Return of Private Foundation

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

ror	calen	dar year 2019 or tax year beginning		<u>, 2019, and</u>				, 20	
Nam	e of fou	ndation			A Employe	er identifica	tion numb	er	
		AND AUGUSTA NEWMAN FOUNDATION				632880			_
Num	ber and	street (or P O box number if mail is not delivered to street address)		Room/suite	B Telephor	ne number (s	see instruct	tions)	
89	3 <u>5</u> 3	3rd street n		SUITE 1	(952	841-22	222_		
City	or town	state or province, country, and ZIP or foreign postal code						ling, check her	e▶
LA	KE E	LMO MN 55042							
G	Check	all that apply: Initial return Initial return Initial retur	n of a former	public charity	D 1. Foreig	n organizati	ons, check	here	ı
		☐ Final return ☐ Amended	return		2 Forois	ın organizatı	one mootin	g the 85% test	
		Address change Name cha	nge	. M		here and at			', !
H	Check	type of organization: X Section 501(c)(3) exempt p	orivate founda	ation A	E If private	foundation	status was	terminated und	
□ :	Sectio	n 4947(a)(1) nonexempt charitable trust Other ta	xable private	foundation	section 5	507(b)(1)(A), (check here		ı
Ī	Fair m	narket value of all assets at J Accounting method	d: 🛛 Cash	☐ Accrual	E If the four	indation is in	a 60-mont	th termination	
(end of	f year (from Part II, col. (c), Other (specify)			under se	ction 507(b)	(1)(B), chec	k here	ı
1	line 16	5) ► \$ 5,906,627. (Part I, column (d), must b	e on cash bas	s.)					
Pa	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue	and				(d) Disburser	
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses	Cr (D) 146	et investment income		sted net ome	for charital purpose	
		the amounts in column (a) (see instructions))	books					(cash basis	
/	1	Contributions, gifts, grants, etc., received (attach schedule)							_
)	2	Check ► X if the foundation is not required to attach Sch. B					dis see		=
•	3	Interest on savings and temporary cash investments				F	RECE	VED	*
	4	Dividends and interest from securities	46,1	.88.	46,188.	1		-	7
	5a	Gross rents				1 8	10V 2 (2020	٩
	b	Net rental income or (loss)						٠,	d
<u>u</u>	6а	Net gain or (loss) from sale of assets not on line 10	33,5	66.			GDE	AL LITE	7
Revenue	b	Gross sales price for all assets on line 6a 609, 938.					JUDE	N, U1	-
Š	7	Capital gain net income (from Part IV, line 2)			33,566.			.1,	R
۳ ا	8	Net short-term capital gain					0.		
- 1	9	Income modifications						,	_
- {	10a	Gross sales less returns and allowances				 			:
	b	Less: Cost of goods sold	-						_
	C	Gross profit or (loss) (attach schedule)							Ţ
	11	Other income (attach schedule)						1,3	
	12	Total. Add lines 1 through 11	79,7	54.	79,754.		0.	_	-
	13	Compensation of officers, directors, trustees, etc.	, , , ,	<u> </u>				_	_
es	14	Other employee salaries and wages		-					_
ξĺ	15	Pension plans, employee benefits		<u> </u>	_				_
xbeuses	16a	Legal fees (attach schedule)	51,9	64.	25,982.			25,9	_ 3 {
	b	Accounting fees (attach schedule)		550.	2,325.			2,3	
<u>\</u>	c	Other professional fees (attach schedule)	16,4		16,460.				
at	17	Interest			,			<u> </u>	_
sti	18	Taxes (attach schedule) (see instructions) See. Stmt	11,7	49.				<u> </u>	_
<u>=</u>	19	Depreciation (attach schedule) and depletion				<u> </u>			_
티	20	Occupancy				<u> </u>		<u> </u>	_
Ž	21	Travel, conferences, and meetings		-		<u> </u>		 	_
밀	22	Printing and publications						 -	_
g	23	Other expenses (attach schedule) See . Stmt .		25.	 -			 	-2
<u>, Ĕ</u>	24	Total operating and administrative expenses.			<u>-</u>	 	· -	-	<u>-</u>
Operating and Administrative E		Add lines 13 through 23	84,8	48.	44,767.			28,3	٠ ۲
be	25	Contributions, gifts, grants paid	106,5		3-1101.	 	-	106,5	
0	26	Total expenses and disbursements. Add lines 24 and 25	191,4		44,767.			134,8	
\rightarrow	27	Subtract line 26 from line 12:	± 2,1 4		11/10/1	<u></u>		134,0	
	۷,	Excess of revenue over expenses and disbursements	111 6	50					
	b	Net investment income (If negative, enter -0-)	111,6	39.	34 007	 			(<u>4)</u>
-		Adjusted net income (if negative, enter -0-)			34,987.			 	<u>``</u>
	_	vork Reduction Act Notice, see instructions.	<u> </u>		. _	L	0.	rm 990-PF	_

