# EXTENDED TO NOVEMBER 16, 2020 Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

Form, 990-PF

Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www irs.gov/Form990PF for instructions and the latest information.

For c	aler	ndar year 2019 or tax year beginning		, and ending		······································
Nan	ne o	f foundation			A Employer identification	number
		HEGMAN FAMILY FOUNDATI		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	41-1751492	
		and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number (952) 920-	2202
		PEAVEY LANE			, ,	
		own, state or province, country, and ZIP or foreign <b>ZATA</b> , <b>MN</b> 55391	postal code		C If exemption application is pe	ending, check here
G C	heck	k all that apply: Initial return	Initial return of a f	or,mer public charity	D 1. Foreign organizations	, check here
		Final return	Amended return		Foreign organizations mer check here and attach cor	eting the 85% test,
٠		X Address change	Name change		check here and attach co	mputation
H_C	_	k type of organization: X Section 501(c)(3) e	1	04	E If private foundation state	
<u> </u>		ection 4947(a)(1) nonexempt charitable trust	Other taxable private found ting method: X Cash		under section 507(b)(1)	
		arket value of all assets at end of year J Accoun	Other (specify)	Accrual	F If the foundation is in a ( under section 507(b)(1)	
	om 1 \$	Part II, col. (c), line 16) 725 , 022 . (Part I, colu		sis.)	under section 507(b)(1)	(b), check here
	rit/l	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
*(**)	2/4	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) )	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	422,482.		N/A	
60	2	Check It the foundation is not required to attach Sch. B. Interest on savings and temporary	6.7			
SCANNED	3	cash investments	67.	67. 12,316.		STATEMENT 2
2	4	Dividends and interest from securities	12,316.	12,310.		STATEMENT 3
Ź		Gross rents		I Record of the contract of th	6.50.28. \$3.6888557565783	
	_	Net rental income or (loss)	3,067.			STATEMENT 1
) a	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 44,622.	3,007.		30 10 10 10 10 10 10 10 10 10 10 10 10 10	TOTAL BANKS
i i	D	assets on line of		28,598.	RECEIVE	
الله الله	7	Capital gain net income (from Part IV, line 2)		20,350	Λ4	2
	8	Net short-term capital gain Income modifications	V. (200)		13 NOV 8 35 20	20 121
<u>ت</u>	9	Gross sales less returns			1812	THE STATE OF THE S
202		and allowances Less Cost of goods sold			SAREN	
21		Gross profit or (loss)	6 X X 20 XEC CONSCION SCORE 2 - 24 EMPRISON		OGUETS	300000000000000000000000000000000000000
	11	Other Income	1,108.	1,108.		STATEMENT 4
,	12	Total. Add lines 1 through 11	439,040.	42,089.		
-	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
es	16a	Legal fees /		- 1		
Expense	b	Accounting fees STMT 5	5,790.	2,895.		2,895.
ı X	C	Other professional fees STMT 6	4,950.	2,475.		2,475.
ative	17	Interest		11.		
rati	18	Taxes	<u> </u>			750000 DECOMBER (M. 1750) 6896 684 684
nis	19	Depreciation and depletion	ļ			
Ē.	20	Occupancy	ļ			:
Ϋ́	21	Travel, conferences, and meetings				
; e	22	Printing and publications Other expenses - STMT 7	245.	220.		25.
	23 24	Other expenses STMT / Total operating and administrative	243.	220.		
era	24	expenses Add lines 13 through 23	10,985.	. 5,590.		5,395.
Ó	25	Contributions, gifts, grants paid	114,400.		1260	114,400.
	25 26	Total expenses and disbursements.		The state of the s	The second secon	1
ŀ		Add lines 24 and 25	125,385.	5,590.		119,795.
	27					
		Excess of revenue over expenses and disbursements	313,655.			
		Net investment income (if negative, enter -0-)		36,499.		
		Adjusted net income (if negative, enter -0-)		7842700000000000000000000000000000000000	N/A	21/2/2015/A/F/A
	1	LLIA For Denominal Reduction Act Nation				Form 990-PF (2019)

Dait IIII	Analysis of	Changes in	<b>Net Assets</b>	or Fund Balances

_	, , , , , , , , , , , , , , , , , , , ,		
1	Total net assets or fund balances at beginning of year - Part II, column (a), line 29		
	(must agree with end-of-year figure reported on prior year's return)		361,380.
2	Enter amount from Part I, line 27a	2	313,655.
_	Other increases not included in line 2 (itemize)	3	. 0.
	Add lines 1, 2, and 3	4	675,035.
	Decreases not included in line 2 (itemize)	5	0.
_	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II. column (b), line 29	6	675,035.

	HEGMAN FAMILY					- 4	1-175	1492	Page 3
<del></del>	and Losses for Tax on the kind(s) of property sold (for e			(b) H	ow acquired	(c) Date	acquired	(d) Dat	
2-story brick wa	rehouse; or common stock, 200 :	shs. MLC Co.)		) P -	ow acquired Purchase Donation	(mo., c	day, yr.)	(mo., d	ay, yr.)
1a PUBLICLY TRADE									
b CAPITAL GAINS I	DIVIDENDS	<del></del>							
<u>c</u>				ļ.—					
<u>d</u>				<b></b>					
(a) Crean colon areas	(f) Depreciation allowed	(g) Co:	st or other basis	<del>'</del>		(h) G	ain or (loss)	)	
(e) Gross sales price	(or allowable)		expense of sale			((e) plu	s (f) minus (	g))	
a 41,994.			16,02	4.					<u>,970.</u>
b 2,628.					<del></del>				,628.
<u>C</u>					<del></del>				
d e									<del></del>
	g gain in column (h) and owned t	y the foundation	on 12/31/69.		(1	) Gains (C	Col. (h) gain	minus	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any		col	(k), but Losses	not less than (from col. (f	1 -0-) <b>or</b> 1))	
a								25	,970.
b				_				2	,628.
<u>c</u>									<del></del>
<u>d</u>		<del>-  </del>		-+	*				<del></del>
<u>e</u> i	C It gain, also as	nter in Part I, line	7	7					
2 Capital gain net income or (net ca	pital loss) 🐧 If (loss), enter	-0- in Part I, line	7	<i></i>	2	,		28	<u>,598.</u>
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8,		and (6):							
If (locs) enter -0- in Part I line 8				<u> </u>	3		N/A		
Part V Qualification U					tment Inco	me			
(For optional use by domestic private	foundations subject to the section	n 4940(a) tax on	net investment ind	come.)					
If section 4940(d)(2) applies, leave th	iis part blank.								
Was the foundation liable for the sect	ion 4942 tax on the distributable	amount of any ve	ear in the base peri	od?				Yes	X No
If "Yes," the foundation doesn't qualify									
1 Enter the appropriate amount in e	ach column for each year; see the	e instructions bef	ore making any en	tries.		<del></del>		, , <u> </u>	
(a) Base period years	(b) Adjusted qualifying	dietributione	Mat value of no	(C)	able-use assets		Distrib	(d) ution ratio	(-))
Calendar year (or tax year beginning	·9 ···/	18,375.	Net value of flo	i iciiai ii	365,004		(col. (b) divi	dea by cor.	24312
2018 2017		89,563.			326,214		<del></del>		74553
2016	1	02,825.			299,076				13809
2015		85,930.			356,033				11354
2014		87,677.	<u></u>		<u>349,631</u>	•		.25	50770
2 Total of line 1, column (d)						2		1.43	34798
3 Average distribution ratio for the 5		al on line 2 by 5.0	O, or by the numbe	r of ye	ars			2.6	36960
the foundation has been in exister	ice if less than 5 years					3	<del></del>	. 20	30300
4 Enter the net value of noncharitab	le-use assets for 2019 from Part	X, line 5				4		409	786.
5 Multiply line 4 by line 3						5		117	,592.
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)					6		- <del>-</del>	365.
7 Add lines 5 and 6						7		117,	957.
8 Enter qualifying distributions from						8_		119,	795.
If line 8 is equal to or greater than	line 7, check the box in Part VI, I	ine 1b, and comp	lete that part using	g a 1%	tax rate.				
See the Part VI instructions.	<u> </u>			_	<del>-</del>			000	OF

