Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

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

So to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

=		0040	T 1 1 004	0			20 00 10
		ndar year 2018 or tax year beginning	Jul 1,201	8, and		er identification numb	un 30, 20 19
		•					GI
		WELLS FOUNDATION	l Door	m/suite		193741 ne number (see instruc	hone
		d street (or P.O. box number if mail is not delivered to street address)	, Addi	nvsuite		·	uoris)
12	2231	ACADEMY ROAD NE, Suite 301-322) 328-9924	
		n, state or province, country, and ZIP or foreign postal code			C If exemp	tion application is pend	ding, check here ▶ [
		JERQUE NM 87111					
G	Chec	· · · · —	n of a former public	charity	D 1. Foreig	ın organızatıons, check	here . ►
		☐ Final return ☐ Amended			2. Foreig	ın organizations meetin	g the 85% test,
_		Address change Name cha		A(1		here and attach comp foundation status was	
Н		k type of organization: X Section 501(c)(3) exempt p				507(b)(1)(A), check here	
<u>!</u>		on 4947(a)(1) nonexempt charitable trust Other ta:					
ı		market value of all assets at J Accounting method	i: 🔼 Cash 📋 A	ccruai		indation is in a 60-mon	
		of year (from Part II, col. (c), Other (specify)			under se	ction 507(b)(1)(B), chec	K nere . ► _
Б		6) ► \$ 7,580,193. (Part I, column (d) must be	e on cash basis.)				14.5
F	art I		(a) Revenue and	(b) Net	investment	(c) Adjusted net	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books		come	ıncome	purposes (cash basis only)
			 	123			(Jac., Jac.)
<i>!</i>	1	Contributions, gifts, grants, etc., received (attach schedule)	3 % 1.	2-12-	*	ļ	1 3
1/	2	Check ► I if the foundation is not required to attach Sch. B		 	*,	ļ	,
~/	3	Interest on savings and temporary cash investments	11.	 	11	DE0-	
	4	Dividends and interest from securities	130,556.	$\frac{1}{1}$	30 <u>,55</u> 6.	HECEN	VFD
	5a	Gross rents				97	10
4	b	Net rental income or (loss)	1 112 040	 		SEP 26	2019
Ž	6a	Net gain or (loss) from sale of assets not on line 10	1,113,249.	T. C.	(C+		2019
ě	b	Gross sales price for all assets on line 6a 4,820,744.			Stmt ³	0000	Ğ
Revenue	7	Capital gain net income (from Part IV, line 2)		1 1 1	13,249	OGDEN	
_	8	Net short-term capital gain	٠ مد مد	 			79.00
	10a	Income modifications			<u> </u>		1
	b	Less: Cost of goods sold	-	*b		- 4	769 y 1
	C	Gross profit or (loss) (attach schedule)		' 		, <u> </u>	3 19 5
	11	Other income (attach schedule)		 			
	12	Total. Add lines 1 through 11	1,243,816.	1 2	43,816.		
	13	Compensation of officers, directors, trustees, etc.	4,500.	1,2	43,010.		4,500.
seuses	14	Other employee salaries and wages	4,300.				4,500.
SE.	15	Pension plans, employee benefits					
	16a	Legal fees (attach schedule) . L-16a Stmt	244.				244.
Ü	b	Accounting fees (attach schedule) L-1.6b. Stmt	2,500.				2,500.
<u>ĕ</u> .	c	Other professional fees (attach schedule) L-16c .Stmt	93,254.		52,254.		41,000.
rat	17	Interest	13,231	$\overline{}$,		
Operating and Administrative Ex	18	Taxes (attach schedule) (see instruction spe. Stmt.	4,702.		822.		
Ë	19	Depreciation (attach schedule) and depletion	, , , , , , , , , , , , , , , , , , ,				
þ	20	Occupancy					
٨	21	Travel, conferences, and meetings	1,399.				1,399.
JUK	22	Printing and publications					
ğ	23	Other expenses (attach schedule) See .St.mt	2,911.				2,911.
iţi	24	Total operating and administrative expenses.					
era		Add lines 13 through 23	109,510.	!	3,076.		52,554.
þ	25	Contributions, gifts, grants paid	370,000.	"	H.		370,000.
<u> </u>	26	Total expenses and disbursements. Add lines 24 and 25	479,510.	,	53,076.		422,554.
	27	Subtract line 26 from line 12:		, , , , ,	Card a graph	Ham fig. 1	A. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
	а	Excess of revenue over expenses and disbursements	764,306.	144	<u> </u>		
	b	Net investment income (If negative, enter -0-) .	明の子がご と るのだ		90,740.	The state of the state of	DA FE FILL LEDGE
	C	Adjusted net income (if negative, enter -0-)	1.24	1. 24	11 4 4		3 14