Part II		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 Valu	16	(c) Fair Market Value	
	1	Cash-non-interest-bearing					
) <u>2</u>	Savings and temporary cash investments	252,734.		0.	0.	
	3	Accounts receivable ▶					
		Less: allowance for doubtful accounts ▶					
	4			· ·			
		Piedges receivable ►					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons (attach schedule) (see instructions)					
	7	Other notes and loans receivable (attach schedule) ▶					
		Less. allowance for doubtful accounts ▶					
ts	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges		_			
As	10a	Investments – U.S. and state government obligations (attach schedule)					
	ь	Investments - corporate stock (attach schedule)		_			
	С	Investments—corporate bonds (attach schedule)					
	11	Investments—land, huildings, and equipment, basis ▶					
		Less. accumulated depreciation (attach schedule) ▶					
	12	Investments—mortgage loans					
	13	Investments—other (attach schedule)	2,078,503.	1,960,4	50.	2,518,972.	
	14	Land, buildings, and equipment: basis ▶					
		Less: accumulated depreciation (attach schedule) ▶					
	15	Other assets (describe ► L-15 Stmt)	3,409,550.	3,387,6	55.	3,387,655.	
	16	Total assets (to be completed by all filers—see the				-	
		ınstructions. Also, see page 1, item I)	5,740,787.	5,348,1	05.	5,906,627.	
	17	Accounts payable and accrued expenses					
S	18	Grants payable				ļ	
ţį	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
ja	21	Mortgages and other notes payable (attach schedule)				<u> </u>	
_	22	Other liabilities (describe ►)				· .	
	23_	Total liabilities (add lines 17 through 22)					
es		Foundations that follow FASB ASC 958, check here					
alances		and complete lines 24, 25, 29, and 30.					
ᇛ	24	Net assets without donor restrictions					
ä	25	Net assets with donor restrictions				1	
핕		Foundations that do not follow FASB ASC 958, check here ▶ 🗵					
显	i	and complete lines 26 through 30.					
ō	26	Capital stock, trust principal, or current funds					
ţ	27	Paid-in or capital surplus, or land, bldg., and equipment fund				,	
ŝ	28	Retained earnings, accumulated income, endowment, or other funds	5,740,787.	5,348,1		9.	
ğ	29	Total net assets or fund balances (see instructions)	5,740,787.	5,348,1	05.		
Net Assets or Fund Ba	30	Total liabilities and net assets/fund balances (see		E 340 1	٥٥		
		Instructions)	5,740,787.	5,348,1	05.	ļ	
	rt III	Analysis of Changes in Net Assets or Fund Balances		t caree south			
1		Il net assets or fund balances at beginning of year—Part II, coluicof-year figure reported on prior year's return)			1	5 710 707	
_					2	5,740,787.	
2		er amount from Part I, line 27a 			3	-111,659.	
3		er increases not included in line 2 (itemize) ► lines 1, 2, and 3			4	5,629,128.	
4		reases not included in line 2 (itemize) ► BOOK TAX DIFFEREN			5	281,023.	
5 6		il net assets or fund balances at end of year (line 4 minus line 5)—		ne 29	6	5,348,105.	
		and the state of t		<u> </u>		<u> </u>	

Part	V Capital Gains and	Losses for Tax on Investn	nent Income			
		d(s) of property sold (for example, real e se, or common stock, 200 shs MLC Co		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr.)
1a	SALE OF PHOTOS			D	01/01/2010	12/31/2019
b	SEE ATTACHED SCHWAE	S STATEMENT - ST		P	01/01/2019	12/31/2019
c	SEE ATTACHED SCHWAR	S STATEMENT - LT		P	01/01/2018	12/31/2019
d	CAPITAL GAIN DISTRI	BUTIONS		P	01/01/2018	12/31/2019
e	 			L		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis		Gain or (loss) us (f) minus (g))
a	21,895.			<u>2</u> 1,895.		0.
b	39,090.			39,330.		<u>-240.</u>
<u>C</u>	524,714.			515,147.		<u>9,567.</u>
<u>d</u>	24,239.			0.		24,239.
<u>e</u>	Complete anhi fay accets sha	was some solvers (b) and sound	h. the ferradation	on 10/21/60		
	(i) FMV as of 12/31/69	wing gain in column (h) and owned (j) Adjusted basis as of 12/31/69	(k) Exces	is of col (i) (j), if any	col (k), but	Col (h) gain minus not less than -0-) or s (from col (h))
a						0.
b						-240.
C						9,567.
d						24 <u>,2</u> 39.
e					ļ	
2	Capital gain net income or		also enter in Pa , enter -0- in Pa		2	33 <u>,5</u> 66.
3	If gain, also enter in Part	n or (loss) as defined in sections I, line 8, column (c). See instru	ctions. If (loss)		3	240
Part		er Section 4940(e) for Redu		let Investment		<u>-240.</u>
Was t	s," the foundation doesn't q	section 4942 tax on the distribu ualify under section 4940(e). Do	not complete t	hıs part.	·	☐ Yes ⊠ No
1		unt in each column for each yea	ar; see the instru	uctions before m	aking any entrie	
Cale	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distribution	s Net value o	(c) f noncharitable-use a		(d) Distribution ratio b) divided by col (c))
		104,8	46.	2,332,5	574.	0.044949
	2017	121,0	72.	2,286,8	347.	0.052943
	2016	119,8		2,155,2		0.055612
	2015	99,0		2,122,7		<u> </u>
	2014	86,8	49.	1,974,4	160.	<u> </u>
2	Total of line 1, column (d)				. 2	0.244156
3		for the 5-year base period—div undation has been in existence				0.048831
4	Enter the net value of nonc	charitable-use assets for 2019 f	rom Part X, line	5	. 4	2,342,961.
5	Multiply line 4 by line 3 .				. 5	114,409.
6	Enter 1% of net investmen	t income (1% of Part I, line 27b)		. 6	350.
7	Add lines 5 and 6				. 7	114,759.
8		ns from Part XII, line 4 ter than line 7, check the box in				134,897.
	Part VI instructions.	tor than line 7, Check the DOX II	i i ait vi, iiile 10	, and complete	mar part using a	1 /0 tax rate. See (Ne

