Form **990-PF** 

Department of the Treasury

JSA For Paperwork Reduction Act Notice, see instructions.
9E1410 1 000 FMV591 P27Y 04/24/2020 11:29:02

**Return of Private Foundation** 

or Section 4947(a)(1) Trust Treated as Private Foundation Do not enter social security numbers on this form as it may be made public.

► Go to www.irs.gov/Form990PFfor instructions and the latest information

	Ciliai	nevenue Service		JOVA TOTALOGOTA TOTALOGOTA	dottons and t				
_	For calendar_year 2019 or tax year beginning , 2019, and ending , 20								
. Na	ame of	foundation	•	المعيد المستفد المستعدد	er 🚓 .	سيها المقد	, =,	A _ Employer identif	ication number مِنْ مِنْ الله أَنْ اللهُ الله
JULIE & DOUG BAKER JR FOUNDATION								46-	1734894
Ñ	ımber	and street (or PO box number if mail is not deliv	ered to	street address)	•	Room/sur	te	B Telephone numb	er (see instructions)
		•	٠,		.* * * 1		'		, • • •
	PO 1	BOX 0634		•	<i>'</i>			65	51-466-8710 . →
Cr	ty or to	own, state or province, country, and ZIP or foreign	posta	رو ت " code					<del></del>
	•						- 1	C If exemption application pending, check here	tion is .
	мты	WAUKEE, WI.53201-0634	-	٠ .		,	_	pending, theth here	· · · · · · · · · · · · · · · · · · ·
_		ck all that apply.   Initial return		Initial return	of a former p	ublic cha	ritv	D 1 Foreign organizat	trans shock have
Ī		Final return		Amended re	•		,	2 Foreign organizat	
		· Address chan	πe.	<del></del>		•		85% test, check h	ere and attach
Н	Che	ck type of organization. X Section				· (m)	1	computation .	
ï	$\neg$	ection 4947(a)(1) nonexempt charitable tru		Other taxable pr		( )	$\downarrow$ $\mid$	E If private foundation	
+		<del></del>		Inting method: X C		rual	٠.		o)(1)(A), check here
·		· Ir—	_	• —	asii Acc	iluai *-	,		n a 60-month termination
		of year (from Part II, col (c), line	_ ,	her (specify) olumn (d), must be on c	aab baara \ t	<del></del>	<del></del>	under section 507(b	)(1)(B), check here
				olumn (d), must be on c	ash basis /			*	(d) Disbursements
L	art I	Analysis of Revenue and Expenses total of amounts in columns (b), (c), and (		(a) Revenue and .	. (b) Net inve	estment .	(0	c) Adjusted net	for charitable
<b>~</b>		may not necessarily equal the amounts in		, expenses per books	incon	ne		income	- purposes (cash basis only)
		column (a) (see instructions) )			va Sandidra Var kiralaksa, inairat 1.	A. Maar (Marsin)	in Means to	BOOK - AN WORKS FOR A MAY	(Cash basis only)
;		Charle V If the foundation is not required		TOTA WAS TO A WAS LESS BREDI			QUINNE O MAZ	ngina oku dalika kalibi. Kana alah Maraka ing	III dan imilia da
	2	Check X attach Sch B				over the contract of the contr	1. 500 14	ではなるをごとくを認	#757801 4448 4841 7 7 7 4 4 4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	3	Interest on savings and temporary cash investme	ents.					· · · · · · · · · · · · · · · · · · ·	(035.44782.35 (8.473.57 ).j
1	.4	Dividends and interest from securities		202,128.	20	2,128.	<u> </u>	•	STATE OF STATE OF
	5a	Gross rents		* * * * * * * * * * * * * * * * * * *	1 3 2-30 NO 1244 NO 1 C. AS	. See a con Total	2) Z D C 3	v 60 300 vo - 5464 5/6 8)	
	ь	Net rental income or (loss)	1 3		and the second second	1965 - 1965 - 1965 - 1965 - 1965 - 1965 - 1965 - 1965 - 1965 - 1965 - 1965 - 1965 - 1965 - 1965 - 1965 - 1965	17 1	1	
ě	6a	Net gain or (loss) from sale of assets not on line		1,051,642.			1201	REGE	- LVED OF
ē	b	Gross sales price for all 1,703,5	42	i ar ' i i i i ' i i i i i i i i i i i i i	Militar i gangangan ( ) 12		A STATE OF THE PERSON NAMED IN	2) galam mahin benjartako	
Rev	7	Capital gain net income (from Part IV, line	2) .		1,05	1,642.	UNIX.		2.202025.06
Œ	8	Net short-term capital gain				Contraction		181 00-	
*	9	Income modifications				re, saka		1	ENTITE
	10a	Gross sales less returns and allowances	i				1200	TOGD	
	b	Less Cost of goods sold						A Maria Service Mos	
	c	Gross profit or (loss) (attach 'schedule)			が設めませる。		`	•	
	11	Other income (attach schedule)	[	23,157.					STMT 2
_	12	Total. Add lines 1 through 11		.1,276,927.	1,25	3,770.			<b>经验证证证证证证</b>
	13	Compensation of officers, directors, trustees, etc	[				1		
ë	14	Other employee salaries and wages	[		•	NONE		NONE	
şu	15	Pension plans, employee benefits	[	:	ر د	NONE		NONE	•
ğ	15 16a b c 17 18 19 20 21	Legal fees (attach schedule)	[	• •					
Ü	b	Accounting fees (attach schedule) STMT.	3 . L	2,500.		NONE		NONE	. 2,500
₹.	С	Other professional fees (attach scheduler.		· 61 <del>,</del> 949.	5	5,754.			6,195
rat	17	Interest	[		•				, ,
ist	18	Taxes (attach schedule) (see instructions).	5.	22,528.		1,554.	•	•	1
듵	19	Depreciation (attach schedule) and depleti			-,	•			A. Thursten H.
듄	20	Occupancy	` [	-		•		<b>P</b>	₹
۷	21	Travel, conferences, and meetings		•		NONE		NONE	
Ē	22	Printing and publications	۱ ٔ ٔ	•	•	NONE		NONE	
		Other expenses (attach schedule) STMT.	6	· · · · 25.		•			` `25.
Operating	24	Total operating and administrative expen		1 4 .	,				
era		Add lines 13 through 23		87,002.	- 5	7,308.		NONE	8,720
ğ	25			2,364,015.			20世纪		2,364,015
J	25 26	Contributions, gifts, grants paid Total expenses and disbursements Add lines 24 an	1	2,451,017.	date describe sets	7,308.	, Jo & NY	NONE	
$\mathcal{F}$	27	Subtract line 26 from line 12	223	2/101/01/					
		Excess of revenue over expenses and disbursem	ente	'-1,174,090.					
		Net investment income (if negative, enter	- T-		<u></u>	6,462.	THE C		
		Adjusted net income (if negative, enter -0-					10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A STATE AND ALTERNATION OF STATE OF STA	

