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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491257004107

2016

OMB No 1545-0052

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.
 Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

Open to Public Inspection

		ndar year 2016, or tax year	beginning 01-01-20	16 , aı	nd en	ding 12-31-		
		ndation OBERHOLTZER FOUNDATION				41-6042619	entification numbe	r
Num	hor and	street (or P O box number if mail is n	at delivered to etreet address)	Room/suite		41-6042619		
		OOKSIDE COURT NO 205	ot delivered to street address)	Room/suite		B Telephone nu (952) 401-0591	mber (see instructior	ns)
	or town IA, MN	, state or province, country, and ZIP or 55436	foreign postal code			C If exemption	application is pending	g, check here
G Ch	neck al	l that apply	☐ Initial return of a f☐ Amended return	former public charity		_	ganızatıons, check he ganızatıons meetıng	▶ ⊔
		☑ Address chan	ge 🔲 Name change				k here and attach cor	· -
1 Ch	eck ty	pe of organization 🗹 Section !	501(c)(3) exempt private f	oundation			indation status was t n 507(b)(1)(A), checl	
	Section	4947(a)(1) nonexempt charitable	e trust 🔲 Other taxable	private foundation				
of y	year <i>(f</i>	tet value of all assets at end rom Part II, col (c), \$ 755,337	☐ Other (specify) (Part I, column (d) must	✓ Cash ☐ Accru	ıal		tion is in a 60-month n 507(b)(1)(B), checi	
Pa	rt I	Analysis of Revenue and	Expenses (The total	(a) Revenue and	ļ			(d) Disbursements
		, ,, , ,,	(d) may not necessarily	expenses per books	(b) I	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1		received (attach	144,067	,			
	2	Contributions, gifts, grants, etc , received (attach schedule) Check ▶ ☐ if the foundation is not required to attach Sch B						
	3		rv cash investments	2	,	2	2	
	4	- ·	·	14,332	2	14,332	14,332	
	5a	Gross rents		•		<u> </u>		
	b	Net rental income or (loss)						
cle	6a	Net gain or (loss) from sale of as	ssets not on line 10	11,747	,			
Revenue	ь 7	•				11.747		
	8					,	0	
	9	· -	-					
	10a	Gross sales less returns and allow	wances					
	b	Less Cost of goods sold						
	С	Gross profit or (loss) (attach sch	edule) [22,147	,		22,147	
	11	Other income (attach schedule)	[16,230)	16,230	16,230	
	12	Total. Add lines 1 through 11		208,525	5	42,311	52,711	
	13	Compensation of officers, director	ors, trustees, etc	39,117	,	0	0	0
	14	Other employee salaries and wag	ges					
es	15		-			0	0	0
ens	16a	- '		 53	1	0	0	0
хр	ь	- ,		on 1				
- Ne	С	·	-	2,400	<u>'</u>	2,400	0	0
ati			}	09-1 1.025		766	0	
<u> </u>		, , , ,	′ L					0
ב ב		-	-				· · · · · · · · · · · · · · · · · · ·	0.051
₽		• ,	-		_			8,051
ם		·	-		+			
Operating and Administrative Expenses		- ·	-	<u> </u>	_	0	0	13,327
E								,-2,
er:		· -	-	99,658	,	3,166	5,775	49,010
5	25	Contributions, gifts, grants paid			-	,	•	365
	26		ments. Add lines 24 and	100 023		3 166	5 775	49 375
	27	Subtract line 26 from line 12		100,023		5,100	5,,,5	15,575
	a		nses and	108,502				
	b	· -	· · · · · · · · · · · · · · · · · · ·			39,145	-	
	С		·				46,936	
or	of amourss m. columns (b), (c), and (g) may not necessary eauth the amounts in actions (g) (see mixtured southous)							

620,992

58,590

679,582

679,582

2 3

4

5

6

571,081 108,502

679,583

679,582

Form **990-PF** (2016)

0

1

511.081 60,000

571,081

571,081

Mortgages and other notes payable (attach schedule).

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

20 21

22

23

24

25

28

29

31 Part III

Balances

Fund 26

ō

Assets 27

Net 30

2

3

4

5

Other liabilities (describe -_

Unrestricted

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) -

Permanently restricted . . .

