efile GRAPHIC print - DO NOT PROCESS

For Paperwork Reduction Act Notice, see instructions.

DLN: 93491318029009

OMB No 1545-0052

2018

Return of Private Foundation

Department of the Treasury Internal Revenue Service

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.

Open to Public

Inspection For calendar year 2018, or tax year beginning 01-01-2018 , and ending 12-31-2018 A Employer identification number PADDOCK FOUNDATION Number and street (or P O box number if mail is not delivered to street address) 600 HIGHWAY 169 SOUTH NO 1950 Room/suite B Telephone number (see instructions) (952) 746-4565 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here MINNEAPOLIS, MN 55426 ☐ Initial return ☐ Initial return of a former public charity G Check all that apply D 1. Foreign organizations, check here 2 Foreign organizations meeting the 85% test, check here and attach computation ☐ Final return Amended return ☐ Name change Address change **E** If private foundation status was terminated under section 507(b)(1)(A), check here ✓ Section 501(c)(3) exempt private foundation **H** Check type of organization \square Other taxable private foundation Section 4947(a)(1) nonexempt charitable trust I Fair market value of all assets at end ✓ Cash ☐ Accrual **J** Accounting method F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here of year (from Part II, col (c), line 16) ▶\$ 8,599,831 Other (specify) (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total (d) Disbursements (b) Net investment (c) Adjusted net for charitable of amounts in columns (b), (c), and (d) may not necessarily expenses per books purposes (cash basis only) income equal the amounts in column (a) (see instructions)) Contributions, gifts, grants, etc , received (attach 521,608 schedule) Check ► L $oldsymbol{ol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{ol{oldsymbol{ol{ol}}}}}}}}}}}}}}}}}}}}$ 2 Interest on savings and temporary cash investments 4 Dividends and interest from securities 152,212 152,212 5a Net rental income or (loss) 1,940,716 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 1,940,716 Net short-term capital gain Income modifications . . 10a Gross sales less returns and allowances Less Cost of goods sold b Gross profit or (loss) (attach schedule) Other income (attach schedule) 12 **Total.** Add lines 1 through 11 2.614.536 2.092.928 Compensation of officers, directors, trustees, etc 13 14 Other employee salaries and wages 15 Pension plans, employee benefits Operating and Administrative Expenses Legal fees (attach schedule) . اروه Accounting fees (attach schedule) 4,053 4,053 Other professional fees (attach schedule) (چە 27,900 27.900 0 17 (چە 39,459 7,459 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 21 Travel, conferences, and meetings . 22 Printing and publications . . . 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. Add lines 13 through 23 . . . 71,412 39.412 375,500 25 Contributions, gifts, grants paid 375.500 26 Total expenses and disbursements. Add lines 24 and 446,912 39,412 375,500 27 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-) 2,053,516 Adjusted net income (if negative, enter -0-) . . .

Cat No 11289X

Form **990-PF** (2018)

2,551,319

1,141,408

2,021,439

5,548

6,128,328

6,128,328

6,128,328

6,128,328

0

3,172,217

2,210,226

2,577,292

8,295,952

8,295,952

8,295,952

8,295,952

2

3 4

5

6

6,128,328

2,167,624

8,295,952

8,295,952 Form **990-PF** (2018)

8,017

3,657,625

2,119,093

2,486,896

8.017

8,599,831

	5
	6
	7
ţ	8
Assets	9
As	10a
	b
	С
	11

12

13 14

15

16

17

18

19

20 21

22

23

24

28

29

31 Part III

Liabilities

lances

Bal 25

Fund 26

ŏ

Assets 27

Net 30

2

Less allowance for doubtful accounts

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe ▶_

Grants payable

Unrestricted

Temporarily restricted

Permanently restricted . .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) > ____

Investments—U S and state government obligations (attach schedule)

Investments—corporate stock (attach schedule) Investments—corporate bonds (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that follow SFAS 117, check here

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg, and equipment fund

Capital stock, trust principal, or current funds

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Prepaid expenses and deferred charges

Investments—land, buildings, and equipment basis ▶ _

Less accumulated depreciation (attach schedule) ▶ _

Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

(a) List and describ 2-story brick wa	How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
1 a PUBLICLY TRADED SECU	RITIES		Р		
b CAPITAL GAINS DIVIDEN			P		
C			·		
d					
-	(f)		(a)	,	h)
(e)	Depreciation allowed		(g) other basis	,	r (loss)
Gross sales price	(or allowable)		ense of sale) minus (g)
a 3,81	6,620		1,901,083		1,915,537
b 2	5,179				25,179
С					
d					
e					
	showing gain in column (h) and ow	ned by the foundation o	on 12/31/69	,	1\
Complete only for assets	(i)	i	(k)		l) h) gain minus
(i)	Adjusted basis		of col (ı)		less than -0-) or
F M V as of 12/31/69	as of 12/31/69		(j), if any	Losses (fr	om col (h))
a					1,915,537
b					25,179
c					
d					
e					
If gain, also enter in Pa	or (net capital loss) gain or (loss) as defined in sections in the sections of the sections in the section in the sec		art I, line 7	2	1,940,716
In Part I, line 8 Part V Qualification U	Jnder Section 4940(e) for Re		Tovestment Inc	3	
For optional use by domestic p	rivate foundations subject to the sec	ction 4940(a) tax on ne	t investment incom	e)	
if section 4940(d)(2) applies, le	eave this part blank				
	e section 4942 tax on the distributa		in the base period?		es 🔽 No
	nount in each column for each year,		making any entries	<u> </u>	
(a)	, .		Thaking any entries	(d)	
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitabl	e-use assets	Distribution rat (col (b) divided by c	
2017	201,630		4,924,353		0 040945
2016	153,188		3,719,246		0 041188
2015	141,774		2,801,095		0 050614
2014	112,024		2,360,802		0 047452
2013	55,794		1,062,230		0 052525
2 Total of line 1, column (d)		2		0 232724
	for the 5-year base period—divide				
	dation has been in existence if less		3		0 046545
	ncharitable-use assets for 2018 fron	•			7,460,894
5 Multiply line 4 by line 3			5		347,267
	ent income (1% of Part I, line 27b)				20,535
					367,802
	ons from Part XII, line 4 , eater than line 7, check the box in Pa			 g a 1% tax rate Se	375,500 e the Part VI
instructions				Fo	orm 990-PF (2018)