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

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Pa	art îl	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		End o	of year
		should be for end-of-year amounts only. (See instructions)	(a) Book Value	(b) Book Va	lue	(c) Fair Market Value
	1	Cash-non-interest-bearing	11,526.	17,6	603.	17,603.
	2	Savings and temporary cash investments	215,246.	499,	157.	
	3	Accounts receivable ▶				
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ▶	D 1			
		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 ▶				<u> </u>
Ś	8	Inventories for sale or use				
Set	9	Prepaid expenses and deferred charges				
Assets	10a	Investments—U.S. and state government obligations (attach schedule)	25,032.			
•	b	Investments—corporate stock (attach schedule) .L-10b Stmt		4,288,1	120	5,532,366.
	C	Investments—corporate bonds (attach schedule) L-10c Stmt	1,154,755.	1,508,8		1,531,067.
	11	Investments—land, buildings, and equipment: basis		1,500,0		1,001,001.
	• •	Less: accumulated depreciation (attach schedule)				
	12	Investments—mortgage loans				
	13	· · · · · · · · · · · · · · · · ·	· · · -			
	14	Investments—other (attach schedule)				
	14	Land, buildings, and equipment: basis			 -	
	45	Less: accumulated depreciation (attach schedule) ▶				
	15	Other assets (describe)				 ,
	16	Total assets (to be completed by all filers—see the				
	4 "7	instructions. Also, see page 1, item I)	5,549,421.	6,313,7	27.	7,580,193.
	17	Accounts payable and accrued expenses		· <u>-</u>		
es	18	Grants payable				
Liabilities	19	Deferred revenue				
ğ	20	Loans from officers, directors, trustees, and other disqualified persons				
Ë	21	Mortgages and other notes payable (attach schedule)				
	22 23	Other liabilities (describe ►)				
	23	Total liabilities (add lines 17 through 22)				
alances		Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26, and lines 30 and 31.				
<u>ja</u>	24	Unrestricted	-			
	25	Temporarily restricted				1
פַ	26	Permanently restricted				
Net Assets or Fund B		Foundations that do not follow SFAS 117, check here ► ⊠ and complete lines 27 through 31.				
0	27	Capital stock, trust principal, or current funds				
et	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
SS	29	Retained earnings, accumulated income, endowment, or other funds	5,549,421.	6,313,7	27.	
₹	30	Total net assets or fund balances (see instructions)	_5,549,421.	6,313,7	27.	
<u>8</u>	31	Total liabilities and net assets/fund balances (see				
_		ınstructions)	5,549,421.	6,313,7	27.	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances				
1		I net assets or fund balances at beginning of year-Part II, colur				
	end-	of-year figure reported on prior year's return)			_1	5,549,421.
2		r amount from Part I, line 27a			2	764,306.
3	Othe	er increases not included in line 2 (itemize) ►			3	
4	Add	lines 1, 2, and 3			4	6,313,727.
_	_				5	
_6	Tota	reases not included in line 2 (itemize) I net assets or fund balances at end of year (line 4 minus line 5)—F	Part II, column (b), lin	e 30	6	6,313,727.

Part	IV Capital Gains and	d Losses for Tax on Investme	ent Income			
		ind(s) of property sold (for example, real est use; or common stock, 200 shs. MLC Co.)	ate,	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a	Securites			P		
<u>b</u>						
<u>c</u>						
<u>d</u>						
<u>e</u>						1
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		ain or (loss) (f) minus (g))
<u>a</u> b	4,820,744.			3,707,495.		1,113,249.
<u>z</u>						
<u>d</u>			·			
е						
	Complete only for assets sho	owing gain in column (h) and owned b	y the foundation	on 12/31/69.	(I) Gains (Co	ol. (h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col. (i) . (j), if any		ot less than -0-) or (from col, (h))
<u>а</u>			_			1,113,249.
b						
<u></u>						
<u>d</u>						
<u>e</u>			 			
2	Capital gain net income o		lso enter in Pa enter -0- in Par		2	1,113,249.
3	If gain, also enter in Part	in or (loss) as defined in sections in the loss in the	tions. If (loss)	, enter -0- ın }	3	
Part		ler Section 4940(e) for Reduc				·
		ivate foundations subject to the se				· — — — — — — — — — — — — — — — — — — —
Was t		e this part blank. section 4942 tax on the distributa qualify under section 4940(e). Do r			pase period?	☐ Yes ⊠ No
1		ount in each column for each year	; see the instru	ictions before ma	aking any entries	
Cale	(a) Base period years endar year (or tax year beginning in	(b) Adjusted qualifying distributions	Net value of	(c) noncharitable-use as	ssets Cool. (b)	(d) stribution ratio divided by col. (c))
	2017	208,82	0.	4,719,1	03.	0.044250
	2016	91,56	8.	1,450,5	26.	0.063127
	2015	81,22		1,408,7		0.057661
	2014	83,03		1,649,0		0.050352
	2013	70,19	9.	1,703,0	57.	0.041219
2	Total of line 4 and your (d)					0.056600
2 3	Total of line 1, column (d)	for the 5-year base period—divid			. 2	0.256609
3	•	oundation has been in existence if			, ,	0.051322
4	Enter the net value of non	charitable-use assets for 2018 fro	m Part X, line	5	. 4	7,544,625.
5	Multiply line 4 by line 3				. 5	387,205.
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)			. 6	11,907.
7	Add lines 5 and 6				. 7	399,112.
8		ons from Part XII, line 4			. 8	422,554.
	Part VI instructions.	ater than line 7, check the box in I	-aπ vi, line 1b	, and complete t	nat part using a	1 % tax rate. See the

