

Form **990-PF**Department of the Treasury  
Internal Revenue Service**Return of Private Foundation**

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

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information.

OMB No. 1545-0052

**2017**

Open to Public Inspection

For calendar year 2017 or tax year beginning **APR 1, 2017**, and ending **MAR 31, 2018**

Name of foundation <b>THE CIRESI WALBURN FOUNDATION FOR CHILDREN FKA: ROBINS, KAPLAN, MILLER AND</b>		A Employer identification number <b>41-1955286</b>
Number and street (or P.O. box number if mail is not delivered to street address) <b>800 IDS CENTER 80 S EIGHTH STREET</b>		B Telephone number <b>(612) 672-3878</b>
City or town, state or province, country, and ZIP or foreign postal code <b>MINNEAPOLIS, MN 55402</b>		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Initial return  <input type="checkbox"/> Final return  <input type="checkbox"/> Address change         </div> <div> <input type="checkbox"/> Initial return of a former public charity  <input type="checkbox"/> Amended return  <input checked="" type="checkbox"/> Name change         </div> </div>		D 1. Foreign organizations, check here <input type="checkbox"/>  2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ <b>40,862,492.</b>	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)	
F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>		

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	1 Contributions, gifts, grants, etc., received .....	11,000.		N/A	
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments .....				
	4 Dividends and interest from securities .....	795,640.	794,454.		STATEMENT 1
	5a Gross rents .....				
	b Net rental income or (loss) .....				
	6a Net gain or (loss) from sale of assets not on line 10 .....	2,531,869.			
	b Gross sales price for all assets on line 6a .....	18,554,471.			
	7 Capital gain net income (from Part IV, line 2) .....		2,295,341.		
	8 Net short-term capital gain .....				
	9 Income modifications .....				
	10a Gross sales less returns and allowances .....				
b Less: Cost of goods sold .....					
c Gross profit or (loss) .....					
11 Other income .....	0.	88,300.		STATEMENT 2	
12 Total. Add lines 1 through 11 .....	3,338,509.	3,178,095.			
<b>Operating and Administrative Expenses</b>	13 Compensation of officers, directors, trustees, etc. ....	0.	0.		0.
	14 Other employee salaries and wages .....				
	15 Pension plans, employee benefits .....				
	16a Legal fees .....				
	b Accounting fees .....	12,479.	2,496.		9,983.
	c Other professional fees .....	554,859.	332,974.		220,917.
	17 Interest .....				
	18 Taxes .....	67,324.	0.		0.
	19 Depreciation and depletion .....				
	20 Occupancy .....				
	21 Travel, conferences, and meetings .....	32,410.	0.		32,410.
	22 Printing and publications .....				
	23 Other expenses .....	561.	125,850.		561.
	24 Total operating and administrative expenses. Add lines 13 through 23 .....	667,633.	461,320.		263,871.
	25 Contributions, gifts, grants paid .....	2,002,800.			1,785,000.
26 Total expenses and disbursements. Add lines 24 and 25 .....	2,670,433.	461,320.		2,048,871.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements .....	668,076.				
b Net investment income (if negative, enter -0-) .....		2,716,775.			
c Adjusted net income (if negative, enter -0-) .....			N/A		

**THE CIRESI WALBURN FOUNDATION FOR  
CHILDREN FKA: ROBINS, KAPLAN, MILLER AND**

41-1955286

<b>Part II Balance Sheets</b> <small>Attached schedules and amounts in the description column should be for end-of-year amounts only.</small>		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	1 Cash - non-interest-bearing .....	192,620.	230,056.	230,056.
	2 Savings and temporary cash investments .....	875,542.	700,395.	700,395.
	3 Accounts receivable ▶ Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶ Less: allowance for doubtful accounts ▶			
	5 Grants receivable .....			
	6 Receivables due from officers, directors, trustees, and other disqualified persons .....			
	7 Other notes and loans receivable ▶ Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use .....			
	9 Prepaid expenses and deferred charges .....			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock <span style="float:right">STMT 7</span>	17,762,365.	28,974,756.	28,974,756.
	c Investments - corporate bonds <span style="float:right">STMT 8</span>	2,883,647.	2,866,646.	2,866,646.
	11 Investments - land, buildings, and equipment: basis ▶ Less: accumulated depreciation ▶			
	12 Investments - mortgage loans .....			
	13 Investments - other <span style="float:right">STMT 9</span>	16,505,418.	8,084,518.	8,084,518.
	14 Land, buildings, and equipment: basis ▶ Less: accumulated depreciation ▶			
	15 Other assets (describe ▶ <span style="float:right">STATEMENT 10</span> )	19,380.	6,121.	6,121.
	16 <b>Total assets</b> (to be completed by all filers - see the instructions. Also, see page 1, item I) .....	38,238,972.	40,862,492.	40,862,492.
<b>Liabilities</b>	17 Accounts payable and accrued expenses .....	849.	1,817.	
	18 Grants payable .....	225,000.	442,800.	
	19 Deferred revenue .....			
	20 Loans from officers, directors, trustees, and other disqualified persons .....			
	21 Mortgages and other notes payable .....			
	22 Other liabilities (describe ▶ <span style="float:right">STATEMENT 11</span> )	87,664.	122,954.	
	23 <b>Total liabilities</b> (add lines 17 through 22) .....	313,513.	567,571.	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>X</b> <b>and complete lines 24 through 26, and lines 30 and 31.</b>			
	24 Unrestricted .....	37,925,459.	40,294,921.	
	25 Temporarily restricted .....			
	26 Permanently restricted .....			
	<b>Foundations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 27 through 31.</b>			
	27 Capital stock, trust principal, or current funds .....			
	28 Paid-in or capital surplus, or land, bldg., and equipment fund .....			
	29 Retained earnings, accumulated income, endowment, or other funds .....			
	30 <b>Total net assets or fund balances</b> .....	37,925,459.	40,294,921.	
	31 <b>Total liabilities and net assets/fund balances</b> .....	38,238,972.	40,862,492.	

**Part III Analysis of Changes in Net Assets or Fund Balances**

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) .....	1	37,925,459.
2 Enter amount from Part I, line 27a .....	2	668,076.
3 Other increases not included in line 2 (itemize) ▶ <b>UNREALIZED LOSS ON INVESTMENTS</b>	3	1,701,386.
4 Add lines 1, 2, and 3 .....	4	40,294,921.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 .....	6	40,294,921.

