

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 for instructions and the latest information.

For	cale	ndar year 2018 or tax year beginning	<del> </del>	, and en	ding		
Na	me o	foundation				A Employer identification	number -
_		CULP FAMILY FOUNDATION				13-4204919	
		and street (or P O box number if mail is not delivered to stree $\overline{ ext{OLD}}$ $\overline{ ext{ORCHARD}}$ $\overline{ ext{LANE}}$ .	t address)	·	Room/suite	8 Telephone number 952-943-23	00
Crt	y or t	own, state or province, country, and ZIP or foreign p	postal code			C If exemption application is p	
		KA BAY, MN 55331 (all that apply: Initial return	Initial return of a f	ormer public ch	arity	D 1. Foreign organizations	check here
		Final return	Amended return	•	•		
<u> </u>	Chaol	Address change	Name change		1	Foreign organizations me . check here and attach co	•
		type of organization: X Section 501(c)(3) exection 4947(a)(1) nonexempt charitable trust	Other taxable private found	ation :	041	E If private foundation state under section 507(b)(1)	
I F		arket value of all assets at end of year J Account	1 1	Accru	al .	F If the foundation is in a	• •
		Part II, col. (c), line 16)	ther (specify)			under section 507(b)(1)	
	<u>-\$</u>	820,642. (Part I, colur		1			(4)
\$ F.	anti	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 inv incor	ne	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	134,088.			KIND ATTEM	
	3	.Check		Takas Faur Faud Alaman Triton Kanas Faur Faud Alaman Triton			
	4	Dividends and interest from securities	23,116.	. 23	3,116.		STATEMENT 2
	Ι.	Gross rents		CONTRACTOR ASSESSMENT	e de la companya de l		
	1 _	Net rental income or (loss)  Net gain or (loss) from sale of assets not on line 10	31,753.				STATEMENT 1
Revenue	Ь	Gross sales price for all assets on line 6a 355,085.					
eve	7	Capital gain net income (from Part IV, line 2)		83	3,030.		
Œ	8	Net short-term capital gain			прихаркалиций Лин';т		
•	9	Income modifications Gross sales less returns	TENERAL PROPERTY OF THE PROPER				
	10a	and allowances Less Cost of goods sold		THE PROPERTY OF THE PROPERTY O			
	į.	Gross profit or (loss)				- CIARLO HINTERING HOLLAND COM	
	11	Other income			7 ( - 7 - 7 - 11	00	
	12	Total. Add lines 1 through 11	188,957.	106	,146.		
	13	Compensation of officers, directors, trustees, etc	0.		0.		
	15	Other employee salaries and wages Pension plans, employee benefits					
ses	I	Legal fees					
)en	1	Accounting fees STMT 3	1,825.	,	913.	•	912.
Ä		Other professional fees				•	
ıtive	1	Interest Taxes STMT 4	. 4 210		707.	•	0.
istra	18 19	Taxes STMT 4 Depreciation and depletion	4,219.		707.	1	V.
E.	20	Occupancy		,	<del></del>		THE PARTY OF THE PARTY OF THE PROPERTY OF THE PARTY OF TH
Adi	21	Travel, conferences, and meetings	2,112.		0.	-	0.
and	22	Printing and publications				1	,
ing	23	Other expenses STMT 5	8,857.		8,832.		25.
 Operating and Administrative Expense	24	Total operating and administrative _expenses. Add lines 13 through 23	17-, 013.	10	,45.2.		937
g	25	Contributions, gifts, grants paid	236,000.				236,000.
		Total expenses and disbursements.					,
	<u> </u>	Add lines 24 and 25	253,013.	10	,452.		236,937.
	l	Subtract line 26 from line 12:	64 056				
		Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)	-64,056.	9 F	,694.		
	•	Adjusted net income (if negative, enter -0-)	AND CONTRACTOR OF THE PROPERTY			N/A	

£ 10	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	<u> </u>
<u> </u>	ai,C	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	255,470.	26,956.	26,956.
	2	Savings and temporary cash investments			
	3	Accounts receivable >			
		Less: allowance for doubtful accounts	CONTROL OF THE TRANSPORT		
	4	Pledges receivable ▶	CARACTA SERVICE CONTRACTOR SERVICE SER	TARTON CONTROL OF THE PARTY OF	TOP : ARPHADA ATTO PROPERTY PROPERTY BEARING TO PROPERTY BEARING TO A STANDARD TO THE STANDARD
		Less: allowance for doubtful accounts	IN PERCONNECTION REPORTER FOR STANKING TO THE RESIDENCE	TAXABLE SALES AND REPLY AND	Principal and Company of the State of the St
	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			
	١				
Assets	8	Inventories for sale or use			
\ss	9	Prepaid expenses and deferred charges			
•	ı	Investments - U.S. and state government obligations	672 420	026 000	702 606
	ı	Investments - corporate stock STMT 6	672,430.	836,880.	793,686.
	C	Investments - corporate bonds		D. CHICATA ACCORDA A	
	11	Investments - land, buildings, and equipment basis		The state of the s	
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis	The state of the s		Control of the state of the sta
		Less accumulated depreciation		,	
	15	Other assets (describe ► )			
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	927,900.	863,836.	820,642.
	17				THE RESERVE AND THE PROPERTY OF THE PROPERTY O
	18	Grants payable			THE REPORT OF THE PROPERTY OF
60	19	Deferred revenue			WHOLE CHANGE THE STATE OF THE S
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			Manual Trail Control of the Control
Ē	21	Mortgages and other notes payable -			AND THE REPORT OF THE PROPERTY
Ë		Other liabilities (describe )			SENTANTANDA PER SENTENTANDA SE
	22	Other natifices (describe			
	١,,	Total linkillation (and lines 47 through 00)	0.	0.	THE REPORT OF THE PROPERTY OF
_	23	Total liabilities (add lines 17 through 22)	0.	· ·	AMORANI, ENERGE SIN BERKERAL RUSAR SERVICE SER
		Foundations that follow SFAS 117, check here			THE WAY AND THE CONTROL OF THE CASE OF THE
ç	١	and complete lines 24 through 26, and lines 30 and 31.			DESCRIPTION CONCERNMENTS NAMED IN A SECOND PROPERTY OF THE PRO
j Ce	24	Unrestricted			
Fund Balanc	25	Temporarily restricted			Principals and the name of the state of the
ã	26	Permanently restricted			CHAPTUNE AND
Ĕ	ľ	Foundations that do not follow SFAS 117, check here			AND
	1	and complete lines 27 through 31.		_	THE PROPERTY OF THE PROPERTY O
ts or	27	Capital stock, trust principal, or current funds	0.	0.	
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	927,900.	863,836.	
ž	30	Total net assets or fund balances	927,900.	863,836.	
_	l	•			
-	31	Total liabilities and net assets/fund balances	927,900.	863,836.	
	*********	Applyois of Changes in Not Assets or Fund P			
1 3	art	Analysis of Changes in Net Assets or Fund B	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		at agree with end-of-year figure reported on prior year's return)		1	927,900.
	•	amount from Part I, line 27a		2	-64,056.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		- 3	863,844.
		eases not included in line 2 (itemize) PRIOR PERIOD A	D.TIISTMENT	. 5	8.
		· · · · · · · · · · · · · · · · · · ·		6	863,836.
6	rotal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumni (D), iine 30		Form <b>990-PF</b> (2018)