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Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	instr	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)			50.				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► ☒ and enter 1% of Part I, line 27b							
				*				
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-)							
3	Add lines 1 and 2							
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)							
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		3	<u>50.</u>				
6	Credits/Payments:			·光李				
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 1,737.			٠,				
b	Exempt foreign organizations—tax withheld at source							
C	Tax paid with application for extension of time to file (Form 8868) 6c 0. Backup withholding erroneously withheld			•				
d 7	Total credits and payments. Add lines 6a through 6d		1 7	37.				
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached		1, <u>/</u>	<u> </u>				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed							
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid \Delta 10		1.3	87.				
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ 1,387. Refunded ▶ 11			· · ·				
	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	\Box	Yes	No				
	participate or intervene in any political campaign?	1a		×				
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		×				
c	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. 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. ► \$		1					
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_	-	<u>×</u> _				
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	<u>.</u>					
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	L	×				
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b						
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		×				
	If "Yes," attach the statement required by General Instruction T.							
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:							
	By language in the governing instrument, or			: vä · :				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that	<u> </u>	.	٠, ،				
_	conflict with the state law remain in the governing instrument?	6_	-	<u>×</u>				
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7_	×					
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ► MN			(<u>,</u>				
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 <i>General Instruction G?</i> If "No," attach explanation	8b	×	 				
9	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 2019 or the tax year beginning in 2019? 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		×				

Par	Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11_	_	×
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	40		
12	person had advisory privileges? If "Yes," attach statement. See instructions	12	×	×
13	Website address ► N/A	13		L
14	The books are in care of ► TREASURER OF FOUNDATION Telephone no. ► (952)	341-	2222	·
	Located at ►8935 33RD ST N LAKE ELMO MN ZIP+4 ► 55042			
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 2019, did the foundation have an interest in or a signature or other authority		Yes	 -
	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			
Par	the foreign country ► VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		يــــــــــــــــــــــــــــــــــــــ
ı aı	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	Γ	Yes	No
1a				
	(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?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ No (5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			`
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			'
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			, 45
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .	1b		
С	Organizations relying on a current notice regarding disaster assistance, check here			
Ū	were not corrected before the first day of the tax year beginning in 2019?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2019?			
_	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			- 1
	all years listed, answer "No" and attach statement—see instructions.)			
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	20		·· 1
	▶ 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or		i	
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the			
	foundation had excess business holdings in 2019.)	<u>3b</u>		لـــــــا
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			ī
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4h		

Page	E

Par	Statements Regarding Activitie	S for w		7120	Way DC I	equile	1001101	1000			
5a	During the year, did the foundation pay or incur	any amo	ount to.							Yes	No
	(1) Carry on propaganda, or otherwise attempt	_		on (sec	tion 4945(e))? .	☐ Yes	⊠ No	,		
	(2) Influence the outcome of any specific publi		_								
	directly or indirectly, any voter registration d						☐ Yes	X No	.		1
							=	X No		ĺ	ĺ
	(3) Provide a grant to an individual for travel, stu						∐ Yes	<u> </u>	'		
	(4) Provide a grant to an organization other tha						_	_			
	section 4945(d)(4)(A)? See instructions						∐ Yes	⊠ No	•		
	(5) Provide for any purpose other than religious				-				}		
	purposes, or for the prevention of cruelty to	children	or animals?				☐Yes	⊠ No	,		١.
b	If any answer is "Yes" to 5a(1)-(5), did any of to	he transa	actions fail t	o quali	fy under th	e exce	otions de	scribed		ł	}
	in Regulations section 53.4945 or in a current no								5b		
	Organizations relying on a current notice regard	_	_					▶□			,
•	If the answer is "Yes" to question 5a(4), does	-							'	ļ	,
C	· · · · · · · · · · · · · · · · · · ·				•						7,1
	because it maintained expenditure responsibility		_				☐ Yes	∐ No	'		·# .
	If "Yes," attach the statement required by Regul										, ~
6a	Did the foundation, during the year, receive any		-	_							
	on a personal benefit contract?						Yes Yes	× No	·		-
b	Did the foundation, during the year, pay premiul	ms, direc	ctly or indired	ctly, on	a persona	benefi	t contract	? .	6b		×
	If "Yes" to 6b, file Form 8870.		•	•	•						. 3
7a	At any time during the tax year, was the foundation	n a nartv	to a prohibite	ed tax s	helter trans	action?	□Yes	X No	,		• • •
b	If "Yes," did the foundation receive any proceed								7b		
	• •		•						76	 -	
8	Is the foundation subject to the section 4960 ta								ŀ		
	remuneration or excess parachute payment(s) d							No	_		
Par	VIII Information About Officers, Direct	ctors, T	rustees, F	ounda	tion Man	agers,	Highly I	Paid E	mploy	ees,	
	and Contractors			_							
1	List all officers, directors, trustees, and found	dation m	nanagers ar	nd their	compens	ation. S	See instri	uctions	3.		
											
