

Return of Private Foundation

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

OMB No 1545-0052 2017

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ▶ Go to www.irs.gov/Form990PF for Instructions and the latest Information.

Open to Public Inspection

For	r <u>calen</u>	dar year 2017 or tax year beginning	, 201	7, and $\mathfrak c$	ending		, 20
Na	me of fo	undation			A Employe	r identification numbe	er
-THI	E PEN	TAIR FOUNDATION			41-1890	149	
Nu	mber an	d street (or P O box number if mail is not delivered to street address)	Room	/surte		e number (see instruct	ons)
550	00 WA	AYZATA BLVD.	600		763-545	5-1730	
		n, state or province, country, and ZIP or foreign postal code	1000			tion application is pend	ing check here b
ഭവ	LDEN	VALLEY, MN 55416			O il exemp	non application is pend	ing, check field
			n of a former public	chanty	D 4 Femile	n organizations, check	hom h 🗀
•	0110011	Final return Amended		Oriality	U 1. Foleig	ii Organizations, check	here . ▶ 🗌
		☐ Address change ☐ Name chai				n organizations meeting	
H	Check	type of organization: X Section 501(c)(3) exempt p		9		here and attach computed foundation status was	
		on 4947(a)(1) nonexempt chantable trust			section 5	07(b)(1)(A), check here	▶ 🗆
		parket value of all assets at J Accounting method					
		f year (from Part II, col (c), Other (specify)	. L Cash M. A	Coluai		ndation is in a 60-mont ction 507(b)(1)(B), checl	
	line 16		on cash hasis)		411407 30	Stron GOY (DY 1 YEAR CHECK	K Hore
_	art I	Analysis of Revenue and Expenses (The total of		1	<u></u>	<u> </u>	(d) Disbursements
_		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		investment	(c) Adjusted net	for chantable
		the amounts in column (a) (see instructions))	books	"	ncome	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	4,160,590	SITH	-1° - 5434	The state of the s	10 10 10 14 14
	2	Check ► ☐ if the foundation is not required to attach Sch. B	1,100,000	3011.		e to the colo	50 S
	3	Interest on savings and temporary cash investments		·		· · · · · · · · · · · · · · · · · · ·	300 300
	4	Dividends and interest from securities .	<u> </u>	 			
	5a	Gross rents .		 			
	Ь	Net rental income or (loss)		1.1	, -, -, -, -, -, -, -, -, -, -, -, -,	• • •	7 3 7
Ð	6a	Net gain or (loss) from sale of assets not on line 10		l			fp f
2	b	Gross sales price for all assets on line 6a			. 3	*	
Revenue	7	Capital gain net income (from Part IV, line 2)					
æ	8	Net short-term capital gain .	•	,	, , , ,	<u> </u>	-110.4
	9	Income modifications	1,11		1		2 32.36
	10a	Gross sales less returns and allowances				10 1 1 10 Te	
	Ь	Less. Cost of goods sold .	. 3 1		ال الله الله الله الله الله الله الله ا	1 6 7 6 1 5 1	
	С	Gross profit or (loss) (attach schedule)			4		* * *
	11	Other income (attach schedule)					3
	12	Total. Add lines 1 through 11	4,160,590		0	0	医生物 经成分
<u></u>	13	Compensation of officers, directors, trustees, etc					
Expenses	14	Other employee salaries and wages	136,006				136,006
ë	15	Pension plans, employee benefits					
ğ	16a	Legal fees (attach schedule)	162				162
	b	Accounting fees (attach schedule)			ECE	VFD	
tive	С	Other professional fees (attach schedule)		F	IEUE	72	
ā	17	Interest				2018	
ist	18	Taxes (attach schedule) (see instructions) .		100	NOV 2) Z010 SS	
Ë	19	Depreciation (attach schedule) and depletion .		lø[ではなってい
þ	20	Occupancy .		<u> </u>	OGDE	N. UT	
ΨÞ	21	Travel, conferences, and meetings .			<u>UGUE</u>		
ğ	22	Printing and publications					
ğ	23	Other expenses (attach schedule) SCH. 2	6,647				6,647
ij	24	Total operating and administrative expenses.					
er		Add lines 13 through 23	142,815	ļ	0	0	142,815
Operating and Administrativ	25	Contributions, gifts, grants paid	2,054,013	X-7	All Exist	力量程一段第二倍	2,974,303
<u> </u>	26	Total expenses and disbursements. Add lines 24 and 25	2,196,828		0	0	3,117,118
	27	Subtract line 26 from line 12	Bir mei Barre				经验加强
	а	Excess of revenue over expenses and disbursements		r. ()	J. 34		京学のできる
	b	Net investment income (if negative, enter -0-)	San Carlotte		0	र क्षेत्र हुन हैं है है कि	C. C. 67 1 150 A 2
		Adjusted net income (if negative, enter -0-)	の発生の変化し	الله وس	1 1 1 1 E		24人,并在1964
For	Paperv	work Reduction Act Notice, see instructions.				Fo	m 990-PF (2017)
							ସ ର।