Page **6**

	990-PF (2018)							F	Page 6
Pai	rt VIII-B Statements Regar	ding A	Activities for Which	Form 4720 May Be	Required (continu	ied)			
5a	During the year did the foundation	pay or	incur any amount to					Yes	No
	(1) Carry on propaganda, or other	wise at	tempt to influence legisla	ition (section 4945(e))?	☐ Yes	. •	No		
	(2) Influence the outcome of any	specific	public election (see secti	on 4955), or to carry					
	on, directly or indirectly, any v	oter re	gistration drive?		· · □ Yes	. V	No		
	(3) Provide a grant to an individua		• • • • • • • • • • • • • • • • • • • •	•	☐ Yes	. 🗸	No		
	(4) Provide a grant to an organiza			· -					
	in section 4945(d)(4)(A)? See				· · 🗌 Yes	, 🗹	No		
	(5) Provide for any purpose other		- '	• • • • • • • • • • • • • • • • • • • •	_	_			
L	educational purposes, or for th	•	,		⊔ Yes	, 🗹	No		
D	If any answer is "Yes" to 5a(1)–(5)		•	· · ·	•		- F-		
	Regulations section 53 4945 or in a Organizations relying on a current						5b		
С	If the answer is "Yes" to question !								
·	tax because it maintained expendit			•					
	If "Yes," attach the statement requ				· · Ye	; LJ	No		
6a	Did the foundation, during the yea				me on				
Va	a personal benefit contract?	•	, , ,		_				
ь	Did the foundation, during the year				⊔ Yes	. <u>V</u>	No 6b		No
_	If "Yes" to 6b, file Form 8870	.,, -	,	, ,		-	1		
7a	At any time during the tax year, w	as the i	foundation a party to a pi	ohibited tax shelter tran	saction?	. 🗸			
Ь	If yes, did the foundation receive a				⊥ Tes	. <u>V</u>	No 7b		
8	Is the foundation subject to the se	ction 49	960 tax on payment(s) of	more than \$1,000,000 i	in remuneration or				
	excess parachute payment during	the yea	ır [,]		· · 🔲 Yes	. 🗸	No L		
	Information About	Office	ers, Directors, Trust	ees, Foundation Ma				,	
Pai	and Contractors		,	,	<i>3</i> , <i>3</i> ,			•	
1	List all officers, directors, truste	ees, fo	undation managers an	d their compensation.	See instructions				
		(b) Title, and average	(c) Compensation (If			(e) Expe	nse acc	ount.
	(a) Name and address		hours per week devoted to position	not paid, enter -0-)	employee benefit pla deferred compens			allowan	
BRUC	E G PADDOCK	PRESI	· · · · · · · · · · · · · · · · · · ·	· · · · · ·	· ·	20.011			
	E G PADDOCK		DENT	1 0		- 01			
600 H	IIGHWAY 169 SOUTH SUITE 1950	1 00	DENT	0		٥			
MINN	IIGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426	1 00				0			
MINN RYAN	IIGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 B PADDOCK	1 00	DENT SURER/SECRETARY	0		0			(
RYAN 600 H	IIGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426	1 00 TREAS				0			C
RYAN 600 H MINN	IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 B PADDOCK IGHWAY 169 SOUTH SUITE 1950	TREAS 1 00 DIREC	SURER/SECRETARY			0			(
RYAN 600 H MINN DARA 600 H	IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 B PADDOCK IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 LYN C MARAS IGHWAY 169 SOUTH SUITE 1950	1 00 TREAS 1 00	SURER/SECRETARY	0					(
MINN RYAN 600 H MINN DARA 600 H MINN	IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 B PADDOCK IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 LYN C MARAS IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426	1 00 TREAS 1 00 DIREC 1 00	SURER/SECRETARY CTOR	0		0	e, enter '	`NONE	(
MINN RYAN 600 H MINN DARA 600 H MINN	IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 B PADDOCK IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 LYN C MARAS IGHWAY 169 SOUTH SUITE 1950	1 00 TREAS 1 00 DIREC 1 00	SURER/SECRETARY STOR STOR STOR STOR STOR	0	—see instructions).	0 If non	e, enter '	`NONE	(
MINN RYAN 600 H MINN DARA 600 H MINN 2	IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 B PADDOCK IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 LYN C MARAS IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 Compensation of five highest-p	1 00 TREAS 1 00 DIREC 1 00 aid em	SURER/SECRETARY STOR Ployees (other than the (b) Title, and average	0 ose included on line 1	see instructions). (d) Contributions employee benef	If non	(e) Exper	nse acco	ount,
MINN RYAN 600 H MINN DARA 600 H MINN 2	IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 B PADDOCK IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 LYN C MARAS IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 Compensation of five highest-p	1 00 TREAS 1 00 DIREC 1 00 aid em	SURER/SECRETARY STOR STOR STOR STOR STOR	0	-see instructions). (d) Contributions employee benef plans and deferment	If non		nse acco	ount,
MINN RYAN 600 H MINN DARA 600 H MINN 2 (a)	IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 B PADDOCK IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 LYN C MARAS IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 Compensation of five highest-p Name and address of each employed more than \$50,000	1 00 TREAS 1 00 DIREC 1 00 aid em	SURER/SECRETARY TOR Ployees (other than the (b) Title, and average hours per week	0 ose included on line 1	see instructions). (d) Contributions employee benef	If non	(e) Exper	nse acco	ount,
MINN RYAN 600 H MINN DARA 600 H MINN 2	IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 B PADDOCK IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 LYN C MARAS IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 Compensation of five highest-p Name and address of each employed more than \$50,000	1 00 TREAS 1 00 DIREC 1 00 aid em	SURER/SECRETARY TOR Ployees (other than the (b) Title, and average hours per week	0 ose included on line 1	-see instructions). (d) Contributions employee benef plans and deferment	If non	(e) Exper	nse acco	ount,
MINN RYAN 600 H MINN DARA 600 H MINN 2 (a)	IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 B PADDOCK IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 LYN C MARAS IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 Compensation of five highest-p Name and address of each employed more than \$50,000	1 00 TREAS 1 00 DIREC 1 00 aid em	SURER/SECRETARY TOR Ployees (other than the (b) Title, and average hours per week	0 ose included on line 1	-see instructions). (d) Contributions employee benef plans and deferment	If non	(e) Exper	nse acco	ount,
MINN RYAN 600 H MINN DARA 600 H MINN 2 (a)	IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 B PADDOCK IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 LYN C MARAS IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 Compensation of five highest-p Name and address of each employed more than \$50,000	1 00 TREAS 1 00 DIREC 1 00 aid em	SURER/SECRETARY TOR Ployees (other than the (b) Title, and average hours per week	0 ose included on line 1	-see instructions). (d) Contributions employee benef plans and deferment	If non	(e) Exper	nse acco	ount,
MINN RYAN 600 H MINN DARA 600 H MINN 2 (a)	IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 B PADDOCK IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 LYN C MARAS IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 Compensation of five highest-p Name and address of each employed more than \$50,000	1 00 TREAS 1 00 DIREC 1 00 aid em	SURER/SECRETARY TOR Ployees (other than the (b) Title, and average hours per week	0 ose included on line 1	-see instructions). (d) Contributions employee benef plans and deferment	If non	(e) Exper	nse acco	ount,
MINN RYAN 600 H MINN DARA 600 H MINN 2 (a)	IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 B PADDOCK IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 LYN C MARAS IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 Compensation of five highest-p Name and address of each employed more than \$50,000	1 00 TREAS 1 00 DIREC 1 00 aid em	SURER/SECRETARY TOR Ployees (other than the (b) Title, and average hours per week	0 ose included on line 1	-see instructions). (d) Contributions employee benef plans and deferment	If non	(e) Exper	nse acco	ount,
MINN RYAN 600 H MINN DARA 600 H MINN 2 (a)	IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 B PADDOCK IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 LYN C MARAS IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 Compensation of five highest-p Name and address of each employed more than \$50,000	1 00 TREAS 1 00 DIREC 1 00 aid em	SURER/SECRETARY TOR Ployees (other than the (b) Title, and average hours per week	0 ose included on line 1	-see instructions). (d) Contributions employee benef plans and deferment	If non	(e) Exper	nse acco	ount,
MINN RYAN 600 H MINN DARA 600 H MINN 2 (a)	IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 B PADDOCK IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 LYN C MARAS IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 Compensation of five highest-p Name and address of each employed more than \$50,000	1 00 TREAS 1 00 DIREC 1 00 aid em	SURER/SECRETARY TOR Ployees (other than the (b) Title, and average hours per week	0 ose included on line 1	-see instructions). (d) Contributions employee benef plans and deferment	If non	(e) Exper	nse acco	ount,
MINN RYAN 600 H MINN DARA 600 H MINN 2 (a)	IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 B PADDOCK IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 LYN C MARAS IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 Compensation of five highest-p Name and address of each employed more than \$50,000	1 00 TREAS 1 00 DIREC 1 00 aid em	SURER/SECRETARY TOR Ployees (other than the (b) Title, and average hours per week	0 ose included on line 1	-see instructions). (d) Contributions employee benef plans and deferment	If non	(e) Exper	nse acco	ount,
MINN RYAN 600 H MINN DARA 600 H MINN 2 (a)	IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 B PADDOCK IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 LYN C MARAS IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 Compensation of five highest-p Name and address of each employed more than \$50,000	1 00 TREAS 1 00 DIREC 1 00 aid em	SURER/SECRETARY TOR Ployees (other than the (b) Title, and average hours per week	0 ose included on line 1	-see instructions). (d) Contributions employee benef plans and deferment	If non	(e) Exper	nse acco	ount,
MINN RYAN 600 H MINN DARA 600 H MINN 2 (a) NONI	IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 B PADDOCK IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 LYN C MARAS IGHWAY 169 SOUTH SUITE 1950 EAPOLIS, MN 55426 Compensation of five highest-p Name and address of each employed more than \$50,000	TREAS 1 00 DIRECTION aid em e paid	ETOR Iployees (other than the (b) Title, and average hours per week devoted to position	ose included on line 1 (c) Compensation	—see instructions). (d) Contributions employee benef plans and deferr compensation	If non it to lit ed	(e) Exper	nse acco	ount,