	(a) Name and address		e, and average		mpensation		Contribution		(e) Expe	nse ac	count.
	(a) Name and address	hour	s per week	(If i	mpensation not paid, nter -0-)	emplo	Contribution byee benefit erred compe	plans	(e) Expe	ense ac allowar	count,
		hour devote	s per week ed to position	(If i	not paid,	emplo	yee benefit	plans	(e) Expe	ense ac allowar	count, nces
	C.A. NEWMAN	hour devote	s per week ed to position DIR/SEC	(If i	not paid, iter -0-)	emplo	yee benefit	plans ensation	(e) Expe other	ense ac allowar	nces
<u>520</u>	C A. NEWMAN O w 73RD ST EDINA MN 55439	hour devote PRES /	s per week ed to position DIR/SEC 5.00	(If i	not paid,	emplo	yee benefit	plans	(e) Expe	ense ac allowar	nces
520 DAV	C A. NEWMAN O W 73RD ST EDINA MN 55439 ID S. NEWMAN	hour devote PRES /	rs per week ed to position /DIR/SEC 5.00 I/TREASURER	(If i	not paid, nter -0-)	emplo	yee benefit	plans ensation	(e) Expe	ense ac allowar	0.
520 DAV	C A. NEWMAN O w 73RD ST EDINA MN 55439	hour devote PRES /	s per week ed to position DIR/SEC 5.00	(If i	not paid, iter -0-)	emplo	yee benefit	plans ensation	(e) Experiment	ense ac allowar	0.
520 DAV 520	C A. NEWMAN O W 73RD ST EDINA MN 55439 ID S. NEWMAN	hour devote PRES /	rs per week ed to position /DIR/SEC 5.00 I/TREASURER 5.00	(If i	not paid, nter -0-)	emplo	yee benefit	plans ensation	(e) Experiment	ense ac allowar	0.
520 DAV 520 DEI	C A. NEWMAN O W 73RD ST EDINA MN 55439 ID S. NEWMAN O W 73RD STREET EDINA MN 55439	PRES/	rs per week ed to position /DIR/SEC 5.00 I/TREASURER 5.00	(If i	not paid, nter -0-)	emplo	yee benefit	plans ensation	(e) Expe other	ense ac allowar	0. 0.
520 DAV 520 DEI 520	C A. NEWMAN O W 73RD ST EDINA MN 55439 ID S. NEWMAN O W 73RD STREET EDINA MN 55439 RDRE STEINBERG O W 73RD STREET EDINA MN 55439	PRES/ VP/DIR	s per week ad to position / DIR/SEC 5.00 A/TREASURER 5.00 CTOR 1.00	(If i	0 .	emplo	yee benefit	plans ensation 0.	(e) Expe other	ense ac allowar	0. 0.
520 DAV 520 DEI 520 JAN	C A. NEWMAN O W 73RD ST EDINA MN 55439 ID S. NEWMAN O W 73RD STREET EDINA MN 55439 RDRE STEINBERG O W 73RD STREET EDINA MN 55439 ICE GEPNER	PRES/	s per week d to position / DIR/SEC 5.00 A/TREASURER 5.00 CTOR 1.00 CTOR	(If i	0.	emplo	yee benefit	O. O.	(e) Expe other	ense ac allowar	0. 0.
520 DAV 520 DEI 520 JAN 520	C A. NEWMAN O W 73RD ST EDINA MN 55439 ID S. NEWMAN O W 73RD STREET EDINA MN 55439 RDRE STEINBERG O W 73RD STREET EDINA MN 55439 ICE GEPNER O W 73RD STREET EDINA MN 55439	hour devote PRES/ VP/DIR DIREC	Sper week Sper	(If I	0. 0.	emplo and def	oyee benefit	0. 0. 0.	other	allowar	0. 0.
520 DAV 520 DEI 520 JAN	C A. NEWMAN O W 73RD ST EDINA MN 55439 ID S. NEWMAN O W 73RD STREET EDINA MN 55439 RDRE STEINBERG O W 73RD STREET EDINA MN 55439 ICE GEPNER	hour devote PRES/ VP/DIR DIREC	Sper week Sper	(If I	0. 0.	emplo and def	oyee benefit	0. 0. 0.	other	allowar	0. 0.
520 DAV 520 DEI 520 JAN 520	C.A. NEWMAN O.W. 73RD ST EDINA MN 55439 ID.S. NEWMAN O.W. 73RD STREET EDINA MN 55439 RDRE STEINBERG O.W. 73RD STREET EDINA MN 55439 ICE GEPNER O.W. 73RD STREET EDINA MN 55439 Compensation of five highest-paid employe	hour devote PRES/ VP/DIR DIREC	Sper week Sper	(If I	0. 0.	emplo and def	oyee benefit erred compe	0. 0. 0. cuction	other	allowar	0. 0.
520 DAV 520 DEI 520 JAN 520	C.A. NEWMAN O. W 73RD ST EDINA MN 55439 ID.S. NEWMAN O. W 73RD STREET EDINA MN 55439 RDRE STEINBERG O. W 73RD STREET EDINA MN 55439 ICE GEPNER O. W 73RD STREET EDINA MN 55439 Compensation of five highest-paid employe "NONE."	PRES/ VP/DIR DIRECT	s per week and to position / DIR/SEC 5.00 //TREASURER 5.00 CTOR 1.00 CTOR 1.00 er than thos	(If i er	0. 0. 0. uded on li	emplo and def	see instr	0. 0. 0. cuction	other	one,	0. 0. 0. enter
520 DAV 520 DEI 520 JAN 520	C.A. NEWMAN O.W. 73RD ST EDINA MN 55439 ID.S. NEWMAN O.W. 73RD STREET EDINA MN 55439 RDRE STEINBERG O.W. 73RD STREET EDINA MN 55439 ICE GEPNER O.W. 73RD STREET EDINA MN 55439 Compensation of five highest-paid employe	PRES/ VP/DIR DIRECT	Sper week Sper	se incl	0. 0.	emplo and def	see instr	0. 0. 0. cuction	s). If n	one,	0. 0. 0. enter
520 DAV 520 DEI 520 JAN 520	C.A. NEWMAN O. W 73RD ST EDINA MN 55439 ID.S. NEWMAN O. W 73RD STREET EDINA MN 55439 RDRE STEINBERG O. W 73RD STREET EDINA MN 55439 ICE GEPNER O. W 73RD STREET EDINA MN 55439 Compensation of five highest-paid employe "NONE."	PRES/ VP/DIR DIRECT	s per week d to position DIR/SEC 5.00 TREASURER 5.00 CTOR 1.00 CTOR 1.00 er than those hours per week d to per week by 1.00	se incl	0. 0. 0. uded on li	emplo and def	see instr	0. 0. 0. cuction	s). If n	one,	0. 0. 0. enter
520 DAV 520 DEI 520 JAN 520	C. A. NEWMAN O. W. 73RD ST EDINA MN 55439 ID. S. NEWMAN O. W. 73RD STREET EDINA MN 55439 RDRE STEINBERG O. W. 73RD STREET EDINA MN 55439 ICE GEPNER O. W. 73RD STREET EDINA MN 55439 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0	PRES/ VP/DIR DIRECT	s per week d to position DIR/SEC 5.00 TREASURER 5.00 CTOR 1.00 CTOR 1.00 er than those hours per week d to per week by 1.00	se incl	0. 0. 0. uded on li	emplo and def	see instr	0. 0. 0. cuction	s). If n	one,	0. 0. 0. enter
520 DAV 520 DEI 520 JAN 520	C. A. NEWMAN O. W. 73RD ST EDINA MN 55439 ID. S. NEWMAN O. W. 73RD STREET EDINA MN 55439 RDRE STEINBERG O. W. 73RD STREET EDINA MN 55439 ICE GEPNER O. W. 73RD STREET EDINA MN 55439 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0	PRES/ VP/DIR DIRECT	s per week d to position DIR/SEC 5.00 TREASURER 5.00 CTOR 1.00 CTOR 1.00 er than those hours per week d to per week by 1.00	se incl	0. 0. 0. uded on li	emplo and def	see instr	0. 0. 0. cuction	s). If n	one,	0. 0. 0. enter