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	n 990-PF (2019) THE HEGMAN FAMILY FOUNDATION 41	<u>-175</u>	1492 Page 4
, ***	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	-, see	INSTRUCTIONS) ~
16	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)		
· · ·	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	-थ्य प्राप्ता-१७५०	365.
_	of Part I, line 27b		
(	e All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)	8 E.3.	
. 2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	<del></del>	<u>0.</u>
3	Add lines 1 and 2	<del></del>	365.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	+	0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	en secretari	365.
6	Credits/Payments:		
<b>_</b>	a 2019 estimated tax payments and 2018 overpayment credited to 2019		
١	D Exempt foreign organizations - tax withheld at source  C Tax paid with application for extension of time to file (Form 8868)  66 0 0		
9	Tax paid with application for similar to ma ( similar to ma )		
(	Duckey Withholding circlicatory withhold	<u> </u>	2 777
7	Total credits and payments. Add lines 6a through 6d	<del></del>	3,777.
- 8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8		0.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<del></del>	3,412.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		<u> </u>
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax   3,412. Refunded   11  Art VII-A Statements Regarding Activities		<u> </u>
7. 3		<del></del>	Yes No
18	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		1 7
٠.	any political campaign?		1a X X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition		2027 0022 (202
	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.		1c X
	: Did the foundation file Form 1120-POL for this year?	•	9587 3585 8653
•	Figure 1: Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation.   \$ 0. (2) On foundation managers.  \$ 0.		
	(1) On the foundation.  \$ (2) On foundation managers.  \$ U •		
. '			
0	managers. > \$U .  Has the foundation engaged in any activities that have not previously been reported to the IRS?		2 · X
2	If "Yes," attach a detailed description of the activities.		
2	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3 X
. 1	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	t	4a X
	of "Yes," has it filed a tax return on Form 990-T for this year?	N/A	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5 X
•	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		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law		
	remain in the governing instrument?		6 X
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 X
	,1		
. 88	Enter the states to which the foundation reports or with which it is registered. See instructions.		
	MN		
ı	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 X
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 X
10	The state of the s		10 X
	)	F	orm 990-PF (2019)

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Pa	art VII-A   Statements Regarding Activities (continued)			
		٠,	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
<i>(</i>	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12	1	х
13		13	Х	
10	Website address ► N/A			<u> </u>
1.6	The books are in care of ► MARK E. HEGMAN  Telephone no. ► 952-92	20-2	392	
17	Located at ▶4913 EAST SUNNYSLOPE RD, EDINA, MN ZIP+4 ▶5!			
45	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			$\overline{\Box}$
10	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
40			Yes	No
16		16		X
	securities, or other financial account in a foreign country?  See the instructions for expectations and filing requirements for EigCEN Form 114. If "Yes" anter the name of the	10		<del>                                     </del>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			'
D:	foreign country ►  art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		
L ·		1	Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	-	163	140
18	a During the year, did the foundation (either directly or indirectly):  (1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No		,	
			,	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)  a disqualified person?  Yes X No			
		1		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X 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)?		-	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.)			
t	olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	<u> </u>		- ` •
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here	1		
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	$\vdash$		لـــِـا
	before the first day of the tax year beginning in 2019?	1c		Х
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)):			
ā	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			1
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
C	: If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.	, ,		
	<b>&gt;</b>			
3 <i>a</i>	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 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.)  N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		X
	Fo	rm <b>990</b>	-PF	(2019)

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Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be R	equired (contin	ued)		
5a During the year, did the foundation pay or incur any amount to:				Y	es No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es X No .	7 \$	,
(2) Influence the outcome of any specific public election (see section 4955); of	r to carry on, directly or indir	ectly,	l	` `;	1 67
any voter registration drive?		Y	es X No	رَ   رُ	. *   - * '
(3) Provide a grant to an individual for travel, study, or other similar purposes	?		es X No	`. ]'(.	. "] `.
(4) Provide a grant to an organization other than a charitable, etc., organization					` .
4945(d)(4)(A)? See instructions	.,		es X No		,
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational nurnoses, or t				-;
the prevention of cruelty to children or animals?	or cooodional purposes, or		es X No	, 1	1.77
•	dar the eventions described		22 10	ł	3 7.1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un		in negulations	N/A	FL .	
section 53.4945 or in a current notice regarding disaster assistance? See instri			·	5b	
Organizations relying on a current notice regarding disaster assistance, check l					1 '
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for		- /-		• .	^
expenditure responsibility for the grant?	<b>.</b>	1/A Y	es No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			-	` -	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		r==-		
a personal benefit contract?		Y	es X No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		L	6b	X
If "Yes" to 6b, file Form 8870.			1	′′	' '
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	es 🗶 No 📙	4	·
b If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A	7b	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remuneration or		Г.		7
excess parachute payment(s) during the year?			s X No	`	.] -/
Part VIII Information About Officers, Directors, Truste	es, Foundation Mar				
Paid Employees, and Contractors					
1 List all officers, directors, trustees, and foundation managers and the	neir compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deterred	(e) E	xpense int, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation		int, other wances
MARK E. HEGMAN	PRESIDENT	Cinci o j	сопредавлон		1000
4913 EAST SUNNYSLOPE ROAD	1120122111	1			
EDINA, MN 55424	1.00	0.	0.	1	0.
	DIRECTOR	<u> </u>			
4913 EAST SUNNYSLOPE ROAD	DIRECTOR				
	1 00	۱ ،	^		^
EDINE, MN 55424	1.00 DIRECTOR	0.	0.		0.
	DIRECTOR				
144 PEAVEY LANE	1 00			1	•
WAYZATA, MN 55391	1.00	0.	0.		<u> </u>
· · · · · · · · · · · · · · · · · · ·		[		l	
(					
2 Compensation of five highest-paid employees (other than those incl		enter "NONE."	(d) 0		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) E	xpense nt, other wances
(a) Harris and address of each employee paid more than \$60,000	devoted to position	(c) compensation	compensation	allo	vances
NONE					
,				į	
<del></del>					
,		<del> </del>			
<del></del>					
		L		L	
Total number of other employees paid over \$50,000	<u> </u>	<del>-</del>		000 0	0 F (2019)
			Form	330-ピ	ニ /クハ19\

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Total. Add lines 1 through 3

F	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, se	e instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a		1a	395,751.
b	Average of monthly cash balances	1b	20,275.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	416,026.
е			
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	416,026.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	6,240.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	409,786.
6	Minimum investment return Enter 5% of line 5	6	20,489.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certain	
	foreign organizations, check here  and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	20,489.
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.)		
C	Add lines 2a and 2b	2c	365.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	20,124.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	20,124.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	20,124.
P	art XI: Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	119,795.
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:		
a	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	119,795.
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	5	365.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	119,430.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	ualifies for th	e section

4940(e) reduction of tax in those years.