Form 990-PF (2018)		Page 7
Part VIII Information About Officers, Directors, Trustees, F and Contractors (continued)	Foundation Managers, Highly Pa	nid Employees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		- 0
Part IX-A Summary of Direct Charitable Activities		0
List the foundation's four largest direct charitable activities during the tax year. Include releving anity and other beneficiaries served, conferences convened, research papers produc		of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see in	nstructions)	
Describe the two largest program-related investments made by the foundation during the	e tax year on lines 1 and 2	Amount
1		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		• 0
		Form 990-PF (2018)

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

Amounts set aside for specific charitable projects that satisfy the

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

3

4

5

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

2

3a 3h

4

5

375.500

20.535

354.965

Form 990-PF (2018)

Page 9

352,510

352,510

Form **990-PF** (2018)

0

t	XIII	

Form 990-PF (20	018)
Part XIII	Und

Part XIII Undistributed Income (see instructions	Form 990-PF (20	018)
	Part XIII	Undistributed Income (see instructions

(a)

Corpus

13.403

13,403

13,403

13.403

(b)

Years prior to 2017

(c)

2017

9.587

9,587

- 1 Distributable amount for 2018 from Part XI, line 7
- 2 Undistributed income, if any, as of the end of 2018 a Enter amount for 2017 only.
 - Excess distributions carryover, if any, to 2018
- **b** Total for prior years a From 2013.
- **b** From 2014. . . . c From 2015. . . d From 2016. e From 2017. f Total of lines 3a through e.

4 Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ a Applied to 2017, but not more than line 2a

b Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election required—see instructions).

5 Excess distributions carryover applied to 2018

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

(If an amount appears in column (d), the

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2019.

10 Analysis of line 9

a Excess from 2014. . . **b** Excess from 2015. . c Excess from 2016. . . . d Excess from 2017. . . e Excess from 2018. . .

Subtract lines 7 and 8 from line 6a

indicated below:

d Applied to 2018 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a))

NONE



nter gross	amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
1 Program	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
f						
2 Membe3 Interes	and contracts from government agencies rship dues and assessments. t on savings and temporary cash lents					
4 Dividen	ds and interest from securities tal income or (loss) from real estate			14	152,212	
	financed property					
	ebt-financed property					
6 Net ren	tal income or (loss) from personal property					
	nvestment income					
	(loss) from sales of assets other than					
Invento	•			18	1,940,716	
	ome or (loss) from special events profit or (loss) from sales of inventory					
	evenue a					
с						
d						
d e						
d e .2 Subtota	al Add columns (b), (d), and (e).		0		2,092,928	
d e 2 Subtota 3 Total.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)		0	13	2,092,928	
d e 2 Subtota 3 Total. (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations)		13		
d e 2 Subtota 3 Total. (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations) ne Accomplish income is reporte		pt Purposes F Part XVI-A contribut	ed importantly to	
d e 2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) ne Accomplish income is reporte		pt Purposes F Part XVI-A contribut	ed importantly to	
d e 2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) ne Accomplish income is reporte		pt Purposes F Part XVI-A contribut	ed importantly to	
d e 2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) ne Accomplish income is reporte		pt Purposes F Part XVI-A contribut	ed importantly to	
d e 2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) ne Accomplish income is reporte		pt Purposes F Part XVI-A contribut	ed importantly to	
d e 2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) ne Accomplish income is reporte		pt Purposes F Part XVI-A contribut	ed importantly to	
d e 2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) ne Accomplish income is reporte		pt Purposes F Part XVI-A contribut	ed importantly to	
d e 2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) ne Accomplish income is reporte		pt Purposes F Part XVI-A contribut	ed importantly to	
d e 2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) ne Accomplish income is reporte		pt Purposes F Part XVI-A contribut	ed importantly to	
d e 2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) ne Accomplish income is reporte		pt Purposes F Part XVI-A contribut	ed importantly to	
d e 2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) ne Accomplish income is reporte		pt Purposes F Part XVI-A contribut	ed importantly to	
d e 2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) ne Accomplish income is reporte		pt Purposes F Part XVI-A contribut	ed importantly to	
d e 2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) ne Accomplish income is reporte		pt Purposes F Part XVI-A contribut	ed importantly to	
d e 2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) ne Accomplish income is reporte		pt Purposes F Part XVI-A contribut	ed importantly to	
d e 2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) ne Accomplish income is reporte		pt Purposes F Part XVI-A contribut	ed importantly to	
d e 2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) ne Accomplish income is reporte		pt Purposes F Part XVI-A contribut	ed importantly to	
d e 2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) ne Accomplish income is reporte		pt Purposes F Part XVI-A contribut	ed importantly to	
d e 2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) ne Accomplish income is reporte		pt Purposes F Part XVI-A contribut	ed importantly to	
d e 2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the color of t	lations) ne Accomplish income is reporte		pt Purposes F Part XVI-A contribut	ed importantly to	
d e 2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the color of t	lations) ne Accomplish income is reporte		pt Purposes F Part XVI-A contribut	ed importantly to	
d e .2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the color of t	lations) ne Accomplish income is reporte		pt Purposes F Part XVI-A contribut	ed importantly to	
d e 2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the color of t	lations) ne Accomplish income is reporte		pt Purposes F Part XVI-A contribut	ed importantly to	