520 DAV 520 DEI 520 JAN 520	C. A. NEWMAN O. W. 73RD ST EDINA MN 55439 ID. S. NEWMAN O. W. 73RD STREET EDINA MN 55439 RDRE STEINBERG O. W. 73RD STREET EDINA MN 55439 ICE GEPNER O. W. 73RD STREET EDINA MN 55439 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0	PRES/ VP/DIR DIRECT	s per week d to position DIR/SEC 5.00 TREASURER 5.00 CTOR 1.00 CTOR 1.00 er than those hours per week d to per week by 1.00	se incl	0. 0. 0. uded on li	emplo and def	see instr	0. 0. 0. cuction	s). If n	one,	0. 0. 0. enter
520 DAV 520 DEI 520 JAN 520	C. A. NEWMAN O. W. 73RD ST EDINA MN 55439 ID. S. NEWMAN O. W. 73RD STREET EDINA MN 55439 RDRE STEINBERG O. W. 73RD STREET EDINA MN 55439 ICE GEPNER O. W. 73RD STREET EDINA MN 55439 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0	PRES/ VP/DIR DIRECT	s per week d to position DIR/SEC 5.00 TREASURER 5.00 CTOR 1.00 CTOR 1.00 er than those hours per week d to per week by 1.00	se incl	0. 0. 0. uded on li	emplo and def	see instr	0. 0. 0. cuction	s). If n	one,	0. 0. 0. enter
520 DAV 520 DEI 520 JAN 520	C. A. NEWMAN O. W. 73RD ST EDINA MN 55439 ID. S. NEWMAN O. W. 73RD STREET EDINA MN 55439 RDRE STEINBERG O. W. 73RD STREET EDINA MN 55439 ICE GEPNER O. W. 73RD STREET EDINA MN 55439 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0	PRES/ VP/DIR DIRECT	s per week d to position DIR/SEC 5.00 TREASURER 5.00 CTOR 1.00 CTOR 1.00 er than those hours per week d to per week by 1.00	se incl	0. 0. 0. uded on li	emplo and def	see instr	0. 0. 0. cuction	s). If n	one,	0. 0. 0. enter
520 DAV 520 DEI 520 JAN 520 2	C. A. NEWMAN O. W. 73RD ST EDINA MN 55439 ID. S. NEWMAN O. W. 73RD STREET EDINA MN 55439 RDRE STEINBERG O. W. 73RD STREET EDINA MN 55439 ICE GEPNER O. W. 73RD STREET EDINA MN 55439 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0	PRES/ VP/DIR DIRECT	s per week d to position DIR/SEC 5.00 TREASURER 5.00 CTOR 1.00 CTOR 1.00 er than those hours per week d to per week by 1.00	se incl	0. 0. 0. uded on li	emplo and def	see instr	0. 0. 0. cuction	s). If n	one,	0. 0. 0. enter
520 DAV 520 DEI 520 JAN 520 2	C. A. NEWMAN O. W. 73RD ST EDINA MN 55439 ID. S. NEWMAN O. W. 73RD STREET EDINA MN 55439 RDRE STEINBERG O. W. 73RD STREET EDINA MN 55439 ICE GEPNER O. W. 73RD STREET EDINA MN 55439 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0	PRES/ VP/DIR DIRECT	s per week d to position DIR/SEC 5.00 TREASURER 5.00 CTOR 1.00 CTOR 1.00 er than those hours per week d to per week by 1.00	se incl	0. 0. 0. uded on li	emplo and def	see instr	0. 0. 0. cuction	s). If n	one,	0. 0. 0. enter
520 DAV 520 DEI 520 JAN 520 2	C. A. NEWMAN O. W. 73RD ST EDINA MN 55439 ID. S. NEWMAN O. W. 73RD STREET EDINA MN 55439 RDRE STEINBERG O. W. 73RD STREET EDINA MN 55439 ICE GEPNER O. W. 73RD STREET EDINA MN 55439 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0	PRES/ VP/DIR DIRECT	s per week d to position DIR/SEC 5.00 TREASURER 5.00 CTOR 1.00 CTOR 1.00 er than those hours per week d to per week by 1.00	se incl	0. 0. 0. uded on li	emplo and def	see instr	0. 0. 0. cuction	s). If n	one,	0. 0. 0. enter
520 DAV 520 DEI 520 JAN 520 2	C. A. NEWMAN O. W. 73RD ST EDINA MN 55439 ID. S. NEWMAN O. W. 73RD STREET EDINA MN 55439 RDRE STEINBERG O. W. 73RD STREET EDINA MN 55439 ICE GEPNER O. W. 73RD STREET EDINA MN 55439 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0	PRES/ VP/DIR DIRECT	s per week d to position DIR/SEC 5.00 TREASURER 5.00 CTOR 1.00 CTOR 1.00 er than those hours per week d to per week by 1.00	se incl	0. 0. 0. uded on li	emplo and def	see instr	0. 0. 0. cuction	s). If n	one,	0. 0. 0. enter
520 DAV 520 DEI 520 JAN 520 2	C. A. NEWMAN O. W. 73RD ST EDINA MN 55439 ID. S. NEWMAN O. W. 73RD STREET EDINA MN 55439 RDRE STEINBERG O. W. 73RD STREET EDINA MN 55439 ICE GEPNER O. W. 73RD STREET EDINA MN 55439 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0	PRES/ VP/DIR DIRECT	s per week d to position DIR/SEC 5.00 TREASURER 5.00 CTOR 1.00 CTOR 1.00 er than those hours per week d to per week by 1.00	se incl	0. 0. 0. uded on li	emplo and def	see instr	0. 0. 0. cuction	s). If n	one,	0. 0. 0. enter
520 DAV 520 DEI 520 JAN 520 2	C. A. NEWMAN O. W. 73RD ST EDINA MN 55439 ID. S. NEWMAN O. W. 73RD STREET EDINA MN 55439 RDRE STEINBERG O. W. 73RD STREET EDINA MN 55439 ICE GEPNER O. W. 73RD STREET EDINA MN 55439 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0	PRES/ VP/DIR DIRECT	s per week d to position DIR/SEC 5.00 TREASURER 5.00 CTOR 1.00 CTOR 1.00 er than those hours per week d to per week by 1.00	se incl	0. 0. 0. uded on li	emplo and def	see instr	0. 0. 0. cuction	s). If n	one,	0. 0. 0. enter
520 DAV 520 DEI 520 JAN 520 2	C. A. NEWMAN O. W. 73RD ST EDINA MN 55439 ID. S. NEWMAN O. W. 73RD STREET EDINA MN 55439 RDRE STEINBERG O. W. 73RD STREET EDINA MN 55439 ICE GEPNER O. W. 73RD STREET EDINA MN 55439 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0	PRES/ VP/DIR DIRECT	s per week d to position DIR/SEC 5.00 TREASURER 5.00 CTOR 1.00 CTOR 1.00 er than those hours per week d to per week by 1.00	se incl	0. 0. 0. uded on li	emplo and def	see instr	0. 0. 0. cuction	s). If n	one,	0. 0. 0. enter