Page 9

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI,				20 124
line 7				20,124.
2 Undistributed income, if any, as of the end of 2019			0.	
a Enter amount for 2018 only	<u></u>		0.	
<b>b</b> Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2019:		<u> </u>		
a From 2014 77, 861.				
b From 2015 68,928.				
c From 2016 89,046.	•			
d From 2017 74,700.				
e From 2018 100,605.				
f Total of lines 3a through e	411,140.			
4 Qualifying distributions for 2019 from				
Part XII, line 4: ►\$ 119,795.				
a Applied to 2018, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior			-	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2019 distributable amount		1		20,124.
e Remaining amount distributed out of corpus	99,671.			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a))  6 Enter the net total of each column as	<u> </u>			
indicated below:  a Corpus Add lines 3f, 4c, and 4e Subtract line 5	510,811.			
b Prior years' undistributed income. Subtract			·	
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which				
the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2018. Subtract line				
4a from line 2a. Taxable amount - see instr.			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)	0.			
8 Excess distributions carryover from 2014				
not applied on line 5 or line 7	77,861.			
9 Excess distributions carryover to 2020.		,		
Subtract lines 7 and 8 from line 6a	432,950.			
0 Analysis of line 9:				
a Excess from 2015 68,928.				
b Excess from 2016 89,046.				
c Excess from 2017 74,700.				
d Excess from 2018 100, 605.				
e Excess from 2019 99,671.	<del></del>			

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Form **990-PF** (2019)

Form 990-PF (2019) THE HEG	MAN FAMILY	FOUNDATION			7 <b>51492</b> Pa
Part XIV   Private Operating F	oundations (see in	structions and Part VI	I-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter that	t it is a private operating			
foundation, and the ruling is effective fo			▶ ∟		
b Check box to indicate whether the found		ng foundation described		4942(j)(3)_or4	942(1)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	111 0010	
income from Part I or the minimum	(a) 2019	<b>(b)</b> 2018	(c) 2017	(d) 2016	(e) Total
investment return from Part X for					
each year listed			<del></del>		
b 85% of line 2a			<del> </del>		
c Qualifying distributions from Part XII,	\ \ \				
line 4, for each year listed			<del></del>		ļ
d Amounts included in line 2c not					
used directly for active conduct of	]				j
exempt activities	·		<u> </u>	<del></del>	<del> </del>
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the			<del></del>	<del> </del>	<del> </del>
alternative test relied upon:					ĺ
a "Assets" alternative test - enter:					
(1) Value of all assets				<del></del>	
(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 ,					
c "Support" alternative test - enter:	j				.'
(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)	ļ				
(3) Largest amount of support from					
an exempt organization				<u> </u>	
(4) Gross investment income					
Part XV. Supplementary Info			f the foundation	had \$5,000 or mo	re in assets 🗼
at any time during the	ne year-see instri	uctions.)			<del></del>
1 Information Regarding Foundation	•				
a List any managers of the foundation who			ributions received by the	foundation before the clos	e of any tax
year (but only if they have contributed m	iore than \$5,000). (See se	ection 507(a)(2).)			
SEE STATEMENT 10					
b List any managers of the foundation who other entity) of which the foundation has			or an equally large porti	on of the ownership of a pa	rtnership or
• •	a 10% of greater filteres	l.			
NONE					<del></del> _
2 Information Regarding Contribution					
Check here X if the foundation of the foundation makes gifts, grants, etc.,					ests for funds. If
<del></del>					
a The name, address, and telephone numb	er or email address of the	e person to wnom applic	ations should be address	Seo:	
b The form in which applications should be	a cubmitted and informat	on and materials they sh	nould include:		
b The form in which applications should be	s Submitted and informati	ion and materials they so	iodia ilicibae.		
e Any cubmiccion deadlines:		<del> </del>		<del></del>	<del>_</del>
c Any submission deadlines:					
d Any restrictions or limitations on awards	e such as hy geographics	l areas charitable fields	kinds of institutions or	other factors	
a Any restrictions of limitations on awards	, auch as by geographica	ा वारवठ, जावासवणार मरा०५,	מווטווטווטווכווו וט פטוואה, 10	טנווטו ומטנטו 5,	
•					
923601 12-17-19		1			Form 990-PF (20
, 12-17-10					. 51111 (20

