Form 990-PF

2949116605523 9 Return of Private Foundation 0MB No 1545-0052

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

2018

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

			hie Services / Go to www.irs.gov/Form990PF for ndar-year 2018 or tax year beginning	mstructions and		ending	орен	to Public Inspection	
			andar-year 2018 or tax year beginning		, and		identification number		
			Financial Foundation			Limpioyer	identification names.		
			d street (or PO box number if mail is not delivered to street address)	Roo	m/suite		36-3608619		
			ert Street North			B Telephone	number (see instruction	is)	
			state or province, country, and ZIP or foreign postal code				,	•	
		Saint Paul MN 55101-2015					651-665-3501		
			intry name Foreign province/state/county	Foreign pos		C If exemption application is pending, check here ▶			
			,	•				,	
	G	Check	call that apply Initial return Initial return of	of a former public	charity	D 1. Foreign	n organizations, check h	ere ▶	
			☐ Final return ☐ Amended return		Or idinty	2 Foreign	n organizations meeting	the 85% test	
			Address change X Name change		1	_	here and attach compute		
	H	Chec	k type of organization X Section 501(c)(3) exempt private the section 501 (c) (d) exempt private			E If private for	oundation status was te		
	$\ddot{\Box}$		on 4947(a)(1) nonexempt charitable trust Other taxa		ation	section 50	7(b)(1)(A), check here	▶ ∐	
	=		narket value of all assets at J Accounting method	☐ Cash 🗓					
0	'		f year (from Part II, col (c), Other (specify)	Casii Ki	, cordar		dation is in a 60-month t tion 507(b)(1)(B), check		
\mathcal{L}			6) \$ 52,175,762 (Part I, column (d) must be	on cash basis)		under see	1011 007 (B)(1)(B), OHOOK		
/		art I	· · · · · · · · · · · · · · · · · · ·					(d) Disbursements	
1	_	alti	amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and expenses per	1	investment	(c) Adjusted net	for charitable	
-			equal the amounts in column (a) (see instructions))	books	ın	come	income	purposes (cash basis only)	
40	$\overline{}$	1	Contributions, gifts, grants, etc., received (attach schedule)	9,999,987	, 				
Ö		2	Check ► If the foundation is not required to attach Sch B	0,000,007	' -				
_ ≥		3	Interest on savings and temporary cash investments	19,376	3	19,376		···	
ş		4	Dividends and interest from securities	1,786,840		1,786,840			
m		5a	Gross rents	.,,,		11. 5515 15			
SCANNED JUL		b	Net rental income or (loss)		-			=IV/ED	
=	<u>o</u>	6a	Net gain or (loss) from sale of assets not on line 10	-1,484,708	3		REC	IVED	
	Revenue	ь	Gross sales price for all assets on line 6a 162,096,850					\%	
-	š	7	Capital gain net income (from Part IV, line 2)			8,272,783	اعدا	* £ 2019 1 is	
er.	æ	8	Net short-term capital gain				YAM 8	T A	
2		9	Income modifications				(6)	TIT	
2019		10a	Gross sales less returns and allowances				\ OG	DEN, UT	
_		b	Less Cost of goods sold						
		С	Gross profit or (loss) (attach schedule)		<u> </u>				
		11	Other income (attach schedule)						
c)		12	Total. Add lines 1 through 11	10,321,495		0,078,999	0	20.505	
$\widetilde{\mathcal{R}}$	nses	13	Compensation of officers, directors, trustees, etc	69,535	<u> </u>			69,535	
Ñ	ns	14	Other employee salaries and wages	04.046	. 			24.042	
æ	be	15	Pension plans, employee benefits	21,812	<u> </u>			21,812	
3	Exper	16a	Legal fees (attach schedule)						
013,29	Ve	b	Accounting fees (attach schedule) Other professional fees (attach schedule)						
9	ati	17	Interest	-	1				
2019	str	18	Taxes (attach schedule) (see instructions)	99,000	. 	-			
201	nis	19	Depreciation (attach schedule) and depletion	33,000	7			1	
CD	Ξ	20	Occupancy	8,405	5			8,405	
	Administrative	21	Travel, conferences, and meetings	, 100					
	and	22	Printing and publications					1	
NOS		23	Other expenses (attach schedule)	15,650	ol	3,214		12,436	
1 10	ng	24	Total operating and administrative expenses.						
111	perating		Add lines 13 through 23	214,402	2	3,214	0	112,188	
- 0	Jec.	25	Contributions, gifts, grants paid	2,800,000				2,800,000	
5	Ö	26	Total expenses and disbursements. Add lines 24 and 25	3,014,402		3,214	0	2,912,188	
· /~		27	Subtract line 26 from line 12						
91		a	Excess of revenue over expenses and disbursements	7,307,093	3			i	
₹ 7		b	Net investment income (if negative, enter -0-)			10,075,785			
7 V 125		С	Adjusted net income (if negative, enter -0-)				, 0		
			rwork Reduction Act Notice see instructions.				For	m 990-PF (2018)	