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees and Contractors (continued)							
3 Five highest-paid independent contractors for professional services. 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	<u> </u>						
Total number of others receiving over \$50,000 for professional services	0						
Part IX-A Summary of Direct Charitable Activities							
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses						
1 N/A							
	0.						
2							
3	- -						
<u> </u>							
4							
Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount						
1 N/A	Amognt						
1							
	0.						
2							
All other program-related investments. See instructions							
3							
Total. Add lines 1 through 3	0.						

Part	Minimum Investment Return (All domestic foundations must complete this part. Forei se's instructions.)	gn toi	undations,
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	<u>2,346,7</u> 77.
b	Average of monthly cash balances	1b	31,864.
С	Fair market value of all other assets (see instructions)	1c	0.
d	Total (add lines 1a, b, and c)	1d	2,378,641.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	2,378,641.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	35,680.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,342,961.
6	Minimum investment return. Enter 5% of line 5	6	117,148.
Part		ounda	ations
	and certain foreign organizations, check here ▶ □ and do not complete this part.)		
1	Mınımum investment return from Part X, line 6	1	117,148.
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.) 2b	ll	
С	Add lines 2a and 2b	2c	350.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	116,798.
4	Recoveries of amounts treated as qualifying distributions	4	<u> </u>
5	Add lines 3 and 4	5	116,798.
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	116,798.
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	134,897.
b	Program-related investments—total from Part IX-B	1b	0.
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	134,897.
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	350.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	134,547.
	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	XIII Undistributed Income (see instruction	ns)			
		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7				116,798.
2	Undistributed income, if any, as of the end of 2019:				
а	Enter amount for 2018 only				
b	Total for prior years: 20, 20, 20				14-2, 14 - 35 1
3	Excess distributions carryover, if any, to 2019:				()
a	From 2014				البراء البراء البراء البراء
D	From 2015				~ ~ ·
d	From 2016				15
e	From 2018				
f	Total of lines 3a through e	22;578.			The Marie and th
4	Qualifying distributions for 2019 from Part XII, line 4: ► \$134,897.	·			£14, 15
а	Applied to 2018, but not more than line 2a .				(الأوران المراد
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 2019 distributable amount				116,798.
е	Remaining amount distributed out of corpus	18,099.	ļ		
5	Excess distributions carryover applied to 2019 (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	40,677.			· 10 · · ·
b	Prior years' undistributed income. Subtract line 4b from line 2b		0.		
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 2018. Subtract line 4a from line 2a. Taxable amount—see instructions			0.	
f	Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				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)				# TA
8	Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).	0.			s. A 4.,
9	Excess distributions carryover to 2020.				all stransver
	Subtract lines 7 and 8 from line Ga	40,677.	,		<u>មើលគេ</u>
10	Analysis of line 9:				• 4
а	Excess from 2015				
b	Excess from 2016				ر وي ميان
C	Excess from 2017 10, 220.				4 1
d e	Excess from 2018		}		দ্ধার্থীদ ্
_		I	ľ	1	