-Pa	art-II-	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	of year
	_	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	3,669,541.	3,146,508.	3,146,508
		Accounts receivable ▶			
		Less allowance for doubtful accounts ▶		10.11	w c calwe
	4	Pledges receivable			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)		. V 12 /A*\ ///* XW \ V // ///	5385.2 t S
	7	Other notes and loans receivable (attach schedule) 🕨			
		Less allowance for doubtful accounts ▶NONE			
\$	8	Inventories for sale or use			<u> </u>
Assets	9	Prepaid expenses and deferred charges			<del></del>
۲	10a	Investments - U S and state government obligations (attach schedule). $$ .			
		Investments - corporate stock (attach schedule) . STMT .7			
	_ c	Investments - corporate bonds (attach schedule) . STMT .8.	1,917,160.	1,917,160.	2,007,844
		Investments - land, buildings, and equipment basis			
		Less accumulated depreciation  (attach schedule)			
	12	Investments - mortgage loans			
		Investments - other (attach schedule)	STATE A GOOD TO A STATE OF THE		V 20 1 7 100 C 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		equipment basis			
		Less accumulated depreciation	10.500	10 150	12.450
- 1	15	Other assets (describe  STMT 9	12,629.	13,472.	13,472
		Total assets (to be completed by all filers - see the		U 046 E13	10 007 107
4		instructions Also, see page 1, item I)		7,846,513.	10,007,197
		Accounts payable and accrued expenses			\$\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
		Grants payable			
<u>ë</u>	19	Deferred revenue			20x2 ** 7 7 7 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
-=1		Loans from officers, directors, trustees, and other disqualified persons			\$\frac{1}{2}\sqrt{1} \cdot \frac{1}{2}\sqrt{1}
ā		Mortgages and other notes payable (attach schedule)			
-	22	Other liabilities (describe	•		
	22	Total linkilities (add loos 17 through 22)		MONE	
┪		Total liabilities (add lines 17 through 22)		NONE	######################################
Balances		Foundations that follow FASB ASC 958, check here			
띭		•			
ā		Net assets without donor restrictions			
		Net assets with donor restrictions · · · · · · · · · · · · · · · · · · ·			
		and complete lines 26 through 30			
or Fund		Capital stock, trust principal, or current funds	9,020,603.	7,846,513.	
S		Paid-in or capital surplus, or land, bldg , and equipment fund	3,020,003.		
ë	28	Retained earnings, accumulated income, endowment, or other funds		·	
Š		Total net assets or fund balances (see instructions)	9,020,603.	7,846,513.	
늏	30	Total liabilities and net assets/fund balances (see		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
ž		instructions) · · · · · · · · · · · · · · · · · · ·		7,846,513.	
	art III			1 31 3	
		I net assets or fund balances at beginning of year - Part		must agree with	
		of-year figure reported on prior year's return)			9,020,603.
2		r amount from Part I, line 27a			-1,174,090.
		lines 1, 2, and 3			7,846,513.
5	Decr	eases not included in line 2 (itemize) ▶		5	
6	Tota	I net assets or fund balances at end of year (line 4 minus	line 5) - Part II, column (b	o), line 29 <b>6</b>	7,846,513.
					Form <b>990-PF</b> (2019)

Par	t IV Capital Gains	and Losses for Tax on Inve	stment Income			
		cribe the kind(s) of property sold (for exick warehouse, or common stock, 200		(b) How acquired P - Purchase D - Donation		(d) Date sold (mo , day, yr )
1 a	PUBLICLY TRADED	SECURITIES				
<u>b</u>						
c						
<u>d</u>						
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) mini	
а	1,703,542.		651,900.		1,	051,642.
ь						
С						<u> </u>
d						
е						<u></u>
	Complete only for assets sh	owing gain in column (h) and owned b	y the foundation on 12/31/69	(1)	Gains (Col (h) ga	in minus
	(:) FM)/ as of 12/21/60	(j) Adjusted basis	(k) Excess of col (i)		(k), but not less t	han -0-) <b>or</b>
	(i) FMV as of 12/31/69	as of 12/31/69	over col (j), if any		Losses (from co	l (h))
a					1,	051,642.
b						
C						
d						
e						
2		or (net capital loss) {   If (lo ain or (loss) as defined in sections ?		2	1,	051,642.
	•	art I, line 8, column (c). See inst				
				3		
			section 4940(a) tax on net investment in			
Was	es," the foundation doesn'	the section 4942 tax on the distrib t qualify under section 4940(e) Do				Yes X No
1		nount in each column for each year	r; see the instructions before makir	g any en		
Cale	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distribution ra (col (b) divided by	
	2018	2,033,551.	9,087,456.			0.223776
	2017	1,570,697.	7,779,265.			0.201908
	2016	2,614,677.				0.357962
	2015	1,512,905.	6,441,261.			0.234877
	2014	779,388.	4,139,687.			0.188272
			-,,			
2	Total of line 1 column (	d)		2		1.206795
3		o for the 5-year base period - divid				
3	•	foundation has been in existence i	-	3		0.241359
4	Enter the net value of no	oncharitable-use assets for 2019 fro	om Part X, line 5	4	10,	240,542.
5	Multiply line 4 by line 3.			5	2,	471,647.
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		11,965.
7	Add lines 5 and 6			7		483,612.
8	Enter qualifying distribut	cions from Part XII, line 4	ın Part VI, line 1b, and complete	8 that part		372,735. c rate. See the

-Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ction	S)
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)			45. 25. (5
		38.70°		100
Ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check	Gd1 > 74	23,9	929. * 21
	here and enter 1% of Part I, line 27b			
C	All other domestic loandations effect 270 of the 275 Exempt foreign organizations, sites 475 of	<u>ڏڪٽٽنڌ</u>	Liski	المحدد
_	Part I, line 12, col (b)		7	ONE
2	Tax under section 311 (doinestic section 4347(d/1) tradic and taxable foundations only, exists, exist.		23,9	
3	Add lifes I alid 2			IONE
4	Subtility A fill control tax fundation section 4047 fax fundations of the fundations of the fundation of the		23,9	
5	Tax based on investment income. Subtract line 4 non-line 3 in zero of less, enter 50	801 1 De	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	2234
6	Credits/Payments 2019 estimated tax payments and 2018 overpayment credited to 2019 6a 43,302.			
a	Exempt foreign organizations - tax withheld at source	200		
b	Tax paid with application for extension of time to file (Form 8868)			2.3
c d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		43,3	02.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		,	
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		19,3	373.
11	Enter the amount of line 10 to be Credited to 2020 estimated tax ▶ 19,373. Refunded ▶ 11			
Par	t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
	instructions for the definition	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
C	Did the foundation file Form 1120-POL for this year?	1c	\$ 21.	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	8.08		
	(1) On the foundation ▶ \$(2) On foundation managers ▶ \$		7 XX	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	<u> </u>	\$ 5.7°	
	on foundation managers 🕨 \$	شند	لانتنف	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2 % > >	16000	<u>X</u>
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles		فتششذ	المضمد
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a 4b		
þ	If "Yes," has it filed a tax return on Form 990-T for this year?	5		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?,	2.22	14:000 T	No.
_	If "Yes," attach the statement required by General Instruction T			
ь	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	<ul> <li>By language in the governing instrument, or</li> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that</li> </ul>		XX.	
	• By state legislation that effectively amends the governing instrument so that no manualory directions that conflict with the state law remain in the governing instrument?	6	X	<u>كىكائىشىسىد</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	X	
7	Enter the states to which the foundation reports or with which it is registered. See instructions.	10 × 10°	10 To	交流側
8a	MN	. 46		
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
U	(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	\$650 g	74X	38 <b>3</b> 6
J	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV If "Yes,"	-	, my ore mather con.	***************************************
	complete Part XIV	9		χ (
10				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X
-		<del></del>	0-PF	2010)

