EXTENDED TO NOVEMBER 16, 2020 949114205424 1

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/Form990PF for instructions and the latest information.

OMB No 1545-8047
2019
Open to Public Inspection

| For | caler | ndar year 2019 or tax year beginning | | | , and ending | | |
|--------------------|--------|--|-------------|---|--|--|--|
| Name of foundation | | | | | A Employer identification | number | |
| PMR_FOUNDATION · | | | | | 47-5209895 | | |
| | | and street (or P O box number if mail is not delivered | to street a | address) | Room/suite | B Telephone number | (|
| 1 | 82 | 2 HOMESTEAD TRAIL | | | | 763-249-14 | 05 |
| | | own, state or province, country, and ZIP or | foreign p | ostal code | , | C If exemption application is pe | ending, check here |
| | | G LAKE, MN 55356 | | | | | · · · · · · · · · · · · |
| ۰, G | Check | call that apply: Initial return | | | ormer public charity | D 1. Foreign organizations | , check here |
| | | Final return | | Amended return | | Foreign organizations me check here and attach co | eting the 85% test, |
| _ | Chool | Address change (type of organization: X Section 50 | | Name change kempt private foundation | | 1 | |
| <u>"</u> - | _ | ection 4947(a)(1) nonexempt charitable trus | | Other taxable private found | otion 04 | E If private foundation sta under section 507(b)(1) | |
| ىك I F | | | | ng method: X Cash | Accrual | F If the foundation is in a | |
| | | Part II, col. (c), line 16) | | ther (specify) | | under section 507(b)(1) | |
| | ►\$ | | | nn (d), must be on cash bas | ıs) | (), / | |
| P | aï;t∛l | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) in necessarily equal the amounts in column (a)) | ay not | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
| | 1 | Contributions, gifts, grants, etc., received | | 75,354. | | N/A | |
| _ | 2 | Check In the toundation is not required to attack | Sch 8 | | | | |
| 3_ | 3 | Interest on savings and temporary cash investments | | 585. | 5854 | | STATEMENT 1 |
| 4 | 4 | Dividends and interest from securities | | 2,392. | 2,392. | <u> </u> | STATEMENT 2 |
| , | | Gioss rents | | ************************************** | | | |
| | _ | Net rental income or (loss) | | | 888 88 88 88 88 88 88 88 88 88 88 88 88 | | |
| , 9 | | Net gain or (loss) from sale of assets not on line 10 Gross sales price for all | | 575.03 56.55 25 56.08 57 57 57 57 57 57 57 57 57 57 57 57 57 | | ZAZABERE | |
| ي و | , b | assets on line 6a Capital gain net income (from Part IV, line 2) | | | 0. | ************************************** | VLD. |
| 7707 | וי | Net short-term capital gain | | | | l ø | Ø |
| | | | | | | NOV 16 | 2020 |
| Q , | 10a | Gross sales less returns and allowances | | | | ACCOMPANY. | K W |
| z | b | Less Cost of goods sold | | | | OGDE! | KUT: WEST |
| JAN | C | Gross profit or (loss) | | | | | PAGE NAME OF THE PROPERTY OF THE PAGE OF T |
| | 11 | | | 70 221 | 2,977. | <u> </u> | Carrier Contract - Year |
| <u> </u> | 12 | Total Add lines 1 through 11 | | 78,331. | 2,9//. | , , , , , , , , , , , , , , , , , , , | 0. |
| SCANNED | 13 | Compensation of officers, directors, trustees, etc Other employee salaries and wages | | | , 0 • | | 0. |
| පි | 14 | Pension plans, employee benefits | | | | | |
| ' Ø | 46. | Legal fees | | | | | |
| Š | , b | Accounting fees - STM | 3 | 1,075. | 538. | | √ 537 . |
| 9000 | Š c | Other professional fees | , | 1 | , | | |
| • | 17 | Interest | | | | | |
| 40 | 18 | Taxes STM7 | . 4 | 441. | 0. | | · 0. |
| į | 19 | Depreciation and depletion | | | | | |
| . id | 20 | Occupancy | | | | | |
| | 1 | Travel, conferences, and meetings | | | ` | | 1 |
| 9 | 22 | Printing and publications Other expenses STMT | י ק | 25. | 0. | | 25. |
| , i | | Other expenses STM ¹ Total operating and administrative | . J | 23. | 0. | | 25, |
| , , Oneratin | | expenses. Add lines 13 through 23 | | 1,541. | 538. | | 562. |
| ć | 25 | Contributions, gifts, grants paid | | 24,280. | | | 24,280. |
| | 26 | Total expenses and disbursements. | | | | | |
| _ | | Add lines 24 and 25 | | 25,821. | 538. | | 24,842. |
| | 27 | Subtract line 26 from line 12: | | | | 033000000000000000000000000000000000000 | \$ 100 miles 100 |
| ~ | 1 | Excess of revenue over expenses and disbursement | | 52,510. | | | |
| | 1 | Net investment income (if negative, enter -0- | | | 2,439. | ≱τ / λ | |
| | C | Adjusted net income (if negative, enter -0-) | | LOST STATE TO SERVICE AND | THE REPORT OF THE PERSON AND THE PER | N/A | ************************************** |