Certified Article Number

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Ò	art II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year		End of	
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Val		(c) Fair Market Value
	1	Cash—non-interest-bearing	45,714	202,	665	202,665
	2	Savings and temporary cash investments				
	3	Accounts receivable ►				
		Less allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less allowance for doubtful accounts ▶	8,916,466	9,839,	050	9,839,050
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) ▶	, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>			
	•	Less allowance for doubtful accounts ▶				<u></u>
ß	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges		•		
Ą	10a	Investments—U S and state government obligations (attach schedule)			$\overline{}$	
•	b	Investments—corporate stock (attach schedule)				
	c	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis ▶	+			- 1
	''	Less accumulated depreciation (attach schedule) ▶				
	12	Investments—mortgage loans			+	
	13	location and a substitute of the substitute of t		-	\rightarrow	
	14	Land, buildings, and equipment basis ►		·	-+	
	1**	Less accumulated depreciation (attach schedule) ▶				
	15	Other assets (describe >				
	16	Total assets (to be completed by all filers—see the				
	10	instructions Also, see page 1, item I)	, 0 000 100	10 041	715	10 041 715
_	47		8,962,180	10,041,		10,041,715
	17	Accounts payable and accrued expenses	18,585		698	
S	18	Grants payable	4,271,455	3,363,	115	
Liabilities	19	Deferred revenue				
<u>ā</u>	20	Loans from officers, directors, trustees, and other disqualified persons				
<u>:</u>	21	Mortgages and other notes payable (attach schedule)	/000			
	22	Other liabilities (describe ► MISCELLANEOUS)	(230)		(230)	
	23	Total liabilities (add lines 17 through 22)	4,289,810	3,405,	583	
s		Foundations that follow SFAS 117, check here				
ခ်		and complete lines 24 through 26, and lines 30 and 31.				,
d Balances	24	Unrestricted	4,672,370	6,636,	132	
Ba	25	Temporarily restricted				
þ	26	Permanently restricted				·
Net Assets or Fun		Foundations that do not follow SFAS 117, check here ▶ □				
ſГ		and complete lines 27 through 31.				
3 0	27	Capital stock, trust principal, or current funds				
ets	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
SS	29	Retained earnings, accumulated income, endowment, or other funds				
t A	30	Total net assets or fund balances (see instructions)	4,672,370	6,636,	132	
Š	31	Total liabilities and net assets/fund balances (see			1	
		instructions)	8,962,180	10,041,	715	
	rt III	Analysis of Changes in Net Assets or Fund Balances				<u></u>
1		I net assets or fund balances at beginning of year—Part II, colu	mn (a), line 30 (must	agree with	T	
	end-	of-year figure reported on prior year's return)			1	4,672,370
2	Ente	r amount from Part I, line 27a			2	1,963,762
3	Othe	er increases not included in line 2 (itemize) ▶			3	
		lines 1, 2, and 3			4	6,636,132
5	Decr	reases not included in line 2 (itemize) ▶			5	
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), line	e 30	6	6,636,132