Total

	Unrelated b	usiness income	Excluded b	y section 512, 513, or 514	(e)
There gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code		1 5000		
ab			+		
	i i		<del>                                     </del>		
· · · · · · · · · · · · · · · · · · ·					
			<del>                                     </del>		
e	_		<del>                                     </del>		
g Fees and contracts from government agencies			<del>                                     </del>		
g Fees and contracts from government agencies  Membership dues and assessments					
3 Interest on savings and temporary cash	<u> </u>				· · · · · · · · · · · · · · · · · · ·
investments			14	67.	
Dividends and interest from securities			14	12,316.	
5 Net rental income or (loss) from real estate:	<del> </del>			12/0201	
a Debt-financed property			<del>                                     </del>		
b Not debt-financed property					
6 Net rental income or (loss) from personal			<del>   </del>		
property			ı		
7 Other investment income			15	1,108.	
8 Gain or (loss) from sales of assets other			<del>  -  </del>		
than inventory			18	3,067.	
9 Net income or (loss) from special events			<del>  -  </del> -		
O Gross profit or (loss) from sales of inventory	'		<del>  </del>		
1 Other revenue:	·		1	- <del></del>	
b	_	<del></del>			
	1	· ·			
C					, , , , , , , , , , , , , , , , , , ,
d					
_					
de		0.		16,558.	0
e		0.		16,558.	
e2 Subtotal. Add columns (b), (d), and (e)  3 Total Add line 12, columns (b), (d), and (e)		0.		16,558.	
e	)		empt Puu	13	
e	)		empt Pui	13	
e	to the Accomp	olishment of Exe		poses	16,558
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which in the foundation's exempt purposes (other the	s to the Accomp	olishment of Execution (e) of Part XVI-A		poses	16,558
e  Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Eee worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which in	s to the Accomp	olishment of Execution (e) of Part XVI-A		poses	16,558
e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Eee worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which in the foundation's exempt purposes (other the	s to the Accomp	olishment of Execution (e) of Part XVI-A		poses	16,558
e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Eee worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which in the foundation's exempt purposes (other the	s to the Accomp	olishment of Execution (e) of Part XVI-A		poses	16,558
e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Eee worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which in the foundation's exempt purposes (other the	s to the Accomp	olishment of Execution (e) of Part XVI-A		poses	16,558
d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities  line No. Explain below how each activity for which in the foundation's exempt purposes (other the	s to the Accomp	olishment of Execution (e) of Part XVI-A		poses	16,558
d e Subtotal. Add columns (b), (d), and (e)  Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities  ine No. Explain below how each activity for which in the foundation's exempt purposes (other the	s to the Accomp	olishment of Execution (e) of Part XVI-A		poses	16,558
d e Subtotal. Add columns (b), (d), and (e)  Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities  ine No. Explain below how each activity for which in the foundation's exempt purposes (other the	s to the Accomp	olishment of Execution (e) of Part XVI-A		poses	16,558
d e Subtotal. Add columns (b), (d), and (e)  Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities  ine No. Explain below how each activity for which in the foundation's exempt purposes (other the	s to the Accomp	olishment of Execution (e) of Part XVI-A		poses	16,558
d e Subtotal. Add columns (b), (d), and (e)  Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities  ine No. Explain below how each activity for which in the foundation's exempt purposes (other the	s to the Accomp	olishment of Execution (e) of Part XVI-A		poses	16,558
d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities  line No. Explain below how each activity for which in the foundation's exempt purposes (other the	s to the Accomp	olishment of Execution (e) of Part XVI-A		poses	16,558
Subtotal. Add columns (b), (d), and (e)  Total Add line 12, columns (b), (d), and (e)  ee worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities  ine No. Explain below how each activity for which in the foundation's exempt purposes (other the	s to the Accomp	olishment of Execution (e) of Part XVI-A		poses	16,558
d e Subtotal. Add columns (b), (d), and (e)  Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities  ine No. Explain below how each activity for which in the foundation's exempt purposes (other the	s to the Accomp	olishment of Execution (e) of Part XVI-A		poses	16,558
d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities  line No. Explain below how each activity for which in the foundation's exempt purposes (other the	s to the Accomp	olishment of Execution (e) of Part XVI-A		poses	16,558
e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Eee worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which in the foundation's exempt purposes (other the	s to the Accomp	olishment of Execution (e) of Part XVI-A		poses	16,558
e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Eee worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which in the foundation's exempt purposes (other the	s to the Accomp	olishment of Execution (e) of Part XVI-A		poses	16,558