Temporarily restricted

Complete only for assets showing gain in column (h) and owned by

1aSee Additional Data Table

(e)

Gross sales price

(i)

FMV as of 12/31/69

Capital gain net income or (net capital loss)

If section 4940(d)(2) applies, leave this part blank

a See Additional Data Table

in Part I, line 8

(a)

Base period years Calendar

year (or tax year beginning in)

2015

2014

2013

2012

2011

2 Total of line 1, column (d)

5 Multiply line 4 by line 3

7 Add lines 5 and 6 . .

instructions

a See Additional Data Table

b C d e

b C d e

b c d е

2

Part V

Income							
te, o)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)				
	 (g)	(1	2)				
Cost or	other basis ense of sale	(h) Gain or (loss) (e) plus (f) minus (g)					
the foundation	on 12/31/69	(I)				
ı	(k)	Gains (Col (h) gain minus col (k), but not less than -0-) or					

2

3

Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

number of years the foundation has been in existence if less than 5 years

4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5

6 Enter 1% of net investment income (1% of Part I, line 27b)

8 Enter qualifying distributions from Part XII, line 4

Adjusted qualifying distributions

3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the

.

(f)

Depreciation allowed

(or allowable)

(j)

Adjusted basis

as of 12/31/69

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

50,120

49,970

47,286

61,614

41,832

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If gain, also enter in Part I, line 7

Net value of noncharitable-use assets

Losses (from col (h))

-5,505

11,747

Page 3

Yes 🗸 No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Enter the appropriate amount in each column for each year, see instructions before making any entries (d) Distribution ratio (col (b) divided by col (c)) 0 095257 0 107578 0 129437 0 196610 0 155726 2 0 684608

0 136922 598,108 81,894 391 82,285 49,375 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI

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Excess of col (1) over col (j), if any

If (loss), enter -0- in Part I, line 7 If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0-

526,156

464,502

365,320

313,382

268,625

3

4

5

6

7

8

Fori	m 990-PF (2016)		Page 7
P	art VIII Information About Officers, Directors, Trustees, Founda and Contractors (continued)	tion Managers, Highly Paid Er	mployees,
3	Five highest-paid independent contractors for professional services (see i	instructions). If none, enter "NON	E".
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NO	NE		
	tal number of others receiving over \$50,000 for professional services		0
	art IX-A Summary of Direct Charitable Activities		
	the foundation's four largest direct charitable activities during the tax year. Include relevant statis anizations and other beneficiaries served, conferences convened, research papers produced, etc.	itical information such as the number of	Expenses
1	THE DIRECT CHARITABLE ACTIVITIES OF THE FOUNDATION ARE AS A WILDERNES		
,	CENTER WHOSE ACTIVITIES OCCUR BETWEEN MAY THROUGH OCTOBER DUE TO W		0
2	THE CENTER IS USED PRIMARILY AS A RESOURCE FOR ECOLOGICAL EDUCATION, C STUDY BY ARTISTS, WRITERS, NATURALISTS, ORGANIZATIONAL LEADERS, RESEA	l l	
	EXTENSIVE LIBRARY, AND THOSE LEARNING ABOUT THE OJIBWE LANGUAGE AND	CULTURE	0
3	3		
,		+	
7	·		
Pá	art IX-B Summary of Program-Related Investments (see instruction	ons)	
	Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2	Amount
1			
2	4		
,	All other program-related investments See instructions		
3	3		
_			
ot	tal. Add lines 1 through 3		0

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

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

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

4

5

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

3a 3h

4

5

49.375

49,375

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Part XIII Undistributed Income (see instruction	ons)			
	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only				
b Total for prior years 20				
3 Excess distributions carryover, if any, to 2016				
a From 2011				
b From 2012				
c From 2013				
d From 2014				
e From 2015				
f Total of lines 3a through e				
4 Qualifying distributions for 2016 from Part				
XII, line 4 🕨 \$				
a Applied to 2015, 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)				
d Applied to 2016 distributable amount.				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2016				
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
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 —see instructions				
e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see				
Instructions				
lines 4d and 5 from line 1 This amount must be distributed in 2017				
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 2011 not applied on line 5 or line 7 (see instructions).				
Subtract lines 7 and 8 from line 6a				
Analysis of line 9				
a Excess from 2012				
b Excess from 2013				
c Excess from 2014				
d Excess from 2015				
e Excess from 2016				