Form **990-PF** (2017)

Part	V Capital Gains and L	osses for Tax on Investment	Income			.	
	(a) List and describe the kind(s) of property sold (for example, real estate, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acqu (mo , day, y		Date sold , day, yr)
1a							
b							
c							
<u>d</u>							
<u>e</u>	····						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		(h) Gain or (loss)) plus (f) minus (g))
<u>a</u>							
<u> </u>							
<u>с</u>			·				
<u> </u>							_
e	Complete only for assets shown	ng gain in column (h) and owned by the	foundation	on 12/31/69		(0 -1 /5)	
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	s of col (i) (j), if any	col (k),	ns (Col (h) gain n but not less than esses (from col (h	-0-) or
a							
b							
С							
d							
е							
2	Capital gain net income or (r	et capital loss) { If gain, also if (loss), enter			2		
3		r (loss) as defined in sections 1222 line 8, column (c) See instruction			3		
Part		Section 4940(e) for Reduced	T N) 			
	tion 4940(d)(2) applies, leave the foundation liable for the se	nis part blank ction 4942 tax on the distributable	amount of	any year in the b	ase period?		∕es ⊠ No
If "Ye	s," the foundation doesn't qua	ilify under section 4940(e). Do not	complete t	his part			
1	<u>' ' ' ' '</u>	t in each column for each year, se	e the instru	actions before ma	aking any en		
Cale	(a) Base penod years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value o	(c) f nonchantable-use as	ssets (c	(d) Distribution ra col (b) divided by	
	2016	3,703,524		82,			44.7794
	2015	2,162,395		347,			6.2215
	2014	4,752,009		488,			9.7259
	2013	5,456,233		336,			16.2122
	2012	5,121,056		178,	818		28.6384
	T 4 1 51 4 4 4 1 4 4 7 6 1						105 577/
2	Total of line 1, column (d)	the Eugerhan ported duide t	ho total on	lino 2 by 5.0 or	2 2		105.5774
3		r the 5-year base period—divide t idation has been in existence if les			3		21.1155
4	Enter the net value of nonch	antable-use assets for 2017 from I	Part X, line	5	4		274,559
5	Multiply line 4 by line 3				5	5	,797,451
6	Enter 1% of net investment i	ncome (1% of Part I, line 27b)			6		
7	Add lines 5 and 6				7	5	,797,451

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 494	8—s	ee insti	ructio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ 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	1			<u></u>
	here ▶ ☐ and enter 1% of Part I, line 27b				
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of				
	Part I, line 12, col (b)				ĺ
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	2			
3	Add lines 1 and 2	3		0	<u> </u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		0	<u></u>
6	Credits/Payments				1
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 1,000				
b	Exempt foreign organizations—tax withheld at source				
C	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld	-			
7	Total credits and payments Add lines 6a through 6d	7	1	,000	<u> </u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		0	<u> </u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	1	,000	<u> </u>
11	Enter the amount of line 10 to be Credited to 2018 estimated tax ▶ 1,000 Refunded ▶	11		0	
	VII-A Statements Regarding Activities			Vaa	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation	or aid		Yes	
	participate or intervene in any political campaign?	Saa +	1 <u>1a</u>	+	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? instructions for the definition	See i			۱
		aatarı	1b	<u>' </u>	X
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any nepublished or distributed by the foundation in connection with the activities	ialena	315		1 1
			10	-	<u> </u>
C	Did the foundation file Form 1120-POL for this year?		10		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ (2) On foundation managers ▶ \$		Į.		1
_	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax im	nose	, 		1 1
е	on foundation managers > \$	ihosed	'		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	_	
2	If "Yes," attach a detailed description of the activities		<u>⊢</u>		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, a	rticles	of		
3	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		48		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	-	X
•	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
•	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directively.	ons th	nat		
	conflict with the state law remain in the governing instrument?		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and	Part)	(V 7	Х	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions				
	MINNESOTA			ŀ	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney	Gene	ral		
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 494	2(j)(3)	or		
-	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV	If "Ye	s,"		
	complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule list	ing th	eır		
	names and addresses		10		X
			Form 9	90-PF	(2017)