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Exempt Organizations  1	Part		enarding Tra			nd Relations	hins With Noncha		Pa	ige 13
(other than section 501(c)3) erganizations) or in section 527, relating to political organizations?  1 Transfers from the reporting foundation to a noncharitable exempt organization of:  1 Statil X  1 (2) Other assets  2 (3) Other assets  1 (1) Statil Statis of assets from a noncharitable exempt organization  1 (2) Purchases of assets from a noncharitable exempt organization  2 (3) Rental of facilities, equipment, or other assets  1 (4) Reminiscrations:  1 (5) Loans or loan guarantees  2 (6) Performance of services or membership or fundrasing solicitations  2 Sharing of facilities, equipment, making lists, other assets, or paid employees  3 Infel X  4 If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services received.  4 If the answer to any of the above is "Yes," complete the following schedule. The services received in section 501(c) (other than section 501(c) (other than section 501(c)(3)) or in section 501(c) (d) Performance, show in column (d) the value of the goods, other assets, or services received.  1 If the answer to any of the above is "Yes," complete the following schedule.  2 If the answer to any of the above is "Yes," complete the following schedule. The section of t				iisicis to a	illu Transactions a	na relations	inps With Noncha	ilabic		
a Transfers from the reporting foundation to a nonchardable exempt organization of:  (1) Cash (2) Other assets  5) Other transactions:  (2) Purchases of assets from a nonchardable exempt organization  (3) Sherial of Stotiles, equipment, or other assets  (4) Remidursement arrangements  (5) Lons or of an apurametes  (5) Lons or of an apurametes  (6) Performance of services or membership or fundrasing solicitations  (6) Performance of services or membership or fundrasing solicitations  (7) The analysis of the above is "Yes," complete the following schedule: Column (5) should always show the fair market value of the goods, other assets, or or services given by the reporting foundation, if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (6) the above its possible, that assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in section 501(c) (6) (finer than section 501(c)(3)) or in section 527?  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization (4) Description of valueders, transactions, and sharing arrangements in section 501(c) (finer than section 501(c)(3)) or in section 527?  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization of sharing arrangement, show in Section 527?  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization of sharing arrangement, show in Section 527?  2b In 1'Yes, complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  1 Indian parameters, transactions, and sharing a schedule and information of which price the sharing arrangements.  1 Indian parameters, transactionship and information of which price the sharing arrangements.  1 Indian parameters, transactionship and information of which pr	1 Dic			y of the followi	ng with any other organizati	on described in sec	ction 501(c)		Yes	No
(1) Sels of assets to a noncharitable exempt organization (2) Purchase of assets from a noncharitable exempt organization (3) Restal of facilities, equipment, or other assets (4) Reminiscramed arrangements (5) Loans or tran guarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) All the answer to any of the above is "75°, complete the organization state of the services given by the reporting fundation, if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (9) through of the goods, other assets, or services received.  (a) Limit of (7) Arrount modified (9) Arrount modified (1) Arround modified	(ot	her than section 501(c)(3) orga	nizations) or in sect	tion 527, relatin	g to political organizations?	•	. ,			
(2) Other assets  (1) Sales of assets to a noncharitable exempt organization  (2) Purchases of assets from a noncharitable exempt organization  (3) Rental of British of Britishes, equipment, or other assets  (4) Reminusement arrangements  (5) Loans or foran quarantees  (5) Loans or foran quarantees  (6) Performance of services or membership or fundrasing solicitations  (6) Performance of services or membership or fundrasing solicitations  (7) A resolution of the above is "vis." complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in section 5010(1) (other than section 5010(3)) or in section 5010(3)) or in section 5010(3) or in sect	<b>a</b> Tra	ansfers from the reporting found	lation to a noncharif	table exempt or	ganization of:					
Differ transactions:  (1) Sales of assets to a noncharitable exempt organization  (2) Perchases of assets from a noncharitable exempt organization  (3) Rental of facilities, equipment, or other assets  (4) Rental organizations:  (5) Loans or loan guarantees  (6) Performance of services or membership or fundraising solicitations  2 Sharing of facilities, equipment, mailing lists, other assets, or paid employees  4 If the answer to any of the above is Yes, complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services perceived.  (a) It may be an any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services perceived.  (a) It may be also in the same of the goods, other assets, or services received.  (b) Amount involved  (c) Name of noncharitable exempt organization  (d) Description of transfers, transactions, and sharing arrangements  N/A  (a) It may be a seen of the second of transfers, transactions, and sharing arrangements.  N/A  (b) Amount involved  (c) Name of noncharitable exempt organization  (d) Description of transfers, transactions, and sharing arrangements.  N/A  (a) It may be a seen of transfers, transactions, and sharing arrangements.  N/A  (b) Type of organization  (c) Description of relationship.  N/A  (c) Description of relationship.  N/A  (d) Description of transfers, transactionship.  N/A  (e) Description of relationship.  N/A  (f) It is to transfers at prayer, letter but have exempted the strong arrangements at prayer, letters but have exempted the strong arrangement and prayer, letters but have exempted the strong arrangement and prayer, letters but have exempted the strong arrangement and prayer, letters but have exempted the strong arrangement and prayer, letters but have exempted the strong arrangement and prayer, letters but have exempted the strong arrangement and prayer, letters but have exempted the strong arrangement and prayer, letters but have exempted the strong arrangement	(1)	Cash						1a(1)		
(1) Sales of assets to a noncharrable exempt organization  (2) Purchases of assets from a noncharrable exempt organization  (3) Rental of facilities, equipment, or other assets  (4) Remidusement arrangements  (5) Loans or loan quiranties  (6) Performance of services or membership or fundrasing solicitations  (6) Reformance of services or membership or fundrasing solicitations  (7) If the answer to any of the above or Sres, complete the following solicitations or services given by the reporting foundation. If the foundation deceived less than faur market value in any transaction or sharing arrangement, show in column (4) Manual involved  (6) Name of noncharitable exempt organization  (9) Amount involved  (9) Name of noncharitable exempt organization  (1) N/A  (1) N/A  (1) Description of relationship  (1) N/A  (2) If Yes, complete the following schedule.  (a) Name of organization  (b) Amount involved  (c) Name of noncharitable exempt organization  (b) Type of organization  (c) Description of relationship  (d) Description of relationship  (e) Description of relationship  (g) N/A  (h) If Yes, complete the following schedule:  (a) Name of organization  (b) Type of organization  (c) Description of relationship  (d) Description of relationship  (e) Description of relationship  (e) Description of relationship  (f) Description of relationship  (g) Type of organization  (h) Type of	(2)	Other assets						1a(2)		X
(2) Purchases of assets from a noncharitable exempt organization  (3) Rental of facilities, equipment, or other assets  (4) Rembusement arrangements  (5) Loans or loan guarantees  (6) Performance of services or membership or fundraising solicitations  2 Sharing of facilities, equipment, making lists, other assets, or paid employees  (7) It is a list of the assets or any of the above resky. Complete the following schedule. Column (6) should always show the fair market value of the goods, other assets, or services greened (6) It is an asset of the above of the goods, other assets, or services received.  (8) Immon (9) Amount involved (2) Name of noncharitable exempt organization (9) Description of treatments, and a sharing arrangements. N / A  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other this assets) or services received.  (9) Amount involved (2) Name of noncharitable exempt organization (9) Description of relationship.  N / A  (a) Immon (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of relationship.  N / A  (b) Type of organization (c) Description of relationship.  (c) Description of relationship.  N / A  (c) Description of relationship.  N / A  (d) Description of relationship.  N / A  (e) Description of relationship.  N / A  (e) Description of relationship.  N / A  (f) Description of relationship.  N / A  (g) Des	<b>b</b> Oti	ner transactions:							ļ	<u> </u>
(a) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan quarantees (6) Performance of services or membership or fundrasing solicitations (7) Loans or loan quarantees (8) Performance of services or membership or fundrasing solicitations (8) Performance of services or membership or fundrasing solicitations (8) The answer to any of the above is "yes," complete the following schedule. Column (a) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation ecceived less than fair market value in any transaction or sharing arrangement, show in column (a) the value of the goods, other assets, or services received.  (a) Immunitiiii ii the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations (b) Amount iiivolved (c) Name of noncharitable exempt organizations described in section 501(c) (other than section 501(c) (other 5			• •						<b></b>	
(a) Reimbursement arrangements  (b) Petromanaco is services or membership or fundraising solicitations  (c) Petromanaco is services or membership or fundraising solicitations  (d) Petromanaco is services or membership or fundraising solicitations  (e) Petromanaco is services or membership or fundraising solicitations  (f) It the answer to any of the above is "Yes," complete the following solicitation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.  (a) It men is not value of the goods, other assets, or services received.  (a) Almount involved  (b) Almount involved  (c) Name of noncharitable exempt organization  (d) Description of vasative, two-sections, and abaving arrangements  N/A  (a) Free organization  (b) Type of organizations described  in section 501(c) (other than section 501(c)(3)) or in section 527?  (a) Name of organization  (b) Type of organization (e) Description of relationship  N/A  (b) Type of organization (e) Description of relationship  N/A  (c) Description of relationship  N/A  (d) Description of relationship  N/A  (e) Description of relationship  N/A  (f) Title of organization (e) Description of relationship  N/A  (g) State of organization (e) Description of relationship  N/A  (g) State of organization (e) Description of relationship  N/A  (g) State of organization (e) Description of relationship  N/A  (g) State of organization (e) Description of relationship  N/A  (g) State of organization (e) Description of relationship  N/A  (g) State of organization (e) Description of relationship  N/A  (g) State of organization (e) Description of relationship  N/A  (h) Type of organization (e) Description of relationship  N/A  (g) State of organization (e) Description of relationship  N/A  (g) State of organization (e) Description of relationship  N/A  (g) State of organization (e) Description of relationship  N/A  (g) Type of organization (e) Description of relationship  N/A  (g) State of org			-	organization					├	
(6) Loans or loan guarantees (6) Performance of servotes or membership or fundraising solicitations (6) Performance of servotes or membership or fundraising solicitations (7) Idea in the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services received.  (8) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of eachders, transactions, and sharing arrangement, show in column (d) the value of the goods, other assets, or services received.  (8) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of eachders, transactions, and sharing arrangements in section 501(c) (other than section 501(c) (other than section 501(c)(3)) or in section 527?  In the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations discribed in section 501(c) (other than section 501(c)(3)) or in section 527?  If "Yes, complete the following schedules.  (a) Name of organization (b) Type of organization (e) Description of relationship N/A  N/A  Indicate provides of perjun, locative than thave examined the return, including accompanying schedules and allements, and to the best of my knowledge scale in the proposer of the provides of perjun, locative than tax perjunction of perputation of pergunary in based on all information of which proposer has any knowledge scale in the proposer below? Segment N/A  Proposer in the CLIFTONLARSONALLEN LLP  Firm's said ress > 220 S 6TH STREET, SUITE 300									╁──┤	
(6) Performance of services or membership or fundraising solicitations  Starting of facilities, equipment, making lists, other assets, or paid employees  If the answer to any of the above is "Ser" complete the following schedules. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.  (a) Line to (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of fransfers, transactions, and sharing arrangements  N/A  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c) (3)) or in section 527?  If Yes \( \) No  If Yes \( \) One or more tax-exempt organizations described in section 501(c) (other than section 501(c) (3)) or in section 527?  If Yes \( \) No  If Yes \( \) No  If Yes \( \) No  N/A  Sign and beyef its thus, correct, and complishs phesitariann of prepare (other than taxpoyer) is based on all information of which prepare has any inconlecting the following schedule.  If yes \( \) OFFICE \( \) If Yes \( \) No  Printing preparer same  Preparer Signature  Preparer Signature  Preparer Signature  Firm's En \( \) A1 - 0.746.74.9  Firm's address \( \) 2.2.0 \( \) 6.74 \( \) STREET, SUITE 3.00			<b>i</b>						<del></del>	
Sharing of facilities, equipment, mailing lists, other assets, or paid employees  d if the answer to any of the above is Yes, Complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services preserved less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.  (a) Line no  (b) Amount involved  (c) Name of nonchartable exempt organization  (d) Description of transfers, transactions, and sharing arrangements  N/A  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?  b. If Yes, Complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A    Indice penalties of parjoy, Idealies that have examined the return, including accompanying schedules and attements, and to the best of they bronkedge and begin in it in this, correct, and completing Decision of prepare (other than topsywer) is based on all information of which prepare is a firm of the continued of the proper is signature    Date   Date   Title   Date   Check			ambarahin ar fundri	nioina colioitatio	200				$\vdash$ $\dashv$	
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (g) the value of the goods, other assets, or services received.  (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of twinsfers, transactions, and sharing arrangements.  N/A  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes   No	٠,		·	-						
or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.    (a) Image   (b) Amount involved   (c) Name of noncharitable exempt organization   (d) Description of transfers, transactions, and sharing arrangements   N/A			•		• •	ways show the fair	market value of the goods		ets	
column (d) the value of the goods, other assets, or services received.  (a) I war on (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements  N/A  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes		•	•	-	• •				,010,	
N/A  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?  □ If "Yes," complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  Sign  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of properer (other than taxpoyer) is based on a finding and belief, it is true, correct, and complete Declaration of properer (other than taxpoyer) is based on a finding and belief, it is true, correct, and complete Declaration of properer (other than taxpoyer) is based on a finding and belief, it is true, correct, and complete Declaration of properer (other than taxpoyer) is based on a finding and belief, it is true, correct, and complete Declaration of properer (other than taxpoyer) is based on a finding and belief, it is true, correct, and complete Declaration of properer (other than taxpoyer) is based on a finding and belief, it is true, correct, and complete Declaration of properer (other than taxpoyer) is based on a finding and belief, it is true. The properer is a properer (other than taxpoyer) is based on a finding and belief, it is true. The properer is a properer to the properer t						,				
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?    If Yes, complete the following schedule.   (a) Name of organization   (b) Type of organization   (c) Description of relationship	(a) Line n	o (b) Amount involved	(c) Name	of noncharitable	e exempt organization	(d) Description	on of transfers, transactions, an	d sharing arr	angemen	ts
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes				N/A						
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes										
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes			ļ							
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes										
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes			<b></b>							
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes		·	<u> </u>				<u>A</u>			
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes		<del> </del>	<del> </del>							
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes			<del> </del>							
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes		-	<del> </del>			<del> </del>				
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes			<del>                                     </del>	<del> </del>		<del> </del>				
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes		<del></del>	<del>                                     </del>			<del></del>				
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes						<del>-  </del>				
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes						· <del>  </del>	<del></del>			
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes										
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes										
b If Yes," complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  Sign  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer shown below? See instruction with the preparer shown below? See instruction below. See instruction below? See instruction below? See instruction below. See instruction below? See instruction below. See instruction below. See instruction below. See instruction below. See instruction below? See instruction below. See instruction below. See instruction be	2a Ist	he foundation directly or indirec	tly affiliated with, or	r related to, one	or more tax-exempt organi	zations described				
(a) Name of organization  N/A  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Preparer Signature  Date  LORI PETERSON  Firm's name  CLIFTONLARSONALLEN LLP  Firm's address  220 S 6TH STREET, SUITE 300	ın s	section 501(c) (other than section	n 501(c)(3)) or in s	section 527?				Yes	X	No
N/A  Sign Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of which preparer has any knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and belief, it	b If "				· · · · · · · · · · · · · · · · · · ·					
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge return with the preparer shown below? See instruction of officer or trustee    Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge of the left of my knowledge			ganization		(b) Type of organization		(c) Description of relation	iship		
Sign Here Signature of officer or trustee Date Title  Print/Type preparer's name Preparer   Date   Date   Date   Date   Print/Type preparer's name   Preparer   Date   Date   Date   Print/Type preparer's name   Preparer   Prim's n		N/A				<del></del>	···-			
Sign Here Signature of officer or trustee Date Title  Print/Type preparer's name Preparer   Date   Date   Date   Date   Print/Type preparer's name   Preparer   Date   Date   Date   Print/Type preparer's name   Preparer   Prim's n					<u>,,,</u>					
Sign Here			<del></del>	<del></del>		<del> </del>				
Sign Here Signature of officer or trustee Date Title  Print/Type preparer's name Preparer   Date   Date   Date   Date   Print/Type preparer's name   Preparer   Date   Date   Date   Print/Type preparer's name   Preparer   Prim's n										
Sign Here		Under penalties of perjury, I declare	that I have examined the	is return, including	accompanying schedules and st	atements, and to the b	est of my knowledge			
Here Signature of officer or trustee Date Title  Print/Type preparer's name Preparer's signature  Paid Preparer Use Only  Firm's address ▶ 220 S 6TH STREET, SUITE 300    Control   Contr	Sign						has any knowledge	turn with the	prepare	r
Signature of officer or trustee  Print/Type preparer's name  Preparer's signature  Date  Check ☐ if self- employed  Preparer  Use Only  Firm's address ▶ 220 S 6TH STREET, SUITE 300	Here	> Xnnise	HISE-		1 11/6/2027	OFF	rce.V			1
Paid Preparer Use Only  LORI PETERSON  LORI PETERSON  Firm's name ► CLIFTONLARSONALLEN LLP  Firm's address ► 220 S 6TH STREET, SUITE 300		Signature of officer or trustee	: '' ()		Date	Title	L	100		7,10
Paid Preparer Use Only  LORI PETERSON  MANUAL MANUAL MANUAL MISSON P00993862  Firm's name ► CLIFTONLARSONALLEN LLP  Firm's address ► 220 S 6TH STREET, SUITE 300		Print/Type preparer's na	ame	Preparer's s	ignature	Date	Check If PTIN			
Preparer Use Only  Firm's address ► 220 S 6TH STREET, SUITE 300  Firm's address ► 220 S 6TH STREET, SUITE 300				14 11	11 000	1.1.	self- employed			
Use Only  Firm's address ► 220 S 6TH STREET, SUITE 300	Paid			Mitsle	La CVII	11/5/2020				
Firm's address ▶ 220 S 6TH STREET, SUITE 300			FTONLARSO	NALLEN	LLP	,	Firm's EIN ► 41-0	7467	49	
			0 S 6TH 9	ਾਸਤ ਦੁਸ਼ਾ	SIITTE 300		<del>                                     </del>	<u>.</u>		
							Phone no. 612-3	76-4	500	