Department of the Treasury

| 01 | ,• m 99 | 0;PF (2019) PMR FOUNDATION | · , | 47- | 5209895 | Page 2 |
|------------------------------------|------------|--|--|---|---|---|
| _ | 9.99 | Balance Sheets Attached schedules and amounts in the description | Beginning of year | End o | of year | |
| į | aπ, | Balance Sheets , Atlached schedules and amounts in the description column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market | Value : |
| | 11 | Cash - non-interest-bearing | 1 | | | |
| | 1 ` | Savings and temporary cash investments | 145,030. | 122,186. | 122. | 186. |
| • | 1 | Accounts receivable | | | #-2/20/S#20/20/20 | |
| • | , | Less: allowance for doubtful accounts | 2013 X-6-2004 200 A3-100 A3-200 0 0000000 115 | 4000,000,000,000,000,000,000,000,000,00 | 10:22004:0000139-Nin-1001100010 | (039/2/17.1/9/499) |
| | | Pledges receivable | | | FILE STATE OF THE | W. W. W. W. W. |
| | 4 | | 67.94.02-49.04.02.79.37.02.72.32.32.32.32.32.32.32.32.32.32.32.32.32 | XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | 1207-4073340064 (1905)* \$100-10. | ********* |
| | _ | Less: allowance for doubtful accounts | | | | |
| | 5 | Grants receivable | ••• | | | ; |
| | 6 | Receivables due from officers, directors, trustees, and other | | · ' | | |
| | | disqualified persons | NOTE STATE OF STATE O | S. | AGARGEACON .S. C. 400 C 401 200 G | 2.0000000000000000000000000000000000000 |
| | 7 | Other notes and loans receivable | | | 300000000000000000000000000000000000000 | |
| | | Less: allowance for doubtful accounts | | | | |
| ţ | | Inventories for sale or use | | <u> </u> | | |
| ssets | 1 | Prepaid expenses and deferred charges | | | | |
| ⋖ | 10a | Investments - U.S. and state government obligations | | 1 - | | |
| | Ь | Investments - corporate stock STMT 6 | 130,829. | 206,183. | 162, | 915. |
| | C | Investments - corporate bonds | 12.00.00 | | | (|
| | 11 | Investments - land, buildings, and equipment basis | | | × 11 12 13 11 11 | |
| | | Less accumulated depreciation | | • • • | | |
| | 12 | Investments - mortgage loans | | <u> </u> | | |
| | 13 | Investments - other | | | · | |
| | 14 | Land, buildings, and equipment: basis | | | | |
| | | Less accumulated depreciation |) | | | <u>;</u> |
| | 15 | Other assets (describe) | | | | <u> </u> |
| , | 16 | Total assets (to be completed by all filers - see the | • | | ,' | ** |
| | | instructions. Also, see page 1, item I) | 275,859. | 328,369. | 285, | <u> 101.</u> |
| | 17 | Accounts payable and accrued expenses | | | | XXX X |
| | 18 | Grants payable . | | | | |
| es | 19 | Deferred revenue | | | | 27.0×.2 |
| 럂 | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | | |
| abiliti | 21 | Mortgages and other notes payable | | , , | | |
| ت | 22 | Other liabilities (describe | · | • . | | |
| ٠. | | , | | . 4 | | |
| | 23 | Total fiabilities (add lines 17 through 22) | <u> </u> | 0. | | \$4 \$ 6 |
| | | Foundations that follow FASB ASC 958, check here | , | , | | |
| Ø | | and complete lines 24, 25, 29, and 30 | | · | | |
| Š | 24 | Net assets without donor restrictions | • | | | |
| a | 25 | Net assets with donor restrictions | | | | |
| Net Assets or Fund Balances | | Foundations that do not follow FASB ASC 958, check here 🕨 🗓 | | , <u> </u> | | |
| Ĕ | | and complete lines 26 through 30. | , , | | | |
| 7. | 26 | Capital stock, trust principal, or current funds | 0. | 0. | | |
| tsί | 27 | Paid-in or capital surplus, or land, bldg., and equipment fund | · 0 • | 0,. | | |
| sse | 28 | Retained earnings, accumulated income, endowment, or other funds | 275,859. | 328,369. | | |
| ţ | 29 | Total net assets or fund balances | 275,859. | 4328,369. | | |
| ž | | • | | | | |
| | 30 | Total liabilities and net assets/fund balances | 275,859. | 328,369. | | |
| P | ařįt: | | lances | t | • | |
| | | | 20 | | 1 | - · |
| ı | | net assets or fund balances at beginning of year - Part II, column (a), line | 43 , , | | 275 | 859. |
| | • | t agree with end-of-year figure reported on prior year's return) | - | ' 1 | | 510. |
| | | amount from Part I, line 27a , | | 2 | 54, | 0. |
| . | | r increases not included in line 2 (itemize) | | 3 | 220 | 369. |
| • | | lines 1, 2, and 3 | • | 4 | 340, | 0. |
| | | eases not included in line 2 (itemize) | olumn (h) Iron 00 | 5 | 328 | 369. |
| <u> </u> | ıota | net assets or fund balances at end of year (line 4 minus line 5) - Part II, co | Juinin (b), line 29 | | Form 990-F | |
| | | | | • | 101111 330-1 | • (2019) |