r'ar	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	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			١
40	person had advisory privileges? If "Yes," attach statement. See instructions	12	v	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	<u> </u>
14	Website address ► WWW.PENTAIR.COM The books are in care of ► MARYBETH THORSGAARD, PRESIDENT Telephone no ► 763-54	5_17	30	
17	Located at ▶ 5500 WAYZATA BLVD., STE 600 GOLDEN VALLEY, MN ZIP+4 ▶ 55416-			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here	1201	: -	
	and enter the amount of tax-exempt interest received or accrued during the year			_
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
_	the foreign country ▶			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No			
	disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			İ
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	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			1
С	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? Taxon on fallure to distribute income (continue 4043) (does not easily for years the foundation was a private.	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and			ŀ
	6e, Part XIII) for tax year(s) beginning before 2017? ☐ Yes ☑ No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20, 20			
D	(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)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
•	► 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
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			ļ
_	foundation had excess business holdings in 2017)	3b		ļ.,.
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a		X
b	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		X
		_ 76	1	_ ^.

Part	VII-B Statements Regarding Activities	for W	hich Form	4720 I	May Be R	equire	d (conti	nued)	_		
5a	During the year, did the foundation pay or incur									Yes	No
	(1) Carry on propaganda, or otherwise attempt t(2) Influence the outcome of any specific public	election					☐ Yes	⊠ No			ļ
	directly or indirectly, any voter registration dr				- 0		Yes	⊠ No			
	(3) Provide a grant to an individual for travel, stu(4) Provide a grant to an organization other than section 4945(d)(4)(A)(?) See instructions					ribed in	☐ Yes	⊠ No ⊠ No	}		
	(5) Provide for any purpose other than religious	charita	able, scientifi	ic. litera	rv. or educ	ational	_	⊠ NO			
	purposes, or for the prevention of cruelty to				,		□Yes	⊠ No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the							ibed in			
	Regulations section 53 4945 or in a current notice	-	_			ructions	3	▶□	5b		 i
С	Organizations relying on a current notice regarding the answer is "Yes" to question 5a(4), does to					the tax					Į
	because it maintained expenditure responsibility						☐ Yes	☐ No			
	If "Yes," attach the statement required by Regula										
6a	Did the foundation, during the year, receive any on a personal benefit contract?	funds,	directly or inc	directly,	to pay pre	miums	_	তি ১১৯			
b	Did the foundation, during the year, pay premium	ns dire	ctly or indired	ctiv on	a personal	benefit	Yes contract	──XINo ?	6b		I
	If "Yes" to 6b, file Form 8870	no, uno	ony or mane.	ony, on	a percenar	00110111	00/////00/				<u> </u>
7a	At any time during the tax year, was the foundation	a party t	to a prohibited	tax she	elter transac	tion?	☐ Yes				
	If "Yes," did the foundation receive any proceeds Information About Officers, Direct								7b	996	
ran	and Contractors	tois, i	rustees, r	Junua	ion mane	agers,	inginy i	alu Li	npicy	ccs,	
1	List all officers, directors, trustees, and found	lation n	nanagers an	nd their	compens	ation. S	ee instru	ıctions	•		
	(a) Name and address	hou	e, and average rs per week ed to position	i (If n	npensation ot paid, ter -0-)	emplo	Contribution yee benefit erred compe	plans	(e) Expe	nse acc allowan	
SCHE	DULE 3										
			<u>.</u>		-						
2	Compensation of five highest-paid employed	es (oth	er than thos	se incli	ıded on li	ne 1—	see instr	uctions	s). If n	one, e	enter
	"NONE."										
(a) Name and address of each employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to pe	veek	(c) Comper	nsation	(d) Contribution (d) Co	benefit deferred		nse acc allowan	
JENN	IFER SCOBIE		FOUNDATI	ON				-			
5500 1	NAYZATA BLVD., STE 600, GOLDEN VALLEY, MN	55416	ADMINIST	RATOR	95	800					
		_									
·											
Total	number of other employees paid over \$50,000										
									Form 99	0-PF	(2017)