-Par	t-VII-A-	Statements Regarding Activities (continued)				
			ř	₩.,	Yes	No
11	At any	time during the year, did the foundation, directly or indirectly, own a controlled entity within	n the			
	meaning	g of section 512(b)(13)? If "Yes," attach schedule See instructions	L	11		<u> </u>
12	-	e foundation make a distribution to a donor advised fund over which the foundation or a disqu				
		nad advisory privileges? If "Yes," attach statement See instructions		12		X
13	Did the	foundation comply with the public inspection requirements for its annual returns and exemption applic	ation?	13	X	
		address ▶· N/A				
14	The bool	ks are in care of ▶ <u>U.S. BANK_NATIONAL_ASSOCIATION</u> Telephone no ▶ <u>(651</u>	.)466-	<u>871</u>	0	
		at ▶ 101 E FIFTH ST, ST PAUL, MN ZIP+4 ▶ 55			_	, ,
15	Section	4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			▶	· 🔲
	and ente	er the amount of tax-exempt interest received or accrued during the year	15			
16	At any	time during calendar year 2019, did the foundation have an interest in or a signature or other a	uthority _		Yes	No
	over a ba	ank, securities, or other financial account in a foreign country?	[	16	,	X
	See the	e instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the na	ame of			3457X
	the forei	ign country ▶	s, i	13.3		<u> </u>
Par	t VII-B	Statements Regarding Activities for Which Form 4720 May Be Required	10	vc.u1		
	File For	rm 4720 if any item is checked in the "Yes" column, unless an exception applies.	- ·	\$1 <b>%</b> ? !	Yes	No
1a	-	he year, did the foundation (either directly or indirectly)	- K	400	7	
	_		∐ No 🥳		يام وكور در راه وكار ما	
	(2) Borr	row money from, lend money to, or otherwise extend credit to (or accept it from) a	n 🔯			
	•		No S			\$ X
	( <b>3</b> ) Furn	goods, sorritory, or resulting to (or execute mann) a many	No [		3,39	&
			∐ No 🏥			
		nsfer any income or assets to a disqualified person (or make any of either available for	ก 🎖	33.	10 6	
			∐ No Ű		ૢૺૢૹ૽ૢૢૺૼ	46
		ee to pay money or property to a government official? (Exception. Check "No" if the		A 27.	) 3 , 64 187 , 9	
		ndation agreed to make a grant to or to employ the official for a period after	a. E		رز . الإيلادلان	
			No 🖔			\$50.00
b		answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions describe	I			
	_	ons section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	¬ ⊢	1b ⊗%	SK 560	(6.1 × 1
		ations relying on a current notice regarding disaster assistance, check here	J   Է,			
С		e foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,	1	حکنت	كشكس	ليكا
_		t corrected before the first day of the tax year beginning in 2019?	· · · ·	1c ⊗≾≎	9.87.4	X .₹%%^
2		on failure to distribute income (section 4942) (does not apply for years the foundation was a process of the foundation was a	orivate K	송기		
		g foundation defined in section 4942(j)(3) or 4942(j)(5))	į.	37.00		
а		end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines	No S	(. W.)	23	
			אַן טאו פּ			
L		list the years ▶,,,,,,,,,,,,,,,,	(2)(2)		繁於	
D		tre any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)( to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(	1"			
		slisted, answer "No" and attach statement - see instructions)		2b		امتحضد
_	•	provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	· · · · · · · · · · · · · · · · · · ·	- 28	EC. 22.2	17×47
·	ii the p		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		<u> </u>	32 . J
20	Did the	foundation hold more than a 2% direct or indirect interest in any business enterprise			6,200 m	
			No		\$200 \$200	
	•	" did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation				
b		fied persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved b	12.5			
		sioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lap	1.	300	13.3	
		sioner under section 4943(c)(7)) to dispose of holdings acquired by gift of bequest, of (3) the lap i-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine i			1.36	
		ion had excess business holdings in 2019)		3b	ستقطفله	www.ed
4.		foundation invest during the year any amount in a manner that would jeopardize its charitable purp	⊢	4a		X
		foundation invest during the year any amount in a marrier that would jeopardize its chandable purp foundation make any investment in a prior year (but after December 31, 1969) that could jeopardi	14.3			
O		le purpose that had not been removed from jeopardy before the first day of the tax year beginning in		4b	مفتندتهند	X
	SHAFILODI	purpose that had not been removed non-people y before the met day or the tax year beginning in			) DE	(2010)