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	<u>: instri</u>	uctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)			↓
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	11,9	<u> 307.</u>	ļ,
	here ► 🗷 and enter 1% of Part I, line 27b			l l
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-)		0.	
3	Add lines 1 and 2	11,9	<u> 307.</u>	<u> </u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0.	<u> </u>
5 6	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	11,9	907.	
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 1,440.			
b	Exempt foreign organizations—tax withheld at source 6b			ĺĺ
C	Tax paid with application for extension of time to file (Form 8868) . 6c			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments. Add lines 6a through 6d	1,4	140.	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			$\overline{}$
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9	10,4	67.	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10		0.	
11_	Enter the amount of line 10 to be: Credited to 2019 estimated tax ▶ Refunded ▶ 11			
Part '	VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		×
Ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b_		×
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.			
C	Did the foundation file Form 1120-POL for this year?	1c		×
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$. [[
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers. ► \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2		×
•	·			
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		×
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	\vdash	×
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	\vdash	<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	\vdash	×
_	If "Yes," attach the statement required by <i>General Instruction T</i> .	–		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	_ f '		. [
	conflict with the state law remain in the governing instrument?	6	×	
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		×	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶			
	NM			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	×	
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes,"			
	complete Part XIV	9		<u></u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		×
ΔΔ	REV 02/01/19 PRO	orm 99	ひ-ピド	(2018)

Par	VIFA Statements Regarding Activities (continued)			
		dr j	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		×
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	10		١.,
13	person had advisory privileges? If "Yes," attach statement. See instructions	12	×	×
.0	Website address ► ISORAFOUNDATION.ORG	10		1
14	The books are in care of ▶ Kerrie Blevins Consulting Telephone no. ▶ (612)	328-	9924	
	Located at ▶ 1330 LAGOON AVE, FLOOR 4 MINNEAPOLIS MN ZIP+4 ▶ 55408			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here		•	▶ [
	and enter the amount of tax-exempt interest received or accrued during the year			,
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		×
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶			47
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		L
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):	41		-
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No	1.		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			-
	disqualified person?	, .	100 (a - 1) 1	.*٧
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No		, , ;	14
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ No (5) Transfer any income or assets to a disqualified person (or make any of either available for	-	 4	• •
	the benefit or use of a disqualified person)?	1	1 1	
	(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	<u> </u>	<u> </u>	
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .	1b		
С	Organizations relying on a current notice regarding disaster assistance, check here		iger of A	
·	were not corrected before the first day of the tax year beginning in 2018?	1c		×
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		1	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		, ,	
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and		1	
	6e, Part XIII) for tax year(s) beginning before 2018?	·	, [
L	If "Yes," list the years ▶ 20 , 20 , 20 , 20		<u>,</u> 1	. !
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	į,	ا ئى	. 1
	all years listed, answer "No" and attach statement—see instructions.)	2b		•
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		F . =	
	▶ 20, 20, 20, 20		. "	ì
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	ŀ	1 = 1	
	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	.	, 4	. ′
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	, '		
	foundation had excess business holdings in 2018.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		×
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		×