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

Part XVII	Exempt Organiz	zations			ana molatio	po tricii itolic	aab.c		
1 Did the org	ganization directly or inc than section 501(c)(3)	directly engage ii	any of the	following with any 527, relating to pol	other organization	on described in section	501	Yes	No
a Transfers f	from the reporting found	dation to a nonch	arıtable exe	empt organization	of				
(1) Cash.							1a(1)		No
(2) Other	assets						. 1a(2)		No
b Other trans	sactions								
(1) Sales	of assets to a noncharı	table exempt org	anızatıon.				. 1b(1)		No
(2) Purch	ases of assets from a n	oncharitable exe	mpt organız	zation			. 1b(2)		No
(3) Renta	al of facilities, equipmen	t, or other assets	5				. 1b(3)		No
(4) Reimb	bursement arrangemen	ts					1b(4)		No
	or loan guarantees.						. 1b(5)		No
(6) Perforr	mance of services or me	embership or fun	draising sol	licitations			1b(6)		No
-	facilities, equipment, m		-						No
of the good	ver to any of the above ds, other assets, or serv nsaction or sharing arrai	rices given by the	e reporting	foundation If the f	foundation receive	ed less than fair marke	et value		
(a) Line No	(b) Amount involved	(c) Name of nonc	مراط مساحما	mut arganization I	(d) Decomption of	transfers, transactions, a	and charma area		+-
(a) Line NO	(b) Amount involved	(C) Name of Hone	nantable exe	inpt organization	(a) Description of	transiers, transactions, a	inu sharing arra	ngemen	LS
described i	ndation directly or indire in section 501(c) (other omplete the following so (a) Name of organizatio	than section 50: thedule	L(c)(3)) or i	•					
	(a) Name of organization		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	b) Type of organization	· ·	(C) Description o	r relationship		
			†						
Unde	er penalties of perjury, :	I declare that I h	ave examın	ed this return, incl	uding accompany	ing schedules and stat	ements, and	to the	best
l l	y knowledge and belief h preparer has any kno		t, and comp	plete Declaration o	of preparer (other	than taxpayer) is bas			
Here	*****			2019-11-11	*****		May the IRS d return with the prepa below		
' s	Signature of officer or tr	rustee		Date	Title		(see instr)?	√ γes l	□No
	Print/Type preparer's MICHAEL PESTKA	name Pre	parer's Sıgr	nature	Date	Check if self- employed ▶ ☐	TIN P0018	5941	
Paid									
Preparer Use Only		ELAND BUHL & C	OMPANY PL	LP		Fil	rm's EIN ▶41	-12927	'16
		0 EAST WAYZATA	A BOULEVA	RD STE 300					
	WA	AYZATA, MN 553	911766			Ph	none no (952	() 476-7	7100

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ACES1115 EAST HENNEPIN AVENUE NONE 501 (C)3 **GENERAL FUND** 5,000

MINNEAPOLIS, MN 55414				
ALS MINNESOTA 333 NORTH WASHINGTON AVENUE SUITE 105	NONE	501 (C)3	GENERAL FUND	10,000

SUITE 105 MINNEAPOLIS, MN 55401				
ALS SOUTH FLORIDA	NONE	501 (C)3	GENERAL FUND	5

MINNEAPOLIS, MN 55401				
ALS SOUTH FLORIDA 3242 PARKSIDE CENTER CIRCLE TAMPA FL 33619	NONE	501 (C)3	GENERAL FUND	5,0

ALS SOUTH FLORIDA 3242 PARKSIDE CENTER CIRCLE TAMPA, FL 33619	NONE	501 (C)3	GENERAL FUND	5,000
Total			▶ 3a	375,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager

Name and address (home or business)

Total .

<u> </u>	or substantial contributor			
a Paid during the year				
BOYS AND GIRLS CLUBS OF BROWARD COUNTY 877 NORTHWEST 61ST STREET FORT LAUDERDALE, FL 33309	NONE	501 (C)3	GENERAL FUND	25,000

recipient

FORT LAUDERDALE, FL 33309				
BEL13VE IN MIRACLES FOUNDATION 1820 OLD HIGHWAY NW 13 NEW BRIGHTON, MN 55112	NONE	501 (C)3	GENERAL FUND	10,000

BEL13VE IN MIRACLES FOUNDATION 1820 OLD HIGHWAY NW 13 NEW BRIGHTON, MN 55112	NONE	501 (C)3	GENERAL FUND	10,000
BRECK SCHOOL123 OTTAWA AVENUE N	NONE	501 (C)3	GENERAL FUND	10,000

1820 OLD HIGHWAY NW 13 NEW BRIGHTON, MN 55112	NONE	501 (C)3	GENERAL FUND	10,000
BRECK SCHOOL123 OTTAWA AVENUE N	NONE	501 (C)3	GENERAL FUND	10,000

1820 OLD HIGHWAY NW 13 NEW BRIGHTON, MN 55112				
BRECK SCHOOL123 OTTAWA AVENUE N	NONE	501 (C)3	GENERAL FUND	10,000

BRECK SCHOOL123 OTTAWA AVENUE N	NONE	501 (C)3	GENERAL FUND	10,000
GOLDEN VALLEY, MN 55422				

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

THE BUONICONTI FUND 1095 MW 14TH TERRACE MIAMI, FL 33136	NONE	501 (C)3	GENERAL FUND	10,000
DULUTH EAST HIGH SCHOOL	NONE	501 (C)3	GENERAL FUND	12,000

DULUTH EAST HIGH SCHOOL FOUNDATION 130 W SUPERIOR STREET SUITE 926 DULUTH, MN 55802	NONE	501 (C)3	GENERAL FUND	12,000
FEED MY STARVING CHILDREN 401 93RD AVENUE NW	NONE	501 (C)3	GENERAL FUND	5,000

FEED MY STARVING CHILDREN 401 93RD AVENUE NW COON RAPIDS, MN 55433 NONE 501 (C)3 GENERAL FUND 5,000	DULUTH, MN 55802				
	401 93RD AVENUE NW	NONE	501 (C)3	GENERAL FUND	5,000

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

WOMEN OF TOMORROW 8400 NW 36TH STREET SUITE 450 DORAL, FL 33166	NONE	501 (C)3	GENERAL FUND	1,500
JOE DIMAGGIO CHILDREN'S HOSPITAL	NONE	501 (C)3	GENERAL FUND	10,000

JOE DIMAGGIO CHILDREN'S HOSPITAL FOUNDATION 3329 JOHNSON STREET HOLLYWOOD, FL 33021	NONE	501 (C)3	GENERAL FUND	10,000
LEONARDO'S BASEMENT	NONE	501 (C)3	GENERAL FUND	2.000

3329 JOHNSON STREET HOLLYWOOD, FL 33021				
LEONARDO'S BASEMENT 150 WEST 60TH STREET MINNEAPOLIS, MN 55419	NONE	501 (C)3	GENERAL FUND	2,000

LEONARDO'S BASEMENT 150 WEST 60TH STREET MINNEAPOLIS, MN 55419 NONE 501 (C)3 GENERAL FUND 2,000		HOLLYWOOD, FL 33021				
	1	150 WEST 60TH STREET	NONE	501 (C)3	GENERAL FUND	2,000

Total .