Pari	VII-B Statements Regarding Activities f	or Which Form 4	1720 May Be Red	uired (continued)			
5a	During the year, did the foundation pay or incur any amo	ount to				Yes	No
	(1) Carry on propaganda, or otherwise attempt to influe	nce legislation (sectio	n 4945(e))?	. Yes X No	o [		
(2) Influence the outcome of any specific public election (see section 4955), or to carry on,							
	directly or indirectly, any voter registration drive?						
(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No							,
	(4) Provide a grant to an organization other than a	charitable, etc., org	ganization described	ın			
	section 4945(d)(4)(A)? See instructions			Yes X No	•		
	(5) Provide for any purpose other than religious, cl	haritable, scientific,	literary, or education				
	purposes, or for the prevention of cruelty to children	or animals?		. Yes X No	•		
b	If any answer is "Yes" to 5a(1)-(5), did any of the	transactions fail to	qualify under the e	xceptions described in	n		
	Regulations section 53 4945 or in a current notice regar	=			<u>5b</u>		ļ
	Organizations relying on a current notice regarding disas	ster assistance, check	here				
c	If the answer is "Yes" to question 5a(4), does the		•				
	because it maintained expenditure responsibility for the	grant <sup>7</sup>		. Yes No	D		
	If "Yes," attach the statement required by Regulations se						
6a	Did the foundation, during the year, receive any fur						
	on a personal benefit contract?			. Yes X No			
b	Did the foundation, during the year, pay premiums, direct	tly or indirectly, on a	personal benefit contra	act <sup>7</sup>	. <u>6b</u>		Х
_	If "Yes" to 6b, file Form 8870						
7a	At any time during the tax year, was the foundation a pa	•					
ь	If "Yes," did the foundation receive any proceeds or have	•		ion <sup>r</sup>	. <u>7b</u>		
8	Is the foundation subject to the section 4960 tax on pay			. Yes X No			
Dor	remuneration or excess parachute payment(s) during the VIII Information About Officers, Directo	rs. Trustees. For	Indation Manage				
	and Contractors						
1	List all officers, directors, trustees, and foundation	(b) Title, and average	(c) Compensation.	(d) Contributions to		0 20001	
		(b) This, and average	(c) Compensation		(e) Expens		ını
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expens other all		
DOUGL	(a) Name and address AS M. BAKER, JR	hours per week	(If not paid,	employee benefit plans			
	<u> </u>	hours per week devoted to position	(If not paid,	employee benefit plans			
4613	AS M. BAKER, JR	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation			es
4613 JULIE	AS M. BAKER, JR EDINA BOULEVARD, EDINA, MN 55424	hours per week devoted to position  C0-TRUSTEE	(If not paid, enter -0-)	employee benefit plans and deferred compensation			es
4613 JULIE	AS M. BAKER, JR EDINA BOULEVARD, EDINA, MN 55424 M. BAKER	hours per week devoted to position  CO-TRUSTEE  2  CO-TRUSTEE	(If not paid, enter -0-) - () -	employee benefit plans and deferred compensation -0-			- 0
4613 JULIE	AS M. BAKER, JR EDINA BOULEVARD, EDINA, MN 55424 M. BAKER	hours per week devoted to position  CO-TRUSTEE  2  CO-TRUSTEE	(If not paid, enter -0-) - () -	employee benefit plans and deferred compensation -0-			- 0
4613 JULIE	AS M. BAKER, JR EDINA BOULEVARD, EDINA, MN 55424 M. BAKER	hours per week devoted to position  CO-TRUSTEE  2  CO-TRUSTEE	(If not paid, enter -0-) - () -	employee benefit plans and deferred compensation -0-			-0
4613 JULIE 4613	AS M. BAKER, JR EDINA BOULEVARD, EDINA, MN 55424  M. BAKER EDINA BOULEVARD, EDINA, MN 55424	hours per week devoted to position C0-TRUSTEE 2 C0-TRUSTEE 2	(lf not paid, enter -0-) -0-	employee benefit plans and deferred compensation  - () -	other all	owance	-0- -0-
4613 JULIE 4613	AS M. BAKER, JR  EDINA BOULEVARD, EDINA, MN 55424  M. BAKER  EDINA BOULEVARD, EDINA, MN 55424  Compensation of five highest-paid employees	hours per week devoted to position C0-TRUSTEE 2 C0-TRUSTEE 2	(lf not paid, enter -0-) -0-	employee benefit plans and deferred compensation  - () -	other all	owance	-0- -0-
4613 JULIE 4613	AS M. BAKER, JR EDINA BOULEVARD, EDINA, MN 55424  M. BAKER EDINA BOULEVARD, EDINA, MN 55424	hours per week devoted to position  CO-TRUSTEE  2  CO-TRUSTEE  2  (other than those	(lf not paid, enter -0-) -0-	employee benefit plans and deferred compensation  -0-  -0-  (d) Contributions to	other all	one, (	-0- -0- enter
4613 JULIE 4613	AS M. BAKER, JR  EDINA BOULEVARD, EDINA, MN 55424  M. BAKER  EDINA BOULEVARD, EDINA, MN 55424  Compensation of five highest-paid employees	hours per week devoted to position C0-TRUSTEE 2 C0-TRUSTEE 2 (other than thos	(lf not paid, enter -0-) -0-	e 1 - see instruction  (d) Contributions to employee benefit plans and deferred	other all	one, (	-0- -0- enter
4613 JULIE 4613	AS M. BAKER, JR  EDINA BOULEVARD, EDINA, MN 55424  M. BAKER  EDINA BOULEVARD, EDINA, MN 55424  Compensation of five highest-paid employees "NONE."	hours per week devoted to position  C0-TRUSTEE 2  CO-TRUSTEE 2  (other than those)	(If not paid, enter -0-) -00- e included on lin	e 1 - see instruction  (d) Contributions to employee benefit	other allo	one, (	-0- -0- enter
4613 JULIE 4613 2	AS M. BAKER, JR  EDINA BOULEVARD, EDINA, MN 55424  M. BAKER  EDINA BOULEVARD, EDINA, MN 55424  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position C0-TRUSTEE 2 C0-TRUSTEE 2 (other than thos	(If not paid, enter -0-) -00- (c) Compensation	e 1 - see instruction  (d) Contributions to employee benefit plans and deferred compensation	ons). If no (e) Expens other allo	one, (	-0- -0- enter
4613 JULIE 4613 2	AS M. BAKER, JR  EDINA BOULEVARD, EDINA, MN 55424  M. BAKER  EDINA BOULEVARD, EDINA, MN 55424  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position C0-TRUSTEE 2 C0-TRUSTEE 2 (other than thos	(If not paid, enter -0-) -00- e included on lin	e 1 - see instruction  (d) Contributions to employee benefit plans and deferred	ons). If no (e) Expens other allo	one, (	-0- -0- enter
4613 JULIE 4613 2	AS M. BAKER, JR  EDINA BOULEVARD, EDINA, MN 55424  M. BAKER  EDINA BOULEVARD, EDINA, MN 55424  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position C0-TRUSTEE 2 C0-TRUSTEE 2 (other than thos	(If not paid, enter -0-) -00- (c) Compensation	e 1 - see instruction  (d) Contributions to employee benefit plans and deferred compensation	ons). If no (e) Expens other allo	one, (	-0- -0- enter
4613 JULIE 4613 2	AS M. BAKER, JR  EDINA BOULEVARD, EDINA, MN 55424  M. BAKER  EDINA BOULEVARD, EDINA, MN 55424  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position C0-TRUSTEE 2 C0-TRUSTEE 2 (other than thos	(If not paid, enter -0-) -00- (c) Compensation	e 1 - see instruction  (d) Contributions to employee benefit plans and deferred compensation	ons). If no (e) Expens other allo	one, (	-0- -0- enter
4613 JULIE 4613 2	AS M. BAKER, JR  EDINA BOULEVARD, EDINA, MN 55424  M. BAKER  EDINA BOULEVARD, EDINA, MN 55424  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position C0-TRUSTEE 2 C0-TRUSTEE 2 (other than thos	(If not paid, enter -0-) -00- (c) Compensation	e 1 - see instruction  (d) Contributions to employee benefit plans and deferred compensation	ons). If no (e) Expens other allo	one, (	-0- -0- enter
4613 JULIE 4613 2	AS M. BAKER, JR  EDINA BOULEVARD, EDINA, MN 55424  M. BAKER  EDINA BOULEVARD, EDINA, MN 55424  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position C0-TRUSTEE 2 C0-TRUSTEE 2 (other than thos	(If not paid, enter -0-) -00- (c) Compensation	e 1 - see instruction  (d) Contributions to employee benefit plans and deferred compensation	ons). If no (e) Expens other allo	one, (	-0- -0- enter
4613 JULIE 4613 2	AS M. BAKER, JR  EDINA BOULEVARD, EDINA, MN 55424  M. BAKER  EDINA BOULEVARD, EDINA, MN 55424  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position C0-TRUSTEE 2 C0-TRUSTEE 2 (other than thos	(If not paid, enter -0-) -00- (c) Compensation	e 1 - see instruction  (d) Contributions to employee benefit plans and deferred compensation	ons). If no (e) Expens other allo	one, (	-0- -0- enter
4613 JULIE 4613 2	AS M. BAKER, JR  EDINA BOULEVARD, EDINA, MN 55424  M. BAKER  EDINA BOULEVARD, EDINA, MN 55424  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position C0-TRUSTEE 2 C0-TRUSTEE 2 (other than thos	(If not paid, enter -0-) -00- (c) Compensation	e 1 - see instruction  (d) Contributions to employee benefit plans and deferred compensation	ons). If no (e) Expens other allo	one, (	-0- -0- enter
4613 JULIE 4613 2	AS M. BAKER, JR  EDINA BOULEVARD, EDINA, MN 55424  M. BAKER  EDINA BOULEVARD, EDINA, MN 55424  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position C0-TRUSTEE 2 C0-TRUSTEE 2 (other than thos	(If not paid, enter -0-) -00- (c) Compensation	e 1 - see instruction  (d) Contributions to employee benefit plans and deferred compensation	ons). If no (e) Expens other allo	one, (	-0- -0- enter
4613 JULIE 4613 2 (a)	AS M. BAKER, JR  EDINA BOULEVARD, EDINA, MN 55424  M. BAKER  EDINA BOULEVARD, EDINA, MN 55424  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position  C0-TRUSTEE  2  C0-TRUSTEE  2  (other than those devoted to position	(If not paid, enter -0-) -00- (c) Compensation	e 1 - see instruction  (d) Contributions to employee benefit plans and deferred compensation	ons). If no (e) Expens other all	one, (	-0- -0- enter