4370 BROOKSIDE COURT 205 EDINA, MN 55436

BETH@EOBER ORG b The form in which applications should be submitted and information and materials they should include

IN WRITING, TO THE ABOVE ADDRESS

c Any submission deadlines NONE

(952) 401-0591

BETH WATERHOUSE EXECUTIVE DIRECTOR

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

RESTRICTED TO EFFORTS TO PRESERVE THE WILDERNESS ECOLOGY OF THE UPPER GREAT LAKES BORDER REGION AND THE CULTURE OF THE ANISHINAABE PEOPLE

501(C)(3)

GENERAL USE OF CHARITY

65

Form **990-PF** (2016)

FRIENDS OF THE BOUNDARY WATERS

401 NORTH THIRD STREET

WILDERNESS

NONE

MINNEAPOLIS, MN 55401 LISTENING POINT FOUNDTION NONE 501(C)(3) GENERAL USE OF CHARITY 100 106 E WILSON ST NONE 501(C)(3) GENERAL USE OF CHARITY 100

ELY, MN 55731 OAKDALE MEMORIAL GARDENS 2501 EASTERN AVENUE DAVENPORT, IA 52804

WILDERNESS SOCIETY NONE 501(C)(3) GENERAL USE OF CHARITY 100 1615 M STREET NW STE 400

WASHINGTON, DC 20036

365

b Approved for future payment

Enter gross amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by section	512, 513, or 514	(e)
	(a)	(b)	(c)	(d)	Related or exempt function income (See instructions)
Program service revenue a	Business code	Amount	Exclusion code	Amount	(See mistractions)
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments			14	2	
4 Dividends and interest from securities			14	14,332	
5 Net rental income or (loss) from real estate					
a Debt-financed property.					
b Not debt-financed property6 Net rental income or (loss) from personal property					
			4.5	16 220	
7 Other investment income 8 Gain or (loss) from sales of assets other than			15	16,230	
inventory			18	11,747	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory	511130	22,147	12		
11 Other revenue a					
b					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		22,147		42,311	0
13 Total. Add line 12, columns (b), (d), and (e)			13	3	64,458
(See worksheet in line 13 instructions to verify calculation					
記述は多なり回じ Relationship of Activities to th	e accomplish	ment of Exemp	ot Purposes		
Line No. Explain below how each activity for which the accomplishment of the foundation's exinstructions)	income is reporte	ed in column (e) of	Part XVI-A contribu		
Line No. Explain below how each activity for which the accomplishment of the foundation's ex	income is reporte	ed in column (e) of	Part XVI-A contribu		
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Line No. Explain below how each activity for which the accomplishment of the foundation's ex	income is reporte	ed in column (e) of	Part XVI-A contribu		

. ,	
ш	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

Part	XVIII	Exempt Organi	zations							<u>-</u>				
1 Did	the org	anization directly or in ode (other than sectio	directly enga	ge in o	any of the zations) o	following with a	ny re	other organ lating to pol	nzatio itical e	n described in secti organizations?	on 501		Yes	No
		om the reporting foun									ŀ			
(1)	Cash.											1a(1)		No
(2)	Other	assets									. [1a(2)		No
	er trans													
		of assets to a nonchari	•	_								1b(1)		No
		ases of assets from a n					•					1b(2)		No
		of facilities, equipmer ursement arrangemen	· ·				•					1b(3) 1b(4)		No No
		or loan guarantees.					. •					1b(5)		No
		nance of services or m										1b(6)		No
c Sha	ring of t	facilities, equipment, n	nailing lists, o	other a	assets, or	paid employees.					.	1c		No
	If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or converse queen by the reporting foundation. If the foundation received less than fair market value													
	of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received													
III ai	ily clairs	saction or snaring arra	ngement, sin	OW III	column (c	i) the value of the	ıe i	goods, other	asse	is, or services recer	veu			
(a) Line	Line No (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements													
	+													
	+													
	\dashv													
2a Is th	ne found	dation directly or indire	ectly affiliated	d with	, or relate	d to, one or mor	e t	ax-exempt o	organı	zations		_	_	
desc	cribed in	n section 501(c) of the	Code (other	than	section 50)1(c)(3)) or in se	cti	on 527?			∟	Yes	✓ N	lo
b If "Y	es," co	mplete the following so			i			ı						
		(a) Name of organization	in		(1) Type of organiza	tior	1		(c) Description	of relation	nship		
		r penalties of perjury,												
Sian		/ knowledge and belief n preparer has any kno		orrect,	and com	piete Declaration	n o	f preparer (d	otner	than taxpayer) is b	ased on a	all infor	mation	n or
Sign		****				2017-09-14		****	**	Ti-	May the IR:	S discus	s this r	eturn
Here								_)			with the pr	· —		
	/ s	ignature of officer or ti	rustee			Date		Title		((see instr)	2 ☑ Υ	es 🗆 N	ło
		Print/Type preparer's	name	Prena	arer's Sigr	nature		Date			PTIN			
		, ,, , , pe p, eparer o						Date		Check if self-		200050	1206	
		REBECCA WALLENI	FFI S7						employed ▶ □		r	200050	300	
Paid		NEDECK WALLEN												
Prepa		Firm's name ► CHAPMAN AND CUTLER LLP							Fırm's EII	N b 26	.01507	721		
Use (Only				_						i ii iii S EII	IA ►20.	-2133/	. 21
		Firm's address ► 11	1 W MONRO	E FL 1	8									
		CH	ICAGO, IL 6	50603	4099						Phone no	(312) 845-:	3000
		İ								I				