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| | FOUNDATION and Losses for Tax or | n Investment | Income | | | 4 | 7-520 | 9 89 5 Page | 3 |
|---|--|--|--------------------------------------|-------------------------------------|------------------|--|--------------------------------|---|----------|
| (a) List and describe | the kind(s) of property sold (for arehouse; or common stock, 200 | example, real esta | | (b) How P - Pt D - Dr | acquired irchase | (c) Date (mo., d | acquired lay, yr.) | (d) Date sold (mo., day, yr.) | |
| 1a | , | · · · · · · · · · · · · · · · · · · · | | 0 0 | mation | | | | |
| b NO | NE | | | | | | | | |
| C - | | | | | | | | | |
| d | | | | | | | | | |
| е | , | · · | | <u> </u> | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | | st or other basis expense of sale | | | | ain or (loss) s (f) minus (| | |
| a | | | | | | | | | _ |
| <u>b</u> | | | | - | | | | | |
| <u>C</u> | | | | | | | | | — |
| <u>d</u> | | | | | | | | | _ |
| Complete only for assets shown | I | I by 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 | (k) E | cess of col. (i) | | | (k), but r | not less thar (from col. (I | 1-0-) or | |
| 2 | | | (,,,) | | | | - | | _ |
| <u>a</u> b | | | | | - | | | - | |
| C | | | | | | | | · | |
| d | | | | | | | | | |
| e | | | , | | | | | | |
| 2 Capital gain net income or (net ca 3 Net short-term capital gain or (lo 1f gain, also enter in Part I, line 8 | ss) as defined in sections 1222(, column (c). | enter in Part I, line er -0- in Part I, line 5) and (6): | 7 | } <u>2</u> | | | | | |
| If (loss), enter -0- in Part I, line 8 Part Va Qualification U | nder Section 4940(e) | for Reduced | Tax on Net | Investi | nent Inco | me | | | <u>,</u> |
| (For optional use by domestic private | | | | | | - | | | ٠., |
| If section 4940(d)(2) applies, leave t | | 10 10 (a) tax 011 | | ooo., | | | | | , |
| Was the foundation liable for the sec | | | · · | ıod? | | | | Yes X N | o'. |
| If "Yes," the foundation doesn't quali 1 Enter the appropriate amount in | | | | ntries | | | | · | ÷ |
| | | the man detions bei | ore making any cr | | | T | | (d) | _ |
| (a) Base period years Calendar year (or tax year beginni | (b) Adjusted qualifying | g distributions | Net value of no | (c) incharitab | le-use assets | | Distrib | (d) ution ratio ided by col. (c)) | |
| 2018 | 1119 1117 | 113,667. | | | 81,613. | | (001. (5) 014 | .62587 | 5 |
| 2017 | | 37,125. | | | 34,405. | | - | .27621 | |
| 2016 | | 29,875. | | | 68,133. | | | .43848 | |
| 2015 | | 75,550. | | | 98,141. | | | .76981 | |
| 2014 | | · | - | | • | 1 | | | |
| | | | | | | | | | |
| 2 Total of line 1, column (d) | | | | | | 2 | | 2.11038 | 4 |
| 3 Average distribution ratio for the | 5-year base period - divide the t | otal on line 2 by 5.0 |), or by the number | er of years | 3 | | | | _ |
| the foundation has been in existe | nce if less than 5 years | | | | | 3 | | .52759 | 6 |
| 4 Enter the net value of noncharital | ble-use assets for 2019 from Par | t X, line 5 | | | | 4 | | 218,769 | <u>•</u> |
| 5 Multiply line 4 by line 3 | | | | | | 5 | | 115,422 | |
| 6 Enter 1% of net investment incor | ne (1% of Part I, line 27b) | | | | | 6 | | 24 | • |
| 7 Add lines 5 and 6 | | | | | | 7 | | 115,446 | • |
| B Enter qualifying distributions from | m Part XII. line 4 | | | | | 8 | | 24,842 | |