П	Part IV Capital Gains a	and Lo	sses for Tax on In	vestmen	t Income						
			of property sold (for exar or common stock, 200 shs		ite,	`P	How a - Puro - Don		(c) Date (mo., d	acquired lay, yr.)	(d) Date sold (mo., day, yr.)
1	a PUBLICLY TRADEI	D SEC	URITIES			Ť		P			
_	b CAPITAL GAINS I	DIVID	ENDS								
	C		_								
Ξ	d		-								
_	e										
	(e) Gross sales price	(f) D	epreciation allowed (or allowable)		st or other basis expense of sale					ain or (loss s (f) minus (	
	a 354,585.				272,05	5.					82,530.
	b 500.							· · · · · · · · · · · · · · · · · · ·			500.
_	С		`								
_	d										
_	e				10/04/00						
_	Complete only for assets showing									iol. (h) gain not less thai	
_	(i) FMV as of 12/31/69		) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any			coi.		(from col. (	h))
_	a										82,530.
_	b										500.
_	С					_					
_	d										
_	<u>e</u>					_					
2	Capital gain net income or (net cap	ortal loss)	If gain, also enter If (loss), enter -0-	ın Part I, line ın Part I, line	7 7	}	2				83,030.
3	Net short-term capital gain or (loss	s) as defin	ed in sections 1222(5) and	d (6):							
	If gain, also enter in Part I, line 8, o			- (-)-		] [					
_	If (loss), enter -0- in Part I, line 8					Д	3	L		N/A	
ь.	<del>:</del>		ection 4940(e) for					nent inc	ome		
(F	or optional use by domestic private	foundatio	ns subject to the section 4	910(a) tax on	i net investment in	como	c.)				
If	section 4940(d)(2) applies, leave th	ıs part bla	nk.								
W	as the foundation liable for the secti	ion 4942 t	ax on the distributable am		•	od?					Yes X No
_	"Yes," the foundation doesn't qualify										
_	Enter the appropriate amount in ea	ach colum	<del></del>	Structions be	tore making any ei				T		(d)
	Base periód years		(b) Adjusted qualifying dist	rihutions	Net value of no	(c) nchai		-use assets			utión ratio
_	Calendar year (or tax year beginnin 2017	ig in)		1,440.	1101 14140 01110			5,219		(col. (b) div	ided by col. (c)) • 231821
_	2017			6,912.	· · · · · · · · · · · · · · · · · · ·		82	8,494	<del>' </del>		.153184
-	2015			0,495.				7,395			.303130
_	2013	+		8,112.				4,565			.151802
_	2013			3,508.	***************************************			3,659			.313744
_	2010	<u> </u>		373000				3,033	1	<del></del>	1323,12
2	Total of line 1, column (d)								2		1.153681
	Avorage distribution ratio for the 5	voor base	o period - divide the total o	n line 2 by 5.0	O, or by the numbe	er of y	vears		<u> </u>		
Ĭ	the foundation has been in existen	•	•		.,,		,		3		.230736
			•								
4	Enter the net value of noncharitable	e-use asse	ets for 2018 from Part X, I	ine 5					4		891,375.
			·								
5	Multiply line 4 by line 3								5		205,672.
	, ,									·	<del> </del>
6	Enter 1% of net investment income	e (1% of F	art I, line 27b)						6		957.
		•	•								
7	Add lines 5 and 6								7		206,629.
8	Enter qualifying distributions from	-							8		236,937.
	If line 8 is equal to or greater than a See the Part VI instructions.	line 7, che	ck the box in Part VI, line	1b, and comp	lete that part using	g a 1º	% tax	rate.			