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (c) (d) (b) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 200 COMCAST CORP A NEW Р 2014-02-26 2016-02-19 700 FORD MOTOR COMPANY NEW Ρ 2012-02-02 2016-02-19 8 RMR GROUP INC A Р 2015-12-15 2016-02-19 400 WELLS FARGO & CO NEW Р 2005-05-25 2016-02-19 450 CALIFORNIA WTR SVC GRP Р 2015-03-24 2016-03-14 Ρ 700 EXACT SCIENCES CROP 2015-10-14 2016-08-05 Р 500 HOSPITALITY PPTYS TR SBI 2014-01-10 2016-08-05 Р 5 ADVANSIX INC 2013-01-11 2016-11-18 200 LOWES COMPANIES INC Ρ 2015-03-05 2016-11-18 CAPITAL GAINS DIVIDENDS Р Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 11,137 10,399 738 8,321 9,738 -1,417152 95 57 18,627 1,259 17,368 11,412 11,718 -306 18,379 -5,256 13,123 15,504 13,565 1,939 73 45 28 13,556 15,200 -1,644 240 240 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (i) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 738 -1,417 57 17,368 -306 -5,256 1,939 28 -1,644240

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, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation JIM FITZPATRICK PRESIDENT 0 25 C/O CHAPMAN CUTLER P O BOX 2593 CHICAGO, IL 606902593 MICHEAL REID VICE PRESIDENT 0 0 TIM HEINLE TREASURER 0 25 C/O CHAPMAN CUTLER P O BOX 2593

C/O CHAPMAN CUTLER P O BOX 2593 CHICAGO, IL 606902593	0 25			
BETH E WATERHOUSE	EXECUTIVE DIRECTOR	39,117	0	0
4370 BROOKSIDE COURT 205 EDINA, MN 55436	35 00			