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Part	VII-B Statements Regarding Activitie	s for V	Vhich Form	4720	May Be F	Requir	ed (continue	ed)			
5a	During the year, did the foundation pay or incur							_		Yes	No
	(1) Carry on propaganda, or otherwise attempt							No		ļ	,
	(2) Influence the outcome of any specific public							7			
	directly or indirectly, any voter registration d							No			
	(3) Provide a grant to an individual for travel, sto(4) Provide a grant to an organization other that	•						No			
	section 4945(d)(4)(A)? See instructions			-				No]		ļ
	(5) Provide for any purpose other than religious										
	purposes, or for the prevention of cruelty to							No	ļ		
b	If any answer is "Yes" to 5a(1)-(5), did any of the	he trans	sactions fail t	o quali	fy under th	e exce	ptions descri	bed			
	in Regulations section 53.4945 or in a current no	otice re	garding disas	ter ass	istance? S	ee instr	uctions .		5b		
	Organizations relying on a current notice regard	-								ľ	-
С	If the answer is "Yes" to question 5a(4), does because it maintained expenditure responsibility							No		,	
	If "Yes," attach the statement required by Regul										
6a	Did the foundation, during the year, receive any					emiums	s	_			
_	on a personal benefit contract?							No	<u></u>		
b	Did the foundation, during the year, pay premiur	ns, dire	ctly or indire	ctly, on	a persona	benefi	t contract?	•	6b	<u> </u>	×
70	If "Yes" to 6b, file Form 8870.		to a probibitor	d day ah	altar transa	odian?	□ v _{••}	l Na			
	At any time during the tax year, was the foundation If "Yes," did the foundation receive any proceed		•					No	7b		
8	Is the foundation subject to the section 4960 ta		•					•	7.5	_	
Ŭ	remuneration or excess parachute payment(s) d							No			
Part	VIII Information About Officers, Direct								nploy	ees,	·
	and Contractors			_							
1	List all officers, directors, trustees, and found	dation r	managers an	d their	compens	ation. S	See instructi	one			
		1									
	(a) Name and address	hou	e, and average rs per week ed to position	(c) Co	mpensation not paid, iter -0-)	(d) emple	Contributions to byee benefit plan erred compensations	ıs	(e) Expe	nse aco allowan	
	Kander Moller	hou	rs per week ed to position ctor	(c) Co	mpensation not paid, iter -0-)	(d) emple	Contributions to byee benefit plan erred compensation	is tion	(e) Expe		nces
12231	Kander Moller Academy Road NE, Suite 301-322 Albuquerque NM 87111	hou devot Dire	rs per week ed to position ctor 1.00	(c) Co	mpensation not paid,	(d) emple	Contributions to byee benefit plan erred compensation	ıs	(e) Expe		nces
12231 Will	kander Moller Academy Road NE, Suite 301-322 Albuquerque NM 87111 Liam King	hou devot Dire	rs per week ed to position ctor 1.00 etary	(c) Co	mpensation not paid, iter -0-)	(d) emple	Contributions to byee benefit plan erred compensat	os tion	(e) Expe		O.
12231 Will 12231	Kander Moller Academy Road NE, Suite 301-322 Albuquerque NM 87111 Liam King Academy Road NE, Suite 301-322 Albuquerque NM 87111	hou devot Direc Secre	rs per week ed to position ctor 1.00 etary 2.00	(c) Co	mpensation not paid, iter -0-)	(d) emple	Contributions to byee benefit plan erred compensat	is tion	(e) Expe		nces
12231 Will 12231 Mari	Kander Moller Academy Road NE, Suite 301-322 Albuquerque NM 87111 Liam King Academy Road NE, Suite 301-322 Albuquerque NM 87111 Lka Wells	hou devot Direc Secre	rs per week ed to position ctor 1.00 etary 2.00 reasurer	(c) Co	1,500.	(d) emple	Contributions to byee benefit plan erred compensat	0.	(e) Expe		0. 0.
12231 Will 12231 Mari 12231	Kander Moller Academy Road NE, Suite 301-322 Albuquerque NM 87111 Liam King Academy Road NE, Suite 301-322 Albuquerque NM 87111 Lka Wells Academy Road NE, Suite 301-322 Albuquerque NM 87111	hou devot Direct Secret VP/T:	rs per week ed to position ctor 1.00 etary 2.00 reasurer 1.00	(c) Co	mpensation not paid, iter -0-)	(d) emple	Contributions to byee benefit plan erred compensat	os tion	(e) Expe		O.
12231 Will 12231 Mari 12231 Wenc	Kander Moller Academy Road NE, Suite 301-322 Albuquerque NM 87111 Liam King Academy Road NE, Suite 301-322 Albuquerque NM 87111 Lka Wells Academy Road NE, Suite 301-322 Albuquerque NM 87111 Academy Road NE, Suite 301-322 Albuquerque NM 87111 Aly Wells	Secre VP/T:	rs per week ed to position ctor 1.00 etary 2.00 reasurer 1.00 ident	(c) Co	1,500.	(d) emple	Contributions to byee benefit plan erred compensat	0.	(e) Expe		0. 0.
12231 Will 12231 Mari 12231 Wenc	Kander Moller Academy Road NE, Suite 301-322 Albuquerque NM 87111 Liam King Academy Road NE, Suite 301-322 Albuquerque NM 87111 Lika Wells Academy Road NE, Suite 301-322 Albuquerque NM 87111 dly Wells Academy Road NE, Suite 301-322 Albuquerque NM 87111 Compensation of five highest-paid employed	Secre VP/T:	rs per week ed to position ctor 1.00 etary 2.00 reasurer 1.00 ident 2.00	(c) Co (if i er	1,500. 1,500.	(d) empli and def	Contributions to byee benefit plan erred compensal	0. 0.	(e) Expe other a	allowan	0. 0.
12231 Will 12231 Mari 12231 Wenc	Kander Moller Academy Road NE, Suite 301-322 Albuquerque NM 87111 Liam King Academy Road NE, Suite 301-322 Albuquerque NM 87111 ika Wells Academy Road NE, Suite 301-322 Albuquerque NM 87111 dy Wells Academy Road NE, Suite 301-322 Albuquerque NM 87111	Secre VP/T:	rs per week ed to position ctor 1.00 etary 2.00 reasurer 1.00 ident 2.00	(c) Co (if i er	1,500. 1,500.	(d) empli and def	Contributions to byee benefit plan erred compensations of the compensati	0. 0. 0. ions	(e) Expe other a	allowan	0. 0.
12231 Will 12231 Mari 12231 Weno 12231 2	Kander Moller Academy Road NE, Suite 301-322 Albuquerque NM 87111 Liam King Academy Road NE, Suite 301-322 Albuquerque NM 87111 Lika Wells Academy Road NE, Suite 301-322 Albuquerque NM 87111 dly Wells Academy Road NE, Suite 301-322 Albuquerque NM 87111 Compensation of five highest-paid employed	Nou devot Direct Secre VP/T: Pres:	rs per week ed to position ctor 1.00 etary 2.00 reasurer 1.00 ident 2.00 er than those	(c) Co (lf r er	1,500. 1,500.	(d) empli and def	Contributions to byee benefit plan erred compensal	0. 0. ions	(e) Expe	one, (0. 0. 0. enter
12231 Will 12231 Mari 12231 Weno 12231 2	Academy Road NE, Suite 301-322 Albuquerque NM 87111 Liam King Academy Road NE, Suite 301-322 Albuquerque NM 87111 ka Wells Academy Road NE, Suite 301-322 Albuquerque NM 87111 dy Wells Academy Road NE, Suite 301-322 Albuquerque NM 87111 Compensation of five highest-paid employer "NONE."	Nou devot Direct Secre VP/T: Pres:	rs per week ed to position ctor 1.00 etary 2.00 reasurer 1.00 ident 2.00 er than thos	(c) Co (lf r er	1,500. 1,500. 1,500. 0. uded on li	(d) empli and def	Contributions to byee benefit plan erred compensations of the compensati	0. 0. 0. ions	(e) Expe	one,	0. 0. 0. enter
12231 Will 12231 Mari 12231 Wenc 12231 2	Academy Road NE, Suite 301-322 Albuquerque NM 87111 Liam King Academy Road NE, Suite 301-322 Albuquerque NM 87111 ka Wells Academy Road NE, Suite 301-322 Albuquerque NM 87111 dy Wells Academy Road NE, Suite 301-322 Albuquerque NM 87111 Compensation of five highest-paid employer "NONE."	hou devot Direct Secre VP/T: Pres: es (oth	rs per week ed to position ctor 1.00 etary 2.00 reasurer 1.00 ident 2.00 er than those	(c) Co (lf r er	1,500. 1,500. 1,500. 0. uded on li	(d) empli and def	contributions to byee benefit planerred compensations of the compensatio	0. 0. 0. ions	(e) Expe	one,	0. 0. 0. enter
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12231 Will 12231 Mari 12231 Wenc 12231 2	Academy Road NE, Suite 301-322 Albuquerque NM 87111 Liam King Academy Road NE, Suite 301-322 Albuquerque NM 87111 Lka Wells Academy Road NE, Suite 301-322 Albuquerque NM 87111 dy Wells Academy Road NE, Suite 301-322 Albuquerque NM 87111 Compensation of five highest-paid employee "NONE."	hou devot Direct Secre VP/T: Pres: es (oth	rs per week ed to position ctor 1.00 etary 2.00 reasurer 1.00 ident 2.00 er than those	(c) Co (lf r er	1,500. 1,500. 1,500. 0. uded on li	(d) empli and def	contributions to byee benefit planerred compensations of the compensatio	0. 0. 0. ions	(e) Expe	one,	0. 0. 0. enter
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12231 Will 12231 Mari 12231 Wenc 12231 2	Academy Road NE, Suite 301-322 Albuquerque NM 87111 Liam King Academy Road NE, Suite 301-322 Albuquerque NM 87111 Lka Wells Academy Road NE, Suite 301-322 Albuquerque NM 87111 dy Wells Academy Road NE, Suite 301-322 Albuquerque NM 87111 Compensation of five highest-paid employee "NONE."	hou devot Direct Secre VP/T: Pres: es (oth	rs per week ed to position ctor 1.00 etary 2.00 reasurer 1.00 ident 2.00 er than those	(c) Co (lf r er	1,500. 1,500. 1,500. 0. uded on li	(d) empli and def	contributions to byee benefit planerred compensations of the compensatio	0. 0. 0. ions	(e) Expe	one,	0. 0. 0. enter
12231 Will 12231 Mari 12231 Wenc 12231 2	Academy Road NE, Suite 301-322 Albuquerque NM 87111 Liam King Academy Road NE, Suite 301-322 Albuquerque NM 87111 Lka Wells Academy Road NE, Suite 301-322 Albuquerque NM 87111 dy Wells Academy Road NE, Suite 301-322 Albuquerque NM 87111 Compensation of five highest-paid employee "NONE."	hou devot Direct Secre VP/T: Pres:	rs per week ed to position ctor 1.00 etary 2.00 reasurer 1.00 ident 2.00 er than those (b) Title, and a hours per week devoted to per the content of the co	(c) Co (lf r er	1,500. 1,500. 1,500. 0. uded on li (c) Comper	(d) emploand def	see instruct (d) Contribution employee benefit plan erred compensation (d) Contribution employee benefit plan plans and defering compensation	O. O. O. ions	(e) Expe	one, o	0. 0. 0. enter