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year MAKE A WISH MINNESOTA NONE 501 (C)3 **GENERAL FUND** 15,000 615 FIRST AVENUE NORTHEAST SUITE 415 MINIMENDOLIS MN 55413

MINNEAL GEIS, MN 33413				
MAKE A WISH SOUTH FLORIDA 4491 SOUTH STATE ROAD 7 SUITE 201 FORT LAUDERDALE, FL 33314	NONE	501 (C)3	GENERAL FUND	15,000
MAYO CLINIC CANCER RESEARCH	NONE	501 (C)3	GENERAL FUND	20,000

Total			▶ 3a	375,500
MAYO CLINIC CANCER RESEARCH 200 FIRST STREET SOUTHWEST ROCHESTER, MN 55905	NONE	501 (C)3	GENERAL FUND	20,000
4491 SOUTH STATE ROAD 7 SUITE 201 FORT LAUDERDALE, FL 33314				

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
MAYO CLINIC CENTER FOR INDIVIDUALIZED MEDICINE 200 FIRST STREET SOUTHWEST ROCHESTER, MN 55905	NONE	501 (C)3	GENERAL FUND	20,000

ROCHESTER, MN 55905				
MAYO CLINIC CENTER FOR REGENERATIVE MEDICINE 200 FIRST STREET SOUTHWEST ROCHESTER, MN 55905	NONE	501 (C)3	GENERAL FUND	

Total .

1	MS SOCIETY FLORIDA	NONE	E01 (C)2	CENEDAL ELIND	15.000
	REGENERATIVE MEDICINE 200 FIRST STREET SOUTHWEST ROCHESTER, MN 55905				
ı	MAYO CLINIC CENTER FOR	NONE	501 (C)3	GENERAL FUND	20,000

REGENERATIVE MEDICINE 200 FIRST STREET SOUTHWEST ROCHESTER, MN 55905				
MS SOCIETY FLORIDA	NONE	501 (C)3	GENERAL FUND	15,000

ROCHESTER, MIN 35905				
AS SOCIETY FLORIDA 125 WEST COMMERCIAL BLVD	NONE	501 (C)3	GENERAL FUND	15,000
ORT LAUDERDALE, FL 33309				

▶ 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
MS SOCIETY MINNESOTA	NONE	501 (C)3	GENERAL FUND	20,000

200 SOUTH 12TH AVENUE MINNEAPOLIS, MN 55415				
NSU ART MUSEUM ONE EAST LAS OLAS BOULEVARD	NONE	501 (C)3	GENERAL FUND	

NONE

FORT LAUDERDALE, FL 33301 NORTH MEMORIAL FOUNDATION

3300 OAKDALE AVENUE NORTH ROBBINSDALE, MN 55422

Total . .

501 (C)3	GENERAL FUND	

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Foundation status of recipient

Purpose of grant or contribution

PLACE FOR HOPE9078 ISAIAH LANE WEST PALM BEACH, FL 33418	NONE	501 (C)3	GENERAL FUND	20,000
PRISM730 FLORIDA AVENUE SOUTH GOLDEN VALLEY, MN 55426	NONE	501 (C)3	GENERAL FUND	15,000
SHRINERS HOSPITALS FOR CHILDREN	NONE	501 (C)3	GENERAL FUND	10,000

GOLDEN VALLEY, MN 55426				
SHRINERS HOSPITALS FOR CHILDREN MINNESOTA 2025 EAST RIVER PARKWAY MINNEAPOLIS, MN 55414	NONE	501 (C)3	GENERAL FUND	10,000
Total			▶ 3a	375,500

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

SHRINERS HOSPITALS FOR CHILDREN NONE 501 (C)3 GENERAL FUND 5,000 TAMPA 12502 USF PINE DRIVE TAMPA, FL 33612	a raid daring the year				
	TAMPA 12502 USF PINE DRIVE	NONE	501 (C)3	GENERAL FUND	5,000

TAMPA, FL 33612				
ST JUDE CHILDREN'S HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105	NONE	501 (C)3	GENERAL FUND	15,000
THE EMILY DROCDAM	NONE	501 (C)2	CENEDAL ELIND	25,000

501 ST JUDE PLACE MEMPHIS, TN 38105		(-,-		23,000
THE EMILY PROGRAM 5354 PARKDALE DRIVE	NONE	501 (C)3	GENERAL FUND	25,000

MEMPHIS, TN 38105				
THE EMILY PROGRAM 5354 PARKDALE DRIVE ST LOUIS PARK, MN 55416	NONE	501 (C)3	GENERAL FUND	25,000

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

	or substantial continuation			
a Paid during the year				
YMCA OF THE GREATER TWIN CITIES NW 5901 PO BOX 1450	NONE	501 (C)3	GENERAL FUND	15,000

MINNEAPOLIS, MN 55485				
YMCA OF SOUTH FLORIDA 900 SE 3 AVENUE SUITE 300 FORT LAUDERDALE FL 33316	NONE	501 (C)3	GENERAL FUND	10,000

			I .	
YMCA OF SOUTH FLORIDA 900 SE 3 AVENUE SUITE 300 FORT LAUDERDALE, FL 33316	NONE	501 (C)3	GENERAL FUND	10,000

efile GRAPHIC print - DO NOT F	ROCESS As Filed	Data -	D	LN: 93491318029009
TY 2018 Accounting Fe	ees Schedule			_
	Name: PADDO	CK FOUNDATION		
	EIN: 46-1610	0503		
_	_			1
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
COPELAND BUHL & CO	4,053	4,053		0

effie GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491318029009
TY 2018 Investments Corpora	te Bonds Schedule	
Name:	PADDOCK FOUNDATION	

BNY MELLON XXXX80

BNY MELLON XXXX20

BNY MELLON XXXX30

EIN: 46-1610503	
Investments Corporate Bonds Schedule	

Name of Bond

EIN:	46-1610503	

End of Year Book

Value

1,177,116

504,166

528,944

End of Year Fair

Market Value

1,132,232

500,290

efile GRAPHIC print - DO NOT PROCESS As Filed Data -	DLN: 93491318029009
TY 2018 Investments Corporate Stock Schedule	
Name: PADDOCK FOUNDATIO	N
FTN: 46-1610503	

DIN. 0240424002000

DO NOT DECCESS.