CHICAGO, IL 606902593				
MARGARET ANNE SMITH	SECRETARY	0	0	
C/O CHAPMAN CUTLER P O BOX 2593	0 25			

ASSIST TREASURER CHARLES A KELLY 0 25 C/O CHAPMAN CUTLER P O BOX 2593 CHICAGO, IL 606902593

CHICAGO. IL 606902593

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2016 Depreciation Schedule

Name: ERNEST C OBERHOLTZER FOUNDATION

EIN: 41-6042619

Description of Property	Date Acquired	Cost or Other Basıs	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
LAND	1982-07-01	16,000			0 %	0	0	0	
STOVE	1982-07-01	275	275	SL	0 %	0	0	0	
FREEZER	1982-07-01	300	300	SL	0 %	0	0	0	
DOCKS	1982-07-01	950	950	SL	0 %	0	0	0	
CHAINSAW	1982-09-01	345	345	SL	0 %	0	0	0	
ELECTRIC SYSTEM	1982-11-01	3,853	3,853	SL	0 %	0	0	0	
KITCHEN BOAT	1982-12-01	2,137	2,137	SL	0 %	0	0	0	
BEDDING	1983-03-01	2,417	2,417	SL	0 %	0	0	0	
CHAIRS	1983-08-01	194	194	SL	0 %	0	0	0	
WINDOW/SCREENS	1983-07-01	928	928	SL	0 %	0	0	0	
OUTHOUSES	1983-08-01	294	294	SL	0 %	0	0	0	
GRUMAN CANOES	1983-08-01	220	220	SL	0 %	0	0	0	
PONTOON BOAT	1984-08-01	4,794	4,794	SL	0 %	0	0	0	
REFRIDERATOR	1985-07-01	1,099	1,099	SL	0 %	0	0	0	
FRONT CABIN	1985-07-01	6,940	6,940	SL	0 %	0	0	0	
BOATHOUSE	1985-07-01	250	250	SL	0 %	0	0	0	
FRONT CABIN ROOF	1985-10-01	1,035	1,035	SL	0 %	0	0	0	
LIBRARY ROOF	1985-11-01	1,394	1,394	SL	0 %	0	0	0	
PUMP/WATER FILTER	1986-07-01	616	616	SL	0 %	0	0	0	
PIOLON WINDOW	1986-08-01	480	480	SL	0 %	0	0	0	

DLN: 93491257004107

Description of Property	Date Acquired	Cost or Other Basıs	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
ROOF	1990-11-01	3,200	3,200	SL	15 000000000000	0	0	0	
DOCTS	1991-05-01	3,200	3,200	SL	0 %	0	0	0	
MATTRESSES	1991-07-01	760	760	SL	0 %	0	0	0	
OMC OUTBOARD MOTOR	1993-06-01	3,176	3,176	SL	0 %	0	0	0	
CHIPPER	2004-09-01	2,486	2,486	SL	5 000000000000	0	0	0	
PONTOON BOAT	2007-03-01	10,995	5,397	SL	18 000000000000	611	0	611	
ROOF	2007-11-13	9,619	5,235	SL	15 000000000000	641	0	641	
PORCH	2007-11-13	641	351	SL	15 000000000000	43	0	43	
FOUNDATION	2007-11-13	2,565	1,045	SL	20 000000000000	128	0	128	
MATTRESS	2008-05-31	234	234	SL	5 000000000000	0	0	0	
FREEZER	2008-06-10	585	585	SL	5 000000000000	0	0	0	
REFRIGERATOR	2009-05-04	554	554	SL	5 000000000000	0	0	0	
WATER CONDITIONER	2009-07-15	3,395	3,395	SL	5 000000000000	0	0	0	
ELECTRIC STOVE	2010-03-26	619	619	SL	5 000000000000	0	0	0	
REFRIGERATOR	2010-05-14	453	453	SL	5 000000000000	0	0	0	
ROOF	2010-06-10	3,853	1,435	SL	15 000000000000	257	0	257	
BIG HOUSE ROOF	2010-07-20	2,917	1,051	SL	15 000000000000	194	0	194	
COOK'S ROOF	2012-06-27	4,225	987	SL	15 000000000000	282	0	282	
BIG HOUSE CHIMNEY	2012-09-12	48,798	8,133	SL	20 000000000000	2,440	0	2,440	
COMPUTER	2012-10-19	1,901	1,203	SL	5 000000000000	380	0	380	

Description of Property	Date Acquired	Cost or Other Basıs	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
COMPUTER	2015-01-20	350	64	SL	5 000000000000	70	0	70	
BOAT MOTOR	2016-06-25	7,285		SL	5 00000000000	729	0	729	