For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2018)

	- 1 T	Balance Sneets Attached schedules and amounts in the description column	Beginning of year	Ena oi	year
Pe	art II	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	88,117	152,804	152,804
	2	Savings and temporary cash investments	1,459,136	324,789	324,789
	3	Accounts receivable ► 267,015			
		Less allowance for doubtful accounts ▶	-	267,015	267,015
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts			
	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)			
		Less allowance for doubtful accounts			
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U S and state government obligations (attach schedule)	1,934,628	1,297,280	1,325,772
	b	Investments—corporate stock (attach schedule)		48,097,690	48,097,690
	С	Investments—corporate bonds (attach schedule)	42,523,005	1,939,555	1,921,255
	11	Investments—land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans		· <u>·</u>	
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe Accrued Investment Income)	391,374	86,437	86,437
	16	Total assets (to be completed by all filers—see the		,	
		instructions Also, see page 1, item I)	46,396,260	52,165,570	52,175,762
	17	Accounts payable and accrued expenses	31,642	45,392	
S	18	Grants payable			
tie	19 Deferred revenue20 Loans from officers, directors, trustees, and other disqualified persons				
Liabilities					
ial	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe ► Securities Payable)		259,223	
	23	Total liabilities (add lines 17 through 22)	31,642	304,615	
(0		Foundations that follow SFAS 117, check here			
alances		and complete lines 24 through 26, and lines 30 and 31.			
an	24	Unrestricted	•		
	25	Temporarily restricted			
þ	26	Permanently restricted			
E		Foundations that do not follow SFAS 117, check here ► 🗵			
ГF		and complete lines 27 through 31.			
Net Assets or Fund B	27	Capital stock, trust principal, or current funds	47,839,887	57,839,874	
et	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
188	29	Retained earnings, accumulated income, endowment, or other funds	-1,475,269	-5,978,919	
ťΑ	30	Total net assets or fund balances (see instructions)	- 46,364,618	51,860,955	
Š	31	Total liabilities and net assets/fund balances (see			
_		instructions)	46,396,260	52,165,570	
	rt III	Analysis of Changes in Net Assets or Fund Balances	l 00 / 1	1	
1		net assets or fund balances at beginning of year—Part II, column (a),	line 30 (must agree w		40.004.040
_		of-year figure reported on prior year's return)		1	46,364,618
_		amount from Part I, line 27a		2	7,307,093
3				3	FO 074 744
_		ines 1, 2, and 3		4	53,671,711
5		eases not included in line 2 (itemize) net assets or fund balances at end of year (line 4 minus line 5)—Part	II column (b) line 20	5	1,810,756
0	iotai	riet assets of futto parances at end of year (line 4 militus line 5)—Part	ii, coluliiii (b), iiile 30	ا م	51,860,955