EIN: 40-1010303		
Investments Corporation Stock Schedule		
Name of Stock	End of Year Book Value	End of Year Fair Market Value
BNY MELLON XXXX40	3,172,217	3,657,625

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491318029009
TY 2018 Investments - Other S	Schedule	
Name: F	PADDOCK FOUNDA	ATION

1,325,055

1,282,775

EIN: 46-1610503

BNY MELLON XXXX60

Investments Other Schedule 2				
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value	
BNY MELLON XXXX50	AT COST	1,294,517	1,161,841	

AT COST

efile GRAPHIC print - DO NOT PROCESS

Name: PADDOCK FOUNDATION

As Filed Data -

DIVIDEND RECEIVABLE

	EIN: 46-1610503
Other Assets Schedule	

Description

4640500

Beginning of Year -

Book Value

5,548

End of Year - Book

Value

DLN: 93491318029009

8,017

End of Year - Fair Market Value

efile GRAPHIC print - DO NOT PROCESS	S As Filed Data	-	DLI	N: 93491318029009	
TY 2018 Other Professional Fees Schedule					
Nam	e: PADDOCK FO	DUNDATION			
EIN: 46-1610503					
Catacassis	A a	Not Tourselment	Adinated Nat	Dishuusamanta	
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable	
				Purposes	

27,900

Category	Amount	Net Investment Income	Adjusted Net Income	D f

27,900

BNY MELLON - INVESTMENT MANAGEMENT

efile GRAPHIC print - DO NOT P	ROCESS As Filed Data	1 -	DL	N: 93491318029009		
TY 2018 Taxes Schedule						
	Name: PADDOCK F EIN: 46-1610503					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
FOREIGN TAXES	7,459	7,459		0		
FEDERAL TAXES	32,000	0		0		

efile GRAPHIC print - DC	NOT PROCESS As Filed Data -		DLN: 93491318029009
Schedule B	Schedule of Contr	ibutors	OMB No 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ ► Go to <u>www irs gov/Form990</u> for the		2018
Name of the organizatio PADDOCK FOUNDATION		Employer	r identification number
Organization type (chec	one)	46-16105	03
Filers of:	Section:		
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization		
	4947(a)(1) nonexempt charitable trust not tre	eated as a private foundation	
	☐ 527 political organization		
Form 990-PF	✓ 501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treater	d as a private foundation	
	☐ 501(c)(3) taxable private foundation		
	on filing Form 990, 990-EZ, or 990-PF that received, roperty) from any one contributor. Complete Parts I a		
Special Rules			
under sections 50 received from any	n described in section 501(c)(3) filing Form 990 or 99(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A one contributor, during the year, total contributions of 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and I	(Form 990 or 990-EZ), Part II, line 1 f the greater of (1) \$5,000 or (2) 2% (l3, 16a, or 16b, and that
during the year, to	n described in section 501(c)(7), (8), or (10) filing Formal contributions of more than \$1,000 exclusively for representation of cruelty to children or animals. Complete	eligious, charitable, scientific, literary	
during the year, co If this box is check purpose Don't co	n described in section 501(c)(7), (8), or (10) filing Form ntributions exclusively for religious, charitable, etc., p ed, enter here the total contributions that were receive inplete any of the parts unless the General Rule appli- e, etc., contributions totaling \$5,000 or more during the	ourposes, but no such contributions to red during the year for an exclusively lies to this organization because it re	otaled more than \$1,000 religious, charitable, etc , ceived <i>nonexclusively</i>
990-EZ, or 990-PF), but it	that isn't covered by the General Rule and/or the Spe must answer "No" on Part IV, line 2, of its Form 990, m 990PF, Part I, line 2, to certify that it doesn't meet t	, or check the box on line H of its	
For Paperwork Reduction Actor Form 990, 990-EZ, or 990-		613X Schedule B (Form 9	990, 990-EZ, or 990-PF) (2018)

Name of organization PADDOCK FOUNDATION

Employer identification number

46-	4	61	0 5	2

		46-161050	3
Part I	Contributors (See Instructions) Use duplicate copies of Part I if additional space is nee	eded	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	See Additional Data Table	\$	Person Payroll Noncash (Complete Part II
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	for noncash contribution) (d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	contribution) (d) Type of contribution
		\$	Person
			(Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
			(Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	Type of contribution
		\$	Payroll
			(Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	Type of contribution
		s	Person
			(Complete Part II for noncash contribution)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018) Page 3 Name of organization **Employer identification** PADDOCK FOUNDATION number 46-1610503 Part II Noncash Property (See Instructions) Use duplicate copies of Part II if additional space is needed (c) (a) (b) (d) No. from FMV (or estimate) Description of noncash property given Date received Part I (See instructions) See Additional Data Table \$ (a) (c) (b) (d) FMV (or estimate) No. from Description of noncash property given Date received Part I (See instructions)

		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Additional Data

Software ID:

Software Version:

EIN: 46-1610503

Name: PADDOCK FOUNDATION

n 990 Schedule E	3, Part I - Contributors (see Instructions) Use duplicate cop	es of Part I if additional space	is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contrib	oution
	EAGLE VENTURE CAPITAL LLC		Person	
1	155 LAKE STREET EAST SUITE 2000		Payroll	
	133 EARE STREET EAST 3017E 2000	\$ 7,689	Noncash	<u> </u>
	WAYZATA, MN 55391			
			(Complete Part II t contributio	
	EAGLE VENTURE CAPITAL LLC		Person	
2	155 LAKE STREET EAST SUITE 2000		Payroll	П
		\$ 10,700	Noncash	<u> </u>
	WAYZATA, MN 55391			
			(Complete Part II t contributio	
	EAGLE VENTURE CAPITAL LLC		Person	
3	155 LAKE STREET EAST SUITE 2000		Payroll	
		\$ 4,623	Noncash	<u> </u>
	WAYZATA, MN 55391			
			(Complete Part II t contributio	
	EAGLE VENTURE CAPITAL LLC		Person	
4			Payroll	
	155 LAKE STREET EAST SUITE 2000	\$ 4,491	Noncash	
	WAYZATA, MN 55391		Noncasii	✓
	WAIZAIA, FIII 33331		(Complete Part II t contributio	
	EAGLE VENTURE CAPITAL LLC		Person	П
<u>5</u>	155 LAKE STREET EAST SUITE 2000		Payroll	
	133 LAKE STREET EAST SOITE 2000	\$ 1,262	Noncash	
	WAYZATA, MN 55391			✓
	,		(Complete Part II i contributio	
	EAGLE VENTURE CAPITAL LLC		Person	П
<u>6</u>	155 LAKE STREET EAST SUITE 2000		Payroll	
	133 LAKE STREET EAST SOTTE 2000	\$ 53,952	Noncash	
	WAYZATA, MN 55391			✓
			(Complete Part II	
			contributio	ns)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contrib	ution
	EAGLE VENTURE CAPITAL LLC		Person	
7	155 LAKE STREET EAST SUITE 2000		Payroll	
		\$ 52,956	Noncash	<u> </u>
	WAYZATA, MN 55391		(Complete Part II f	
			contribution Person	ns)
<u>8</u>	EAGLE VENTURE CAPITAL LLC			
-	155 LAKE STREET EAST SUITE 2000		Payroll	
		\$ 37,826	Noncash	✓
	WAYZATA, MN 55391		(Complete Part II fo contribution	
	EAGLE VENTURE CAPITAL LLC		Person	
<u>9</u>	155 LAKE STREET EAST SUITE 2000	_	Payroll	
	133 BINE STREET EAST SOITE 2000	\$ 30,010	Noncash	<u> </u>
	WAYZATA, MN 55391		(Complete Part II fo contribution	or noncash
	EAGLE VENTURE CAPITAL LLC		Person	
<u>10</u>	155 LAKE STREET EAST SUITE 2000		Payroll	
		\$ 11,590	Noncash	<u> </u>
	WAYZATA, MN 55391		(Complete Part II fo contribution	or noncash
	EAGLE VENTURE CAPITAL LLC		Person	
<u>11</u>	155 LAKE STREET EAST SUITE 2000		Payroll	
	133 EARE STREET EAST SOITE 2000	\$ 6,842	Noncash	✓
	WAYZATA, MN 55391		(Complete Part II f	or noncash
			contribution Person	ns)
<u>12</u>	EAGLE VENTURE CAPITAL LLC		Payroll	
_	155 LAKE STREET EAST SUITE 2000	# 2 000	•	
	WAYZATA, MN 55391	\$ 3,880	Noncash	\checkmark
	WAIZAIA, MIN 33391		(Complete Part II fo	