Part	XIV Private Operating Founda	tions (see ınstru	ictions and Part	VII-A, question 9	9)	N/A
	If the foundation has received a ruling foundation, and the ruling is effective fo	g or determination	letter that it is a	private operating		
	Check box to indicate whether the four				ection 4942(j)	(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) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
	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 Subtract line 2d from line 2c .					
3	Complete 3a, b, or c for the alternative test relied upon.					
а	"Assets" alternative test - enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-enter 2/3					
	of minimum investment return shown in					
	Part X, line 6, for each year listed			ļ		
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					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Part				he foundation h	ad \$5,000 or m	ore in assets at
	any time during the year-	*****	ns.)	***************************************		
1	Information Regarding Foundation	•				
а	List any managers of the foundation vibefore the close of any tax year (but of					by the foundation
,	NONE	ing it they have of	ontributed more a	iaii 40,000). (Oce s	section 307 (d)(2).)	
	List any managers of the foundation ownership of a partnership or other er					rge portion of the
1	NONE	,		2.2 2. g. 2010. III	· · · · · · · · · · · · · · · · · · ·	
	Information Regarding Contribution	, Grant, Gift. Loa	an, Scholarship.	etc., Programs:		
	Check here ▶ ☒ if the foundation	•	• •	· -	organizations and	does not accept
	unsolicited requests for funds. If the fe		gifts, grants, etc.,	to individuals or o	organizations unde	r other conditions,
	complete items 2a, b, c, and d. See in	structions.				
а	The name, address, and telephone nu	imber or email add	dress of the perso	on to whom applica	ations should be a	ddressed:
b	The form in which applications should	Lhe submitted and	d information and	materials they sho	vild include:	
J	The form in which applications should	r be submitted and	u mormation and	materials they sho	ala malae.	
С	Any submission deadlines:					
d	Any restrictions or limitations on aw factors:	vards, such as b	y geographical a	reas, charitable fi	elds, kinds of ins	titutions, or other