	and Contractors (continued) Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE	. 11
3_	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
IONE		
		-
otal	number of others receiving over \$50,000 for professional services	
Part	IX-A Summary of Direct Charitable Activities	
List	the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of inizations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1	IONE	
2		
3	· · · · · · · · · · · · · · · · · · ·	
•		
•		
4		
	IX-B Summary of Program-Related Investments (see instructions)	Amount
	cribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	IONE	
2		
All	ther program-related investments. See instructions	<u></u> .
3		
ıotal	Add lines 1 through 3	

Part	see instructions.)	gii ioi	indations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes	ll	
а	Average monthly fair market value of securities	1a_	0
b	Average of monthly cash balances	1b	278,740
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	278,740
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	278,740
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	4,181
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	274,559
6	Minimum investment return. Enter 5% of line 5	6	13,728
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations, check here	ounda	ations
1	Minimum investment return from Part X, line 6	1	13,728
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017 (This does not include the tax from Part VI)]	
С	Add lines 2a and 2b	2c	0
3	Distributable amount before adjustments Subtract line 2c from line 1	3	13,728
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	13,728
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	13,728
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	3,117,118
b	Program-related investments—total from Part IX-B	1b	
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		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	3,117,118
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,117,118
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculatin qualifies for the section 4940(e) reduction of tax in those years	g whe	ther the foundation

	90-PF (2017)					Page 9
Part	XIII Undistributed Incom	ne (see instruction				
1	Distributable amount for 201	7 from Part XI,	(a) Corpus	(b) Years pnor to 2016	(c) 2016	(d) 2017 13,728
2 a	Undistributed income, if any, as of Enter amount for 2016 only	the end of 2017				13,720
b	Total for prior years 20,2	0,20 [
3	Excess distributions carryover,	ıf any, to 2017				
а	From 2012	5,112,115				
b	From 2013	5,439,405				
C	From 2014	4,727,579				
d	From 2015	2,145,017				
e •	From 2016 Total of lines 3a through e	3,699,389	21,123,505			
4	Qualifying distributions for 201	7 from Part XII,	21,123,303			
	line 4 ▶ \$ 3,117,118			د		1
	Applied to 2016, but not more					
D	Applied to undistributed incom (Election required—see instruc					
С	Treated as distributions out of required—see instructions)	corpus (Election				
d	Applied to 2017 distributable a	mount				13,728
е	Remaining amount distributed	out of corpus	3,103,390			
5	Excess distributions carryover (If an amount appears in column amount must be shown amount must be shown and must be shown amount must be shown and must be shown and must be shown as a column amount must be shown and must be shown as a column amount must be shown as a column	nn (d), the same				-
6	Enter the net total of each indicated below:					
a b	Corpus Add lines 3f, 4c, and 4e Prior years' undistributed incline 4b from line 2b		24,226,895	0		
С	Enter the amount of prior year income for which a notice of been issued, or on which the tax has been previously assess	deficiency has section 4942(a) sed				
d	Subtract line 6c from line amount—see instructions	e 6b Taxable		0	:	
e	Undistributed income for 2014 4a from line 2a Taxable instructions		·		0	
f	Undistributed income for 2017 4d and 5 from line 1. This all distributed in 2018					0
7	Amounts treated as distribution to satisfy requirements important (b)(1)(F) or 4942(g)(3) (Elegentred—see instructions)	sed by section				
8	Excess distributions carryover applied on line 5 or line 7 (see i		E 110 115			
9	Excess distributions carry	· L	5,112,115			
•	Subtract lines 7 and 8 from line		19,114,780	į		ļ
10	Analysis of line 9	· - -	19,114,700			
а	Excess from 2013	5,439,405				
b	Excess from 2014	4,727,579		1		
c	Excess from 2015	2,145,017		J]	j
d	Excess from 2016	3,699,389				
e	Excess from 2017	3,103,390				