Part VI	and Contractors (continued)	
3 F	ive 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
None		
Total nu	mber of others receiving over \$50,000 for professional services	0
Part IX		10
	foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of	_
	ations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1		
2		
3		
4		
Part IX	-B Summary of Program-Related Investments (see instructions)	<u> </u>
	e the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	o the the largest program related investments made by the loan dating the tax year on times i and a.	1
•		
2		
]
All other	program-related investments. See instructions	
3		
Total. Ad	Id lines 1 through 3	

Part	Minimum Investment Return (All domestic foundations must complete this part. Fore	ign fo	undations,
	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	6,859,290.
b	Average of monthly cash balances	1b	800,228.
С	Fair market value of all other assets (see instructions)	1c	· · · · · · · · · · · · · · · · · · ·
d	Total (add lines 1a, b, and c)	1d	7,659,518.
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	4
3	Subtract line 2 from line 1d	3	7,659,518.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	114,893.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	7,544,625.
6	Minimum investment return. Enter 5% of line 5	6	377,231.
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations, check here ▶ ☐ and do not complete this part.)	ounda	ations
1	Minimum investment return from Part X, line 6	1	377,231.
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.) 2b		
C	Add lines 2a and 2b	2c	11,907.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	365,324.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	365,324.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	365,324.
Part	XII Qualifying Distributions (see instructions)	<u> </u>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	422,554.
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	422,554.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b. See instructions	5	11,907.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	410,647.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whe	ther the foundation

Part	VIII Undistributed Income (see instruction	ons)			, –
	,	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1	Distributable amount for 2018 from Part XI, line 7				365,324.
2	Undistributed income, if any, as of the end of 2018:				
а	Enter amount for 2017 only	<u>.</u>		12,058.	
b	Total for prior years: 20, 20, 20				
3	Excess distributions carryover, if any, to 2018:				
а	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: ► \$422,554.				
а	Applied to 2017, but not more than line 2a .			12,058.	
b	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2018 distributable amount				365,324.
е	Remaining amount distributed out of corpus	45,172.			
5	Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	45,172.			o
b	Prior years' undistributed income. Subtract line 4b from line 2b		0.		1,
С	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—see instructions		0.		
е	Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount—see				
	instructions			0.	
f	Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019				0.
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) .	0.			
9	Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	45,172.			
10	Analysis of line 9:				
а	Excess from 2014 0 .				
b	Excess from 2015 0 .		٠		
С	Excess from 2016 0 .				
d	Excess from 2017 0 .				, , ,
е	Excess from 2018 45, 172.				