يرا:	Excise lax based on investment income (Section 494	υ(a), 4	1940(b), 4940(e), or 4	948 -	· see inst	ructio	ns)	
18	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and e			SEASON TO				
	Date of ruling or determination letter: (attach copy of letter if new			CHANGE.				
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	<b>►</b> [X]	and enter 1%	1		9	57.	
	of Part I, line 27b			THE LEAVING	STATE SET PROPERTY OF THE SET OF	CANAL SALES		
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 49		• •			4.11		
	, , , , , , , , , , , , , , , , , , , ,	hers, en	ter -0-)	2			0.	
3	Add lines 1 and 2			3		9	57.	
4	Subtrtle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, o	thers, er	iter -0-)	4			0.	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			5 388 686 687	MARRY E BARK JENNYKÉM	<u>ک</u> ۱۹۹۹: المناسخة	57.	
6	Credits/Payments:	1 _ 1	2 240		STATE STATE OF THE			
	2018 estimated tax payments and 2017 overpayment credited to 2018	6a	2,240.		Marchael Control			
	Exempt foreign organizations - tax withheld at source	6b	0.	KEEL STATE	SHE REALES. ISANG - AND SHE REALES - AND SHE			
	: Tax paid with application for extension of time to file (Form 8868)	6c	0.		Particular de la company de la			
	I Backup withholding erroneously withheld	6d	<b>U</b> •	7		2,2	<i>1</i> 0	
_	Total credits and payments. Add lines 6a through 6d  Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	obod		8		2,2	0.	
8	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	ciiea		9			<del>••</del>	
9	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			10	-	1,2	83.	
	Enter the amount of line 10 to be: Credited to 2019 estimated tax		1,283. Refunded	11		1,2	0.	
	it VIIA Statements Regarding Activities		1,200 i Relative	L! •I			<del></del>	
	During the tax year, did the foundation attempt to influence any national, state, or local legis	lation or	did it participate or intervene	ın		Yes	No	
	any political campaign?	14.1011 01	,		1a		X	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos	ses? See	the instructions for the defin	rtion	16		X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of							
	distributed by the foundation in connection with the activities.				CHANGE CHANGE CHANGE CHANGE CHANGE CHANGE			
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:			E-11/2			
	(1) On the foundation. > \$ 0. (2) On foundation managers		0.		0 mgr 5 1 2 2 mg 7 1 mg 2 mg 2 mg 7 1 mg 2 mg 2 mg 2 mg 2 mg 2 mg 2 mg 2 mg 2			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expendi		imposed on foundation	•	148 31 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3			
	managers. ► \$ 0.				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		111000000	
2	Has the foundation engaged in any activities that have not previously been reported to the IF	RS?			2		X	
	If "Yes," attach a detailed description of the activities.							
3	Has the foundation made any changes, not previously reported to the IRS, in its governing in	nstrume	nt, articles of incorporation, o	r	MEGNET AND			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3	<u> </u>	X	
	Did the foundation have unrelated business gross income of \$1,000 or more during the year	L)			,_ 4a		X	
	If "Yes," has it filed a tax return on Form 990-T for this year?			N	/A 4b	<u> </u>	<del> </del>	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5	192 alazo-12.	X	
_	If "Yes," attach the statement required by General Instruction T.				PAGE STATE			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied er	ther:			a Mariante de la companya de la comp			
	By language in the governing instrument, or			1.	2. 10 mg / 10		Market And	
	By state legislation that effectively amends the governing instrument so that no mandatory	y airection	ons that conflict with the state	iaw	british.			
_	remain in the governing instrument?	1-4- D	.u1 /-\4 D4\0/		6	X	<b></b>	
′	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comp	iete Pan	11, col. (c), and Part XV		7		(INCOME)	
٥.	Enter the atotac to which the foundation reports or with which it is registered. Can instruction				ANT THE STATE OF T			
oa	Enter the states to which the foundation reports or with which it is registered. See instruction MN	iis. –			## 100 m			
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Ai	Horney (	General (or designate)		A CONTROL OF THE PROPERTY OF T			
Ų	of each state as required by General Instruction G? If "No," attach explanation	morney (	aonorai (or designate)		8b	X		
9	Is the foundation claiming status as a private operating foundation within the meaning of se	ction 49.	42(1)(3) or 4942(1)(5) for cale	ndar				7
•	year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," com				9		X	4
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedu				. 10	+	X	
·•		ung 1		•		90-PF		
							, /	

	1990-PF (2018) THE CULP FAMILY FOUNDATION 13-420	<u>4919</u>	<u>,                                    </u>	Page
P	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 person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► KIM A. CULP  Telephone no. ► 952-9			
	Located at ► 20 OLD ORCHARD LANE, TONKA BAY, MN ZIP+4 ►5	<u>5331</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		_ ▶	ا ٠
	and enter the amount of tax-exempt interest received or accrued during the year	N	I/A	
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank,		Yes	
	securities, or other financial account in a foreign country?	16	1	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country	E-STEEL STEEL		-
Ę.	irt-VII-Bi Statements Regarding Activities for Which Form 4720 May Be Required	I riatha a		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	During the year, did the foundation (either directly or indirectly):	FILETY FATT		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			***
	a disqualified person?			12-721
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Marie Company		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		新邊	
	(5) Transfer any income or assets to a disqualified person (or make any of either available	ENTERNAL PROPERTY OF THE PARTY		
	for the benefit or use of a disqualified person)?	OC 15	्रम् - । 	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		Gan, see	GENT TEXT
	If the foundation agreed to make a grant to or to employ the official for a period after	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	termination of government service, if terminating within 90 days.)	MARTINET TO THE PARTY OF THE PA		
0	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		ACTION.	THE ST
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions  N/A	1b	ANARTYSS:	ate water
	Organizations relying on a current notice regarding disaster assistance, check here	AND TANK AND TANK AND TANK BARBARAN		
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	The state of		
	before the first day of the tax year beginning in 2018?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	WEARY OF THE STREET		
_	defined in section 4942(j)(3) or 4942(j)(5)):	999759899F	144	
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	AND THE PARTY OF T		
	before 2018?  Yes X No			
	If "Yes," list the years \( \bigs_{	ANTINESS OF		11111111
U		ENGLANCES	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	FREE STATE
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			#KI
	statement - see instructions.)  N/A	2b	jegggalijág	an Farance
Ü	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	EL VECTE		Series Co
20	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			the second
Jä	· · · · · · · <u> </u>			
	during the year?  Yes X No		<b>大声流</b>	
0	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after	A LONG TO SERVICE AND A SERVIC		
	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,		e de	
Ac	Form 4720, to determine if the foundation had excess business holdings in 2018.)  N/A	3b	$\longmapsto$	· Vor
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	dizerrken.	X
Q	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 2018?	4b	ı I	X