TY 2016 Investments Corporate Stock Schedule

Name: ERNEST C OBERHOLTZER FOUNDATION

EIN: 41-6042619

Name of Stock	End of Year Book Value	End of Year Fair Market Value	
1200 DNP SELECT	13,434	12,276	
150 EXXON MOBIL	11,019	13,539	
300 VERIZON	11,979	16,014	
200 WELLS FARGO	0	0	
531 CONOCO PHILLIPS	12,770	26,624	
150 STATE STREET CORP	8,770	11,658	
200 BERKSHIRE HATHAWAY INC	19,484	32,596	
700 FORD MOTOR COMPANY	0	0	
400 JP MORGAN CHASE	19,505	34,516	
500 MICROSOFT CORP	19,663	31,070	
200 WALGREENS	15,318	24,828	
500 PNC FINANCIAL SVCS GRP	12,814	11,810	
150 STATE STREET CORP NON	13,205	11,658	
300 ABBOTT LABS	10,267	11,523	
200 MERCK & CO	8,829	11,774	
200 MONDELEZ INTERNATIONAL	6,502	8,866	
400 ORACLE CORP	15,592	15,380	
150 UNITED TECHNOLOGIES	14,504	16,443	
22418.448 DEARBORN PARTNERS RISING	26,142	30,763	
352.444 DODGE & COX	4,900	4,790	
125 HONEYWELL INTL INC.	8,501	14,481	
400 AT&T	13,778	17,012	
300 APPLE	33,578	34,746	
200 BOEING COMPANY	25,802	31,136	
200 COMCAST CORP	0	0	
150 CVS CARMARK CORP	11,121	11,837	
250 FIRST SOLAR INC	13,847	8,023	
300 PFIZER INC	9,725	9,744	
550 SUNPOWER CORP	16,092	3,636	
300 ABBVIE INC.	17,974	18,786	

Name of Stock	End of Year Book Value	End of Year Fair Market Value	
3 BOIGEN IDEC INC	115	851	
300 BRISTOL MYERS SQUIBB CO	18,676	17,532	
450 CALIFORNIA WATER SVC GRP	0	0	
200 WALT DISNEY	21,538	20,844	
800 EXACT SCIENCES CORP	8,058	10,688	
300 KINDER MORGAN INC.	12,685	6,213	
200 LOWES COMPANIES INC.	0	0	
8 RMR GROUP INC CL A	0	0	
10 ALPHABET INC CL C	7,832	7,718	
10 AMAZON.COM INC	7,818	7,499	
100 CELEGENE CORP	10,332	11,575	
150 HOME DEPOT INC.	19,656	20,112	
150 MEDTRONIC PLC	12,993	10,685	
200 NIKE INC CL B	12,483	10,166	
250 STARBUCKS	14,234	13,880	

TY 2016 Investments - Other Schedule	

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Name: ERNEST C OBERHOLTZER FOUNDATION

DLN: 93491257004107

FIN: 41-6042610

LIN. 41-00-			
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
500 HOSPITALITY PPTYS TR SBI	AT COST	0	0
1001.376 T ROWE PRICE TOTAL EQTY	AT COST	21,387	25,385

TY 2016 Land, Etc. Schedule

Name: ERNEST C OBERHOLTZER FOUNDATION

EIN: 41-6042619

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
LAND	16,000	0	16,000	16,000
STOVE	275	275	0	
FREEZER	300	300	0	
DOCKS	950	950	0	
CHAINSAW	345	345	0	
ELECTRIC SYSTEM	3,853	3,853	0	
KITCHEN BOAT	2,137	2,137	0	
BEDDING	2,417	2,417	0	
CHAIRS	194	194	0	
WINDOW/SCREENS	928	928	0	
OUTHOUSES	294	294	0	
GRUMAN CANOES	220	220	0	
PONTOON BOAT	4,794	4,794	0	
REFRIDERATOR	1,099	1,099	0	
FRONT CABIN	6,940	6,940	0	
BOATHOUSE	250	250	0	
FRONT CABIN ROOF	1,035	1,035	0	
LIBRARY ROOF	1,394	1,394	0	
PUMP/WATER FILTER	616	616	0	
PIOLON WINDOW	480	480	0	
ROOF	3,200	3,200	0	
DOCTS	3,200	3,200	0	
MATTRESSES	760	760	0	
OMC OUTBOARD MOTOR	3,176	3,176	0	
CHIPPER	2,486	2,486	0	
PONTOON BOAT	10,995	6,008	4,987	4,987
ROOF	9,619	5,876	3,743	3,743
PORCH	641	394	247	247
FOUNDATION	2,565	1,173	1,392	1,392
MATTRESS	234	234	0	