	90-PF (2018)			1 1 (1) A	0)	rage 10
Part'					9)	N/A
1a	If the foundation has received a ruling	g or determination	n letter that it is a	private operating		
	foundation, and the ruling is effective fo	r 2018, enter the c	late of the ruling .			
b	Check box to indicate whether the four	ndation is a privat	e operating founda		ection)(3) or 🗌 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2018	(b) 2017	(c) 2016	(d) 2015	,-,
	each year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities.				İ	
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the			-		
	alternative test relied upon:					
а	"Assets" alternative test—enter:	/	7			
a	(1) Value of all assets					
	(2) Value of assets qualifying under	/	 	-	-	
	section 4942(I)(3)(B)(i)					
b	"Endowment" alternative test—enter 2/3		<u> </u>			-
-	of minimum investment return shown in					
_	Part X, line 6 for each year listed			<u> </u>	-	
С	"Support" alternative test—enter:					
	(1) Total support other than gross investment income (interest,					
	dividends, rents, payments on					
	securities loans/ (section					
	512(a)(5)), or royalties)		 	-		ļ
	(2) Support from general public and 5 or more exempt				i	
	organization's as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income				1	<u> </u>
Part	•	-		the foundation I	nad \$5,000 or m	iore in assets at
	any time during the year-		ns.)			
1	Information Regarding Foundation			04 411 111		
а	List any managers of the foundation					by the foundation
	before the close of any tax year (but o	only if they have c	ontributed more t	nan \$5,000). (See :	section 507(a)(z).)	
					,	
b	List any managers of the foundation					arge portion of the
	ownership of a partnership or other el	ntity) of which the	toungation has a	. 10% or greater in	ieresi.	
						
2	Information Regarding Contribution					
	Check here ▶ ☐ If the foundation	only makes conf	ributions to pres	elected charitable	organizations and	d does not accept
	unsolicited requests for funds. If the f		gifts, grants, etc.	, to individuals or o	organizations unde	er other conditions,
	complete items 2a, b, c, and d. See in					
а	The name, address, and telephone nu	ımber or email ad	dress of the perso	on to whom application	ations should be a	ddressed:
;	See Supplementary Informat	ion Statemer	nt	<u> </u>		
b	The form in which applications should	d be submitted an	d information and	I materials they sho	ould include:	
c	Any submission deadlines:					
	-					
d	Any restrictions or limitations on av	vards, such as b	y geographical a	areas, charitable f	ields, kinds of ins	stitutions, or other
	factors:					
						Form 990-PF (2018)

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Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During t		ed for Fu	ıture Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	or substantial contributor	recipient			
a Paid during the year					
ENLACE COMUNITARIO					
2425 ALAMO AVE SE				05.000	
ALBUQUERQUE NM 87106		PC	OPERATING	25,000.	
MCTC FOUNDATION					
1501 HENNEPIN AVE				20.000	
MINNEAPOLIS MN 55403		PC	POWER OF YOU LEGACY GRANT	30,000.	
UNIVERSITY OF MN FOUNDATION					
200 SE OAK ST #500		DG.	MECHINE MELIC EUND	25,000.	
MINNEAPOLIS MN 55455		PC	WESTLAKE-WELLS FUND	25,000.	
CARING CHOICES					
1398 RIDGEWOOD DRIVE		PC	PIDE DELICE	10,000.	
CHICO CA 95973		PC	FIRE RELIEF	10,000.	
FACE TO FACE AIDS PROJECT, INC. 75 LIVINGSTON ST. #30A					
BROOKLYN NY 11201		PC	VICTORY GARDEN	15,000.	
FRED WELLS TENNIS & EDUCATION CENTER		rc	VICTORI GARDEN	13,000.	
100 FEDERAL DRIVE					
ST. PAUL MN 55111		PC	OPERATING/SCHOLARSHIPS	65,000.	
COMMUNITY ACCESS, INC					
2 WASHINGTON ST 9TH FLOOR					
NEW YORK NY 10004		PC	YOUNG FILMAKER FESTIVAL	20,000.	
UNIVERSITY OF MN FOUNDATION					
200 SE OAK ST #500				•	
MINNEAPOLIS MN 55455		PC	DEPT OF PSYCHIATRY	25,000.	
ALBUQUERQUE CENTER FOR PEACE AND JUSTICE					
202 HARVARD DR SE					
ALBUQUERQUE NM 87106		PC	CLIMATE CHANGE	10,000.	
See Statement					
				,	
				145,000.	
Total			▶ 3a	370,000.	
b Approved for future payment					
,					
Total	<u> </u>		▶ 3b	000 DE (0010)	