Part VII B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)	<u> </u>	
5a During the year, did the foundation pay or incur any amount to:			21900	Yes No	5
(1) Carry on propaganda, or otherwise attempt to influence legislation (sectio	n 4945(e))?	Y	es 🗶 No		1
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir	ectly,	100 mg		
any voter registration drive?		Y	es 🗶 No 🖟	THE PARTY OF THE P	Pill Pr
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y	es 🗶 No 📳		1
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			AND STREET, ST	
4945(d)(4)(A)? See instructions		Y	es 🗶 No 📗		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	, or educational purposes, or t				
the prevention of cruelty to children or animals?		Y	es 🗶 No 🏻	ENGLAND TO THE PROPERTY OF THE	i
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify un	der the exceptions described	ın Regulations	Į,	100 100 100 100 100 100 100 100 100 100	1
section 53.4945 or in a current notice regarding disaster assistance? See instr			N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check				ACCOUNTS OF THE PROPERTY OF TH	1
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f					4
expenditure responsibility for the grant?	N	I/A 🔲 Y	es 🔛 No 🔓		1
If "Yes," attach the statement required by Regulations section 53.4945-5(d).				AND	1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Y	es 🗶 No 📱		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		<u> </u>	6b X	
If "Yes" to 6b, file Form 8870.		<u> </u>			i i
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y <sub>0</sub>	es 🗶 No 📱		į,
b If "Yes," did the foundation receive any proceeds or have any net income attribute.			N/A	7b	-0
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	61,000,000 in remuneration of		[#] [#		tivit.
excess parachute payment(s) during the year?	F		es 🗶 No 🖟	Salata de la secución	1
Part: VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, roundation Ma	ınagers, nıgnı	<i>,</i>		
1 List all officers, directors, trustees, and foundation managers and t	heir compensation.				_
A Maria and adding	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense	_
(a) Name and address	hours per week devoted to position	(if not paid, enter -0-)	and deferred compensation	account, other allowances	ı
	PRESIDENT				_
20 OLD ORCHARD LANE					
ronka bay, mn 55331	0.00	0.	0.	0.	•
	TREASURER				
20 OLD ORCHARD LANE					
TONKA BAY, MN 55331	0.00	0.	0.	0.	•
	DIRECTOR				
5320 ALDRICH AVENUE			_	_	
MINNEAPOLIS, MN 55419	0.00	0.	0.	0.	•
2 Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	ontor "NONE "			_
		enter NONE.	(d) Contributions to	(e) Expense	_
(a) Name and address of each employee paid more than \$50,000	(b) Trtle, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other allowances	r
NONE	devoted to position		compensation	allowalices	_
NONE					
			~		_
					_
				ĺ	
				<del></del>	-
<del></del>					
				<u> </u>	-
Total number of other employees paid over \$50,000		L-,, ,,_, -,-	. •	0	5
To the state of th			Form	<b>990-PF</b> (2018	_

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All other program-related investments. See instructions.

Total. Add lines 1 through 3

(Zait(X)) Willington investment No	· · · · · · · · · · · · · · · · · · ·		art Foreign tour		e instructions.)
1 Fair market value of assets not used (or held for		haritable, etc., purposes;			
a Average monthly fair market value of securities	S			1a	857,328. 47,621.
b Average of monthly cash balances	•			1b	47,621.
c Fair market value of all other assets				1c	
d Total (add lines 1a, b, and c)				1d	904,949.
e Reduction claimed for blockage or other factor	's reported on lines 1a and		_		
1c (attach detailed explanation)		1e	0.		
2 Acquisition indebtedness applicable to line 1 a	ssets			2	0.
3 Subtract line 2 from line 1d				3	904,949.
4 Cash deemed held for charitable activities. Ent	er 1 1/2% of line 3 (for greater a	mount, see instructions)		4	13,574.
5 Net value of noncharitable-use assets. Subtr	act line 4 from line 3. Enter here	and on Part V, line 4		5	891,375.
6 Minimum investment return. Enter 5% of line				6	44,569.
Part:XI Distributable Amount (see foreign organizations, check here			ng foundations an	d certain	
1 Minimum investment return from Part X, line 6		<u>-</u>	·	1	44,569.
2a Tax on investment income for 2018 from Part		2a	957.		
b Income tax for 2018. (This does not include th		2b			
c Add lines 2a and 2b	·			2c	957.
3 Distributable amount before adjustments. Sub-	tract line 2c from line 1			3	43,612.
4 Recoveries of amounts treated as qualifying di			ļ	4	0.
5 Add lines 3 and 4				5	43,612.
6 Deduction from distributable amount (see insti	ructions)		•	6	0.
7 Distributable amount as adjusted. Subtract lin	•	on Part XIII. line 1	•	7	43,612.
Part XIIi Qualifying Distributions			<del></del>	<del> '</del>	
1 Amounts paid (including administrative expens	ses) to accomplish charitable, et	c., purposes:		<b>强聚</b>	
a Expenses, contributions, gifts, etc total from	Part I, column (d), line 26			1a	236,937.
<b>b</b> Program-related investments - total from Part	IX-B			1b	0.
2 Amounts paid to acquire assets used (or held to	or use) directly in carrying out c	harıtable, etc., purposes	Ţ	2	
3 Amounts set aside for specific charitable proje	cts that satisfy the:				<del></del>
a Suitability test (prior IRS approval required)			ſ	3a	
<b>b</b> Cash distribution test (attach the required sche	:dule)			3b	
4 Qualifying distributions. Add lines 1a through	3b. Enter here and on Part V, lir	ne 8; and Part XIII, line 4	Ī	4	236,937.
5 Foundations that qualify under section 4940(e)	for the reduced rate of tax on n	et investment	Ţ		
income. Enter 1% of Part I, line 27b			1	5	957.
6 Adjusted qualifying distributions. Subtract lin	e 5 from line 4		Ţ	6	957. 235,980.
Note: The amount on line 6 will be used in Par	t V, column (b), in subsequent y	ears when calculating whether	the foundation q	ualifies for the	
4940(e) reduction of tax in those years	•	-	•		