Form 99	0-PF (2017)					Page 10
Part	XIV Private Operating Founda	tions (see instru	ctions and Part \	VII-A, question 9))	$\overline{}$
	If the foundation has received a ruling foundation, and the ruling is effective for	or determination	letter that it is a p		N/A	
b	Check box to indicate whether the four	ndation is a private	operating foundati	ion described in se		3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Pnor 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d)/2014	
	each year listed					0
	85% of line 2a	0	0	0	0	0
С	Qualifying distributions from Part XII, line 4 for each year listed					0
d	Amounts included in line 2c not used directly for active conduct of exempt activities .		_			0
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	0	0	0	o	0
3	Complete 3a, b, or c for the alternative test relied upon			_		
а	"Assets" alternative test—enter					
	(1) Value of all assets					0
	(2) Value of assets qualifying under					0
b	section 4942(j)(3)(B)(i) "Endowment" alternative test—enter ² / ₃ of minimum investment return shown in Part X, line 6 for each year listed					0
С	"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)					0
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j(3)(B)(iii)					0
	(3) Largest amount of support from		-			
	an exempt organization					0
	(4) Gross investment income	12		6 1.41		0
Part	Supplementary Information			ne toundation n	aa \$5,000 or mo	ore in assets at
4	Information Regarding Foundation		15.)	_	_	
1 a	List any managers of the foundation before the close of any tax year (but of	who have contribu				by the foundation
NONE				 		
b	List any managers of the foundation ownership of a partnership or other en					ge portion of the
NONE						
2	Information Regarding Contribution					daaa mak aaaama
	Check here ▶ ☐ if the foundation unsolicited requests for funds. If the foundation complete items 2a, b, c, and d. See in	oundation makes				
а	The name, address, and telephone nu		iress of the persor	to whom applica	ations should be ad	dressed
PENT	AIR FOUNDATION ADMINISTRAT	OR, 5500 WAY	ZATA BLVD.,	STE 600, GOL	DEN VALLEY, N	MN 55416
	The form in which applications should					
CONT	ACT INFORMATION, ORGANIZAT	ION INFORMAT	ION, REQUEST	INFORMATION	, DEMOGRAPHIC	cs
	Any submission deadlines					
<u>''' d</u>	Any restrictions or limitations on av	vards, such as by	geographical ar	eas, charitable fi	elds, kinds of inst	itutions, or other

factors

N/A

Supplementary Information (continued)

∙Part XV

3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or status of Amount any foundation manager or substantial contributor contribution Name and address (home or business) recipient a Paid during the year 2,974,303 SCHEDULE 4A & 4B Total **3a** 2,974,303 **b** Approved for future payment 3,363,115 SCHEDULE 5 Total **3b** 3,363,115

Form **990-PF** (2017)

nter gross amounts unless otherwise indicated		siness income	Excluded by section	-	(e) Related or exempt
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
1 Program service revenue					,
a					
b			<u> </u>		
c					
d					
e	-		-		
		 .			
g Fees and contracts from government agencies			<u> </u>		
2 Membership dues and assessments			<u> </u>	-	
3 Interest on savings and temporary cash investments4 Dividends and interest from securities					
					
5 Net rental income or (loss) from real estate a Debt-financed property		··-			
a Debt-financed property b Not debt-financed property	· - 	<u> </u>			
6 Net rental income or (loss) from personal property					
7 Other investment income		· · -	 	 -	
8 Gain or (loss) from sales of assets other than inventory			 		
9 Net income or (loss) from special events			 		
10 Gross profit or (loss) from sales of inventory	-		-		
11 Other revenue a					
<u> </u>					
					