iter gr	oss amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by sect	ion 512, 513, or 514	(E)
4 -		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemption function income (See instructions.)
	ogram service revenue:					<u> </u>
a				 		
b						
C			· · 			
d						
e				 		
T	F					
g	Fees and contracts from government agencies			<u> </u>		
	embership dues and assessments			1.4	11	
	erest on savings and temporary cash investments vidends and interest from securities			14	11. 130,556.	
				14	130,336.	
	t rental income or (loss) from real estate:	<u> </u>		<u> </u>		<u></u>
	Debt-financed property					
		-				
	t rental income or (loss) from personal property her investment income	-				
	in or (loss) from sales of assets other than inventory			10	1,113,249.	
	t income or (loss) from special events	-		10	1,113,249.	
	oss profit or (loss) from sales of inventory					
						
b	ner revenue: a					
0				<u> </u>		<u></u>
d						
u			· -			 -
. c.,	btotal. Add columns (b), (d), and (e)				1,243,816.	
- Ou	biotal. Add columns (b), (d), and (e)	<u> </u>				L
3 To	tal Add line 12 columns (b) (d) and (e)				12	1 2/3 816
					13	1,243,816.
e wo	rksheet in line 13 instructions to verify calculation	s.)			13	1,243,816.
e wo	rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		
e wo art X	rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		
e wo art X ne No	rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		
e wo art X ne No	rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		
e wo art X ne No	rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		1,243,816.
e wo art X ne No	rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		
e wo art X ne No	rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		
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		Organizati	ons					<u></u> .			
1	in sect	organization on the contraction of the contraction	directly or indirectly other than section	engage in any of the 501(c)(3) organize	ne following ations) or	g with an in sect	y other orga ion 527, re	nization de lating to	escribed political	Ye	es No
а	-		porting foundation t	o a noncharitable e	exempt org	anızatıor	of:				
										1a(1)	×
		er assets .								1a(2)	×
b		ansactions:									
			a noncharitable ex	empt organization						1b(1)	×
			ets from a noncharit							1b(2)	×
			, equipment, or other							1b(3)	×
			rrangements							1b(4)	×
		ns or loan gua								1b(5)	×
			ervices or members							1b(6)	×
С			quipment, mailing l							1c	×
			of the above is "Ye							$\overline{}$	market
_			ther assets, or serv								
			on or sharing arrang								
(a) Line		Amount involved		haritable exempt organi			ription of transfe				
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	describ	ed in section 5	ectly or indirectly a 601(c) (other than se following schedule	ection 501(c)(3)) or i						☐ Yes	⊠ No
		(a) Name of organi	zation	(b) Type of	organization			(c) Description	on of relation	nship	
		· · · -									
	,							<u>.</u>			
ign Iere	correct,	and complete Declar	declare that I have examine aration of preparer (other the	ed this return, including action and taxpayer) is based on a	II information of	f which prep esiden	parer has any knov	to the best of vledge	May the IR	ge and belied	his return n below?
	_	re of officer or trus	•	C Date	Title				<u> </u>		
aid	P	nt/Type preparer	s name	Prepater's signature	11 0		Date		:k [] f]	PTIN	
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lse C	1 -	rm's name	Landon C Sco	tt, UPLLC				Firm's EIN	▶ 81-45	29486	
		rm's address 🕨	8985 33rd St	N				Phone no		74-878	
BAA			Lake Elmo		MN	55042	-8900	-	Fo	rm 990-F	PF (2018)

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

Form 990-PF: Return of Private Foundation

Part XV, Line 3a: Grants and Contributions Paid During the Year

Continuation Statement

Recipient name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
ASSOC FOR BLACK ECONOMIC POWER		PC	OPERATING	15,000
1200 W BROADWAY AVE #110				
MINNEAPOLIS, MN 55411				
BRIDGES PROJECT FOR EDUCATION		PC	POST SECONDARY	10,000
112A ALEXANDER ST		1	ACCESS	
TAOS, NM 87571				
EL CENTRO DE IGUALDAD Y DERECHOS		PC	OPERATING	20,000
714 4TH ST SW				
ALBUQUERQUE, NM 87102				
ENCUENTRO	J	PC	SUPPORT FOR TVD	15,000
714 4TH ST SW				
ALBUQUERQUE, NM 87102				
FRIENDS OF BWCA		PC	SULFIDE MINING PROTECTION	30,000
401 N 3RD ST #290			PROTECTION	
MINNEAPOLIS, MN 55401				15.000
HEALTHY NATIVE COMMUNITIES PARTNERSHIP PO BOX 1019		PC	COMMUNITY CIRCLES FOR CHANGE	15,000
SHIPROCK, NM 87420			FOR CHANGE	
NORTHLAND FOUNDATION		PC	NATIVE LED	25,000
202 W SUPERIOR ST #610		-	PHILANTHROPY	23,000
DULUTH, MN 55802			INITIATIVE	
SOUTHWEST CREATIONS COLLABORATIVE		PC	HACIA-TOWARD THE	10,000
1308 4TH ST NW			UNIVERSITY	10,000
ALBUQUERQUE, NM 87102				
YOUTH CARE		PC	OPERATING	5,000
3236 2701 UNIVERSITY AVE SE #205				-
MINNEAPOLIS, MN 55414				
	······································			4.5 000
			[145,000

145,000.

Additional information from your Form 990-PF: Return of Private Foundation

Form 990-PF: Return of Private Foundation

Taxes

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
EXCISE TAXES	3,880.			
FOREIGN TAXES	822.	822.		
Total	4,702.	822.		