Part VI instructions



Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see inst	tru	ctior	ıs)			_
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	1	00,75	8	
	here ► X and enter 1% of Part I, line 27b						- 1
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of Part I, line 12, col (b)	-	_ -			-	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)		2			0	
3	Add lines 1 and 2	L	3	10	00,75	8	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	L	4			\downarrow	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5	10	00,75	8	
6	Credits/Payments						
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 100,233	4	- 1				
b	Exempt foreign organizations—tax withheld at source 6b	4					
С	Tax paid with application for extension of time to file (Form 8868) 6c	4					
d	Backup withholding erroneously withheld	- -	-			_	
7	Total credits and payments Add lines 6a through 6d	\vdash	7	1(00,23	3	
8	Enter any penalty for underpayment of estimated tax. Check here X 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		52		—
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be Credited to 2019 estimated tax Refunded	_	11				—
11			<u>''</u>	-		0	
	/II-A Statements Regarding Activities	ıŧ	-		Yes	s N	_
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	11		1a	16		<u>(</u>
L	participate or intervene in any political campaign? Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			Id	+	+-^	<u>`</u>
b	Instructions for the definition			1b		x	,
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materia	alc		10	+	+-^	`-
	published or distributed by the foundation in connection with the activities	215					
С	Did the foundation file Form 1120-POL for this year?			1c	-	- x	$\overline{}$
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			···	+	+-	Ì
u	(1) On the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impo	se	d	-			- 1
•	on foundation managers >\$						- 1
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		7	₹
_	If "Yes," attach a detailed description of the activities					\top	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles					_	
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3	Х		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		>	<u> </u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?			4b	N/A	<u> </u>	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T			5		>	<u>`</u>
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						1
	By language in the governing instrument, or						1
	• By state legislation that effectively amends the governing instrument so that no mandatory directions the	hat]	_	_ _	╝
	conflict with the state law remain in the governing instrument?			6	<u> </u>	\perp	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV			7	<u> </u>	\perp	_
8a	Enter the states to which the foundation reports or with which it is registered. See instructions MN						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gene	era	1		_	_	_]
	(or designate) of each state as required by General Instruction G? If "No," attach explanation			8b	X	\perp	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(_	_ _	
	or 4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV	lf					1
	"Yes," complete Part XIV			9	↓	×	<u>(</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing to names and addresses	the	ır	10		<u> </u>	<u>_</u>

Part	VII-A Statements Regarding Activities (continued)			
11 `	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	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 ► https://www.securian.com/sites/securian/about-us/community-commitment			-
14	The books are in care of ► Melissa Rockvoy Telephone no ► 651-665-	4322		
	Located at ► 400 Robert Street North Saint Paul MN ZIP+4 ► 55101			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here		ı	▶ □
	and enter the amount of tax-exempt interest received or accrued during the year 15		12 1	
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority	40	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the			
Dod	name of the foreign country VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
rait			Yes	No
1.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			
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			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? L Yes X No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			Ì
	disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		l	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		i	}
	(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)			
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	N/A	
	Organizations relying on a current notice regarding disaster assistance, check here			
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 2018?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			. 1
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 before 2018?			
	If "Yes," list the years 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions)	2b	N/A	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		1177	
·	► 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 2018 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			لــــا
	foundation had excess business holdings in 2018)	3b	N/A	ļ
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			

Pari	t VII-B	Statements Regarding Activities	for Wh	iich Form	47 <u>20 N</u>	<i>l</i> lay Be Re	quire	d (contin	ued)			
5a `		e year, did the foundation pay or incur any on propaganda, or otherwise attempt to in	/ amoun	nt to				Yes	X No		Yes	No
	(2) Influer	nce the outcome of any specific public ele y or indirectly, any voter registration drive	ection (se				,	Yes	X No			
		le a grant to an individual for travel, study,		er sımılar pur	ooses?			Yes	⊠ No			1
	(4) Provid	le a grant to an organization other than a n 4945(d)(4)(A)? See instructions					ın	Yes	X No			
		le for any purpose other than religious, ch ses, or for the prevention of cruelty to chil			terary, o	or education	ıal	Yes	X No			
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance? See instructions							5b	N/A			
С	Organizations relying on a current notice regarding disaster assistance, check here If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Yes						► □ No					
6a	If "Yes," attach the statement required by Regulations section 53 4945–5(d). Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? — Yes — X No											
b	Did the fo	undation, during the year, pay premiums, 6b, file Form 8870	directly	or indirectly,	on a p	ersonal ben	efit cor	tract?		6b		
7a b	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes X No If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?						7b	N/A	<u></u>			
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? Yes X No						_					
Par		nformation About Officers, Directo	ors, Tru	ustees, Fo	undati	ion Manag	jers, ł	Righly Pa	aid Em	iploye	es,	
1		nd Contractors ficers, directors, trustees, and foundat	ion mar	nagers and	heir co	mpensatio	n. See	instruction	ons.			
•	<u> Liot ali oi</u>	(a) Name and address	(b) Title hour	, and average s per week ed to position	(c) Co (If i	mpensation not paid, nter -0-)	(d) empl	Contribution byee benefit erred compe	s to plans	(e) Expe	ense acc allowan	
See A	ttached Sta	atement				•						
				00		0						
				00		0			··			
				00		. 0						
				00	•	0						
2	Compens	sation of five highest-paid employees (other th		cluded	on line 1—	see ins	structions	s). If no	ne, ent	er	
	(a) Name an	d address of each employee paid more than \$50,000		(b) Title, and a hours per w devoted to po	eek	(c) Comper	sation	(d) Contribi employee plans and c compens	benefit deferred	(e) Expe	ense acc allowan	
NON												
-												
Fotal	number of	other employees paid over \$50,000				<u> </u>		L	•			
									F	orm 99	0-PF	(2018)