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Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount	for 2018 from Part XI,		AND THE RESERVE OF THE PROPERTY OF THE PROPERT		
/ line 7		AND A THE RESIDENCE OF THE PROPERTY OF THE PRO	CARRIED A CONTRACTOR OF THE CARREST CONTRACTOR WAS A CARREST CONTRACTOR OF THE CARREST CONTRACTO	TO RESENT AND ADDRESS OF THE PROPERTY OF THE P	43,612.
2 Undistributed income, if a	ny, as of the end of 2018				
a Enter amount for 2017	7 only			0.	
<b>b</b> Total for prior years:			0.		
3 Excess distributions c	arryover, if any, to 2018:	AND THE CONTRACT OF THE PROPERTY OF THE PROPER			rea faresenesenesenesenesenesenesenesenesenese
a From 2013	104,033.	BANN HERBETERE XRE ZAKE, KREZDRE TYKKERT ZAKEREK BANDES GETTAR LEBE TYKETEK TYKETER KREZDREKEN BANDES GETTAR KREZDREK ETTERE FALLEN BELLEME BANDES ETTERE GETTAR KREZDREK ETTERE FALLEN BELLEME BANDES BANDES KREZDREK BANDES KREZDREK BENDES BANDES BANDES BANDES KREZDREK BANDES KREZDREK BENDES BANDES BANDES BANDES KREZDREK BANDES KREZDREK BENDES BANDES BANDES BANDES BANDES BANDES KREZDREK BENDES BANDES	The state of the s	CHILDREN CONTROL OF THE CONTROL OF T	AND REPRESENTATIONS OF THE STATE OF T
<b>b</b> From 2014	54,314.				THE REST OF THE PROPERTY OF TH
c From 2015	185,185.		AND AND THE PROPERTY OF THE PR	THE PRINCIPAL AREA THE AREA TO A THE AREA TO	THE THE PERSON OF THE PERSON O
<b>d</b> From 2016	86,430.		AND	THE REPORT OF THE PERSON OF TH	
e From 2017	178,143.	CHARLE CHECKE ALL WAS AN AND AND AND AND AND AND AND AND AND	Gentre for det terrestelle en en en la des la	AND THE THREE TRANSPORTER AND THE THREE THE THREE THRE	NAME AND THE PROPERTY OF THE P
f Total of lines 3a throu	gh e	608,105.			
4 Qualifying distribution	s for 2018 from	Secretary and antique of the secretary o	THE RESERVE THE PERSON OF THE		The service of the se
Part XII, line 4: ►\$_	236,937.	INTERPOSED TO THE TOTAL T	CONTROL TREE TO THE TOTAL PROPERTY OF THE TREE TO THE TREE TO THE TREE TO THE TREE TREE TREE TREE TREE TREE TREE		THE AND THE STATE OF THE STATE
a Applied to 2017, but n	ot more than line 2a	ACTUAL OF COLUMN AND ACTUAL OF THE STATE OF	rykel nictorpho komerckerphologische eine bei eine eine eine eine eine eine	0.	THE RECORD OF THE PROPERTY OF
<b>b</b> Applied to undistribute	ed income of prior				
years (Election require	ed - see instructions)	STATE AND A STATE OF THE PROPERTY OF THE PROPE	. 0.		
c Treated as distribution	is out of corpus				PRINCIPLE PRINCIPLE DE LA CONTRACTION DEL CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRA
(Election required - se	e instructions)	0.	AND THE CONTRACT OF THE CAME OF THE CONTRACT O		
d Applied to 2018 distrit	,		Trigoria de la compressión de		43,612.
e Remaining amount dis	stributed out of corpus	193,325.			
5 Excess distributions carry (If an amount appears in comust be shown in column	olumn (d), the same amount	0.	Samarina (1904) Harana katana (1904)		
6 Enter the net total of indicated below:	each column as	,			
a Corpus Add lines 3f, 4c, a	and 4e Subtract line 5	801,430.			ACCION ENGINEER SERVICE SERVIC
b Prior years' undistribu	ited income. Subtract		,	TARLA MANELAN ETANES (NABRANA) PROBLEM (NA PARENA P	
line 4b from line 2b	•		0.		
c Enter the amount of pi		15 and the state of the present the state of		THE PRODUCTION OF THE PRODUCT OF THE	Angryd Pater Berger en en en begreit 'en eine beide Ligher f'erfer en
undistributed income to deficiency has been is:		A LI APPET TELEMANAMENTEN PARENTE AL LI LA TERRE BETTAT TELEMAN PER BENERAL AREA SERVICE AND ANTONIO TELEMAN PER BENERAL PER BENERAL AREA SERVICE AND ANTONIO TELEMAN PER BENERAL PER BENERAL PER BENERAL AND ANTONIO TELEMAN PER BENERAL		CONTROL OF THE STATE OF T	
the section 4942(a) ta					THE TAX OF THE PROPERTY OF THE
assessed		ATTACHER OF THE PROPERTY OF TH		ADDROUGH TORONG AND A PARTY PARTY AND A PA	TARABAN AN ANTANAN PERSONAL PROPERTY OF AN ANTANAN PERSONAL PROPERTY OF AN ANALYSIS OF AN
d Subtract line 6c from I					
amount - see instruction		PROLICEMENT OF SERVICE SERVICES SERVICE	U •	A THE CONTRACTOR OF T	THE STREET OF SECURE AND ASSESSED FOR THE SECURE OF THE SE
e Undistributed income		PROMING LEARNING CHRISTIAN CONTROL OF THE CONTROL OF T	Patrian dannar andraman transler transler than at the sea of the language transler transler transler than at the sea of the language transler trans		TICHTAN THE THE PROPERTY OF TH
4a from line 2a. Taxab f Undistributed income	•		(Constituent and accompanies of the constituent of	U • Haristanian ender ender ender ender	
	e 1. This amount must	CARTOT WARLAND BY STANKING STA	AND THE STATE OF T	ALTERNATION OF THE TANK AND THE TANK AND THE TRANSPORTED TO THE TANK AND THE TANK A	
be distributed in 2019	e i. iiiis amount must			THE RESIDENCE OF THE PROPERTY	0.
7 Amounts treated as dis	stributions out of				
corpus to satisfy requi		,			
section 170(b)(1)(F) o	· · · · · ·	•		TANAN	
may be required - see		.0.		A THE STATE OF THE	
8 Excess distributions ca		<b>-</b>	A THE ATTERNATION OF THE PROPERTY OF THE PROPE	CALADA CAME IN LANGUAGE COMMINISTRATION OF THE CALADA COMMINISTRAT	AND THE PROPERTY OF THE PROPER
not applied on line 5 o	•	104,033.			THE PARTY OF THE P
9 Excess distributions of					CAPPER VALABLE VALUE CONTROL OF THE
Subtract lines 7 and 8,		697,397.	CALLED THE	PROGRESS OF THE PROGRESS OF TH	CORNEL DE CONTRACTOR DE CONTRA
10 Analysis of line 9:					
a Excess from 2014	54,314. 185,185.	REGILITATOR ANGED TO A STATE OF THE STATE OF			A CONTRACTOR OF THE CONTRACTOR
<b>b</b> Excess from 2015	185,185.	THE PERSON NAMED OF T		THE PROPERTY OF THE PROPERTY O	
c Excess from 2016	86,430.	THE PROPERTY OF THE PROPERTY O	AND THE RESERVE AND THE RESERV		
d Excess from 2017	178,143.				
e Excess from 2018	193,325.				Form <b>990-PF</b> (2018)