Form 990-PF: Return of Private Foundation

Other Expenses

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
DUES AND MEMBERSHIPS	1,250.			1,250.
SUPPLIES	581.			581.
WEBSITE	667.			667.
INSURANCE	413.			413.
Tot	al 2,911.			2,911.

Continuation Statement

ISORA WELLS FOUNDATION
Form 990-PF: Return of Private Foundation
Part XV, Line 2: Supplementary Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc.

Name and Address Information	Form Information	Submission Information	Restrictions .
See Attachment 2	See Attachment 2	See Attachment 2 See Attachment 2	See Attachment 2

Net Gain or Loss From Sale of Assets

rorm	99U-PF	nei
Part I,	Line 6a	

Name		Employer Identification No
ISORA WELLS FOUNDATION		20-5193741
Asset Information:		
Description of Property <u>S</u>	ecurities	
Business Code Exclusi	on Code · · · <u>18</u>	
Date Acquired .	How Acquired	
Date Sold	Name of Buyer	
Check Box, if Buyer is a Business.		
Sales Price4, 820, 744.	Cost or other basis (do not reduce by depreciat	ion)3,707,495.
Sales Expense	Valuation Method	
Total Gain (Loss) 1,113	, 249. Accumulated Depreciation	· · · · ·
Description of Property		
Business Code Exclusion	on Code	
Date Acquired .	How Acquired	
Date Sold	Name of Buyer .	
Check Box, if Buyer is a Business.		
Sales Price	Cost or other basis (do not reduce by depreciat	ion)..
Sales Expense	Valuation Method	
Total Gain (Loss)	Accumulated Depreciation	
Description of Property		
Business Code Exclusion	on Code	
	How Acquired	
	Name of Buyer .	
Check Box, if Buyer is a Business .		
Sales Price	Cost or other basis (do not reduce by depreciate	on)
Sales Expense	Valuation Method	
Total Gain (Loss)	Accumulated Depreciation	
Description of Property		
Business Code Exclusion	on Code	
Date Acquired	How Acquired	
Date Sold	Name of Buyer .	
Check Box, if Buyer is a Business.		
Sales Price	Cost or other basis (do not reduce by depreciati	on)
	Valuation Method	
Total Gain (Loss)	Accumulated Depreciation	
Description of Property	on Code	
Business Code Exclusion	on Code	
Date Acquired .	How Acquired	
Date Sold	Name of Buyer .	
Check Box, if Buyer is a Business.	🔲	
Sales Price =	Cost or other basis (do not reduce by depreciati	on)
Sales Expense .	Valuation Method	
Total Gain (Loss)	Accumulated Depreciation	
Totals:		
Total Gain (Loss) of all assets	1,113,249.	
Gross Sales Price of all assets		
Unrelated Business Income	Business Code .	
Excluded by section 512, 513, 514	1, 113, 249. Exclusion Code . 18	
Related/Exempt Function Income		
QuickZoom here to Form 990-PF, Pag	e 1	
	e 12	

Name	Employer Identification No
ISORA WELLS FOUNDATION	<u>20-5193741</u>

Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
DORSEY & WHITNEY LLP	LEGAL SERVICES	244.			244.
Total to Form 990-	PF, Part I, Line 16a	244.			244.

Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
SMR	TAX PREP	2,500.			2,500.
Total to Form 990-	PF, Part I, Line 16b	2,500.			2,500.

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
STIFFEL KERRIE BLEVINS CONSULTING	INVESTMENT ADVISORS MANAGEMENT SERVICES	52,254. 41,000.	52,254.		41,000.
Total to Form 990-	PF, Part I, Line 16c	93,254.	52,254.		41,000.

		_			
Name ISORA WELLS FOUNDATION					yer Identification No 193741
		State and Local Obligations	US Govern Obligati Book Va	ations Obligations	
Tot to Fm 990-PF, Pt II, Ln 10a					
Line 10b - Investmo	ents - Corporate	Stock:	Book Value	(f Year Fair Market Value
SEE ATTACHMENT 1			4,288,	128.	5,532,366.
Totals to Form 990-PF, Part II, L	ine 10b		4,288,	128.	5,532,366.
Line 10c - Investme	nts - Corporate E	Bonds:	Book Value	-	f Year Fair Market Value
SEE ATTACHMENT 1			1,508,	839.	1,531,067.
Totals to Form 990-PF, Part II, L	ine 10c		1,508,	839.	1,531,067.
Line 12 - Investme	ents - Mortgage k	oans:	Book Value		f Year Fair Market Value
Totals to Form 990-PF, Part II, L	ine 12				
Line 13 - Inve	stments - Other:		Book Value	í	f Year Fair Market Value
Totals to Form 990 DE Doot !! !	ino 12				
Totals to Form 990-PF, Part II, L	HIG 19				

Additional information from your 2018 Federal Exempt Tax Return

Form 990-PF: Return of Private Foundation

Line 10a(a)

Description		Amount
US T Note 1.5% - 11/30/19		25,032.
	Total	25,032.

Form 990-PF: Return of Private Foundation

Line 10b(a)

Itemization Statement

Description	Amount
	4,142,862.
Total	4,142,862.

Form 990-PF: Return of Private Foundation

Line 10c(a)

Itemization Statement

Description		Amount
	-	1,154,755.
	Total	1,154,755.