Form 990-PF (2018)

Pa	rt VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid En and Contractors (continued)	nployees,
3	Five highest-paid independent contractors for professional services. See instructions. If none, enter "NON	E."
_	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
100	NE -	
	4-	
.		
Tota	I number of others receiving over \$50,000 for professional services	
Pa	rt IX-A Summary of Direct Charitable Activities	
		· · · · · · · · · · · · · · · · · · ·
	the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of anizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
 -		
1	None	
2	· · · · · · · · · · · · · · · · · · ·	
_	<u>-</u>	
3	· · · · · · · · · · · · · · · · · · ·	
•	*	
4		
	,	
Pa	rt IX-B Summary of Program-Related Investments (see instructions)	
D€	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		
2		
	other program-related investments. See instructions	
3		
T. 4	I Adding a 4th south 2	
lota	I. Add lines 1 through 3	<u> </u>

Form 99	90-PF (2018) Securian Financial Foundation	36-3608619	Page 8
Part	X Minimum Investment Return (All domestic foundations must complete this part. Foreign	n foundations	5,
,	see instructions)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	48,361,846
b	Average of monthly cash balances	1b	4,680
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	48,366,526
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	48,366,526
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see		
	instructions)	4	725,498
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4		47,641,028
6	Minimum investment return. Enter 5% of line 5	6	2,382,051
Part 1	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundation and certain foreign organizations, check here and do not complete this part.)	ns 	
1	Minimum investment return from Part X, line 6	1	2,382,051
2a	Tax on investment income for 2018 from Part VI, line 5]	
b	Income tax for 2018 (This does not include the tax from Part VI)	<u> </u>	
С	Add lines 2a and 2b	2c	100,758
3	Distributable amount before adjustments Subtract line 2c from line 1	3	2,281,293
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	2,281,293
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,	1	
	line 1	7	2,281,293
	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		0.040.400
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	2,912,188
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		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	2 012 199
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	2,912,188
5	Foundations that qualify under section 4940(e) for the reduced raté of tax on net investment income	_	100 750
c	Enter 1% of Part I, line 27b See instructions	6	100,758 2,811,430
6	Adjusted qualifying distributions. Subtract line 5 from line 4 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whet		
	qualifies for the section 4940(e) reduction of tax in those years	nei uie lourida	LIOTI
	qualifies for the section 4340(e) reduction of tax in those years		

Securian Financial Foundation

² art	XIII Undistributed Income	(see instructions)				·
•			(a)	(b)	(c)	(d)
1	Distributable amount for 2018 from	n Part XI,	Corpus	Years prior to 2017	2017	2018
	line 7					2,281,293
2	Undistributed income, if any, as of the	end of 2018				
а	Enter amount for 2017 only	_			0	
b	Total for prior years 20,	20, 20				
3	Excess distributions carryover, if a	ny, to 2018				
а	From 2013					
b	From 2014					
С	From 2014					
d	From 2016				İ	
е	From 2017	548,356				
f	Total of lines 3a through e		548,356	`		
4	Qualifying distributions for 2018 from	om Part XII,		•		
	line 4 ▶ \$ 2,912,188					
а	Applied to 2017, but not more than	n line 2a				
b	Applied to undistributed income of	prior years				
	(Election required—see instruction	ns)				
С	Treated as distributions out of corp	ous (Election				
	required—see instructions)					
d	Applied to 2018 distributable amou	unt				2,281,293
е	Remaining amount distributed out	· -	630,895			
5	Excess distributions carryover app	olied to 2018				
	(If an amount appears in column (-	,			
	amount must be shown in column	· · · · —				
6	Enter the net total of each colum	nn as				
	indicated below:					
а	Corpus Add lines 3f, 4c, and 4e 5	Subtract line 5	1,179,251			
b	· · · · · · · · · · · · · · · · · · ·	Subtract				
	line 4b from line 2b			0		
С	Enter the amount of prior years' ur	l l				
	income for which a notice of defici					
	been issued, or on which the secti	: : · · · · · · · · · · · · · · · · · ·				
	tax has been previously assessed					<u>.</u>
d	Subtract line 6c from line 6b Taxa	ble				
	amount—see instructions					
е	Undistributed income for 2017 Su	ibtract line				
	4a from line 2a Taxable amount—	-see			_	
	instructions	ļ_			0	
f	Undistributed income for 2018 Su					
	4d and 5 from line 1 This amount	must be				,
_	distributed in 2019	-				
7	Amounts treated as distributions o	•				
	to satisfy requirements imposed by	•				
	170(b)(1)(F) or 4942(g)(3) (Electio	on may be				
_	required—see instructions)					
8	Excess distributions carryover from					
	applied on line 5 or line 7 (see inst			-		
9	Excess distributions carryover t		4 470 051			
	Subtract lines 7 and 8 from line 6a	' <u> </u>	1,179,251			
10	Analysis of line 9	,				
	Excess from 2014		ļ			
C	Excess from 2016	7.005	İ			
d	Excess from 2017	548,356				
•	Evenes from 2019	E30 9061	1		l l	