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**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a PUBLICLY TRADED SECURITIES</b>				
<b>b CAPITAL GAINS FROM PARTNERSHIP K-1S</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
<b>a</b> 18,554,471.		16,022,602.	1,983,642.
<b>b</b>			311,699.
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
<b>a</b>			1,983,642.
<b>b</b>			311,699.
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)	<div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div>	<b>2</b>	2,295,341.
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8		<b>3</b>	N/A

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2016	1,621,170.	37,347,197.	.043408
2015	1,917,956.	35,900,780.	.053424
2014	2,072,357.	39,418,657.	.052573
2013			
2012			

<b>2</b> Total of line 1, column (d)	<b>2</b>	.149405
<b>3</b> Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b>	.049802
<b>4</b> Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	<b>4</b>	39,909,434.
<b>5</b> Multiply line 4 by line 3	<b>5</b>	1,987,570.
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	27,168.
<b>7</b> Add lines 5 and 6	<b>7</b>	2,014,738.
<b>8</b> Enter qualifying distributions from Part XII, line 4 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 instructions.	<b>8</b>	2,048,871.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	27,168.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		2	0.
3 Add lines 1 and 2		3	27,168.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	27,168.
6 Credits/Payments:			
a 2017 estimated tax payments and 2016 overpayment credited to 2017	6a	32,374.	
b Exempt foreign organizations - tax withheld at source	6b	0.	
c Tax paid with application for extension of time to file (Form 8868)	6c	15,000.	
d Backup withholding erroneously withheld	6d	0.	
7 Total credits and payments. Add lines 6a through 6d	7	47,374.	
8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	0.	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	20,206.	
11 Enter the amount of line 10 to be: Credited to 2018 estimated tax <input checked="" type="checkbox"/> 20,206. Refunded <input type="checkbox"/>	11	0.	

**Part VII-A Statements Regarding Activities**

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$ 0. (2) On foundation managers. \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	X	
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. <u>MN</u>		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

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**Part VII-A** Statements Regarding Activities (continued)

	Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>WWW.RKMCFOUNDATIONFORCHILDREN.ORG</b>	X	
14 The books are in care of <b>GREG WENZ - THE MINNEAPOLIS FOUNDAT</b> Telephone no. <b>(612) 672-3878</b> Located at <b>800 IDS CENTER, 80 SOUTH 8TH STREET, MINNEAPOLIS,</b> ZIP+4 <b>55402</b>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year <b>15</b> N/A		
16 At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country		X

**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year, did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A		
Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017?		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) N/A		
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2017.) N/A		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?		X

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**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year, did the foundation pay or incur any amount to:

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions ☐ Yes ☒ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions ☐ N/AOrganizations relying on a current notice regarding disaster assistance, check here ☐c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ N/A ☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ Nob Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ Nob If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ N/A**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** List all officers, directors, trustees, and foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 12		0.	0.	0.

**2** Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 ☐ 0

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<b>Part VIII</b>	<b>Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors</b> <i>(continued)</i>
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3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
THE MINNEAPOLIS FOUNDATION - 80 SOUTH 8TH STREET, MINNEAPOLIS, MN 55402-2115	MANAGEMENT SERVICES	277,356.

<b>Total</b> number of others receiving over \$50,000 for professional services .....	0
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<b>Part IX-A</b>	<b>Summary of Direct Charitable Activities</b>
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List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1	N/A	
2		
3		
4		

<b>Part IX-B</b>	<b>Summary of Program-Related Investments</b>
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Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1	N/A	
2		
	All other program-related investments. See instructions.	
3		
<b>Total.</b> Add lines 1 through 3		0

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**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	21,778,561.
b	Average of monthly cash balances	1b	203,265.
c	Fair market value of all other assets	1c	18,535,366.
d	<b>Total</b> (add lines 1a, b, and c)	1d	40,517,192.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	40,517,192.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	607,758.
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	5	39,909,434.
6	<b>Minimum investment return.</b> Enter 5% of line 5	6	1,995,472.

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	1,995,472.
2a	Tax on investment income for 2017 from Part VI, line 5	2a	27,168.
b	Income tax for 2017. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	27,168.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,968,304.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,968,304.
6	Deduction from distributable amount (see instructions)	6	0.
7	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,968,304.

**Part XII Qualifying Distributions** (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	2,048,871.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	2,048,871.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	27,168.
6	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	6	2,021,703.

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.



**Part XIII** Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
<b>1</b> Distributable amount for 2017 from Part XI, line 7 .....				1,968,304.
<b>2</b> Undistributed income, if any, as of the end of 2017:				
<b>a</b> Enter amount for 2016 only .....			0.	
<b>b</b> Total for prior years:		0.		
<b>3</b> Excess distributions carryover, if any, to 2017:				
<b>a</b> From 2012 .....				
<b>b</b> From 2013 .....				
<b>c</b> From 2014 .....				
<b>d</b> From 2015 ..... 65,402.				
<b>e</b> From 2016 .....				
<b>f</b> Total of lines 3a through e ..... 65,402.				
<b>4</b> Qualifying distributions for 2017 from Part XII, line 4: ► \$ 2,048,871.				
<b>a</b> Applied to 2016, but not more than line 2a ...			0.	
<b>b</b> Applied to undistributed income of prior years (Election required - see instructions) ...		0.		
<b>c</b> Treated as distributions out of corpus (Election required - see instructions) .....	0.			
<b>d</b> Applied to 2017 distributable amount .....				1,968,304.
<b>e</b> Remaining amount distributed out of corpus ..... 80,567.				
<b>5</b> Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a).) .....	0.			0.
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 .....	145,969.			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b .....		0.		
<b>c</b> 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 .....		0.		
<b>d</b> Subtract line 6c from line 6b. Taxable amount - see instructions .....		0.		
<b>e</b> Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount - see instr. ...			0.	
<b>f</b> Undistributed income for 2017. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018 .....				0.
<b>7</b> 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) .....	0.			
<b>8</b> Excess distributions carryover from 2012 not applied on line 5 or line 7 .....	0.			
<b>9</b> Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a .....	145,969.			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2013 ...				
<b>b</b> Excess from 2014 ...				
<b>c</b> Excess from 2015 ..... 65,402.				
<b>d</b> Excess from 2016 ...				
<b>e</b> Excess from 2017 ..... 80,567.				

<b>Part XIV</b>	<b>Private Operating Foundations</b> (see instructions and Part VII-A, question 9)
-----------------	--

N/A

- 1 a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling ..... **b** Check box to indicate whether the foundation is a private operating foundation described in section ..... ☐ 4942(j)(3) or ☐ 4942(j)(5)

- |   |   | Tax year | Prior 3 years |          |          | (e) Total |
|---|---|----------|---------------|----------|----------|-----------|
|   |   | (a) 2017 | (b) 2016      | (c) 2015 | (d) 2014 |           |
| 2 | a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed .....                       |          |               |          |          |           |
|   | b 85% of line 2a .....  |          |               |          |          |           |
|   | c Qualifying distributions from Part XII, line 4 for each year listed .....   |          |               |          |          |           |
|   | d Amounts included in line 2c not used directly for active conduct of exempt activities .....   |          |               |          |          |           |
|   | e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c .....                                   |          |               |          |          |           |
| 3 | Complete 3a, b, or c for the alternative test relied upon:  |          |               |          |          |           |
|   | a "Assets" alternative test - enter:  |          |               |          |          |           |
|   | (1) Value of all assets .....   |          |               |          |          |           |
|   | (2) Value of assets qualifying under section 4942(j)(3)(B)(i) .....   |          |               |          |          |           |
|   | b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed .....                              |          |               |          |          |           |
|   | c "Support" alternative test - enter:   |          |               |          |          |           |
|   | (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) ..... |          |               |          |          |           |
|   | (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) .....                                      |          |               |          |          |           |
|   | (3) Largest amount of support from an exempt organization .....   |          |               |          |          |           |
|   | (4) Gross investment income .....   |          |               |          |          |           |