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contrib	ution
	EAGLE VENTURE CAPITAL LLC		Person	
<u>13</u>	155 LAKE STREET EAST SUITE 2000		Payroll	
		\$ 51,416	Noncash	<u> </u>
	WAYZATA, MN 55391		(Complete Part II fo contribution	or noncash
	EAGLE VENTURE CAPITAL LLC		Person	<u>''s)</u>
<u>14</u>			Payroll	
	155 LAKE STREET EAST SUITE 2000	\$ 12,256	Noncash	
	WAYZATA, MN 55391			✓
	,		(Complete Part II fo contribution	
15	EAGLE VENTURE CAPITAL LLC		Person	
<u>15</u>	155 LAKE STREET EAST SUITE 2000		Payroll	
		\$ 14,835	Noncash	✓
	WAYZATA, MN 55391		(Complete Part II fo contribution	or noncash
	EAGLE VENTURE CAPITAL LLC		Person	$\overline{\Box}$
<u>16</u>	155 LAKE STREET EAST SUITE 2000	_	Payroll	
	133 EARE STREET EAST 301TE 2000	\$ 7,252	Noncash	<u> </u>
	WAYZATA, MN 55391		(Complete Part II fo contribution	or noncash
	EAGLE VENTURE CAPITAL LLC		Person	, <u>,,</u>
<u>17</u>	155 LAKE STREET EAST SUITE 2000		Payroll	
	133 LAKE STREET EAST SOITE 2000	\$ 28,542	Noncash	✓
	WAYZATA, MN 55391		(C	_
			(Complete Part II fo contribution	
	EAGLE VENTURE CAPITAL LLC		Person	
<u>18</u>	155 LAKE STREET EAST SUITE 2000		Payroll	$\overline{\Box}$
	255 2 1112 5 1112 1 25 1 5 5 5 1 1 2 5 5 5	\$ 50,476	Noncash	<u> </u>
	WAYZATA, MN 55391		(Complete Part II fo contribution	or noncash

-om aan Schednie	B, Part I - Contributors (see Instructions) Use duplicate copies	oi Fart i il auditional space	ris needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
10	EAGLE VENTURE CAPITAL LLC		Person	Ī
<u>19</u>	155 LAKE STREET EAST SUITE 2000		Payroll	
		\$ 20,381	Noncash 🕙	7
	WAYZATA, MN 55391		(Complete Part II for nonce contributions)	ash
20	EAGLE VENTURE CAPITAL LLC		Person	
<u>20</u>	155 LAKE STREET EAST SUITE 2000		Payroll	
		\$ 3,133	Noncash 🔽	7
	WAYZATA, MN 55391		(Complete Part II for nonce contributions)	ash
24	EAGLE VENTURE CAPITAL LLC		Person	
<u>21</u>	155 LAKE STREET EAST SUITE 2000		Payroll	J l
		\$ 21,175	Noncash	7
	WAYZATA, MN 55391		(Complete Part II for nonce contributions)	
22	EAGLE VENTURE CAPITAL LLC		Person	
<u>22</u>	155 LAKE STREET EAST SUITE 2000	-	Payroll	_
		\$ 13,463	Noncash	7
	WAYZATA, MN 55391		(Complete Part II for nonce contributions)	ash
22	EAGLE VENTURE CAPITAL LLC		Person	
<u>23</u>	155 LAKE STREET EAST SUITE 2000		Payroll	J
		\$ 12,681	Noncash	7
	WAYZATA, MN 55391		(Complete Part II for nonce contributions)	ash
	EAGLE VENTURE CAPITAL LLC		Person	$\overline{1}$
<u>24</u>	155 LAKE STREET EAST SUITE 2000	-	Payroll	_
		\$ 4,174	Noncash	- 7
	WAYZATA, MN 55391		(Complete Part II for nonce contributions)	

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribu	ition
	EAGLE VENTURE CAPITAL LLC		Person	
25			Payroll	
	155 LAKE STREET EAST SUITE 2000	# 100	Namasah	
		\$ 100	Noncash	~
	WAYZATA, MN 55391		(Complete Part II fo	
	EAGLE VENTURE CAPITAL LLC		Person	
26	155 LAKE STREET EAST SUITE 2000		Payroll	
	135 LAKE STREET EAST SUITE 2000	\$ 19,806	Noncash	<u></u>
	WAYZATA, MN 55391			$\overline{\mathbf{v}}$
	WATZATA, MIN 55391		(Complete Part II fo contribution	
	EAGLE VENTURE CAPITAL LLC		Person	
27	4 F F LAWE OTD FFT FACT CUTTE 2000		Payroll	_
	155 LAKE STREET EAST SUITE 2000	\$ 17,448	Noncash	<u> </u>
	WAYZATA MN FF204		Noncasii	√
	WAYZATA, MN 55391		(Complete Part II fo	
	EAGLE VENTURE CAPITAL LLC		Person	
28			Payroll	
	155 LAKE STREET EAST SUITE 2000	# 2 073		
		\$ 2,873	Noncash	$\overline{\mathbf{v}}$
	WAYZATA, MN 55391		(Complete Part II fo	
	DVAN B DADDOCK		Person	
<u>29</u> ——	RYAN B PADDOCK 4350 BAKER ROAD SUITE 220		Payroll	_
	1330 57 1121 1120	\$ 2,170	Noncash	<u> </u>
	MINNETONKA, MN 55343	\$ 2,170	Noncash	~
	,		(Complete Part II fo	
	DVAN D DADDOCK		Person	
30 —	RYAN B PADDOCK 4350 BAKER ROAD SUITE 220	 	Payroll	_
	TOO DAKEN NOAD SOITE 220		•	
	MINNETONKA, MN 55343	\$ 3,314	Noncash	✓
	FIRMLIONION, FIR 33343		(Complete Part II fo	