Total

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or contribution show any relationship to any foundation manager or substantial contributor status of Amount recipient Name and address (home or business) a Paid during the year 2,800,000 See Attached 3a 2,800,000 **b** Approved for future payment

3b

ra	IU AV	Analysis of income-Producing Ac					
Ente	er gros	ss amounts unless otherwise indicated	Unrelated bu	siness income	Excluded by secti	on 512, 513, or 514	(6)
			(a) (b) Business code Amount		(c) Exclusion code	(d) Amount	(e) Related or exempl function income
1	Prog	ram service revenue	Dusiness code	Amount	Exclusion code		(See instructions)
	a _						
	b _					.,,,	
	c _						
	d _				-		
	e _						
	f _						
	g F	Fees and contracts from government agencies					
2	Mem	bership dues and assessments					
3	Intere	est on savings and temporary cash investments					19,370
4	Divid	dends and interest from securities					1,786,840
5	Net	rental income or (loss) from real estate					
	a [Debt-financed property					
	1 d	Not debt-financed property					
6	Net	rental income or (loss) from personal property					
7	Othe	er investment income					
8	Gain	or (loss) from sales of assets other than inventory					-1,484,70
9	Net	ncome or (loss) from special events					
10	Gros	ss profit or (loss) from sales of inventory					
11	Othe	er revenue a					
	b			-			
	c ⁻					•	
	d _					<u>-</u>	
	е –						
12	Subt	otal Add columns (b), (d), and (e)		(0	321,50
		I. Add line 12, columns (b), (d), and (e)	•	·		13	321,50
		sheet in line 13 instructions to verify calculations	;)	•			
Pa	rt XV	-B Relationship of Activities to the A	ccomplishme	ent of Exemp	t Purposes		
Lin	e No. ▼	Explain below how each activity for which incom accomplishment of the foundation's exempt purpose.	ne is reported in cooses (other than	olumn (e) of Part by providing fund	XVI-A contributed ds for such purpos	importantly to the es) (See instructi	ons)
	3	Income earned to support charitable contribution	ns		· · · · · · · · ·		
	4	Income earned to support charitable contribution				•	-
	8	Income earned to support charitable contribution			·		
		11					
			-				
			-				
			_				
			-				
			-				
			_				
		•					

Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable

		Exempt Org	ganizations			_				
1	Did t		irectly or indirectly eng	gage in any of the follow	wing with any of	her organiza	tion descr	ibed	Yes	No
			er than section 501(c)(
	orga	inizations?						ŀ		
а	Tran	sfers from the rep	orting foundation to a	noncharitable exempt	organization of					
	(1) (Cash						1a(1)	Х
	(2)	Other assets						1a(2)	Х
b	Othe	er transactions								
	(1) 5	Sales of assets to	a noncharitable exemp	ot organization				1b(1)	Х
	(2) F	ourchases of asse	ets from a noncharitable	e exempt organization				1b(2)	Х
	(3) F	Rental of facilities,	equipment, or other a	ssets				1b(3)	X
	(4) F	Reimbursement ar	rrangements		•			1b(4)	Х
	(5) L	oans or loan gua	rantees					1b(5)	X
	(6) F	Performance of se	rvices or membership	or fundraising solicitat	ions			1b(6		Х
С	Shar	ring of facilities, ed	quipment, mailing lists,	other assets, or paid	employees			1c		X
d			he above is "Yes," comp							
	value	e of the goods, othe	er assets, or services giv	en by the reporting foun	dation If the four	ndation receiv	ed less tha	n fair market		
	value	e in any transaction	or sharing arrangement	t, show in column (d) the	value of the goo	ods, other ass	ets, or serv	ices received		
a) Line	e no	(b) Amount involved	(c) Name of noncha	aritable exempt organization	(d) Des	scription of transf	ers, transacti	ons, and shanng arr	angemer	nts
			_							
				 						