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Hi and Contractors (continued)	ghly Paid Employe	ees,
3 Five hi	ghest-paid independent contractors for professional services. See instructions. If	none, enter "NONE.	1
		ype of service	(c) Compensation
US BANK NA			
	ST, ST PAUL, MN ADVISOR/AGE	NT	61,949.
	r of others receiving over \$50,000 for professional services		NONE
Part IX-A	Summary of Direct Charitable Activities		
List the foun organizations	dation's four largest direct charitable activities during the tax year include relevant statistical information s and other beneficiaries served, conferences convened, research papers produced, etc	uch as the number of	Expenses
1 NONE			
2			
3			
	<u></u>		<del></del>
4			
Part IX-B	Summary of Program-Related Investments (see instructions)		
	two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1NONE			
-			
2			
All other prog	gram-related investments. See instructions		
3 NONE			
			<del></del>
Total. Add lir	nes 1 through 3	· · · · · · • •	

Form **990-PF** (2019)

	t X Minimum Investment Return (All domestic foundations must complete this part. Foreisee instructions.)	gn found	dations,
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>6,839,353.</u>
Ь	Average of monthly cash balances	1b	3,557,136.
C	Fair market value of all other assets (see instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d	10,396,489.
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	NONE
3	Subtract line 2 from line 1d	3	10,396,489.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	155,9 <u>47</u> .
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	10,240,542.
6	Minimum investment return. Enter 5% of line 5	6	512,027.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found and certain foreign organizations, check here and do not complete this part.)	dations	
1	Minimum investment return from Part X, line 6	1	512,027.
2 а	Tax on investment income for 2019 from Part VI, line 5 2a 23,929.		· · · · · · · · · · · · · · · · · · ·
ь	Income tax for 2019 (This does not include the tax from Part VI).		
C	Add lines 2a and 2b	2c	23,929.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	488,098.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	488,098.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII,		
•	line 1	7	488,098.
Par	t XII Qualifying Distributions (see instructions)		100,050.
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	2,372,735.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:	·	
а	Suitability test (prior IRS approval required)	3a	NONE
b		3b	NONE
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	2,372,735.
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	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,372,735.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when call	culating	whether the foundation
	qualifies for the section 4940(e) reduction of tax in those years.		

Form **990-PF** (2019)

Page 9

Рa	rt XIII Undistributed Income (see instr	ructions)			
1	Distributable amount for 2019 from Part XI,	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
•	line 7	4. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.			488,098.
2	Undistributed income, if any, as of the end of 2019			NONE	
	Enter amount for 2018 only	F26.4904.03629786.2864	NONE	NONE	\$25 \\ \frac{1}{2} \left\{ \frac{1} \left\{ \frac{1}{2} \left\{ \frac{1}{2} \left\{ \frac{1}{2} \left\{ \frac{1}{2} \left\{ \frac{1}{2} \left\{ \frac{1} \left\{ \frac{1} \left\{ \frac{1} \left\{ \frac{1} \left\{ \frac{1} \left
	Total for prior years 20,20,20		NONE		CONCLESS TO A CART CONTROL OF SA PROBABILISTE SON CONTROL CONT
	Excess distributions carryover. If any, to 2019.				
	From 2014				
	From 2015				
	From 2016			Volumenta in the second	AND AND THE TOTAL TO SERVE THE TOTAL TO SERVE THE TOTAL THE TOTAL THE TOTAL THE TOTAL THE TOTAL THE TOTAL THE T
	From 2017	na era gaga, ay raman ar sanga ay ay ay	anning are so and a property of a second of the		vers " " ving groups occord such september 25
	From 2018	6,905,617.		· 大大大學 多級 阿爾斯斯斯	147.5-22.5.72.5.72.4.72.
, ,	Qualifying distributions for 2019 from Part XII,	K. W.	\$16X25\\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	and the property and the property	
, 🕶	line 4 ▶ \$ 2,372,735.				
	Applied to 2018, but not more than line 2a			NONE	
			Com Contractor Services		
	Applied to undistributed income of prior years (Election required - see instructions)		NONE		
	Treated as distributions out of corpus (Election)		com a dheata i dheatain a si ann a si ann an talan a Sa sa an 177 i 187 a sha sha ba a sha an talan a sha an talan a	ali illinins aasaka Clubsidelii laagulla lii ja egastii ja ali illinin ja salatel Laik kultuulii kepinalii ja ja egasti. L	i joja sega joga nepokaljakan ilin adgledili Prakon nepokasa ilinia ilinia ilinia kan
	required - see instructions)	ЙОЙЕ			
d	Applied to 2019 distributable amount	1.144.64.644.644.644.644.644.644.644.644	COVERNMENT OF THE PROPERTY OF		488,098.
	Remaining amount distributed out of corpus.	1,884,637.	Triche Seed Chiamidan Seed Chiamidan in the Color of the	ការិយាណ៍ នេះប្រជាជាក្នុង ការិយាណៈ ការិយាណ៍ ប្រជាជាក្នុង ការិយាណៈ ប្រជាជាក្នុង ការិយាណៈ ប្រជាជាក្នុង ការិយាណៈ ប ប្រជាជាក្រាយ ប្រជាជាក្នុង ការិយាណៈ ប្រជាជាក្នុង ការិយាណៈ ប្រជាជាក្នុង ការិយាណៈ ប្រជាជាក្នុង ការិយាណៈ ប្រជាជាក្	្ត្រាប់ ប្រជាពលរដ្ឋ ប្រជាពលរដ្ឋមានប្រជាពលរដ្ឋ ប្រជាពលរដ្ឋ ប្រជាពលរដ្ឋ ប្រជាពលរដ្ឋ ប្រជាពលរដ្ឋ ប្រជាពលរដ្ឋ ប្រ ប្រជាពលរដ្ឋ ប្រជាពលរដ្ឋ ប្រជាពលរដ្ឋ ប្រជាពលរដ្ឋ ប្រជាពលរដ្ឋ ប្រជាពលរដ្ឋ ប្រជាពលរដ្ឋ ប្រជាពលរដ្ឋ ប្រជាពលរដ្ឋ ប្រ
5	Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same				
	amount must be shown in column (a), the same	NONE			NONE
6	Enter the net total of each column as		n na 1950 jang in minang manang kanawa Printi pang panggan pangganang pangganang	ng sa grang digapakan ng kalanggan digipang ng mga ng kagamat na mga ng mga ng kaga ng kaga ng kaga ng kaga	innititive namining ninggrappus sang ninggrap Sigreme ang linggrappus sang properties
	indicated below:		The species and the second sec	South Say Canterno Color Secretar	ก็การเกาะสัง กูลักร์เกาะสายเกาะสายเกาะสายเกาะสายเกาะสายเกาะสายเกาะสายเกาะสายเกาะสายเกาะสายเกาะสายเกาะสายเกาะสา
a	Corpus Add lines 31, 4c, and 4e Subtract line 5	8,790,254.	hunding Marke himing a shape the contraction of the		
b	Prior years' undistributed income Subtract		NONE		
	line 4b from line 2b		NONE		\$\tau_{\text{\tin}\text{\tett{\text{\tetx{\text{\texit}\text{\text{\text{\texit{\text{\texit{\text{\texitt{\text{\texi}\texit{\tert{\texit{\tert{\tert{\texit{\tert{\tert{\tert{\tert{\tert{\ter
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)		NONE		
	tax has been previously assessed	KOZYZY POGRALITYCH	NONE		NATION OF THE PARTY OF THE PART
d	Subtract line 6c from line 6b Taxable amount - see instructions		NONE		
е	Undistributed income for 2018 Subtract line			0. 4 or 4. distal. C. 16 dd wyren	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
	4a from line 2a Taxable amount - see instructions			NONE	
_			PERSONAL PROPERTY (PROCESS)		, ,,,,
f	Undistributed income for 2019 Subtract lines 4d and 5 from line 1 This amount must be				
-	distributed in 2020				NONE
7	- Amounts treated as distributions out of corpus				And Andrews of the Control of the Co
•	to satisfy requirements imposed by section		o to trong supprishabilities with an including		
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)	NONE			
8	Excess distributions carryover from 2014 not				
	applied on line 5 or line 7 (see instructions)	572,404.			
9	Excess distributions carryover to 2020.	0 110 050			
	Subtract lines 7 and 8 from line 6a	8,217,850.	KU SAMAKAN MANAN MAN		
	Analysis of line 9	The Company of Community Community of the Community of Community C			
	Excess from 2015 1,264,428.				The days in the district of the months in the least
	Excess from 2016 2,226,037.  Excess from 2017 1,218,918.				
			Marie Care San	Company of the compan	man and the second of the seco
	Excess from 2018 1,623,830 Excess from 2019 1,884,637 .				
- 5		a. V	1 N. 14 N. 17 P. 17 N. 20 A. 18 C. 18 A.	CX - N C - N L Land Sun Trung C C V	