**Part XV** **Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)**

**1 Information Regarding Foundation Managers:**

- a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

- b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

- a** The name, address, and telephone number or email address of the person to whom applications should be addressed:

SEE STATEMENT 13

- b** The form in which applications should be submitted and information and materials they should include:

- c** Any submission deadlines:

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

**Part XV** Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
AMHERST H. WILDER FOUNDATION 451 LEXINGTON PARKWAY NORTH ST. PAUL, MN 55104	NONE	PC	THE SAINT PAUL PROMISE NEIGHBORHOOD	75,000.
ASCENSION CHURCH AND SCHOOL 1723 BRYANT AVE NORTH MINNEAPOLIS, MN 55411	NONE	PC	ASCENSION INSTRUCTIONAL ENHANCEMENTS	100,000.
CHILDREN'S THEATRE COMPANY AND SCHOOL 2400 THIRD AVENUE SOUTH MINNEAPOLIS, MN 55404	NONE	PC	NEIGHBORHOOD BRIDGES	50,000.
CLOSE GAPS BY 5 2800 UNIVERSITY AVE SE, SUITE 202 MINNEAPOLIS, MN 55414	NONE	PC	GENERAL OPERATING SUPPORT	75,000.
CRISTO REY JESUIT HIGH SCHOOL 2924 FOURTH AVENUE SOUTH MINNEAPOLIS, MN 55408	NONE	PC	COLLEGE PREPARATORY ACADEMIC PROGRAM	50,000.
Total SEE CONTINUATION SHEET(S) ▶ 3a				1,560,000.
b Approved for future payment				
MINNESOTA PRIVATE COLLEGE FUND 445 MINNESOTA STREET, SUITE 500 MINNEAPOLIS, MN 55101	NONE	PC	RKMC FOUNDATION FOR CHILDREN SCHOLARSHIP	442,800.
Total ▶ 3b				442,800.




<b>Part XVII</b>	<b>Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations</b>
------------------	--

		Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		
a	Transfers from the reporting foundation to a noncharitable exempt organization of:		
	(1) Cash		X
	(2) Other assets		X
b	Other transactions:		
	(1) Sales of assets to a noncharitable exempt organization		X
	(2) Purchases of assets from a noncharitable exempt organization		X
	(3) Rental of facilities, equipment, or other assets		X
	(4) Reimbursement arrangements		X
	(5) Loans or loan guarantees		X
	(6) Performance of services or membership or fundraising solicitations		X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees		X
d	If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.		

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule.		
(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

<b>Sign Here</b> 	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.					<div>           May the IRS discuss this return with the preparer shown below? See instr.         </div> <div> <input checked="checked" type="checkbox"/> Yes           <input type="checkbox"/> No         </div>	
	Signature of officer or trustee		Date		Title		
				<b>PRESIDENT</b>			
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>KIMBERLY ANDERSON, CPA</b>		Preparer's signature		Date	Check <input type="checkbox"/> if self-employed	PTIN <b>P00188889</b>
	Firm's name ► <b>CLIFTONLARSONALLEN LLP</b>					Firm's EIN ► <b>41-0746749</b>	
	Firm's address ► <b>220 SOUTH SIXTH STREET, SUITE 300 MINNEAPOLIS, MN 55402</b>					Phone no. <b>612-376-4500</b>	

**THE CIRESI WALBURN FOUNDATION FOR  
CHILDREN FKA: ROBINS, KAPLAN, MILLER AND 41-1955286**

Form 990-PF

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**Part XV** **Supplementary Information** (continued)

**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
ED ALLIES 2800 UNIVERSITY AVE SE, SUITE 200 MINNEAPOLIS, MN 55414	NONE	PC	GENERAL OPERATING SUPPORT	100,000.
FRIENDSHIP ACADEMY OF THE ARTS 2600 EAST 38TH STREET MINNEAPOLIS, MN 55406	NONE	PC	STUDENT/TEACHER INSTITUTE FOR LEARNING/LEADERSHIP	50,000.
HIAWATHA ACADEMIES 1611 EAST 46TH STREET MINNEAPOLIS, MN 55407	NONE	PC	HIAWATHA ACADEMIES NETWORK EXPANSION	125,000.
HOPE ACADEMY 2300 CHICAGO AVE SOUTH MINNEAPOLIS, MN 55404	NONE	PC	GROWING HOPE THROUGH HIGH QUALITY EDUCATION	25,000.
JOYCE PRESCHOOL 3400 PARK AVE MINNEAPOLIS, MN 55407	NONE	PC	EXPANSION OF HIGH-QUALITY, BILINGUAL PRESCHOOL	25,000.
KIPP MINNESOTA 5034 NORTH OLIVER AVENUE MINNEAPOLIS, MN 55430	NONE	PC	INNOVATING FOR EXCELLENCE, PLANNING FOR GROWTH	25,000.
MINNEAPOLIS COMMUNITY AND TECHNICAL COLLEGE FOUNDATION 1501 HENNEPIN AVENUE MINNEAPOLIS, MN 55403	NONE	PC	POWER OF YOU	25,000.
<b>Total from continuation sheets</b>				<b>1,210,000.</b>

THE CIRESI WALBURN FOUNDATION FOR  
CHILDREN FKA: ROBINS, KAPLAN, MILLER AND 41-1955286

Form 990-PF

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**Part XV** **Supplementary Information** (continued)

**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
MINNESOTA COMEBACK 710 SOUTH SECOND STREET, SUITE 400 MINNEAPOLIS, MN 55401	NONE	PC	BUILDING A COMMUNITY OF GREAT SCHOOLS	100,000.
NORTHSIDE ACHIEVEMENT ZONE 2123 WEST BROADWAY AVENUE, SUITE 100 MINNEAPOLIS, MN 55411	NONE	PC	NORTHSIDE ACHIEVEMENT ZONE FAMILY ENGAGEMENT	120,000.
NORTHSIDE ACHIEVEMENT ZONE 2123 WEST BROADWAY AVENUE, SUITE 100 MINNEAPOLIS, MN 55411	NONE	PC	NAZ IS WORKING CAMPAIGN	15,000.
PRODEO ACADEMY 620 OLSON MEMORIAL HIGHWAY MINNEAPOLIS, MN 55411	NONE	PC	CLOSING THE ACHEIVEMENT GAP IN NORTH MINNEAPOLIS	50,000.
RISEN CHRIST CATHOLIC SCHOOL 1120 EAST 37TH STREET MINNEAPOLIS, MN 55407	NONE	PC	EXPANSION OF DUAL IMMERSION PROGRAM	50,000.
ST. MARY'S MISSION SCHOOL HIGHWAY 1, BOX 189 REDLAKE, MN 56671	NONE	PC	ST. MARY'S MISSION SCHOOL TECH FOR SUCCESS	50,000.
SUMMIT ACADEMY OIC 935 OLSON MEMORIAL HIGHWAY MINNEAPOLIS, MN 55405-1359	NONE	PC	TRAINING THE EMERGING WORKFORCE	100,000.
<b>Total from continuation sheets</b>				