Part XV . Supplementary Informati				·
3 . Grants and Contributions Paid During th		<del></del>	<del></del>	
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		
LIFE CENTER INNER CITY CHRISTIAN	NONE	501(C)(3)	GENERAL	
MINISTRIES	NONE	BUT(C)(3)	SENERAL	ļ
1812 PARK AVENUE				
MINNEAPOLIS, MN 55404	/			, 500
MINNEGORA CONCERNATION NOT INMEED	NONE	501(C)(3)	GENERAL	
MINNESOTA CONSERVATION VOLUNTEER 500 LAFAYETTE ROAD	NOME	501(0)(3)	GENERAL	
ST PAUL, MN 55155		1		100
1110B, IM 33133			<del> </del>	
MINNESOTA LANDSCAPE ARBORETUM	NONE	501(C)(3)	GENERAL	
3675 ARBORETUM DRIVE				17 500
CHASKA, MN 55318			<del>                                     </del>	17,500
·				
MINNESOTA OVARIAN CANCER ALLIANCE	NONE	501(C)(3)	GENERAL	
4604 CHICAGO AVENUE				
MINNEAPOLIS, MN 55407	<del></del>			15,000
MOUNT OLIVET LUTHERAN CHURCH	NONE	501(C)(3)	RELIGIOUS	
12235 OLD ROCKFORD ROAD				
PLYMOUTH, MN 55441		<u> </u>		18,000
•				
NC LITTLE MEMORIAL HOSPICE	NONE	501(C)(3)	MEDICAL	
7019 LYNMAR LANE		, , , , , ,		
EDINA, MN 55435				5,150.
OUTING MN VOLUNTEER LIBRARY	NONE	501(C)(3)	GENERAL	
3300 WOODS BAY DRIVE	NONE	501(0)(3)	GENERAL	
OUTING, MN 56662				750.
PI BETA PHI FOUNDATION	NONE	501(C)(3)	GENERAL	
1154 TOWN & COUNTRY COMMONS DRIVE				
TOWN & COUNTRY, MO 63017				1,000.
PLYMOUTH CHRISTIAN YOUTH CENTER	NONE	501(C)(3)	GENERAL	
2519 LYNDALE AVENUE		[, -, -, -, -, -, -, -, -, -, -, -, -,		
MINNEAPOLIS, MN 55411				26,000.
				-
PROJECT FOR PRIDE AND LIVING	NONE	501(C)(3)	GENERAL	
1035 EAST FRANKLIN AVENUE			GENERAL	
MINNEAPOLIS, MN 55404				6,000.
Total from continuation sheets				102,700.