<del></del>	P FAMILY FO				204919 Page 1
Part XIV Private Operating F				N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective fo		-	. ▶ └	T	
<b>b</b> Check box to indicate whether the foun		ing foundation described		4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	4115545	Prior 3 years		
income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
investment return from Part X for					
each year listed					<u> </u>
<b>b</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		İ			
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					<del></del>
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter	<b> </b>			<del>                                     </del>	
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:		<u> </u>			
(1) Total support other than gross					
investment income (interest,	<i>Y</i>				
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					
organizatjøfis 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 Info	rmation (Comple	ete this part only	if the foundation	n had \$5,000 or n	nore in assets
at any time during t	he year-see inst	ructions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh	o have contributed more	than 2% of the total cor	ntributions received by the	e foundation before the cl	ose of any tax
year (but only if they have contributed n	nore than \$5,000). (See s	section 507(d)(2).)			
SEE STATEMENT 7					
b List any managers of the foundation wh			ı (or an equally large portı	on of the ownership of a	partnership or
other entity) of which the foundation ha	s a 10% or greater intere	SL			
NONE					
2 Information Regarding Contribut					
Check here X if the foundation of					quests for funds. If
the foundation makes gifts, grants, etc.,		<del></del>			
a The name, address, and telephone num	ber or email address of the	he person to whom appl	ications should be addres	ssed:	
<b>b</b> The form in which applications should b	e submitted and informa	tion and materials they	should include:		`
c Any submission deadlines:				<u>,                                      </u>	<del></del> ,
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields	s, kinds of institutions, or	other factors:	
		,			

Form 990-PF (2018) THE CULP FAMILY FOUNDATION 13-4204919 Page 11 Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to **Amount** any foundation manager status of Name and address (home or business) or substantial contributor recipient a Paid during the year AIM HIGHER FOUNDATION 501(C)(3) CHARITABLE 10350 BREN RD W MINNETONKA, MN 55343 2,500. ASCENSION CATHOLIC SCHOOL 501(C)(3) CHARITABLE 1726 N DUPONT AVE MINNEAPOLIS, MN 55411 10,000. BRIDGING 501(C)(3) CHARITABLE 201 W 87TH STREET BLOOMINGTON, MN 55420 15,000. CATHOLIC CHARITIES 501(C)(3) CHARITABLE 1200 S 2ND AVE MINNEAPOLIS, MN 55403 5,000. COLLEGE OF SAINT BENEDICT 501(C)(3) CHARITABLE 31802 COUNTY ROAD 159 COLLEGEVILLE, MN 56321 16,000. SEE CONTINUATION SHEET(S) 236,000. ▶ 3a Total b Approved for future payment NONE

**▶** 3b

Total

# Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income	Exclu	uded by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
	Code		1000		
a	ļ				
D		······································	<del> </del>		<del></del>
<u> </u>			<del> </del>		
d					
e	<u> </u>				<del></del>
f	<u></u>				
g Fees and contracts from government agencies			ļ		
2 Membership dues and assessments			L		
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	23,116.	
5 Net rental income or (loss) from real estate:	_				-
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	31,753.	
9 Net income or (loss) from special events				32,7331	
10 Gross profit or (loss) from sales of inventory	<del></del>		$\vdash$		
11 Other revenue:	<del></del>				·
a			<u> </u>		
	<b> </b>		<del> </del>		
·	ļļ			1	
d					
e				F.4.060	
12 Subtotal. Add columns (b), (d), and (e)	<u> </u>	0.		54,869.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	54,869.
(See worksheet in line 13 instructions to verify calculations.)		<u>.</u> .			
Part XVI-B Relationship of Activities to	the Acco	omplishment of Ex	emp	t Purposes	
Line No. Explain below how each activity for which incom			contrit	outed importantly to the accom	plishment of
the foundation's exempt purposes (other than b	y providing fui	nds for such purposes).			
				•	
		<u></u>			
	· · ·				
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<del></del>				<del></del>	
					<del></del>
	<del></del>	····		<u> </u>	