orm 990 Schedule	B, Part I - Contributors (see Instructions) Use duplicate cop	Dies of Part I if additional space	: is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contril	bution
	DVAN B DADDOCK		Person	
<u>31</u>	RYAN B PADDOCK 4350 BAKER ROAD SUITE 220		Payroll	
	4330 BAKEK KOAD 3011E 220		-	
	MINNETONKA, MN 55343	\$ 2,125	Noncash	✓
	MINNETONKA, MN 55343		/G	
			(Complete Part II contribution	
			Person	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
<u>32</u>	RYAN B PADDOCK		Payroll	
	4350 BAKER ROAD SUITE 220		Payloli	
		\$ 278	Noncash	✓
	MINNETONKA, MN 55343			
			(Complete Part II contribution	
	DADALVNI C MADAC		Person	
<u>33</u>	DARALYN C MARAS 4350 BAKER ROAD SUITE 220		Payroll	
	1030 BARKER NOAB SOTTE EEG	4 2 170		
	MINNETONKA, MN 55343	\$ 2,170	Noncash	✓
	PINNETONICA, PIN 33343		(Complete Part II	
			contributio	ons)
<u>34</u>	DARALYN C MARAS			
<u>54</u>	4350 BAKER ROAD SUITE 220		Payroll	
		\$ 3,314	Noncash	<u> </u>
	MINNETONKA, MN 55343			V
			(Complete Part II contributio	
	DADALVAL C MADAC		Person	
<u>35</u>	DARALYN C MARAS 4350 BAKER ROAD SUITE 220		Payroll	
	TOO DAILER ROAD SOITE 220		•	
	MINNETONKA, MN 55343	\$ 2,125	Noncash	✓
	PINNETOWA, I'IIV 55545		(Commists Do 177	
			(Complete Part II contribution	
	DARALYN C MARAS		Person	
<u>36</u>	4350 BAKER ROAD SUITE 220	 	Payroll	
		# 270	-	Ш
	MINNETONKA, MN 55343	\$ 278	Noncash	✓
	THINKE TOWNS, THE 555-15		(Complete Days II	for non-s-s-
			(Complete Part II	

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed (c) (a) (b) (d)

No. from Part I	Description of noncash property given	(See instructions)	Date received
1	151 SHARES OF APPLE INC STOCK	\$ 26,368	2018-11-29
2	417 SHARES OF ABBVIE INC STOCK	<u> </u>	2018-11-29
<u>3</u>			

	417 SHARES OF ABBVIE INC. STOCK	\$ 35,962	2018-11-29
3_	26 SHARES OF AMAZON INC STOCK	<u> </u>	2018-11-29
<u>4</u>	78 SHARES OF ANTHEM INC STOCK	\$ 21,944	2018-11-29
5			

<u>4</u>	78 SHARES OF ANTHEM INC STOCK	\$ 21,944	2018-11-29
5_	178 SHARES OF ADVANSIX INC COM STOCK	<u> </u>	2018-11-29
<u>6</u>	924 SHARES OF THE BOEING COMPANY STOCK	\$ 292,317	2018-11-29
<u>7</u>	7672 SHARES OF BANK OF AMERICA CORPORATION STOCK	\$ 211,440	2018-11-29

	170 SHARES OF ABVANSIX INC COM STOCK		
<u>6</u>	924 SHARES OF THE BOEING COMPANY STOCK	\$ 292,317	2018-11-29
7	7672 SHARES OF BANK OF AMERICA CORPORATION STOCK	<u>\$ 211,440</u>	2018-11-29
8	572 SHARES OF CATERPILLAR INC STOCK	\$ 71,386	2018-11-29

<u>6</u>	924 SHARES OF THE BOEING COMPANY STOCK	\$ 292,317	2018-11-29
7	7672 SHARES OF BANK OF AMERICA CORPORATION STOCK	\$ 211,440	2018-11-29
<u>8</u>	572 SHARES OF CATERPILLAR INC STOCK	\$ 71,386	2018-11-29
•		· · · · · · · · · · · · · · · · · · ·	1

7	7672 SHARES OF BANK OF AMERICA CORPORATION STOCK	<u> </u>	2018-11-29	
<u>8</u>	572 SHARES OF CATERPILLAR INC STOCK	\$ 71,386	2018-11-29	
9	1998 SHARES OF CISCO SYSTEMS INC STOCK	<u> </u>	2018-11-29	
<u>10</u>	1303 CHARES OF EDA CROUD INC STOCK	¢ 14 981	2018-11-39	

\$ 14,981

2018-11-29

8_	572 SHARES OF CATERPILLAR INC STOCK	\$ 71,386	2018-11-29
<u>9</u>	1998 SHARES OF CISCO SYSTEMS INC STOCK	\$ 91,049	2018-11-29

1382 SHARES OF ERA GROUP, INC STOCK

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed (c) (a) (b) (d) FMV (or estimate) No. from Part I Description of noncash property given Date received (See instructions) 11 504 SHARES OF ETSY, INC STOCK \$ 24,308 2018-11-29 <u>12</u> 202 SHARES OF H C A HOLDINGS INC STOCK \$ 27,373 2018-11-29 <u>13</u> 1503 SHARES OF HOME DEPOT INC STOCK \$ 255,239 2018-11-29 14 2153 SHARES OF HP INC STOCK \$ 49,110 2018-11-29 15 2018-11-29 406 SHARES OF IDEXX LABS INC STOCK \$ 79,860 16 374 SHARES OF INTEL CORP STOCK \$ 17,746 2018-11-29 <u>17</u> 650 SHARES OF INTUIT STOCK \$ 130,923 2018-11-29 18 1553 SHARES OF JP MORGAN CHASE & CO STOCK \$ 169,681 2018-11-29 1094 SHARES OF KRATON PERFORMANCE POLYMERS <u>19</u> 2018-11-29 INC STOCK \$ 28,039 113 SHARES OF LYONDELLBASELL INDUSTRIES NV 20

STOCK

2018-11-29

\$ 10,407

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed (c) (a) (b) (d) FMV (or estimate) No. from Part I Description of noncash property given Date received (See instructions) 21 128 SHARES OF METTLER-TOLEDO INTL INC STOCK \$ 77,400 2018-11-29 22 2385 SHARES OF MICRON TECHNOLOGY INC STOCK \$ 87,219 2018-11-29 23 1461 SHARES OF NUTRI/SYSTEM INC STOCK \$ 52,523 2018-11-29 24 173 SHARES OF ROYAL CARIBBEAN CRUISES LTD 2018-11-29 STOCK \$ 19,283 25 2018-11-29 8 SHARES OF THE RMR GROUP INC STOCK \$ 508 26 2018-11-29 3290 SHARES OF ISTAR FINANCIAL INC STOCK \$ 34,381 27 400 SHARES OF UNITED HEALTH GROUP INC STOCK \$ 106,464 2018-11-29 28 144 SHARES OF VISA INC-CLASS A SHRS STOCK \$ 19,575 2018-11-29 29 241 SHARES OF NETFLIX COM INC STOCK \$ 68,740 2018-12-07 30 2018-12-07

\$ 45,329

279 SHARES OF NVIDIA CORP STOCK

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed (c) (a) (b) (d) FMV (or estimate) Description of noncash property given No. from Part I Date received (See instructions) 31 111 SHARES OF CONSTELLATION BRANDS STOCK \$ 21,567 2018-12-07 32 2018-12-07 12 SHARES OF ADOBE SYSTEMS INC STOCK \$ 2,998 22

<u>33</u>	241 SHARES OF NETFLIX COM INC STOCK	\$ 68,740	2018-12-07
<u>34</u>	279 SHARES OF NVIDIA CORP STOCK	<u> </u>	2018-12-07
<u>35</u>	111 SHARES OF CONSTELLATION BRANDS STOCK	\$ 21,567	2018-12-07
<u>36</u>	12 CHARES OF ADORE SYSTEMS THIS STOCK	+ 2.000	2010 12 07

\$ 2.998

2018-12-07

12 SHARES OF ADOBE SYSTEMS INC STOCK