THE CIRESI WALBURN FOUNDATION FOR  
CHILDREN FKA: ROBINS, KAPLAN, MILLER AND 41-1955286

Form 990-PF

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**Part XV** Supplementary Information (continued)

**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
THE MASTERY SCHOOL 1301 7TH AVENUE NORTH MINNEAPOLIS, MN 55411	NONE	PC	GENERAL OPERATING SUPPORT	100,000.
THINK SMALL 10 YORKTON COURT ST. PAUL, MN 55117-1065	NONE	PC	ADVANCING QUALITY EARLY CHILDHOOD CARE & EDUCATION	75,000.
TWIN CITIES ACADEMY 690 BIRMINGHAM ST ST PAUL, MN 55106	NONE	PC	EDUCATION EXCELLENCE THROUGH A CULTURE OF EQUITY	50,000.
WAY TO GROW 125 WEST BROADWAY AVENUE, SUITE 110 MINNEAPOLIS, MN 55411	NONE	PC	GREAT BY 8 EARLY CHILDHOOD EDUCATION	125,000.
<b>Total from continuation sheets</b>				



**Schedule B**(Form 990, 990-EZ,  
or 990-PF)Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**

- ▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2017**

Name of the organization

THE CIRESI WALBURN FOUNDATION FOR  
CHILDREN FKA: ROBINS, KAPLAN, MILLER AND

Employer identification number

41-1955286

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)( ) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

**LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)**

Name of organization <b>THE CIRESI WALBURN FOUNDATION FOR CHILDREN FKA: ROBINS, KAPLAN, MILLER AND</b>	Employer identification number <b>41-1955286</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 10,000.	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Employer identification number

41-1955286

## Part II

[illegible]

Name of organization

THE CIRESI WALBURN FOUNDATION FOR  
CHILDREN FKA: ROBINS, KAPLAN, MILLER AND

Employer identification number

41-1955286

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

**Underpayment of Estimated Tax by Corporations**

▶ Attach to the corporation's tax return.

**FORM 990-PF****2017**▶ Go to [www.irs.gov/Form2220](http://www.irs.gov/Form2220) for instructions and the latest information.Name **THE CIRESI WALBURN FOUNDATION FOR  
CHILDREN FKA: ROBINS, KAPLAN, MILLER AND**Employer identification number  
**41-1955286**

**Note:** Generally, the corporation isn't required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38 on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

**Part I Required Annual Payment**

1	Total tax (see instructions) .....	1	27,168.
2a	Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1 .....	2a	
2b	Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method .....	2b	
2c	Credit for federal tax paid on fuels (see instructions) .....	2c	
2d	<b>Total.</b> Add lines 2a through 2c .....	2d	
3	Subtract line 2d from line 1. If the result is less than \$500, <b>do not</b> complete or file this form. The corporation doesn't owe the penalty .....	3	27,168.
4	Enter the tax shown on the corporation's 2016 income tax return. See instructions. <b>Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5</b> .....	4	24,202.
5	<b>Required annual payment.</b> Enter the <b>smaller</b> of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3 .....	5	24,202.

**Part II Reasons for Filing** - Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it doesn't owe a penalty. See instructions.

- 6 ☐ The corporation is using the adjusted seasonal installment method.
- 7 ☒ The corporation is using the annualized income installment method.
- 8 ☐ The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

**Part III Figuring the Underpayment**

	(a)	(b)	(c)	(d)
9 <b>Installment due dates.</b> Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year .....	9 08/15/17	09/15/17	12/15/17	03/15/18
10 <b>Required installments.</b> If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column .....	10 2,590.	9,511.	4,291.	7,810.
11 <b>Estimated tax paid or credited for each period.</b> For column (a) only, enter the amount from line 11 on line 15. See instructions .....	11 11,374.	18,000.	3,000.	
<b>Complete lines 12 through 18 of one column before going to the next column.</b>				
12 Enter amount, if any, from line 18 of the preceding column .....	12	8,784.	17,273.	15,982.
13 Add lines 11 and 12 .....	13	26,784.	20,273.	15,982.
14 Add amounts on lines 16 and 17 of the preceding column .....	14			
15 Subtract line 14 from line 13. If zero or less, enter -0- .....	15 11,374.	26,784.	20,273.	15,982.
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- .....	16	0.	0.	
17 <b>Underpayment.</b> If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18 .....	17			
18 <b>Overpayment.</b> If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column .....	18 8,784.	17,273.	15,982.	

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 2220 (2017)

**Part IV Figuring the Penalty**

	(a)	(b)	(c)	(d)
<b>19</b> Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C Corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	<b>19</b>			
<b>20</b> Number of days from due date of installment on line 9 to the date shown on line 19	<b>20</b>			
<b>21</b> Number of days on line 20 after 4/15/2017 and before 7/1/2017	<b>21</b>			
<b>22</b> Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 4\% (0.04)}{365}$	<b>22</b>	\$	\$	\$
<b>23</b> Number of days on line 20 after 06/30/2017 and before 10/1/2017	<b>23</b>			
<b>24</b> Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 4\% (0.04)}{365}$	<b>24</b>	\$	\$	\$
<b>25</b> Number of days on line 20 after 9/30/2017 and before 1/1/2018	<b>25</b>			
<b>26</b> Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 4\% (0.04)}{365}$	<b>26</b>	\$	\$	\$
<b>27</b> Number of days on line 20 after 12/31/2017 and before 4/1/2018	<b>27</b>			
<b>28</b> Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 4\% (0.04)}{365}$	<b>28</b>	\$	\$	\$
<b>29</b> Number of days on line 20 after 3/31/2018 and before 7/1/2018	<b>29</b>			
<b>30</b> Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times \%}{365}$	<b>30</b>	\$	\$	\$
<b>31</b> Number of days on line 20 after 6/30/2018 and before 10/1/2018	<b>31</b>			
<b>32</b> Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times \%}{365}$	<b>32</b>	\$	\$	\$
<b>33</b> Number of days on line 20 after 9/30/2018 and before 1/1/2019	<b>33</b>			
<b>34</b> Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times \%}{365}$	<b>34</b>	\$	\$	\$
<b>35</b> Number of days on line 20 after 12/31/2018 and before 3/16/2019	<b>35</b>			
<b>36</b> Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times \%}{365}$	<b>36</b>	\$	\$	\$
<b>37</b> Add lines 22, 24, 26, 28, 30, 32, 34, and 36	<b>37</b>	\$	\$	\$
<b>38 Penalty.</b> Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 33; or the comparable line for other income tax returns	<b>38</b>	\$		0.

\* Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at [www.irs.gov](http://www.irs.gov). You can also call 1-800-829-4933 to get interest rate information.

**Schedule A Adjusted Seasonal Installment Method and Annualized Income Installment Method**

See instructions.

**Form 1120S filers:** For lines 1, 2, 3, and 21, below, "taxable income" refers to excess net passive income or the amount on which tax is imposed under section 1374(a), whichever applies.**Part I Adjusted Seasonal Installment Method****Caution:** Use this method only if the base period percentage for any 6 consecutive months is at least 70%.

See instructions.

		(a)	(b)	(c)	(d)
		First 3 months	First 5 months	First 8 months	First 11 months
<b>1</b> Enter taxable income for the following periods.					
<b>a</b> Tax year beginning in 2014 .....	<b>1a</b>				
<b>b</b> Tax year beginning in 2015 .....	<b>1b</b>				
<b>c</b> Tax year beginning in 2016 .....	<b>1c</b>				
<b>2</b> Enter taxable income for each period for the tax year beginning in 2017. See the instructions for the treatment of extraordinary items	<b>2</b>				
<b>3</b> Enter taxable income for the following periods.		First 4 months	First 6 months	First 9 months	Entire year
<b>a</b> Tax year beginning in 2014 .....	<b>3a</b>				
<b>b</b> Tax year beginning in 2015 .....	<b>3b</b>				
<b>c</b> Tax year beginning in 2016 .....	<b>3c</b>				
<b>4</b> Divide the amount in each column on line 1a by the amount in column (d) on line 3a .....	<b>4</b>				
<b>5</b> Divide the amount in each column on line 1b by the amount in column (d) on line 3b .....	<b>5</b>				
<b>6</b> Divide the amount in each column on line 1c by the amount in column (d) on line 3c .....	<b>6</b>				
<b>7</b> Add lines 4 through 6 .....	<b>7</b>				
<b>8</b> Divide line 7 by 3.0 .....	<b>8</b>				
<b>9a</b> Divide line 2 by line 8 .....	<b>9a</b>				
<b>b</b> Extraordinary items (see instructions) .....	<b>9b</b>				
<b>c</b> Add lines 9a and 9b .....	<b>9c</b>				
<b>10</b> Figure the tax on the amt on ln 9c using the instr for Form 1120, Sch J, line 2 or comparable line of corp's return ...	<b>10</b>				
<b>11a</b> Divide the amount in columns (a) through (c) on line 3a by the amount in column (d) on line 3a .....	<b>11a</b>				
<b>b</b> Divide the amount in columns (a) through (c) on line 3b by the amount in column (d) on line 3b .....	<b>11b</b>				
<b>c</b> Divide the amount in columns (a) through (c) on line 3c by the amount in column (d) on line 3c .....	<b>11c</b>				
<b>12</b> Add lines 11a through 11c .....	<b>12</b>				
<b>13</b> Divide line 12 by 3.0 .....	<b>13</b>				
<b>14</b> Multiply the amount in columns (a) through (c) of line 10 by columns (a) through (c) of line 13. In column (d), enter the amount from line 10, column (d) .....	<b>14</b>				
<b>15</b> Enter any alternative minimum tax for each payment period. See instructions .....	<b>15</b>				
<b>16</b> Enter any other taxes for each payment period. See instr. ....	<b>16</b>				
<b>17</b> Add lines 14 through 16 .....	<b>17</b>				
<b>18</b> For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions .....	<b>18</b>				
<b>19</b> Total tax after credits. Subtract line 18 from line 17. If zero or less, enter -0- .....	<b>19</b>				

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**Part II Annualized Income Installment Method**

		(a)	(b)	(c)	(d)
		First <u>2</u> months	First <u>4</u> months	First <u>7</u> months	First <u>10</u> months
20 Annualization periods (see instructions) .....	20				
21 Enter taxable income for each annualization period. See instructions for the treatment of extraordinary items .....	21	172,667.	995,241.	1,274,909.	2,285,786.
22 Annualization amounts (see instructions) .....	22	6.000000	3.000000	1.714290	1.200000
23a Annualized taxable income. Multiply line 21 by line 22 ..	23a	1,036,002.	2,985,723.	2,185,564.	2,742,943.
b Extraordinary items (see instructions) .....	23b				
c Add lines 23a and 23b .....	23c	1,036,002.	2,985,723.	2,185,564.	2,742,943.
24 Figure the tax on the amount on line 23c using the instructions for Form 1120, Schedule J, line 2, or comparable line of corporation's return .....	24	10,360.	29,857.	21,856.	27,429.
25 Enter any alternative minimum tax for each payment period (see instructions) .....	25				
26 Enter any other taxes for each payment period. See instr. ....	26				
27 Total tax. Add lines 24 through 26 .....	27	10,360.	29,857.	21,856.	27,429.
28 For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions .....	28				
29 Total tax after credits. Subtract line 28 from line 27. If zero or less, enter -0- .....	29	10,360.	29,857.	21,856.	27,429.
30 Applicable percentage .....	30	25%	50%	75%	100%
31 Multiply line 29 by line 30 .....	31	2,590.	14,929.	16,392.	27,429.

**Part III Required Installments**

		1st installment	2nd installment	3rd installment	4th installment
<b>Note:</b> Complete lines 32 through 38 of one column before completing the next column.					
32 If only Part I or Part II is completed, enter the amount in each column from line 19 or line 31. If both parts are completed, enter the <b>smaller</b> of the amounts in each column from line 19 or line 31 .....	32	2,590.	14,929.	16,392.	27,429.
33 Add the amounts in all preceding columns of line 38. See instructions .....	33		2,590.	12,101.	16,392.
34 <b>Adjusted seasonal or annualized income installments.</b> Subtract line 33 from line 32. If zero or less, enter -0- ..	34	2,590.	12,339.	4,291.	11,037.
35 Enter 25% (0.25) of line 5 on page 1 of Form 2220 in each column. <b>Note:</b> "Large corporations," see the instructions for line 10 for the amounts to enter .....	35	6,051.	6,050.	6,051.	6,050.
36 Subtract line 38 of the preceding column from line 37 of the preceding column .....	36		3,461.		1,760.
37 Add lines 35 and 36 .....	37	6,051.	9,511.	6,051.	7,810.
38 <b>Required installments.</b> Enter the <b>smaller</b> of line 34 or line 37 here and on page 1 of Form 2220, line 10. See instructions .....	38	2,590.	9,511.	4,291.	7,810.

Form 2220 (2017)

\*\* ANNUALIZED INCOME INSTALLMENT METHOD USING OPTION 1



FORM 990-PF	DIVIDENDS AND INTEREST FROM SECURITIES				STATEMENT	1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	
INTEREST/DIVIDENDS	795,640.	0.	795,640.	794,454.		
TO PART I, LINE 4	795,640.	0.	795,640.	794,454.		