# Form 990-PF (2018) Part XVII Ir Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

1	Did the	organization directly or indi	rectly engage in any	of the following	ng with any other organization	n described in sect	ion 501(c)	Ye	s No
	(other th	nan section 501(c)(3) organ	nizations) or in sectic	n 527, relatin	g to political organizations?			" " 123	
a	Transfer	s from the reporting found	ation to a noncharita	ble exempt or	ganization of:			A. yamin a za u	
	(1) Cas	h						1a(1)	X
	(2) Oth	er assets						1a(2)	X
b	Other tra	ansactions:						167 7 3 3	
	(1) Sale	es of assets to a noncharita	ble exempt organiza	tion				1b(1)	X
	(2) Pur	chases of assets from a no	ncharitable exempt o	organization				1b(2)	X
	(3) Ren	ital of facilities, equipment,	or other assets					1b(3)	X
	(4) Reir	mbursement arrangements	i					1b(4)	X
	(5) Loa	ns or loan guarantees						1b(5)	X
	( <b>6</b> ) Peri	formance of services or me	anbership or fundral:	sing solicitatio	ons			1b(6)	X
Ü	Sharing	of facilities, equipment, ma	alıng lists, other asse	ets, or paid em	ployees			Ic	X
d	If the an	swer to any of the above is	"Yes," complete the f	following sch	edule. Column (b) should alv	vays show the fair r	narket value of the goods, of	ther assets,	
					ed less than fan market valu	e In any transactior	or sharing arrangement, sh	ow in	
	column	(d) the value of the goods,	other assets, or serv	ices received.					
(a)∟	ne no	(b) Amount involved	(c) Name of		e exempt organization	(d) Description	of transfers, transactions, and si	haring arrange	ments
				N/A					
				· · · · · · · · · · · · · · · · · · ·					
					· . ·				
					··-··			_	
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_			1 - 151 - 1 - 1			<u> </u>			
			=		or more tax-exempt organiz	zations described		٦., ٢	<b>ਦ</b> ]
		n 501(c) (other than section		ction 527?				_ Yes L	X No
D_	IT "Yes," (	complete the following sche (a) Name of org			(h) Type of organization		(c) Description of relationship		
		N/A	<u>ailizauuli</u>		(b) Type of organization	·· · · · · · · · · · · · · · · · · · ·	(c) Description of relationship	ıþ	
		N/A							
							<del></del>	- <del></del>	<del></del>
									<del></del>
	Unde	er penalties of perjupy. I declare t	that I have examined this	s return, includir	g accompanying schedules and	statements, and to the	best of my knowledge		
Sig	ا مـما				n taxpayer) is based on all informa		has any knowledge May return	the IRS discus	parer
He					191319	PRESI		n below? See	
		nature of office or thistee	<u> </u>	lack -	Date	Trtle		L Yes L	No
		Print/Type preparer's na	ime	Preparer's s		Date	Check If PTIN		
		- Amerype property of the		( )			self- employed		
Pai	id	STACY RUBS	AM	1	: <b>1</b>	SISIA		51411	5
	parer	L		NALLEN	LLP	-1-17	Firm's EIN ▶ 41-07		
	e Only				7		I SEM P EL UT	, <del>-</del> -	
			O SOUTH S	IXTH S	TREET, SUITE	300	<del>                                     </del>		
			NNEAPOLIS				Phone no. 612-37	6-450	0
		<u> </u>		<u>,, -</u>			<u> </u>	m <b>990-P</b>	
							. •.		//

Part XV Supplementary Information 3 Grants and Contributions Paid During the Y			······································	
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	Amount
CRISTO REY JESUIT HIGH SCHOOL		501(C)(3)	CHARITABLE	
2924 S 4TH AVE			CHARTRABLE	
MINNEAPOLIS, MN 55408				2,500
EVANS SCHOLARS FOUNDATION		501(C)(3)	CHARITABLE	
1 BRIAR ROAD				5 000
GOLF, IL 60029			4,	5,000
FRESH ENERGY		501(C)(3)	CHARITABLE	
408 ST. PETER STREET SUITE 220				
ST. PAUL, MN 55102				2,000
HOLY FAMILY CATHOLIC HIGH SCHOOL		501(C)(3)	CHARITABLE	
8101 KOCHIA LN VICTORIA, MN 55386				5,000
				3,000
1			,	
HUMOR TO FIGHT THE TUMOR FOUNDATION	,	501(C)(3)	CHARITABLE	
16404 EAGLE RIDGE DRIVE MINNETONKA, MN 55345				1,500
MAYO CLINIC		501(C)(3) ·	CHARITABLE	
200 FIRST ST. SW.				
ROCHESTER, MN 55905				1,000
MINNEAPOLIS HEART INSTITUTE		501(C)(3)	CHARITABLE	
POUNDATION		_		
920 E 28TH ST #100				
MINNEAPOLIS, MN 55407				25,000
PRODEO ACADEMY		501(C)(3)	CHARITABLE	
1555 40TH AVE NE MINNEAPOLIS, MN 55421				5,000.
,			•	
SABES JEWISH COMMUNITY CENTER		501(C)(3)	CHARITABLE	
4330 CEDAR LAKE RD S				
MINNEAPOLIS, MN 55416				1,000
ST. JOHN'S UNIVERSITY		501(C)(3)	CHARITABLE	
31802 COUNTY ROAD 159				
COLLEGEVILLE, MN 56321	1			2,500.

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
THE BASILICA OF SAINT MARY		501(C)(3)	CHARITABLE	
1600 HENNEPIN AVE				
MINNEAPOLIS, MN 55403				5,000
NGO DEMBERM		501(C)(3)	OUTAD TOWARD IS	
THE RETREAT 1221 WAYZATA BLVD E		B01(C)(3)	CHARITABLE	
WAYZATA, MN 55391			•	65,000
THEATER LATTE DA		501(C)(3)	CHARITABLE	
1170 15TH AVE SE MINNEAPOLIS, MN 55414	•			25,000
		•		
TWINS CITIES HABITAT FOR HUMANITY		501(C)(3)	CHARITABLE	
1954 UNIVERSITY AVE A	,			10 000
ST. PAUL, MN 55104				10,000
WILLIAM SHEID FUND FOR A BETTER		501(C)(3)	CHARITABLE,	
FUTURE 7730 COUNTYSIDE DR				
MINNEAPOLIS, MN 55438			-	5,000
	!			
YOUTH FRONTIERS 6009 EXCELSIOR BLVD		501(C)(3)	CHARITABLE	
MINNEAPOLIS, MN 55416		-	, ,	10,000
A-T CHILDREN'S PROJECT 5300 W HILLSBORO BLVD STE 105		501(C)(3)	CHARITABLE	
COCONUT CREEK, FL 33073				2,500
BOOKS FOR AFRICA		501(C)(3)	CHARITABLE	
370 SELBY AVE, SUITE 305 ST. PAUL, MN 55102				1,000
			_	
DIVISION OF INDIAN WORK		501(C)(3)	CHARITABLE	
1001 E LAKE ST				
MINNEAPOLIS, MN 55407				2,000
EVERWOOD FARMSTEAD FOUNDATION		501(C)(3)	CHARITABLE	•
801 WASHINGTON AVE N, APT 317				
MINNEAPOLIS, MN 55401	1	<u> </u>		500
Total from continuation sheets	<u> </u>	-		