d				·	
e					
		0			(
12 Subtotal Add columns (b) (d), and (e)		U	1	U	
12 Subtotal Add columns (b), (d), and (e) 13 Total, Add line 12, columns (b), (d), and (e)		0	<u>L</u> 1	13	
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation	ns)	0	<u> </u>		
13 Total. Add line 12, columns (b), (d), and (e)			t Purposes		
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation	Accomplishme	ent of Exemp		13	(
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations are XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt process.	Accomplishme	ent of Exemp		13	(
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations are XVI-B Relationship of Activities to the	Accomplishme	ent of Exemp		13	(
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations are XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt process.	Accomplishme	ent of Exemp		13	(
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations are XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt process.	Accomplishme	ent of Exemp		13	(
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations are XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt process.	Accomplishme	ent of Exemp		13	(
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations are XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt process.	Accomplishme	ent of Exemp		13	(
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations are XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt process.	Accomplishme	ent of Exemp		13	(
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations are XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt process.	Accomplishme	ent of Exemp		13	(
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations are XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt process.	Accomplishme	ent of Exemp		13	(
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations are XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt process.	Accomplishme	ent of Exemp		13	(
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations are XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt process.	Accomplishme	ent of Exemp		13	(
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations are XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt process.	Accomplishme	ent of Exemp		13	(
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations are XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt process.	Accomplishme	ent of Exemp		13	(
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations are XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt process.	Accomplishme	ent of Exemp		13	(
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations are XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt process.	Accomplishme	ent of Exemp		13	(
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations are XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt process.	Accomplishme	ent of Exemp		13	(
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations are XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt process.	Accomplishme	ent of Exemp		13	(
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations are XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt process.	Accomplishme	ent of Exemp		13	(
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations are XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt process.	Accomplishme	ent of Exemp		13	(
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations are XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt process.	Accomplishme	ent of Exemp		13	(
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations are XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt process.	Accomplishme	ent of Exemp		13	(
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations are XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt process.	Accomplishme	ent of Exemp		13	(

Part	XVII	Information Organization		to and Transactio	ns and Relationships With Noncha	aritable l	≣xem∣
1		ion 501(c) (oth			ng with any other organization described r in section 527, relating to political		es No
а	(1) Cas	h	rting foundation to a non	charitable exempt orç	ganization of	1a(1)	X
b	Other tr	er assets ansactions	and a stable exempt on			1a(2) 1b(1)	X
	(2) Pur	chases of assets	noncharitable exempt or from a noncharitable ex quipment, or other asset	empt organization		1b(2) 1b(3)	X
	(4) Reir	mbursement arrans ns or loan guara	ingements	J		1b(4) 1b(5)	X
•	(6) Perf	formance of sen	ices or membership or fi	undraising solicitation	is.	1b(6)	Х
С	Sharing	of facilities, equ				1c	X
d	If the a value o value in	nswer to any of f the goods, oth any transaction	upment, mailing lists, oth the above is "Yes," con er assets, or services giv or sharing arrangement,	ner assets, or paid em inplete the following s iven by the reporting for show in column (d) t	ployees schedule Column (b) should always sho oundation If the foundation received les the value of the goods, other assets, or s	ow the far ss than far services re	r marl r marl ceive
d a) Line	If the a value o value in	nswer to any of f the goods, oth	upment, mailing lists, oth the above is "Yes," con er assets, or services giv	ner assets, or paid em inplete the following s iven by the reporting for show in column (d) t	ployees schedule Column (b) should always sho oundation If the foundation received les	ow the far ss than far services re	r mar r mar ceive