FORM 990-PF	OTHER INCOME				STATEMENT	2
DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME			
OTHER INCOME - PARTNERSHIPS	0.	88,300.				
TOTAL TO FORM 990-PF, PART I, LINE 11	0.	88,300.				

FORM 990-PF	ACCOUNTING FEES				STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
ACCOUNTING FEES	12,479.	2,496.		9,983.		
TO FORM 990-PF, PG 1, LN 16B	12,479.	2,496.		9,983.		

FORM 990-PF	OTHER PROFESSIONAL FEES				STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
INVESTMENT CONSULTANT FEES	20,014.	20,014.		0.		
ADMINISTRATIVE FEES	277,356.	55,471.		220,917.		
INVESTMENT PORTFOLIO MANAGEMENT FEES	257,489.	257,489.		0.		
TO FORM 990-PF, PG 1, LN 16C	554,859.	332,974.		220,917.		

FORM 990-PF	TAXES	STATEMENT	5
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL EXCISE TAX	67,324.	0.		0.
TO FORM 990-PF, PG 1, LN 18	67,324.	0.		0.

FORM 990-PF	OTHER EXPENSES	STATEMENT	6
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OFFICE EXPENSES	276.	0.		276.
LICENSEE & PERMITS	285.	0.		285.
K-1 INVESTMENT EXPENSES	0.	125,850.		0.
TO FORM 990-PF, PG 1, LN 23	561.	125,850.		561.

FORM 990-PF	CORPORATE STOCK	STATEMENT	7
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DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
US BANK - SEE ATTACHMENT	28,974,756.	28,974,756.
TOTAL TO FORM 990-PF, PART II, LINE 10B	28,974,756.	28,974,756.

FORM 990-PF	CORPORATE BONDS	STATEMENT	8
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DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
US BANK - SEE ATTACHMENT	2,866,646.	2,866,646.
TOTAL TO FORM 990-PF, PART II, LINE 10C	2,866,646.	2,866,646.

FORM 990-PF	OTHER INVESTMENTS	STATEMENT	9
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
US BANK - SEE ATTACHMENT	FMV	8,084,518.	8,084,518.
TOTAL TO FORM 990-PF, PART II, LINE 13		8,084,518.	8,084,518.

FORM 990-PF	OTHER ASSETS	STATEMENT	10
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
INTEREST RECEIVABLE	8,170.	5,945.	5,945.
PREPAID TAX ASSET	11,210.	176.	176.
TO FORM 990-PF, PART II, LINE 15	19,380.	6,121.	6,121.

FORM 990-PF	OTHER LIABILITIES	STATEMENT	11
DESCRIPTION	BOY AMOUNT	EOY AMOUNT	
DEFERRED EXCISE TAX PAYABLE	87,664.	122,954.	
TOTAL TO FORM 990-PF, PART II, LINE 22	87,664.	122,954.	

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FORM 990-PF	PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS	STATEMENT 12
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NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
MICHAEL V. CIRESI 800 IDS CENTER 80 S EIGHTH STREET MINNEAPOLIS, MN 55402	CHAIR 0.70	0.	0.	0.
JOHN F. EISBERG 800 IDS CENTER 80 S EIGHTH STREET MINNEAPOLIS, MN 55402	VICE CHAIR 0.70	0.	0.	0.
LOUIS KING II 800 IDS CENTER 80 S EIGHTH STREET MINNEAPOLIS, MN 55402	DIRECTOR 0.50	0.	0.	0.
MAUREEN KUCERA-WALSH 800 IDS CENTER 80 S EIGHTH STREET MINNEAPOLIS, MN 55402	DIRECTOR 0.50	0.	0.	0.
MICHAEL J. O'CONNELL 800 IDS CENTER 80 S EIGHTH STREET MINNEAPOLIS, MN 55402	DIRECTOR 0.50	0.	0.	0.
CAROLYN SMALLWOOD 800 IDS CENTER 80 S EIGHTH STREET MINNEAPOLIS, MN 55402	DIRECTOR 0.50	0.	0.	0.
ROBERTA WALBURN 800 IDS CENTER 80 S EIGHTH STREET MINNEAPOLIS, MN 55402	SECRETARY & TREASURER 0.50	0.	0.	0.
DORIS BAYLOR 800 IDS CENTER 80 S EIGHTH STREET MINNEAPOLIS, MN 55402	DIRECTOR 0.50	0.	0.	0.
GREG WENZ 800 IDS CENTER 80 S EIGHTH STREET MINNEAPOLIS, MN 55402	CFO 1.00	0.	0.	0.
PATRICE RELERFORD 800 IDS CENTER 80 S EIGHTH STREET MINNEAPOLIS, MN 55402	DIRECTOR OF IMPACT - ED 9.00	0.	0.	0.
KATHLEEN FLYNN PETERSON 800 IDS CENTER 80 S EIGHTH STREET MINNEAPOLIS, MN 55402	DIRECTOR 0.50	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		0.	0.	0.

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FORM 990-PF	GRANT APPLICATION SUBMISSION INFORMATION	STATEMENT 13
	PART XV, LINES 2A THROUGH 2D	

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NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

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PATRICE RELERFORD  
THE MINNEAPOLIS FOUNDATION  
MINNEAPOLIS, MN 55402

TELEPHONE NUMBER	NAME OF GRANT PROGRAM
612-672-3853	GENERAL GRANTS

EMAIL ADDRESS

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PRELERFORD@MPLSFUNDATION.ORG

FORM AND CONTENT OF APPLICATIONS

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APPLICANTS WILL CONTINUE TO USE THE WEBSITE OF THE MINNEAPOLIS FOUNDATION TO ELECTRONICALLY SUBMIT LETTERS OF INQUIRY (LOI) AND ADDITIONAL MATERIALS. GRANT AWARD DECISIONS WILL BE MADE IN DECEMBER 2018. BEFORE SUBMITTING A PROPOSAL FOR FUNDING, PLEASE REVIEW THE ABOUT THE FOUNDATION TAB OF THE CIRESI WALBURN FOUNDATION FOR CHILDREN'S WEBSITE TO DETERMINE IF YOUR ORGANIZATION'S WORK ALIGNS WITH THE FOUNDATION'S GRANTMAKING PRIORITIES.