idual, produce to status of recipient status o	Purpose of grant or contribution  CHARITABLE  CHARITABLE  CHARITABLE	Amount 2,00
501(C)(3)	CHARITABLE	2,00
501(c)(3)	CHARITABLE	
501(c)(3)	CHARITABLE	
		1,00
501(C)(3)	CHARITABLE	1,00
501(C)(3)	CHARITABLE	
•		5,00
		,
501(C)(3)	CHARITABLE	
		50
501(C)(3)	CHARITABLE	
		2,50

### 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 for the latest information.

OMB No. 1545-0047

2018

Name of the organization **Employer identification number** THE CULP FAMILY FOUNDATION 13-4204919 Organization type (check one): Filers of: Section: ] 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF · 4947(a)(1) nonexempt chantable 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 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 (entering "N/A" in column (b) instead of the contributor name and address), 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, chantable, 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) (2018)

Employer identification number

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13-4204919

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	KIM AND CAROL CULP  20 OLD ORCHARD LANE  TONKA BAY, MN 55331	\$ 110,330.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	KIM AND CAROL CULP  20 OLD ORCHARD LANE  TONKA BAY, MN 55331	\$\$3,758.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	•	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	1	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	. (b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
· ·		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) . No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d). Type of contribution
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)

Name of organization

**Employer identification number** 

## THE CULP FAMILY FOUNDATION

13-4204919

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	1,240 SHARES HEARTLAND FINANCIAL USA INC		<del>- v.</del>
		\$	09/10/18
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	425 SHARES HEARTLAND FINANCIAL USA INC		
		\$\$	07/24/18
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	· · · · · · · · · · · · · · · · · · ·	\$	
(a) - No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

Schèdule B (Form 990, 990-EZ, or 990-PF) (2018) Page 4 Name of organization **Employer identification number** THE CULP FAMILY FOUNDATION 13-4204919 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 (a) No. from (b) Purpose of gift (c) Use 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 (b) Purpose of gift (d) Description of how gift is held (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF	G.	AIN OR	(LOSS)	FROM	SALE	OF A	SSETS	· · · · · · · · · · · · · · · · · · ·	ST	ATEMENT	1
(A) DESCRIPTION OF PRO	PERTY						ANNER QUIRED		ATE JIRED	DATE	SOLI
PUBLICLY TRADED SE	CURIT	IES				PUR	CHASED				
(B) GROSS SALES PRI	.С.Е.	COS	C) T OR BASIS	EX	(D) PENSE SALE	OF	(E DEPR		GATI	(F) N OR LO	, SS
	585.		323,332.	<u> </u>		0.		0.			253.
CAPITAL GAINS DIVI	DENDS	FROM	PART IV						-		500.
TOTAL TO FORM 990-	PF, P.	ART I,	LINE 6A	4						31,	753.
700W 000 DF					OM PD	OM GE	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·	
	G	VIDEND ROSS MOUNT	S AND IN  CAPI  GAI  DIVID	TAL INS	RI	OM SEC	E NE	ES (B) T INVE	EST-	ATEMENT (C) ADJUS NET IN	TED
FORM 990-PF  SOURCE UBS	G: A)	ROSS	CAPI GAI DIVID	TAL INS	RI PEI	(A) EVENUI	e ne Ks me	(B) T INVE	ST-	(C) · ADJUS	TED
SOURCE UBS	G: Al	ROSS MOUNT	CAPI GAI DIVID	TAL INS DENDS	RI PEI	(A) EVENUI R BOOF	E NE	(B) T INVE NT INC	EST- COME	(C) · ADJUS	TED
SOURCE	G: Al	ROSS MOUNT 23,616	CAPI GAI DIVID	TAL INS DENDS 500	RI PEI	(A) EVENUE R BOOF 23,12	E NE	(B) T INVE NT INC	2ST- COME -16.	(C) · ADJUS	TED COME
SOURCE UBS TO PART I, LINE.4	G: Al	ROSS MOUNT 23,616	CAPI GAI DIVID	TAL INS DENDS 500 500	RI PEI	(A) EVENUE R BOOK 23,12 23,12	E NE	(B) T INVE NT INC	STA	(C) ADJUS NET IN	TED COME
SOURCE UBS TO PART I, LINE.4 FORM 990-PF	G: Al	ROSS MOUNT 23,616	CAPI GAI DIVID  ACCOU  (A) EXPENSE PER BOO	TAL INS DENDS 500 500	RI PEI	(A) EVENUE R BOOK 23,12 23,12	E NE	(B) T INVENT INC 23,1 23,1	STA	(C) ADJUS NET IN  ATEMENT (D) CHARIT	TED COME

FORM 990-PF	TAX	ES		STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM			
FOREIGN TAXES EXCISE TAX	707. 3,512.			0.		
TO FORM 990-PF, PG 1, LN 18	4,219.	707	•	0.		
FORM 990-PF	OTHER E	XPENSES		STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM			
MN ATTORNEY GENERAL FILING FEE INVESTMENT FEES	25. 8,832.	0 8,832		25. 0.		
TO FORM 990-PF, PG 1, LN 23	8,857.	8,832	•	25.		
FORM 990-PF	CORPORAT	E STOCK	<u></u>	STATEMENT 6		
DESCRIPTION		В	OOK VALUE	FAIR MARKET VALUE		
UBS SECURITIES (SEE ATTACHED)			836,880.	793,686.		
TOTAL TO FORM 990-PF, PART II, LINE 10B			836,880.	793,686.		
FORM 990-PF	PART XV - L OF FOUNDATI			STATEMENT 7		

NAME OF MANAGER

KIM A. CULP CAROL J. CULP