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
FREEZER	585	585	0	
REFRIGERATOR	554	554	0	
WATER CONDITIONER	3,395	3,395	0	
ELECTRIC STOVE	619	619	0	
REFRIGERATOR	453	453	0	
ROOF	3,853	1,692	2,161	2,161
BIG HOUSE ROOF	2,917	1,245	1,672	1,672
COOK'S ROOF	4,225	1,269	2,956	2,956
BIG HOUSE CHIMNEY	48,798	10,573	38,225	38,225
COMPUTER	1,901	1,583	318	318
COMPUTER	350	134	216	216
BOAT MOTOR	7,285	729	6,556	6,556

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TY 2016 Legal Fees Schedu	ıle	_	_		
Nan	ne: ERNEST C O	BERHOLTZER FOL	JNDATION		
EIN: 41-6042619					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
LEGAL FEES	53	0	0	0	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491257004107
TY 2016 Other Decreases Sch	edule		
Name:	ERNEST C OBERHOLTZ	ER FOUNDATION	
EIN:	41-6042619		
De	escription		Amount

ROUNDING

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	93491257004107			
TY 2016 Other Expenses Schedule							
Name:	ERNEST C OBE	RHOLTZER FOUNI	DATION				
EIN:	EIN: 41-6042619						
Other Expenses Schedule		1					
Description	Revenue and Expenses per	Net Investment Income	Adjusted Net Income	Disbursements for Charitable			

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE EXPENSES	3,160	0	0	3,160
REPAIR AND MAINTENANCE	2,739	0	0	2,739

6,000

1,428

6,000

1,428

CARETAKER EXPENSE

MISCELLANEOUS

efile GRAPHIC print - DO NOT PROCESS

Name: ERNEST C OBERHOLTZER FOUNDATION

As Filed Data -

OIL & GAS ROYALTIES

EIN: 41-6042619

Expenses Per Books

16,230

Other Income Schedule Description Revenue And

Net Investment Income

Adjusted Net Income

DLN: 93491257004107

16,230

16,230

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DL	N: 93491257004107		
TY 2016 Other Professional Fees Schedule						
Name: ERNEST C OBERHOLTZER FOUNDATION						
EIN: 41-6042619						
20100	A .		6 d' -1 - 1 bi -1	<u> </u>		
Category	Amount	Net Investment	Adjusted Net	Disbursements		

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

2,400

2,400

ROYALTY MANAGERS COMMISSIONS

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLN	N: 93491257004107
TY 2016 Taxes Schedule				
Name	: ERNEST C O	BERHOLTZER FOL	INDATION	
EIN:	41-6042619	l		
	1 11 00 12019	 	<u> </u>	1
Category	Amount	Net Investment	Adjusted Net	Disbursements
		Income	Income	for Charitable Purposes
REAL ESTATE TAX /OIL PROPERTY	766	766	0	0
U S TREASURER	259	0	0	0

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Schedule B (Form 990, 990-EZ,	Schedule of	Contributors	OMB No 1545-0047	
or 990-PF) Department of the Treasury Internal Revenue Service	► Information about Schedule B (Form 990	ov/form990		
Name of the organizat ERNEST C OBERHOLTZE			Employer identification number	
			41-6042619	
Organization type (ch	ck one)			
Filers of:	Section:			
Form 990 or 990-EZ	☐ 501(c)() (enter number) organiza	tion		
	4947(a)(1) nonexempt charitable tri	ust not treated as a private foundati	on	
	☐ 527 political organization			
Form 990-PF	▼ 501(c)(3) exempt private foundation	١		
	4947(a)(1) nonexempt charitable trust treated as a private foundation			
	501(c)(3) taxable private foundation	n		
	ation filing Form 990, 990-EZ, or 990-PF that r r property) from any one contributor Complete			
Special Rules				
under sections received from a	cion described in section 501(c)(3) filing Form 9 (09(a)(1) and 170(b)(1)(A)(vi), that checked So by one contributor, during the year, total contrib the 1h, or (ii) Form 990-EZ, line 1 Complete Pa	hedule A (Form 990 or 990-EZ), Pa outlons of the greater of (1) \$5,000 c	rt II, line 13, 16a, or 16b, and that	
during the year,	cion described in section 501(c)(7), (8), or (10) total contributions of more than \$1,000 exclusions the prevention of cruelty to children or animals	<i>ively</i> for religious, charitable, scientif		
during the year, If this box is che purpose Do no	cion described in section 501(c)(7), (8), or (10) contributions <i>exclusively</i> for religious, charitab cked, enter here the total contributions that we complete any of the parts unless the General ble, etc, contributions totaling \$5,000 or more	le, etc., purposes, but no such contrere received during the year for an e Rule applies to this organization be	ributions totaled more than \$1,000 xclusively religious, charitable, etc., ecause it received nonexclusively	
990-EZ, or 990-PF), bu	on that is not covered by the General Rule and, it must answer "No" on Part IV, line 2, of its Form 990PF, Part I, line 2, to certify that it does	orm 990, or check the box on line H	l of its	
For Paperwork Reduction for Form 990, 990-EZ, or 9	·	Cat No 30613X Schedule	e B (Form 990, 990-EZ, or 990-PF) (2016)	