ANY SUBMISSION DEADLINES

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6/1 TO 7/10: LOI SUBMISSION  
AUGUST 1-30: FULL PROPOSAL SUBMISSION

RESTRICTIONS AND LIMITATIONS ON AWARDS

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N/A

# Exempt Organization Business Income Tax Return

(and proxy tax under section 6033(e))

OMB No. 1545-0687

## 2017

Department of the Treasury  
Internal Revenue ServiceFor calendar year 2017 or other tax year beginning **APR 1, 2017**, and ending **MAR 31, 2018**▶ Go to [www.irs.gov/Form990T](http://www.irs.gov/Form990T) for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for  
501(c)(3) Organizations Only

<b>A</b> <input type="checkbox"/> Check box if address changed		<b>Print or Type</b>	Name of organization ( <input checked="" type="checkbox"/> Check box if name changed and see instructions.) <b>THE CIRESI WALBURN FOUNDATION FOR CHILDREN FKA: ROBINS, KAPLAN, MILLER AND</b>	<b>D</b> Employer identification number (Employees' trust, see instructions.) <b>41-1955286</b>
<b>B</b> Exempt under section <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)			Number, street, and room or suite no. If a P.O. box, see instructions. <b>800 IDS CENTER 80 S EIGHTH STREET</b>	<b>E</b> Unrelated business activity codes (See instructions.) <b>523000</b>
			City or town, state or province, country, and ZIP or foreign postal code <b>MINNEAPOLIS, MN 55402</b>	
<b>C</b> Book value of all assets at end of year <b>40,862,492.</b>			<b>F</b> Group exemption number (See instructions.) ▶	
		<b>G</b> Check organization type ▶ <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust		

**H** Describe the organization's primary unrelated business activity. ▶ **PASSTHROUGH INCOME FROM PARTNERSHIPS**
**I** During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ ☐ Yes ☒ No

If "Yes," enter the name and identifying number of the parent corporation. ▶

**J** The books are in care of ▶ **GREG WENZ - THE MINNEAPOLIS FOUNDATION** Telephone number ▶ **(612) 672-3878**

### Part I Unrelated Trade or Business Income

	(A) Income	(B) Expenses	(C) Net
<b>1a</b> Gross receipts or sales			
<b>b</b> Less returns and allowances			
<b>c</b> Balance	<b>1c</b>		
<b>2</b> Cost of goods sold (Schedule A, line 7)	<b>2</b>		
<b>3</b> Gross profit. Subtract line 2 from line 1c	<b>3</b>		
<b>4a</b> Capital gain net income (attach Schedule D)	<b>4a</b>		
<b>b</b> Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	<b>4b</b>		
<b>c</b> Capital loss deduction for trusts	<b>4c</b>		
<b>5</b> Income (loss) from partnerships and S corporations (attach statement)	<b>5</b>	<b>-817.</b>	<b>-817.</b>
<b>6</b> Rent income (Schedule C)	<b>6</b>		
<b>7</b> Unrelated debt-financed income (Schedule E)	<b>7</b>		
<b>8</b> Interest, annuities, royalties, and rents from controlled organizations (Sch. F)...	<b>8</b>		
<b>9</b> Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	<b>9</b>		
<b>10</b> Exploited exempt activity income (Schedule I)	<b>10</b>		
<b>11</b> Advertising income (Schedule J)	<b>11</b>		
<b>12</b> Other income (See instructions; attach schedule)	<b>12</b>		
<b>13 Total.</b> Combine lines 3 through 12	<b>13</b>	<b>-817.</b>	<b>-817.</b>

### Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.)

(Except for contributions, deductions must be directly connected with the unrelated business income.)

<b>14</b> Compensation of officers, directors, and trustees (Schedule K)	<b>14</b>	
<b>15</b> Salaries and wages	<b>15</b>	
<b>16</b> Repairs and maintenance	<b>16</b>	
<b>17</b> Bad debts	<b>17</b>	
<b>18</b> Interest (attach schedule)	<b>18</b>	
<b>19</b> Taxes and licenses	<b>19</b>	
<b>20</b> Charitable contributions (See instructions for limitation rules)	<b>20</b>	
<b>21</b> Depreciation (attach Form 4562)	<b>21</b>	
<b>22</b> Less depreciation claimed on Schedule A and elsewhere on return	<b>22a</b>	<b>22b</b>
<b>23</b> Depletion	<b>23</b>	
<b>24</b> Contributions to deferred compensation plans	<b>24</b>	
<b>25</b> Employee benefit programs	<b>25</b>	
<b>26</b> Excess exempt expenses (Schedule I)	<b>26</b>	
<b>27</b> Excess readership costs (Schedule J)	<b>27</b>	
<b>28</b> Other deductions (attach schedule)	<b>28</b>	<b>100.</b>
<b>29 Total deductions.</b> Add lines 14 through 28	<b>29</b>	<b>100.</b>
<b>30</b> Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	<b>30</b>	<b>-917.</b>
<b>31</b> Net operating loss deduction (limited to the amount on line 30)	<b>31</b>	
<b>32</b> Unrelated business taxable income before specific deduction. Subtract line 31 from line 30	<b>32</b>	<b>-917.</b>
<b>33</b> Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)	<b>33</b>	<b>1,000.</b>
<b>34</b> Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32	<b>34</b>	<b>-917.</b>

**Part III Tax Computation****35 Organizations Taxable as Corporations.** See instructions for tax computation.Controlled group members (sections 1561 and 1563) check here ☐ See instructions and:**a** Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):

(1) \$ (2) \$ (3) \$

**b** Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$

(2) Additional 3% tax (not more than \$100,000) \$

**c** Income tax on the amount on line 34 **35c** 0.**36 Trusts Taxable at Trust Rates.** See instructions for tax computation. Income tax on the amount on line 34 from:☐ Tax rate schedule or ☐ Schedule D (Form 1041) **36****37 Proxy tax.** See instructions **37****38 Alternative minimum tax** **38****39 Tax on Non-Compliant Facility Income.** See instructions **39****40 Total.** Add lines 37, 38 and 39 to line 35c or 36, whichever applies **40** 0.**Part IV Tax and Payments****41a** Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) **41a****b** Other credits (see instructions) **41b****c** General business credit. Attach Form 3800 **41c****d** Credit for prior year minimum tax (attach Form 8801 or 8827) **41d****e** **Total credits.** Add lines 41a through 41d **41e****42** Subtract line 41e from line 40 **42** 0.**43** Other taxes. Check if from: ☐ Form 4255 ☐ Form 8611 ☐ Form 8697 ☐ Form 8866 ☐ Other (attach schedule) **43****44** **Total tax.** Add lines 42 and 43 **44** 0.**45a** Payments: A 2016 overpayment credited to 2017 **45a****b** 2017 estimated tax payments **45b****c** Tax deposited with Form 8868 **45c****d** Foreign organizations: Tax paid or withheld at source (see instructions) **45d****e** Backup withholding (see instructions) **45e****f** Credit for small employer health insurance premiums (Attach Form 8941) **45f****g** Other credits and payments: ☐ Form 2439 **45g**☐ Form 4136 ☐ Other Total **45g****46** **Total payments.** Add lines 45a through 45g **46****47** Estimated tax penalty (see instructions). Check if Form 2220 is attached ☐ **47****48** **Tax due.** If line 46 is less than the total of lines 44 and 47, enter amount owed **48** 0.**49** **Overpayment.** If line 46 is larger than the total of lines 44 and 47, enter amount overpaid **49** 0.**50** Enter the amount of line 49 you want: **Credited to 2018 estimated tax** **Refunded** **50****Part V Statements Regarding Certain Activities and Other Information** (see instructions)**51** At any time during the 2017 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here **Yes** **No** **X****52** During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file. **Yes** **No** **X****53** Enter the amount of tax-exempt interest received or accrued during the tax year **\$****Sign Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer **PRESIDENT**  
Date TitleMay the IRS discuss this return with the preparer shown below (see instructions)? ☒ **Yes** ☐ **No****Paid Preparer Use Only**Print/Type preparer's name **KIMBERLY ANDERSON, CPA**  
Preparer's signature Date  
Check ☐ if self-employed PTIN **P00188889**  
Firm's name **CLIFTONLARSONALLEN LLP** Firm's EIN **41-0746749**  
Firm's address **220 SOUTH SIXTH STREET, SUITE 300**  
Firm's address **MINNEAPOLIS, MN 55402** Phone no. **612-376-4500**