Form 990-PF (2019)

Pa	rt XIV Private Ope	erating Foundations	(see instructions ar	nd Part VII-A, questi	on 9)	NOT APPLICABL			
1 a	1a If the foundation has received a ruling or determination letter that it is a private operating								
	foundation, and the ruling is effective for 2019, enter the date of the ruling								
b	Check box to indicate v	whether the foundation	is a private operating f	oundation described in	section 4	942(j)(3) or 4942(j)(5)			
2a	Enter the lesser of the ad-	Tax year		Prior 3 years		(a) Total			
	justed net income from Part	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total			
	I or the minimum investment								
	return from Part X for each								
L	year listed								
	85% of line 2a			<del></del>					
С	Qualifying distributions from Part XII, line 4, for each year listed .								
d	Amounts included in line 2c not	<del></del>	<del></del>						
_	used directly for active conduct								
	of exempt activities								
е	Qualifying distributions made directly for active conduct of								
	exempt activities Subtract line	Ì							
3	2d from line 2c Complete 3a, b, or c for the		<del> </del>	<u> </u>					
	alternative test relied upon								
a	"Assets" alternative test - enter								
	(1) Value of all assets								
	(2) Value of assets qualifying under section	<b>,</b>							
	4942(j)(3)(B)(i)				<u> </u>				
þ	"Endowment" alternative test								
	enter 2/3 of minimum invest- ment return shown in Part X,								
	line 6 for each year listed								
C	"Support" alternative test enter					<u> </u>			
	(1) Total support other than gross investment income								
	(interest, dividends, rents,		ļ						
	payments on securities loans (section 512(a)(5)),								
	or royalties)				ļ				
	(2) Support from general public and 5 or more				1				
	exempt organizations as								
	provided in section 4942 (j)(3)(B)(iii)								
	(3) Largest amount of sup-								
	port from an exempt organization			_					
	(4) Gross investment income .				<u> </u>				
Pa				only if the founda	ition had \$5,00	00 or more in assets at			
		uring the year - see				·-			
1	Information Regarding			than 2% of the total	al contributions r	eceived by the foundation			
a	before the close of any								
	•		io, navo cominacioa n			·-/··			
	DOUGLAS M	BAKER, JR	our 10% or more of	the stock of a corn	oration for an ec	qually large portion of the			
D	ownership of a partner					quality large portion of the			
	ownership or a partitor	omp or other orther, or		nas a 7070 or ground.					
	NT / 7A								
	N/A Information Regarding	Contribution Grant	Gift Loan Scholarshir	etc Programs					
-									
						ns and does not accept is under other conditions,			
	complete items 2a, b, c			ints, etc., to individue	iis or organization	is under other conditions,			
	The name, address, and			tobom cont	restrone should be	oddroood			
a	The name, address, and	a telephone number o	r email address of the p	person to whom appi	ications should be	e addressed			
	The form in which app		muttad and information	n and materials they	should include:	<del></del>			
D	The form in which app	iivations snould be Sut	minited and illioringlio	n and materials they :	Silvaia iliciaae				
	Any submission deadlii	nes							
U	raiy subinission deadin								
d	Any restrictions or li	mitations on awards	such as by geogra	phical areas, charita	ible fields, kinds	of institutions, or other			
<b>.</b>	factors:		20 -, 300310			23.2, 2			

Part XV Supplementary Information	on (continued)			
Part XV Supplementary Information  3 Grants and Contributions Paid D  Recipient  Name and address (home or business)	uring the Year or App	roved for l	Future Payment	
Recipient	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business	or substantial contributor	recipient	contribution	
a Paid during the year				
SEE STATEMENT 27				2,364,015
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		1		
Total			▶ 3a	2,364,015
b Approved for future payment				
-				
	-			
				<u></u>
Total			▶ 3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrela	ated business income	Excluded by	section 512, 513, or 514	Polated or exampt
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
a					
b					
c					
d		-			
			1		
			-		
g Fees and contracts from government agencies					
2 Membership dues and assessments			+ -		<del></del>
3 Interest on savings and temporary cash investments •				000 100	
4 Dividends and interest from securities			14	202,128.	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
<b>b</b> Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	1,051,642.	
				-	
9 Net income or (loss) from special events · · · 10 Gross profit or (loss) from sales of inventory · ·					
11 Other revenue a		· · · · · · · · · · · · · · · · · · ·			
b FEDERAL TAX REFUND			1	23,157.	
				23/23/1	·
c					
d			<del> </del>		
e				1 276 027	
12 Subtotal Add columns (b), (d), and (e)		<u> </u>		1,410,341.	1 276 027
				13	1,276,927.
See worksheet in line 13 instructions to verify calcilorate XVI-B Relationship of Activities				<del></del>	
Line No. Explain below how each activit accomplishment of the foundation	y for which	n income is reported i	n column (e	e) of Part XVI-A contribu	
	-				
	<del></del>				·
				· · · · · · · · · · · · · · · · · · ·	
		NOW ADDITION	n		
		NOT APPLICABLE	<u> </u>	<del></del>	
				<del></del>	<del></del>
			<del></del>		
		···			<del></del>
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		- · · · · · · · · · · · · · · · · · · ·			
		<del> </del>			

