPERATIONS | 20,000 |

| ST PAUL, MN 55102 | | | |
|--|------|------------|--------|
| RED CROSS5380 FRANKLIN RD BOISE, ID 83705 | NONE | OPERATIONS | 20,000 |

1,995,000

| | | | · |
|--|------|------------|------|
| RED CROSS5380 FRANKLIN RD BOISE, ID 83705 | NONE | OPERATIONS | 20,0 |
| BOISE, ID 83/05 | | | i |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

| | or substantial contributor | | |
|---------------------------|----------------------------|------------|-------|
| a Paid during the year | | | |
| RIVER NETWORKPO BOX 21387 | NONE | OPERATIONS | 6,000 |

| RIVER NETWORKPO BOX 21387 BOULDER, CO 80308 | NONE | OPERATIONS | 6,000 |
|--|------|--------------|--------|
| RIVERLAND COMMUNITY COLLEGE 1900 8TH AVE NW | NONE | SCHOLARSHIPS | 25,000 |

| • | | | |
|--|------|--------------|--------|
| RIVERLAND COMMUNITY COLLEGE 1900 8TH AVE NW AUSTIN, MN 55912 | NONE | SCHOLARSHIPS | 25,000 |
| | | | |

| AUSTIN, MN 55912 | | | |
|-----------------------------|------|------------|--------|
| RUFF START RESCUEPO BOX 129 | NONE | OPERATIONS | 12,000 |

| RUFF START RESCUEPO BOX 129 PRINCETON, MN 55371 | NONE | | OPERATIONS | 12,000 |
|--|------|--|------------|--------|
| · | | | | |

| PRINCETON, MN 55371 | NONE | OPERATIONS | 12,0 |
|---------------------|------|------------|-----------|
| Total | | | 1,995,000 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year | | | |
|--|------|------------|--------|
| SALVATION ARMY OF NORTHERN NEW ENGLAND PO BOX 3647 PORTLAND, ME 04101 | NONE | OPERATIONS | 33,000 |

| PORTLAND, ME 04101 | | |
|--|------|------------|
| SAVE THE SCENIC SANTA RITAS 8987 E TANQUE VERDE 309-157 TUCSON, AZ 85749 | NONE | OPERATIONS |

5,000

| E TANQUE VERDE 309-157 SON, AZ 85749 | | |
|---|------|------------|
| CCHNATIVE SEEDS E RIVER ROAD SON AZ 85718 | NONE | OPERATIONS |

| OPERATIONS | |
|------------|--|
| | |

TUCSO SEARC 15,000

| Total | | | 1,995,000 |
|---------------------------------------|--|------|-----------|
| 3584 E RIVER ROAD TUCSON, AZ 85718 | | | |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

any foundation manager

or cubetantial contributor

Name and address (home or business)

Total .

| | or substantial contributor | | |
|---|----------------------------|------------|--------|
| a Paid during the year | | | |
| SIMPLY CATS ADOPTION CENTER 2833 S VICTORY VIEW WAY BOISE, ID 83709 | NONE | OPERATIONS | 13,000 |
| SMALL SUMSAT HOME GROUP 1222 UNIVERSITY AVENUE WEST | NONE | OPERATIONS | 8,000 |

recipient

| SMALL SUMSAT HOME GROUP 1222 UNIVERSITY AVENUE WEST SAINT PAUL, MN 55104 | NONE | OPERATIONS | 8,00 |
|--|------|------------|------|
| SOCIETY FOR COMPANION ANIMALS 619 WOOLSEY DRIVE | NONE | OPERATIONS | 6,00 |

| SAINT PAUL, MN 55104 | | | |
|--|------|------------|-------|
| SOCIETY FOR COMPANION ANIMALS 619 WOOLSEY DRIVE DALLAS, TX 75224 | NONE | OPERATIONS | 6,000 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year

Total .

| | - · - · - · - · · · · · · · · · · · · · | | | |
|---|---|------|------------|-------|
| ı | SONORAN INSTITUTE 44 E BROADWAY BLVD STE 350 TUCSON, AZ 85701 | NONE | OPERATIONS | 5,000 |
| 1 | CDAY NEUTED IDAUG DETC INC | NONE | ODEDATIONS | F 000 |

| CT ANDREWS CLINICRO BOY CZ | NONE | ODEDATIONS | 22.000 |
|---|------|------------|--------|
| SPAY NEUTER IDAHO PETS INC 1077 S GARDEN PL BOISE, ID 83705 | NONE | OPERATIONS | 5,000 |

| BOISE, ID 83705 | | | |
|--|------|------------|--------|
| ST ANDREWS CLINICPO BOX 67 GREEN VALLEY, AZ 85622 | NONE | OPERATIONS | 22,000 |

| GREEN VALLEY, AZ 85622 | ST ANDREWS CLINICPO BOX 67 GREEN VALLEY, AZ 85622 | NONE | | OPERATIONS | 22,000 |
|------------------------|---|------|--|------------|--------|
|------------------------|---|------|--|------------|--------|