	_									
_										
		_			<u> </u>					
			<u> </u>				··· ·			
	1 - 41-									
2a			ctly or indirectly affiliate 01(c) (other than section			exempt orgai	lizations	□ Yes	X	Jn
b	If "Ye		following schedule	on 66 1(6)(6)) or in 666					٠٠ ندی	
	11 10	(a) Name of organ	· · · · · · · · · · · · · · · · · · ·	(b) Type of organ	ızatıon		(c) Descript	tion of relationship		
		(a) Hamo of organ		(2/ 1/25 5. 5.85			(0)			-
					•	:				
		· · · · · ·		<u> </u>						
									•	
	Unde	er penalties of perjury, I dec	lare that I have examined this retui	m, including accompanying schedu	iles and statements, and	to the best of my k	nowledge and b	elief, it is true,		
ign	corre	ect, and complete Declaration	on of preparer (other than taxpave	r) is based on all information of wh	ich preparer has any kno	owledge		May the IRS discus	s this retu	ırn
ere		Manne		3/14/19	Treasurer			with the preparer si	_	_
	Sig	nature of officer or trus	stee	Date	Title			See instructions	Yes	∐ No
_!.!	•	Print/Type preparer's	shame	Preparer's signature		Date	Che	eck T if PTIN		
aid							-employed			
repa		Firm's name		•			Firm's EIN	>		
se C	nly	y Firm's address 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

2018

Employer identification number

Securian Financial Foundation	n <u>36-3608619</u>
Organization type (check on	
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	X 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	7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See
instructions	
General Rule	
	iling Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 property) from any one contributor. Complete Parts I and II. See instructions for determining a stributions.
Special Rules	
	lescribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the
	ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line
	that received from any one contributor, during the year, total contributions of the greater of (1)
\$5,000, or (2) 2% of 1	the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one eyear, total contributions of more than \$1,000 exclusively for religious, charitable, scientific,
	al purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering instead of the contributor name and address), II, and III
П г	100 to 10
contributor, during the	lescribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one eyear, contributions exclusively for religious, charitable, etc., purposes, but no such
	more than \$1,000. If this box is checked, enter here the total contributions that were received
	n exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the
General Rule applies totaling \$5,000 or mo	s to this organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions re during the year
Caution: An organization tha	t 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)

Name of organization
Securian Financial Foundation

Employer identification number 36-3608619

Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed							
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
1	Securian Holding Company 400 Robert Street North Saint Paul MN 55101 Foreign State or Province Foreign Country	\$9,646,794	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				
2	Minnesota Life Insurance Company 400 Robert Street North Saint Paul MN 55101 Foreign State or Province Foreign Country	\$ 353,193	Person Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	Foreign State or Province Foreign Country	\$	Person Payroll Oncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)				

Name of organization
Securian Financial Foundation

Employer identification number 36-3608619

Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed. Part II (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions) ABIOMED, Inc. Stock 3132 Units ...1 \$ 840,785 2/26/2018 (a) No. (c) (b) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions) ABIOMED, Inc Stock ...2 1317 Units 3/1/2018 (a) No. (c) (b) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions) Docusign, Inc Stock 218,403 Units ___1__ (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions) Part I (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions) (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions) Part I

Name of org	anization Inancial Foundation				Employer identification number
Part III	Exclusively religious, charitable, e (10) that total more than \$1,000 for		_		
	the following line entry. For organizat contributions of \$1,000 or less for the Use duplicate copies of Part III if add.	e year (Enter this in	formation once See		
(a) No. from	(b) Purpose of gift		c) Use of gift	(d)	Description of how gift is held
ratti					