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
SCHUBERT CLUB	NONE	501(C)(3)	GENERAL	
302 LANDMARK CTR, 75 w 5TH STREET				
ST PAUL, MN 55102				100
		T01/G1/2)		
UNIVERSITY OF MINNESOTA FOUNDATION	NONE	501(C)(3)	GENERAL	
200 OAK STREET SE #500 MINNEAPOLIS, MN 55455				3,200
ATTINEAT OFFE, IN 13433				, , , , , , , , , , , , , , , , , , , ,
WILD AND FREE WILDLIFE PROGRAM	NONE	501(C)(3)	GENERAL	
10033 OLD HIGHWAY 18				
BRAINERD, MN 56401				400
WOMAN'S CLUB OF MINNEAPOLIS	NONE	501(C)(3)	GENERAL	
410 OAK GROVE STREET				E 000
MINNEAPOLIS, MN 55403				5,000
YOUTH FRONTIERS	NONE	501(C)(3)	GENERAL	
6009 EXCELSIOR BLVD	HONE	501(0)(3)	· ·	
MINNEAPOLIS, MN 55416				1,000
PURDUE UNIVERSITY	NONE	501(C)(3)	GENERAL	
403 WEST WOOD STREET				
WEST LAFAYETTE, IN 47907				3,000
	١			
1				
Total from continuation sheets		<u> </u>		

### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

➤ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

2019

Name of the organization Employer identification number

	THE HEGMAN FAMILY FOUNDATION	41-1751492
Organization type (chec	k one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt chantable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
· -	n is covered by the <b>General Rule</b> or a <b>Special Rule.</b> (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Speci	al Rule See instructions
•		
General Rule		
-	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions to my one contributor Complete Parts I and II See instructions for determining a contrib	- · · · · ·
Special Rules		•
sections 509(a)( any one contribu	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% sup 1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, utor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the EZ, line 1 Complete Parts I and II	16a, or 16b, and that received from
year, total contri	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received to the section \$1,000 exclusively for religious, charitable, scientific, literary, or welty to children or animals. Complete Parts I, II, and III	
year, contribution is checked, enter purpose Don't contribution.	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section sections exclusively for religious, charitable, etc., purposes, but no such contributions total or here the total contributions that were received during the year for an exclusively released any of the parts unless the General Rule applies to this organization becausely, contributions totaling \$5,000 or more during the year	led more than \$1,000 If this box ligious, chantable, etc ,
out it must answer "No" o	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on it the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Name of organization

Employer identification number

## THE HEGMAN FAMILY FOUNDATION

41-1751492

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MARK AND JACQUELINE HEGMAN  4913 EAST SUNNYSLOPE ROAD  EDINA, MN 55424	\$352,172.	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) ' Type of contribution
2	MARK AND JACQUELINE HEGMAN  4913 EAST SUNNYSLOPE ROAD  EDINA, MN 55424	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_		\$	Person Payroll Oncash (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)

Name of organization

Employer identification number

#### THE HEGMAN FAMILY FOUNDATION

41-1751492

	EGMAN FAMILI FOUNDATION		-1751452
Part II	Noncash Property (see instructions). Use duplicate copies of Part II	if additional space is needed	
(a) No. from Part I	 (b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	2,500 SHS OF VICTORY MUNDER MULTI-CAP FUND CLASS A		
		102,675.	11/07/19
(a)		(c)	
No. from	(b)	FMV (or estimate)	(d)
Part I	Description of noncash property given	(See instructions)	Date received
	1,200 SHS OF LINCOLN NATIONAL CORPORATION	_	
1		_	
- 1		- s 72,552.	11/06/19
Ì		$-   \$ - \frac{72,552}{}  $	11/00/19
(a)		(c)	
No.	بر <b>(b)</b>	FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions)	Date received
	500 SHS OF HOME DEPOT		
1		_	
Ì		_   110 242	11/05/10
}		_   \$110,343.	11/06/19
(a)		(.)	<del></del>
No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions)	Date received
	2,000 SHS OF HP INC		<del></del>
1		_	
}		-   40,000	10/00/10
		_ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	12/20/19
(a)		(0)	<del></del>
No.	(b)	(c) FMV (or estimate)	(d)
from   Part I	Description of noncash property given	(See instructions)	Date received
	854 SHS OF CORTEVA INC		
_1		_	
}		_	12/20/10
		\$\$	12/20/19
(a)			<del></del>
No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions)	Date received
	2,000 SHS OF CHESAPEAKE ENERGY CORPORATION		
_1		_	
_		-	10/00/10
23453 11-06-		\$ 1,905.	12/20/19 0.990-EZ, or 990-PE) (2019)