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year TEDFORD HOUSING NONE **OPERATIONS** 5,000 PO BOX 958 14 MIDDLE STREET BRUNSWICK, ME 04011

| THE FOOD TRUST 1617 JOHN F KENNEDY BLVDONE PENN CENTER 900 PHILADELPHIA, PA 19103 | NONE | OPERATIONS | 5,000 |
|--|------|------------|-------|
| TLC HORSE MULE AND DONKEY RESCUE PO BOX 6915 | NONE | OPERATIONS | 8,000 |

| PHILADELPHIA, PA 19103 | | | |
|--|------|------------|-------|
| TLC HORSE MULE AND DONKEY RESCUE PO BOX 6915 KINGMAN, AZ 86402 | NONE | OPERATIONS | 8,000 |
| | | | |

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

| a Paid during the year | | | |
|---|------|------------------------------------|-------|
| TRUST FOR PUBLIC LAND 2610 UNIVERSITY AVE WEST STE 300 | NONE | RAVENWOOD/BRANDENBURG ENDOWMENT | 5,000 |

| T PAUL, MN 55114 | | | | |
|---|------|---|------------|--|
| RUTHOUTPO BOX 276414 ACRAMENTO, CA 95827 | NONE | | OPERATIONS | |
| | | · | | |

or substantial contributor

| TRUTHOUTPO BOX 276414 SACRAMENTO, CA 95827 | NONE | OPERATIONS | 5,000 |
|---|------|------------|--------|
| U OF IDAHO MCCALL OUTDOOR SCIENCE SCHOOL | NONE | OPERATIONS | 10,000 |

| U OF IDAHO MCCALL OUTDOOR SCIENCE SCHOOL | NONE | | OPERATIONS | 10,000 |
|---|------|---|------------|--------|
| SCIENCE SCHOOL | | 1 | | |
| PO BOX 1025 | | | | |
| MCCALL, ID 83638 | | | | |
| ' | | 1 | | |

| SCIENCE SCHOOL | | | |
|------------------|------|----------------|-----------|
| PO BOX 1025 | | | |
| MCCALL, ID 83638 | | | |
| | | | |
| Total | | > 3a | 1,995,000 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

| Name and address (nome or business) | or substantial contributor | · | | |
|-------------------------------------|----------------------------|---|------------|--------|
| a Paid during the year | | | | |
| UM CVM COLLEGE SCHOLARSHIP FUND | NONE | | OPERATIONS | 15,000 |

| 1365 GORTNER AVE 459 ST PAUL, MN 55108 | | | , |
|--|------|------------|--------|
| UNION FOR CONCERNED SCIENTISTS TWO BRATTLE SQUARE | NONE | OPERATIONS | 80,000 |

| ST PAUL, MN 55108 | | | |
|---|------|------------|--------|
| UNION FOR CONCERNED SCIENTISTS TWO BRATTLE SQUARE CAMBRIDGE, MA 02138 | NONE | OPERATIONS | 80,000 |
| VISION LOSS RESOURCES 1936 LYNDALE AVENUE SOUTH | NONE | OPERATIONS | 6,000 |

| CAMBRIDGE, MA 02138 | | | |
|---|------|------------|-------|
| VISION LOSS RESOURCES 1936 LYNDALE AVENUE SOUTH MINNEAPOLIS, MN 55403 | NONE | OPERATIONS | 6,000 |
| | | | 1 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| WEST VET5019 N SAWYER GARDEN CITY, ID 83714 | NONE | OPERATIONS | 5,000 |
|---|------|------------|-------|
| WEST VALLEY HUMANE SOCIETY 5801 GRAYE LANE CALDWELL, ID 83607 | NONE | OPERATIONS | 5,000 |

| 5801 GRAYE LANE CALDWELL, ID 83607 | | | |
|--|------|------------|--------|
| WESTERN WATERSHED PROJECT PO BOX 1770 HAILEY, ID 83333 | NONE | OPERATIONS | 36,000 |

| WESTERN WATERSHED PROJECT PO BOX 1770 HAILEY, ID 83333 | NONE | OPERATIONS | 36,000 |
|--|------|------------|-----------|
| Total | | ▶ 3a | 1,995,000 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager

Name and address (home or business)

Total .

| Name and address (nome or business) | or substantial contributor | | |
|-------------------------------------|----------------------------|-----------------------|-------|
| a Paid during the year | | | |
| WILDEARTH GUARDIANS | NONE | END TRAPPING CAMPAIGN | 4,500 |

recipient

| 516 ALTO STREET SANTA FE, NM 87501 | | | |
|---|------|------------|-------|
| WILDLIFE REHAB CENTER 2530 DALE STREET ROSEVILLE.MN 55113 | NONE | OPERATIONS | 8,000 |

| WILDLIFE REHAB CENTER 2530 DALE STREET ROSEVILLE, MN 55113 | NONE | OPERATIONS | 8,000 |
|--|------|------------|--------|
| WORLD FOOD PROGRAMME 1725 I STREET SUITE 510 | NONE | OPERATIONS | 20,000 |

| ROSEVILLE, MN 55113 | | | |
|---|------|------------|--------|
| WORLD FOOD PROGRAMME 1725 I STREET SUITE 510 WASHINGTON, DC 20006 | NONE | OPERATIONS | 20,000 |