Form 990-T (2017)

**Schedule A - Cost of Goods Sold.** Enter method of inventory valuation ► **N/A**

<b>1</b> Inventory at beginning of year .....	<b>1</b>		<b>6</b> Inventory at end of year .....	<b>6</b>	
<b>2</b> Purchases .....	<b>2</b>		<b>7</b> <b>Cost of goods sold.</b> Subtract line 6		
<b>3</b> Cost of labor .....	<b>3</b>		from line 5. Enter here and in Part I,		
<b>4a</b> Additional section 263A costs			line 2 .....	<b>7</b>	
(attach schedule) .....	<b>4a</b>		<b>8</b> Do the rules of section 263A (with respect to		<b>Yes</b> <b>No</b>
<b>b</b> Other costs (attach schedule) .....	<b>4b</b>		property produced or acquired for resale) apply to		
<b>5</b> <b>Total.</b> Add lines 1 through 4b .....	<b>5</b>		the organization? .....		

**Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)**

(see instructions)

**1.** Description of property

(1)
(2)
(3)
(4)

**2.** Rent received or accrued

<b>(a)</b> From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	<b>(b)</b> From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	<b>3(a)</b> Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
<b>Total</b> 0.	<b>Total</b> 0.	

**(c) Total income.** Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ►

**(b) Total deductions.** Enter here and on page 1, Part I, line 6, column (B) ... ► 0.

**Schedule E - Unrelated Debt-Financed Income** (see instructions)

<b>1.</b> Description of debt-financed property	<b>2.</b> Gross income from or allocable to debt-financed property	<b>3.</b> Deductions directly connected with or allocable to debt-financed property	
		<b>(a)</b> Straight line depreciation (attach schedule)	<b>(b)</b> Other deductions (attach schedule)
(1)			
(2)			
(3)			
(4)			
<b>4.</b> Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	<b>5.</b> Average adjusted basis of or allocable to debt-financed property (attach schedule)	<b>6.</b> Column 4 divided by column 5	<b>7.</b> Gross income reportable (column 2 x column 6)
(1)		%	
(2)		%	
(3)		%	
(4)		%	
<b>Totals</b> .....		Enter here and on page 1, Part I, line 7, column (A). 0.	Enter here and on page 1, Part I, line 7, column (B). 0.
<b>Total dividends-received deductions</b> included in column 8 .....		0.	

Form 990-T (2017)



## THE CIRESI WALBURN FOUNDATION FOR

Form 990-T (2017) CHILDREN FKA: ROBINS, KAPLAN, MILLER AND

41-1955286

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**Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations** (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

**Nonexempt Controlled Organizations**

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).
<b>Totals</b>			0.	0.

**Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization** (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
		Enter here and on page 1, Part I, line 9, column (A).		Enter here and on page 1, Part I, line 9, column (B).
<b>Totals</b>		0.		0.

**Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
		Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).			Enter here and on page 1, Part II, line 26.
<b>Totals</b>		0.	0.			0.

**Schedule J - Advertising Income** (see instructions)**Part I Income From Periodicals Reported on a Consolidated Basis**

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
<b>Totals (carry to Part II, line (5))</b>		0.	0.			0.

Form 990-T (2017)

## THE CIRESI WALBURN FOUNDATION FOR

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41-1955286

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**Part II** **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
<b>Totals from Part I</b> .....	0.	0.				0.
<b>Totals, Part II (lines 1-5)</b> .....	0.	0.				0.

**Schedule K - Compensation of Officers, Directors, and Trustees** (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
<b>Total.</b> Enter here and on page 1, Part II, line 14 .....			0.

Form 990-T (2017)

FORM 990-T	OTHER DEDUCTIONS	STATEMENT 14
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DESCRIPTION	AMOUNT
TAX PREPARATION FEES	100.
TOTAL TO FORM 990-T, PAGE 1, LINE 28	100.

FORM 990-T	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 15
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PARTNERSHIP NAME	GROSS INCOME	DEDUCTIONS	NET INCOME OR (LOSS)
RXR REAL ESTATE VALUE ADDED FUND - FUND III LP	-801.	16.	-817.
TOTAL TO FORM 990-T, PAGE 1, LINE 5	-801.	16.	-817.

**Application for Automatic Extension of Time To File an  
Exempt Organization Return**

OMB No. 1545-1709

► **File a separate application for each return.**► **Information about Form 8868 and its instructions is at [www.irs.gov/form8868](http://www.irs.gov/form8868).**

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile), click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

**Automatic 6-Month Extension of Time.** Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

		Enter filer's identifying number
<b>Type or print</b>  <small>File by the due date for filing your return. See instructions.</small>	Name of exempt organization or other filer, see instructions. <b>THE CIRESI WALBURN FOUNDATION FOR CHILDREN FKA: ROBINS, KAPLAN, MILLER AND</b>	Employer identification number (EIN) or  <b>41-1955286</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>800 IDS CENTER 80 S EIGHTH STREET</b>	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>MINNEAPOLIS, MN 55402</b>	

Enter the Return Code for the return that this application is for (file a separate application for each return) **0 4**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

**GREG WENZ - THE MINNEAPOLIS FOUNDATION - 800 IDS CENTER,**

- The books are in the care of ► **80 SOUTH 8TH STREET - MINNEAPOLIS, MN 55402**

Telephone No. ► **(612) 672-3878**

Fax No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 1** I request an automatic 6-month extension of time until **FEBRUARY 15, 2019**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ☐ calendar year \_\_\_\_\_ or  
► ☒ tax year beginning **APR 1, 2017**, and ending **MAR 31, 2018**.

- 2** If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return  
☐ Change in accounting period

<b>3a</b> If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$	<b>47,374.</b>
<b>b</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$	<b>32,374.</b>
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	<b>15,000.</b>

**Caution:** If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA **For Privacy Act and Paperwork Reduction Act Notice, see instructions.**Form **8868** (Rev. 1-2017)

**MAIL TO: DEPARTMENT OF THE TREASURY  
INTERNAL REVENUE SERVICE CENTER  
OGDEN, UT 84201-0045**