Form 990		19)				46-173489	4.		Pag	ge 13
Part >		Informatión Re Organizations	garding Trans	sfers to and Tran	sactions and	Relationship	s 'With Noncha	ritable	Exe	mpt
in oı	secti ganiza	organization direction 501(c) (other ations?	than section	engage in any of the 501(c)(3) organizati	ons) or in sec	ction 527, rela	ization described sting to political		Yes	No
a Ti	ransfe	rs from the reporting	g foundation to a	noncharitable exem	pt organization	of:				v
										X.
•			• • • • • • • • •			• • • • • • • • •		18(2)		
		ansactions:	charitable evem	pt organization				15(1)		Х
(2	) Pur	hases of assets from	m a noncharitabl	e exempt organizatio	n			1b(2)		X
				assets						X
14	) Reir	nbursement arrange	ements					16(4)		Х
(5	) Loa	ns or loan guarantee	s	• • • • • • • • • •	· · · · · · · · · ·			1b(5)		X
				or fundraising solicit						X
				s, other assets, or paid s," complete the follo					fair m	
d it	the a	inswer to any of the	accets or servic	es given by the rep	owing schedule orting foundatio	. column (b) si m. If the founds	nould always show	than	fair m	narket
V	alue ir	n any transaction of	r sharing arrange	ement, show in colu	mn (d) the valu	e of the goods,	other assets, or :	service	s rece	eived.
(a) Line		(b) Amount involved	T	oncharitable exempt organi			rs, transactions, and sha			
			ļ							
			<u> </u>	· · · · · · · · · · · · · · · · · · ·					<del></del>	
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						· · · · · · · · · · · · · · · · · · ·			-	
			<del> </del>							
	_		<u> </u>							
• • • • • • • • • • • • • • • • • • • •										
d	escrib	ed in section 501(c)	(other than sec	iliated with, or relate tion 501(c)(3)) or in s			organizations		es 📝	X No
<u>b</u> If	"Yes,"	complete the follow (a) Name of organization		(b) Type of orga	nization	(6	c) Description of relation	ship		
		(a) Nome of Digametri					· · · · · · · · · · · · · · · · · · ·			
				<del></del>		\				
	T	· · · · · · · · · · · · · · · · · · ·		ed this return, including acco	mannung sehadulas a	and statements and to	the best of my knowler	loe and l	naliai it	is tore
Siĝn	correct	penalties of Farjury, I does , and complete. Declaration o	Tereparer (other than ta	ear (his return, including accompany) is based on all information of the company	ion of which preparer h	as any knowledge  JGLAS M. BA	May the IF	S discus	s this	
Here	1 -	ature of officer or trustee USTEE		Date	Title		See instruction		Yes [	No
D-! 1	,	Print/Type preparer's na	ime	Preparer's signature	10	Date	Check X if	PTIN		
Paid			ASTRIANO	1 Al		04/24/2	020 self-employed	P012		<u> 33</u>
Prepa			RICEWATERHO		)	-	Firm's EIN ► 13-	4008	324	
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		l PI	TTSBURGH,	PA	15219		Phone no. 412=3	55-6 rm <b>99</b>		(2019)

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

NET INVESTMENT INCOME	50,768. 14,329. 55,879. 5,095. 65,528. 10,529.
REVENUE AND EXPENSES PER BOOKS	50,768. 14,329. 55,879. 5,095. 65,528. 10,529.
DESCRIPTION	USGI REPORTED AS NONQUALIFIED DIVIDENDS FOREIGN DIVIDENDS DOMESTIC DIVIDENDS NONQUALIFIED FOREIGN DIVIDENDS NONQUALIFIED DOMESTIC DIVIDENDS SECTION 199A DIVIDENDS

FORM 990PF, PART I - OTHER INCOME 

> REVENUE AND **EXPENSES** PER BOOKS

DESCRIPTION -----

FEDERAL TAX REFUND

23,157.

TOTALS

23,157. ==========

CHARITABLE PURPOSES	2,500.
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	NONE
REVENUE AND EXPENSES PER BOOKS	2,500.
DESCRIPTION	TAX PREPARATION FEE (NON-ALLOC

 $\sim$ 

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

CHARITABLE PURPOSES	6,195. 	
NET INVESTMENT INCOME	55,754. 55,754. ====================================	
REVENUE AND EXPENSES PER BOOKS	61,949.  61,949. ===========	
DESCRIPTION	OTHER EXPENSE (NON-DEDUCTIBLE TOTALS	

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TAXES
1
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990PF,
FORM

NET INVESTMENT INCOME	1,154.	1,554.
REVENUE AND EXPENSES PER BOOKS	1,154. 20,974. 400.	22,528.
DESCRIPTION	FOREIGN TAXES FEDERAL ESTIMATES - PRINCIPAL FOREIGN TAXES ON NONQUALIFIED	TOTALS

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46-1734894

FORM 990PF, PART I - OTHER EXPENSES

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	EXPEN
DESCRIPTION	PER E

REVENUE
AND
EXPENSES
PER BOOKS

CHARITABLE PURPOSES 25.

STATE FILING FEE/TAX

1

25.

25.

TOTALS

25.

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION		BEGINNING BOOK VALUE	ENDING BOOK VALUE	ENDING FMV
278865100 ECOLAB INC 78462F103 SPDR S P 500 ETF 464287804 I SHARES S P SMALLC 78467Y107 MIDCAP SPDR TRUST SE 46432F834 ISHARES CORE MSCI TO 808524847 SCHWAB US REIT ETF	TOTALS	1,303,800. 1,067,954. 47,959. 152,136. 532,553. 316,871. 3,421,273.	651,900. 1,067,954. 47,959. 152,136. 532,553. 316,871. 2,769,373.	1,929,900. 1,590,632. 71,189. 216,219. 642,336. 389,097.

^

JULIE & DOUG BAKER JR FOUNDATION

FORM 990PF, PART II - CORPORATE BONDS 

ENDING FMV	876,153. 1,131,691. 
ENDING BOOK VALUE	852,944. 1,064,216. 1,917,160. ====================================
BEGINNING BOOK VALUE	852,944. 1,064,216. 1,917,160. ====================================
	TOTALS
DESCRIPTION	921937702 VANGUARD SHORT TERM 921937835 VANGUARD TOTAL BOND

ω

FORM 990PF, PART II - OTHER ASSETS JULIE & DOUG BAKER JR FOUNDATION

SNICING	FMV			13,472.	13,472.	
נאני	BOOK VALUE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		13,472.	13,472.	
CMININITINA	BOOK VALUE	!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!	12,629.		12,629.	
ı					TOTALS	
	DESCRIPTION		ACCRUED INCOME	000000000 MISCELLANEOUS ENTRY		

σ

RECIPIENT NAME:

GREENLIGHT FUND INC

ADDRESS:

120 ST JAMES AVENUE, 6TH FLOOR

BOSTON, MA 02116

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 20,000.

RECIPIENT NAME:

DINOMIGHTS

ADDRESS:

3400 PARK AVENUE

MINNEAPOLIS, MN 55407

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

CHILDREN'S HEARTLINK

ADDRESS:

5075 ARCADIA AVENUE

EDINA, MN 55436

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 5,000.

ROCHESTER, MN 55905

FOUNDATION STATUS OF RECIPIENT:

RELATIONSHIP:

PURPOSE OF GRANT: GENERAL OPERATING

NONE

PC

RECIPIENT NAME: GREAT MN SCHOOLS ADDRESS: 1330 LAGOON AVE, 4TH FLOOR MINNEAPOLIS, MN 55408 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PCRECIPIENT NAME: EPISCOPAL HOMES FOUNDATION ADDRESS: 490 EAST LYNNHURST AVE ST PAUL, MN 55104 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: 5,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: MILKWEED EDITIONS ADDRESS: 1011 SOUTH WASHINGTON AVE MINNEAPOLIS, MN 55415 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID .....