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

| | or substantial contributor | | |
|-------------------------------------|----------------------------|------------|-------|
| a Paid during the year | | | |
| YELLOW DOG RIVER WATERSHED PO BOX 5 | NONE | OPERATIONS | 5,000 |

| PO BOX 5 BIG BAY, MI 49808 | | | |
|---|------|------------|-------|
| GAMERS OUTREACHPO BOX 694 SALINE, MI 48176 | NONE | OPERATIONS | 5,000 |

| GAMERS OUTREACHPO BOX 694 SALINE, MI 48176 | NONE | OPERATIONS | 5,000 |
|---|------|------------|--------|
| EASTER SEALS401 NE 66TH AVE | NONE | OPERATIONS | 15,000 |

| ı | SALINE, MI 40170 | | | |
|---|---|------|------------|--------|
| | EASTER SEALS401 NE 66TH AVE DES MOINES, IA 50313 | NONE | OPERATIONS | 15,000 |

1,995,000

| EASTER SEALS401 NE 66TH AVE | NONE | OPERATIONS | 15,00 |
|-----------------------------|------|------------|-------|
| DES MOINES, IA 50313 | | | |

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

| a Paid during the year | | | |
|-------------------------------|------|------------|--------|
| GOODWILL15810 INDIANOLA DRIVE | NONE | OPERATIONS | 10,000 |

| ROCKVILLE, MD 20855 | NONE | OPERATIONS | 10,000 |
|---------------------|------|------------|-----------|
| Total | | ▶ 3a | 1,995,000 |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | DLN: 93491316020 | 189 | |
|--|-----------------|-------------------------|------------------|-----|--|
| TY 2018 All Other Program Related Investments Schedule | | | | | |
| | | | | | |
| Name: | STEVEN C LEU | THOLD FAMILY FOUNDATION | | | |
| EIN: | 41-1680986 | | | | |
| | Category | | Amount | | |
| N/A | | | | 0 | |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | DLN: 93491316020189 |
|--------------------------------------|-----------------|-----------------------|---------------------|
| TY 2018 Investments - Other 9 | Schodulo | | |
| 11 2016 livestillents - Other s | Scriedule | | |
| Name: | STEVEN CLEUTH | OLD FAMILY FOUNDATION | |
| | 41-1680986 | OLD THE TOOM DATE | |

| 11 1000500 | | | | | |
|-----------------------------|-----------------------|------------|----------------------------------|--|--|
| nvestments Other Schedule 2 | | | | | |
| Category/ Item | Listed at Cost or FMV | Book Value | End of Year Fair Market Value | | |
| CASH/MUTUAL FUNDS | AT COST | 22,100,904 | 22,505,171 | | |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | DLN | I: 93491316020189 | | |
|--------------------------------------|--------------------------------------|--------------------------|------------------------|---|--|--|
| TY 2018 Other Expenses Schedule | | | | | | |
| | | | | | | |
| Name: | STEVEN C LEUT | HOLD FAMILY FO | UNDATION | | | |
| EIN: 41-1680986 | | | | | | |
| Other Expenses Schedule | | | | | | |
| Description | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | | |
| MISCELLANEOUS | 3,747 | 0 | | 0 | | |
| BANK FEES | 30 | 0 | | 0 | | |

634,989

634,989

PORTFOLIO DEDUCTIONS

As Filed Data -

Name: STEVEN C LEUTHOLD FAMILY FOUNDATION

Description

efile GRAPHIC print - DO NOT PROCESS

EIN: 41-1680986

Other Income Schedule

MISCELLANEOUS INCOME

Revenue And

Expenses Per Books

23,927

23,927

Net Investment

Income

Adjusted Net Income

DLN: 93491316020189

23,927

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data | - | DL | N: 93491316020189 | | |
|---|---------------|--------------------------|------------------------|---------------------------------|--|--|
| TY 2018 Other Professional Fees Schedule | | | | | | |
| | | | | | | |
| Name: STEVEN C LEUTHOLD FAMILY FOUNDATION | | | | | | |
| EIN: 41-1680986 | | | | | | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable | | |

36,512

232,315

Purposes

195,803

| Category | Amount | Net II |
|----------|--------|--------|

MANAGEMENT FEES

| efile GRAPHIC print - DO NOT PROCES | SS As Filed Data | - | DL | N: 93491316020189 | | |
|-------------------------------------|------------------|-----------------------|------------------------|---------------------------------|--|--|
| TY 2018 Taxes Schedule | | | | | | |
| | | | | | | |
| Nan | ne: STEVEN C L | EUTHOLD FAMILY | FOUNDATION | | | |
| EIN: 41-1680986 | | | | | | |
| Catanami | A | Not Tourselment | Adires al Net | Dishuusausaus | | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable | | |
| | | | | Purposes | | |
| INCOME TAXES | 3,419 | 0 | | 0 | | |

6,385

6,385

FOREIGN TAXES