Name of or	rganization		Employer identification number	
THE H	EGMAN FAMILY FOUNDATION		41-1751492	
Part III	Exclusively religious, charitable, etc., contribut		ion 501(c)(7), (8), or (10) that total more than \$1,000 for the year	
	from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious,	charitable, etc., contributions of \$1,000 or les	ss for the year (Enter this info once) \$	
(a) No.	Use duplicate copies of Part III if additional	space is needed	<del></del>	
from Part I	(b) Purpose of gift	(d) Description of how gift is held		
- Faiti				
			_	
-		(a) Tuesday of aith		
		(e) Transfer of gift		
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee	
(a) No. Trom	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
Part I				
-		(e) Transfer of gift		
		(e) Transfer or gift		
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee	
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
Part I				
		(e) Transfer of gift		
1		(c) Trunsier or gift		
Ļ	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee	
1				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
Parti				
- }-		(e) Transfer of gift		
		(e) Hansier of gift		
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee	

FORM 990-PF	GAIN OR	(LOSS)	FROM S	SALE	OF A	ASSET	'S		STA	TEMEN	T 1
(A) DESCRIPTION OF PRO	PERTY					MANNE CQUIR		DAT CQUI	'E RED	DATE	SOLI
PUBLICLY TRADED SE	CURITIES				)						
(B) GROSS SALES PRIC	COST COST CE OTHER I	OR	EXP	(D) ENSE SALE	OF	DE	(E)			(F) OR L	oss
41,	994.	41,555	•		0.			0.		-	439.
CAPITAL GAINS DIVI	•		A					=		_	,628. ,067.
FORM 990-PF INTERI	EST ON SAVING	GS AND	TEMPOR	RARY	CASI	INV	ESTME	NTS	STA	remen <sup>°</sup>	т 2
FORM 990-PF INTERI	EST ON SAVING	F	TEMPOR (A) REVENUE ER BOOK	<del>.</del>	,	) VNI '	ESTME B) ESTME OME		AI	(C) OJUSTI	ED
	<del></del>	F	(A) REVENUE	<del>.</del>	NET	) VNI '	B) ESTME OME		AI	(C)	ED
SOURCE	,*	F	(A) REVENUE	E KS	NET	) VNI '	B) ESTME OME	NT	AI	(C)	ED
SOURCE RAYMOND JAMES	,*	F	(A) REVENUE	67.	NET	) VNI '	B) ESTME OME	7.	AI	(C)	ED
SOURCE RAYMOND JAMES	,*	PI	(A) REVENUE ER BOOK	67.	NET	( INC	B) ESTME OME 6	7.	AI NET	(C)	ED OME
SOURCE  RAYMOND JAMES  TOTAL TO PART I, L	INE 3	PI	(A) REVENUE RE BOOK TEREST	67. 67.	NET	CCURI	B) ESTME OME  6  6	NT 7. 7. 8) NVES	AI NET	(C) JUSTI INCO	ED OME T 3
SOURCE  RAYMOND JAMES  TOTAL TO PART I, LE	DIVIDENDS  GROSS	AND IN  CAPI GAI DIVII	(A) REVENUE RE BOOK TEREST	67. 67.	NET	CURI	B) ESTME OME  6  6  TIES  NET I	NT 7. 7. 8) NVES	AI NET STAT	(C) DJUSTI NCC	ED OME T 3

FORM 990-PF	OTHER	INCOME		STATEMENT 4
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
ROYALTY INCOME ROYALTY EXPENSES	_	5,943. -4,835.	5,943. -4,835.	
TOTAL TO FORM 990-PF, PART I		1,108.	1,108.	
	=	<del></del>		
FORM 990-PF	ACCOUNT	ING FEES	1	STATEMENT 5
DESCRIPTION .	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	5,790	. 2,895	•	2,895.
TO FORM 990-PF, PG 1, LN 16B	5,790	. 2,895	•	2,895
,	<del></del>		,*	
FORM 990-PF (	THER PROFE	SSIONAL FEES		STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PROFESSIONAL SERVICE FEE	4,950	. 2,475.	•	2,475.
TO FORM 990-PF, PG 1, LN 16C	4,950	2,475.		2,475.
FORM 990-PF	OTHER 1	EXPENSES		STATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
MN AG FILING FEE BANK FEES	25 220			25. 0.
TO FORM 990-PF, PG 1, LN 23	245			25.
,				

FORM 990-PF	CORP	ORATE STOCK		STATEMENT 8
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE
ALTRIA GROUP INC - 500 SHS		·	20,849.	24,955.
CHEVRON CORPORATION - 325 SHS			38,790.	39,166.
JPMORGAN CHASE - 1,000 SHS			56,042.	139,400.
WELLS FARGO - 700 SHS			38,231.	37,660.
UNITED HEALTH GROUP - 400 SHS			113,152.	117,592.
LINCOLN NATIONAL CORPORATION -	1,200	SHS	72,552.	70,812.
HOME DEPOT - 500 SHS			110,343.	109,190.
HP INC - 2,000 SHS			40,900.	41,100.
CORTEVA INC - 854 SHS			23,797.	25,244.
CHESAPEAKE ENERGY CORPORATION -	2,000	O SHS	1,905.	1,650.
TOTAL TO FORM 990-PF, PART II,	LINE 3	10B =	516,561.	606,769.
FORM 990-PF	OTHER	INVESTMENTS		STATEMENT 9
FORM 990-PF DESCRIPTION	OTHER	INVESTMENTS  VALUATION METHOD	BOOK VALUE	STATEMENT 9 FAIR MARKET VALUE
DESCRIPTION	, <b>a</b> 1	VALUATION METHOD	BOOK VALUE	FAIR MARKET
	, <b>a</b> 1	VALUATION	<del></del>	FAIR MARKET VALUE
DESCRIPTION  BP PRUDHOE BAY ROYALTY TRUST - SHS	, <b>a</b> 1	VALUATION METHOD	BOOK VALUE  36,451. 40,562.	FAIR MARKET
DESCRIPTION  BP PRUDHOE BAY ROYALTY TRUST - SHS SECTOR SPDR TR - 500 SHS	500	VALUATION METHOD COST	36,451.	FAIR MARKET VALUE
DESCRIPTION BP PRUDHOE BAY ROYALTY TRUST -	500	VALUATION METHOD  COST  COST	36,451.	FAIR MARKET VALUE 3,440.

FORM 990-PF	PART XV - LINE 1A	STATEMENT 10
	LIST OF FOUNDATION MANAGERS	ר

NAME OF MANAGER

MARK E. HEGMAN JACQUELINE B. HEGMAN