PC

1,000.

MUSEUM OF RUSSIAN ART ADDRESS: 5500 STEVENS AVENUE MINNEAPOLIS, MN 55419

RELATIONSHIP:

RECIPIENT NAME:

NONE

PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

APPETITE FOR CHANGE

ADDRESS:

1200 WEST BROADWAY AVE , SUITE 250

MINNEAPOLIS, MN 55411

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

10,000. AMOUNT OF GRANT PAID .....

RECIPIENT NAME:

CATHOLIC CHARITIES OF ST PAUL

ADDRESS:

1200 SECOND AVENUE S MINNEAPOLIS, MN 55405

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

25,000. AMOUNT OF GRANT PAID ......

RECIPIENT NAME:

MONTESSORI CENTER OF MINNESOTA

ADDRESS:

1611 AMES AVENUE

ST PAUL, MN 55106

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 15,000.

RECIPIENT NAME:

PENUMBRA THEATRE COMPANY INC

ADDRESS:

270 KENT STREET

ST PAUL, MN 55102

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

10,000. AMOUNT OF GRANT PAID .....

RECIPIENT NAME:

COLLEGE POSSIBLE

ADDRESS:

540 FAIRVIEW AVENUE N, SUITE 201

ST PAUL, MN 55014

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

5,000. AMOUNT OF GRANT PAID .....

RECIPIENT NAME:

KINSHIP OF CUMBERLAND

ADDRESS:

PO BOX 441

CUMBERLAND, WI 54829

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

PAGE EDUCATION FOUNDATION

ADDRESS:

PO BOX 581254

MINNEAPOLIS, MN 55458

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

EDINA EDUCATION FOUNDATION

ADDRESS:

5701 NORMANDALE RD # 336

EDINA, MN 55424

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

BABY'S SPACE - A PLACE TO GROW

ADDRESS:

2438 - 18TH AVENUE S MINNEAPOLIS, MN 55404

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 2,500.

RECIPIENT NAME:

BEACON INTERFAITH HOUSING

ADDRESS:

2610 UNIVERSITY AVE. WEST, SUITE 10

ST PAUL, MN 55114

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

BANYAN FOUNDATION

ADDRESS:

2529 13TH AVE S.

MINNEAPOLIS, MN 55404

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

\_\_\_\_\_\_ RECIPIENT NAME: BRIDGE FOR YOUTH ADDRESS: 1111 WEST 22ND STREET MINNEAPOLIS, MN 55405 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC2,500. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: CHRISTO REY JESUIT HIGH SCHOOL ADDRESS: 2924 4TH AVENUE SOUTH MINNEAPOLIS, MN 55404 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: 1,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME:

CITIZEN'S LEAGUE
ADDRESS:
213 FOURTH STREET EAST, SUITE 425
ST PAUL, MN 55101
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

JULIE & DOUG BAKER JR FOUNDATION FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_

RECIPIENT NAME:

CLOSE GAPS BY 5

ADDRESS:

PO BOX 24885

MINNEAPOLIS, MN 55424

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID ..... 50,000.

RECIPIENT NAME:

COLLEGE OF THE HOLY CROSS

ADDRESS:

1 COLLEGE STREET

WORCESTER, MA 01610

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID ..... 660,000.

RECIPIENT NAME:

COMPAS, INC.

ADDRESS:

75 WEST 5TH STREET, SUITE 304

ST PAUL, MN 55102

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC 1,000. AMOUNT OF GRANT PAID .....

\_\_\_\_\_\_ RECIPIENT NAME: DUKE UNIVERSITY ADDRESS: BOX 90581 DURHAM, NC 27708 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 135,000. RECIPIENT NAME: EDALLIES ADDRESS: 2800 UNIVERSITY AVE. SE, SUITE 200 MINNEAPOLIS, MN 55414 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: 5,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: EDINA GIVENGO ADDRESS: 5701 NORMANDALE RD. EDINA, MN 55424 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL OPERATING

AMOUNT OF GRANT PAID .....

PC

5,815.

FOUNDATION STATUS OF RECIPIENT:

\_\_\_\_\_

RECIPIENT NAME:
GREATER TWIN CITIES UNITED WAY

ADDRESS:

404 SOUTH 8TH ST

MINNEAPOLIS, MN 55404

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ...... 100,000.

RECIPIENT NAME:

JEREMIAH PROGRAM

ADDRESS:

1510 LAUREL AVENUE

MINNEAPOLIS, MN 55403

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

KIPP MINNESOTA

ADDRESS:

5034 NORTH OLIVER AVE.

MINNEAPOLIS, MN 55432

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

CONTRIBUTIONS, GIFTS, GRANTS FAID

RECIPIENT NAME:

MICROGRANTS

ADDRESS:

1035 EAST FRANKLIN AVE MINNEAPOLIS, MN 55404

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

MINNEAPOLIS CRISIS NURSERY

ADDRESS:

4544 4TH AVE. S.

MINNEAPOLIS, MN 55419

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

MINNESOTA HISTORICAL SOCIETY

ADDRESS:

345 W. KELLOGG BLVD.

ST PAUL, MN 55102

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:
MINNESOTA PUBLIC RADIO
ADDRESS:
480 CEDAR STREET
ST PAUL, MN 55101
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL OPERATING
FOUNDATION STATUS OF RECIPIENT:
PC

RECIPIENT NAME:
NORTHSIDE ACHIEVEMENT ZONE
ADDRESS:
2133 WEST BROADWAY AVE #100
MINNEAPOLIS, MN 55411
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL OPERATING
FOUNDATION STATUS OF RECIPIENT:

PROJECT FOR PRIDE IN LIVING

ADDRESS:

1035 EAST FRANKLIN AVE. MINNEAPOLIS, MN 55404

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

11,000. AMOUNT OF GRANT PAID .....

AMOUNT OF GRANT PAID .....

AMOUNT OF GRANT PAID ..... 260,000.

PURPOSE OF GRANT: GENERAL OPERATING

RECIPIENT NAME:

RELATIONSHIP:

PURPOSE OF GRANT: GENERAL OPERATING

ADDRESS:

NONE

PC

FOUNDATION STATUS OF RECIPIENT:

FOUNDATION STATUS OF RECIPIENT:

1101 WEST RIVER PARKWAY, SUITE 200

THE NATURE CONSERVANCY

MINNEAPOLIS, MN 55415

350,000.

TWIN CITIES RISE

ADDRESS:

1301 BRYANT AVE. N.

MINNEAPOLIS, MN 55411

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

75,000. AMOUNT OF GRANT PAID .....

RECIPIENT NAME:

UPTURNSHIPS INC

ADDRESS:

5121 MIRROR LAKES DR MINNEAPOLIS, MN 55436

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 25,000.

RECIPIENT NAME:

WAY TO GROW

ADDRESS:

SUITE 110

MINNEAPOLIS, MN 55411

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ...... 108,500.

RECIPIENT NAME:

YOUTH FRONTIERS

ADDRESS:

6009 EXCELSIOR BLVD.

MINNEAPOLIS, MN 66416

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

46-1734894 JULIE & DOUG BAKER JR FOUNDATION FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: YWCA OF MINNEAPOLIS ADDRESS: 1130 NICOLLET MALL MINNEAPOLIS, MN 55403 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ...... 20,000.

TOTAL GRANTS PAID:

2,364,015.

STATEMENT 27

Ε