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During	If recipient is an individual,		T	
Name and address (home or business)	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	or substantial contributor	-		
MAINE MEDIA WORKSHOPS			SPONSORS MMMW	
70 CAMDEN STREET		İ	SCHOLARSHIP	
ROCKPORT ME 04856	NONE	PUBLIC	PROGRAM	42,565
LOWE ART MUSEUM	NONE	LODBIC	SPECIAL EVENT	12,303
1301 STANFORD DR			LECTURE & WORKSHOP	
CORAL GABLES FL 33124	NONE	PUBLIC		20,000
MPLS INSTITUTE OF ARTS	I NONE	LOBBIO	SPECIAL EVENT	20,000
2400 3RD AVENUE SOUTH			LECTURE & WORKSHOP	
MINNEAPOLIS MN 55404	NONE	PUBLIC	IN PHOTOGRAPHY	8,000
INTL CENTER OF PHOTOGRAPHY	NONE			, ,,,,,,
250 BOWERY	1.01.2			
NEW YORK NY 10012		PUBLIC	GENERAL	10,000
PORTLAND ART MUSEUM	j			10,000
1219 SW PARK AVENUE				
PORTLAND OR 97205		PUBLIC	GENERAL	7,500
PHILADELPHIA ART MUSEUM	NONE			,
2600 BENJAMIN FRANKLIN PKWY				
PHILADELPHIA PA 19130		PUBLIC	GENERAL	10,000
NATIONAL GALLERY OF ART	is:			
6TH & CONSTITUTION AVE NW				
WASHINGTON DC 20565		PUBLIC	GENERAL	8,500
	H	1		
			[
Total				100 505
b Approved for future payment	_	- · · ·	► 3a	106,565
b Approved for future payment				
				1
		1		1
Total		<u> </u>	▶ 3t	

Ente	r gross amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by section	on 512, 513, or 514	1 (5)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
1				 - 	_	
	a			 		
	b					
	·					
	d		_			
	e			 		
	f				•••••	
_	g Fees and contracts from government agencies					
2	Membership dues and assessments				-	
3	Interest on savings and temporary cash investments				15.100	
4	Dividends and interest from securities			14	46,188.	
5	Net rental income or (loss) from real estate:			 		
	a Debt-financed property					-
	b Not debt-financed property		<u> </u>		 _	
6	Net rental income or (loss) from personal property			 		
7	Other investment income			10	22 5 6 5	
8	Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events		<u> </u>	18	<u>33,565.</u>	
9	` '					
10 11	Gross profit or (loss) from sales of inventory			-	 _	
• • •		<u> </u>		+	***************************************	
	b			 		
	d			+		
				 		
40	e Subtotal. Add columns (b), (d), and (e)				79,753.	
	SUDIDIAL AUG COMMINS IDE IOL AUG (C)			I I	19.133.	
12	Total Add line 12 columns (b) (d) and (e)	<u> </u>				70 752
13	Total. Add line 12, columns (b), (d), and (e)				13	79,753.
13 (See	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation	 s.)				79,753.
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		Organization	ons								
1	in se	he organization dection 501(c) (or nizations?	lirectly or indirectly ther than section	engage in any of the 501(c)(3) organization	following wons) or in	th any other orga section 527, re	anızatıon de elatıng to p	scribed political		Yes	No
а	Trans	sfers from the rep	orting foundation to	o a noncharitable exe	mpt organiz	zation of:					
		•	~						1a(1)		×
		ther assets .						•	1a(2)		×
									ra(Z)	-	- ^ -
b		r transactions:									
				empt organization .					1b(1)		×
	(2) P	urchases of asse	ts from a noncharita	able exempt organiza	tion				1b(2)		×
	(3) R	ental of facilities,	equipment, or other	r assets					1b(3)		×
	(4) R	eimbursement ar	rangements						1b(4)		×
	(5) L	oans or loan guar	rantees						1b(5)		×
		~		nip or fundraising soli					1b(6)	-	×
•				sts, other assets, or p					1c		×
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d				s," complete the follo							
				ces given by the repo							
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(a) Line	no (b) Amount involved	(c) Name of nonch	naritable exempt organization	on (d	Description of transf	ers, transaction	ns, and shai	ring arra	angeme	ents
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	desci	ribed in section 5 es," complete the	01(c) (other than se following schedule		ection 527					es 🗵	No
		(a) Name of organi	ZatiOII	(b) Type of org	ariiZaliŲH		(c) Descriptio	- Or relation	onip_		
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Sign	corre	ct, and complete Decla	aration of preparer (other that	d this return, including accon an taxpayer) is based on all in	formation of wh	ich preparer has any kn		May the IR	S discu	ss this	return
Here		en Neuras	· · · · · · · · · · · · · · · · · · ·		. <u> </u>	CTOR		See instruc	tions (XiYes⊺	No.
	Sign	ature of officer or trus		Date	Title						
Paid		Print/Type preparer'	s name	Preparer's signature		Date	Checl	< □ if F	NIT'		
Prepa	rer	PAUL J DIN	ZEO	I KUKIY M	}	11/16/2		mployed P	0028	3889	9
		Firm's name	Paul J Dinze	CPA, P.A.	/		Firm's EIN ▶				
Jse (niy	Firm's address ▶	3145 Ilo Way					(952) 90			
2 A A		Thin 3 address	Stillwater		MN 5	5082	TEHONE HO.			0-PF	(2010)
BAA			PCTTTMGCET		T-114 D	JUU2		ro	1111 JJ	V-L L	(2019)

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	11,749.			
Total	11 749	·		

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		
ATTY GENERAL FILING	25.		_	25.		
Total	25.			25.		