	Transferee's name, address,		Trans ['] fer of gift Relatio	onship of tr	ransferor to transferee
	For Prov Country	y			
(a) No. from Part I	(b) Purpose of gift	(0	c) Use of gift	(d)	Description of how gift is held
,		(e)	Transfer of gift		
	Transferee's name, address,	and ZIP + 4	Relation	onship of tr	ransferor to transferee
(a) No. from Part I	For Prov Country	У			
from	(b) Purpose of gift	(0	c) Use of gift	(d)	Description of how gift is held
ı		(e)	Transfer of gift		
!	Transferee's name, address,	and ZIP + 4	Relation	onship of tr	ansferor to transferee
	For Prov Country	·			
from	(b) Purpose of gift		c) Use of gift	(d)	Description of how gift is held
•					
:		(e)	Transfer of gift		
(a) No. from Part I	Transferee's name, address,		_	onship of tr	ransferor to transferee
•					

Part I, Line 6 (990-PF) - Gain/Loss from Sale of Assets Other Than Inventory

Secunan Financial Foundation

						•		orais	SOIS		Cost of Other Basis, Expenses,	sis, Expenses,	Nei	Net Gain.
	Amount								Sales		Depreciation and Adjustments	1 Adjustments	or Loss	SSC
Long Term CG Distributions		<u>18</u>					Ü	Capital Gains/Losses		162,096,850		163,581,558		-1,484,708
Short Term CG Distributions		10						Other sales		0		0		,
-				Check "X" If										
-		Check X		Purchaser							Expense of Sale			-
- • -		to include		S a	Acquisition	Date	Date	Gross Sales	Cost or	Valuation	and Cost of			Net Gain
Description	CUSIP#	in Part IV	Purchaser	Business	Method	Acquired	Sold	Price	Other Basis	Method	Improvements	Depreciation	Adjustments	or Loss
1 Publically Traded Securities		×						162,096,850	163,581,558					-1,484,708

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Part I, Line 18 (990-PF) - Taxes

		99,000	0	0	0
	Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1	Real estate tax not included in line 20	0			
2	Tax on investment income	99,000			
3	Income tax	0			

Part I, Line 23 (990-PF) - Other Expenses

					
		15,650	3,214	0	12,436
	Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1	Bank Charges	3,214	3,214		
2	Misc Expenses	12,436			12,436

Part II, Line 10a (990-PF) - Investments - U.S. and State Government Obligations

	Federal	1,934,628	1,297,280	1,943,954	1,325,772	•
	State/Local	0	0	0	0	
	Num Stares/	Book Value	Book Value	FMV	FMV	State/Local
Description	Face Value	Beg of Year	End of Year	Beg of Year	End of Year	Obligation
1 Long Term US		1,934,628	1,297,280	1,943,954	1,325,772	

Part II, Line 10b (990-PF) - Investments - Corporate Stock

Secunan Financial Foundation

			48,097,690	0	48,097,690
	Num Shares/	Book Value	Book Value	FMV	FMV
Description	Face Value	Beg of Year	End of Year	Beg of Year	End of Year
Corporate Stock		0	48,097,690	0	48,097,690

Part II, Line 10c (990-PF) - Investments - Corporate Bonds

Securian Financial Foundation

1,921,255	43,580,079	1,939,555	42,523,005			Long Term
End of Year	Beg of Year	End of Year	Beg. of Year	Date	ı Rate	Description
FMV	FMV	Book Value	Book Value	Maturity	Interest	
1,921,255	43,580,079	1,939,555	42,523,005		,	

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Part II, Line 15 (990-PF) - Other Assets

Securian Financial Foundation

	391,374	86,437	86,437
	Book Value	Book Value	FMV End
Asset Description	Beg of Year	End of Year	of Year
1 Accrued Investment Income	391.374	86.437	86,437

Part II, Line 22 (990-PF) - Other Liabilities

	0	259,223
	Beginning	Ending
Description	Balance	Balance
1 Securities Payable		259,223