Name of organization ERNEST C OBERHOLTZER FOUNDATION

Employer identification number

		41-60426	19
Part I	Contributors (see Instructions) Use duplicate copies of Part I if additional space	s is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	See Additional Data Table	s	Person Payroll Noncash
			(Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	Type of contribution
		s	Person Payroll Noncash (Complete Part II
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	for noncash contribution) (d) Type of contribution
		s	Person Payroll Noncash
			(Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person Payroll Noncash
			(Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s ———	Person
			(Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s ———	Person Payroll Noncash
			(Complete Part II for noncash contribution)

Schedule B (Form 99	0, 990-EZ, or 990-PF) (2016)		Page 3
Name of organization		Employer ident	ification number
		41-60	042619
Part II	Noncash Property		_
(a) No.from Part I	(see instructions) Use duplicate copies of Part II if additional space is needed (b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
=			
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		Schedule B (Form	990, 990-EZ, or 990-PF) (2016)

Schedule B (Form	990, 990-EZ, or 990-PF) (2016)		Page 4
Name of organizat ERNEST C OBERHOL			Employer identification number 41-6042619
than \$1, organiz the year	,000 for the year from any one contributor	r. Complete columns (a) throu of exclusively religious, chari ctions.) ► \$	d in section 501(c)(7), (8), or (10) that total more ugh (e) and the following line entry. For table, etc., contributions of \$1,000 or less for
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 F	Relationship of transferor to transferee
(a)	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
No.from Part I		(c) ose or gift	(u) Description of now gift is field
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 F	Relationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee
			schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Additional Data

Software ID:

Software Version:

EIN: 41-6042619

Name: ERNEST C OBERHOLTZER FOUNDATION

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	HARRY AND GINNY SWEATT 325 BOHNS POINT ROAD	\$ 30,000	Person ✓ Payroll ☐
	WAYZATA, MN55391	\$ 30,000	Noncash (Complete Part II for non contribution)
2	MAIRI DOERR 29555 23RD AVENUE WAY	5 10 000	Person 🗸 Payroll 🗌
	CANNON FALLS, MN 55009	\$ 10,000	Noncash (Complete Part II for non contribution)
3	STEVEN J DAYTON PO BOX 9480	\$ 5,000	Person 🗸 Payroll 🗌
	SANTA FE, NM87504		Noncash ☐ (Complete Part II for non contribution)
<u>4</u>	TIM HEINLE 10260 EAST WHITE FEATHER LANE 1002	\$ 5,000	Person ✓ Payroll ☐
	SCOTTSDALE, AZ85262		Noncash L (Complete Part II for non contribution)
<u>5</u>	HELGESON FAMILY 90 S SEVENTH ST N9305-111	\$ 5,000	Person 🗸 Payroll 🗌
	MINNEAPOLIS, MN55402		Noncash (Complete Part II for non contribution)
<u>6</u>	MARY AND ALLAN JUERS 1151 HONAPA CIRCLE	¢ 5 000	Person 🗸 Payroll 🗌
	IVINS, UT84738	\$ 5,000	Noncash (Complete Part II for non contribution)

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) Name, address, and ZIP + 4 No. Total contributions Type of contribution Person **V** JOHN S WADSWORTH Payroll 1020 VALLEJO SREET \$ 5,000 Noncash SAN FRANCISCO, CA94133 (Complete Part II for noncash contribution) Person **V** WINTER WHEAT FOUNDATION Payroll 16184 HIGHWAY 7 \$ 10,000 Noncash MINNETONKA, MN55345 (Complete Part II for noncash

contribution)