			1								
				<u> </u>		<u> </u>					
-								· · · · · · · · · · · · · · · · · · ·			
				······································				· -			
2a	ls the	foundation dire	ctly or indirect	ly affiliated with, or rela-	ted to, one or mo	ore tax-exer	npt organ	izations			
				in section 501(c)(3)) or in				☐ Yes ☐ No			
b	lf "Ye	s," complete the	following sche	dule							
		(a) Name of organ	ization	(b) Type of o	(b) Type of organization			(c) Description of relationship			
_											
-											
	Unde	r penalties of perjury, I	declare that I have ex	camined this return, including acc	ompanying schedules ar	nd statements, ar	nd to the bes	t of my knowledge and belief, it is true			
Sign	corre	ct, and complete Dec	aration of preparer (ot	her than taxpayer) is based on all	k		owledge	May the IRS discuss this return			
Here		41/h 4/		11-7-	TREASURE	R	with the preparer shown below? See instructions Yes No				
	Sign	ature of officer or trus	stee	Date	Title						
Doid		Print/Type preparer	's name	Preparer's signature	-	Date	C	neck I if PTIN			
Paid								employed			
Prepa		Firm's name ▶						Firm's EIN ▶			
Use Only					Dhara						

Firm's address ▶

Form **990-PF** (2017)

Phone no

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Employer identification number

THE PENTAIR FOUNDATION 41-1890149 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 foundation Check 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 331/3% 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)

THE PENTAIR FOUNDATION

Employer Identification number

41-1890149

Part I	Contributors (see instructions). Use duplicate cop	bles of Part I if additional space is	needed
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	SCHEDULE 1	c 4 160 590	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	,	\$	Person Payroll Noncash (Complete Part II for noncash contributions)

THE PENTAIR FOUNDATION 41-1890149

Employer identification number

Part II	Noncash Property (see instructions) Use duplicate co	ppies of Part II if additional space	ce is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
		 \$		
) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
		s		
) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
		\$		
) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
		s		
) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
		\$		
) No. rom 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) (2017) **Employer identification number** Name of organization 41-1890149 THE PENTAIR FOUNDATION Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions) ▶ Use duplicate copies of Part III if additional space is needed (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (c) Use of gift (b) Purpose of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (c) Use of gift (d) Description of how gift is held (b) Purpose of gift from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

THE PENTAIR FOUNDATION FEIN #41-1890149 12/31/2017

Form 990-PF, Page 1, Line 1

Contributions, gifts, grants, etc., recer	ved
---	-----

Contributions, gifts, grants, etc.	January	February	March	April	Мау	June	July	August	September	October	November	December	Total Contributions C	Type of Contributor
Pentair Management Company 5500 Wayzata Blvd , Suite 600	Spilopit.	Tentnaia	Maion	CHEE	may	Sulfa	ANII	HARAM	SOPREMISE	00,000	110101111101	PRICINGE	34110/100000	
Golden Valley, MN 55416	346,716	346,716	346,716	346,716	346,716	346,716	346,716	346,716	346,716	346,716	346,716	346,716	4,160,590 P	Person

Grand Total 4,160,590

"The term "person" includes individuals, fudiciaries, partnerships, corporations, associations, trusts, and exempt organizations

THE PENTAIR FOUNDATION FEIN #41-1890149 12/31/2017

Form 990-PF, Part 1, Line 23, column (a)

Other expenses

General Administrative 6,647
Total 6,647

The Pentair Foundation FEIN #41-1890149 Information about Directors Form 990-PF, Page 6 Part VIII 12/31/2017

Name and Address	Title	Compensation	Avg. Hrs. Per Week	Contributions to Emp. Plans	Expense Allowance	
Marybeth Thorsgaard 5500 Wayzata Blvd , Suite 600 Golden Valley, MN 55416	President	0	0	0	0	
Jennifer Scobie 5500 Wayzata Blvd , Suite 600 Golden Valley, MN 55416	Vice President	95,800	30	0	0	
Karla Robertson 5500 Wayzata Blvd , Suite 600 Golden Valley, MN 55416	Secretary	0	0 .	0	0	
Mark Borin 5500 Wayzata Blvd , Suite 600 Golden Valley, MN 55416	Treasurer	0	. 0	0	0	
Kelly Baker 5500 Wayzata Blvd , Suite 600 Golden Valley, MN 55416	Director	0	0	0	0	
Phil Rolchigo 5500 Wayzata Blvd , Suite 600 Golden Valley, MN 55416	Director	0	0	0	0	