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

Charle Higger Charle Name	0	Γ										_							
Name Check Yr If Busness Steet Cry State Cry State Cry Sult Foreign Country Title Per Week Compensation Benefits Christ Higher 400 Robert Si N Si Paul MN 55101 Pression of President None Chart Christmen 400 Robert Si N Si Paul MN 55101 Pression of President None Chart Christmen 400 Robert Si N Si Paul MN 55101 Asstrain None Chart Christmen 400 Robert Si N Si Paul MN 55101 Asstrain Asstrain 0 Chart Christmen 400 Robert Si N Si Paul MN 55101 Asstrain Asstrain 0 Chart Christmen 400 Robert Si N Si Paul MN 55101 Asstrain Asstrain 0	,	Expense	Account	\ 															
Check TX Street Check TX Street Check TX Street Check TX Title Per Veek Compans Compans Christ Higher 400 Robert St N St Paul MN \$510 t President	0		Benefits																
Cyrns Higer Check "X" Sirest of Park Influences of Park Influences of Park Influences of	69,535		Compensation	0		0		0		0		0		0		69,535		0	
Name Check Yr (Business) Sireet Copy State Zip Code Foreign Country Cyrns Higger 400 Robert SI N St Paul MN 55101 And St 101 And St		Avg Hrs	Per Week													40.00			
Chack "X" Street Cry State Zp Code Chrs Higer 400 Robert St N St Paul MN 55101 Kähleen Pinkett 400 Robert St N St Paul MN 55101 Gary Christensen 400 Robert St N St Paul MN 55101 Krist Fox 400 Robert St N St Paul MN 55101 Krist Fox 400 Robert St N St Paul MN 55101 Lon Koulsky 400 Robert St N St Paul MN 55101 Warren Zaccario 400 Robert St N St Paul MN 55101			Title	President		Vice		Secretary		Treasurer		Asst	וופסחומו	Asst Secretary		Manager		Treasurer	
Check "X" Street City State Chris Hilger 400 Robert St N St Paul MN Kathleen Pinkett 400 Robert St N St Paul MN Gary Christensen 400 Robert St N St Paul MN Kristl Fox 400 Robert St N St Paul MN Berth Grover Wiederholt 400 Robert St N St Paul MN Lon Koutsky 400 Robert St N St Paul MN Warren Zaccaro 400 Robert St N St Paul MN	1		Foreign Country															, -	
Check "X" Street City State Chris Hilger 400 Robert St N St Paul MN Kathleen Pinkett 400 Robert St N St Paul MN Gary Christensen 400 Robert St N St Paul MN Kristl Fox 400 Robert St N St Paul MN Berth Grover Wiederholt 400 Robert St N St Paul MN Lon Koutsky 400 Robert St N St Paul MN Warren Zaccaro 400 Robert St N St Paul MN			apo				,						,		_				
Check "X" Street City State Chris Hilger 400 Robert St N St Paul MN Kathleen Pinkett 400 Robert St N St Paul MN Gary Christensen 400 Robert St N St Paul MN Kristl Fox 400 Robert St N St Paul MN Berth Grover Wiederholt 400 Robert St N St Paul MN Lon Koutsky 400 Robert St N St Paul MN Warren Zaccaro 400 Robert St N St Paul MN			ZpCc	55101		55101		55101		55101		55101		55101		55101		55101	
Check "X" Street Street Street Street Street Street A00 Robert St N St Paul Gary Christensen 400 Robert St N St Paul Gary Christensen 400 Robert St N St Paul Krist Fox 400 Robert St N St Paul Beth Grover Wiederholt 400 Robert St N St Paul Warren Zaccaro 400 Robert St N St Paul			State			N		MN		MN		MM		MM		NM	_	¥	
Check "X" Name if Business Christ Higer Kaithleen Pinkett Gary Christensen Cany Christensen A00 Robert St Krist Fox Kaith Grover Wiederholt Lon Koutsky Warren Zaccaro (hon Robert St (hon Robert S	-		Cuty	St Paul		St Paul		St Paul	_	St Paul	-	St Paul	-	St Paul		St Paul		St Paul	
Check "X" Name If Business Chris Higer Gary Christensen Gary Christensen Kaithleen Pinkett Christensen Bath Grover Wiederholt Lon Koutsky Warren Zaccaro			Street	400 Robert St N		400 Robert St N		400 Robert St N		400 Robert St N		400 Robert St N		400 Robert St N		400 Robert St N	,	400 Robert St N	
		Check "X"	if Business																
			Name	Chris Hilger	1	Kathleen Pinkett	2	Gary Christensen	3	Dave LePlavy	4	Kristi Fox	5	Beth Grover Wiederholt	9	Lon Koutsky	7	Warren Zaccaro	89