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

8 Enter qualifying distributions from Part XII, line 4

| Form 990-PF (2019) PMR FOUNDATION | , | | 5209 | | Page 4 |
|---|--|---------|-------------|--------------------------|----------------|
| Rant VI Excise Tax Based on Investment Income (Section 4940 | (a), 4940(b), 4940(e), or 4 | 948 - | see in | structions | s) |
| 1a Exempt operating foundations described in section 4940(d)(2), check here . and en | nter "N/A" on line 1. | | | | |
| Date of ruling or determination letter: (attach copy of letter if nec | essary-see instructions) 🚶 | | | | |
| b Domestic foundations that meet the section 4940(e) requirements in Part V, check here | ► and enter 1% | 1 | | | <u>49.</u> |
| of Part I, line 27b | 2 | | | | |
| c All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% | of Part I, line 12, col. (b) | | | | |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; oth | ners, enter -0-) | 2 | | | 0. |
| 3 Add lines 1 and 2 | • | 3 | | | 49. |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; of | hers, enter -0-) | 4 | | | 0. |
| 5 Tax based on investment income Subtract line 4 from line 3. If-zero or less, enter -0- | | 5 | , | | <u>49.</u> |
| 6 Credits/Payments: | | | 1000 | | |
| a 2019 estimated tax payments and 2018 overpayment credited to 2019 | 6a ` O. | | | | |
| b Exempt foreign organizations - tax withheld at source | 6b ' '0. | 1 | | | |
| c Tax paid with application for extension of time to file (Form 8868) | 6c 'O. | 1 | | | |
| d Backup withholding erroneously withheld | 6d 0. | | | | |
| 7 Total credits and payments. Add lines 6a through 6d | | 7 | | - | 0. |
| 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta | ched | 8 | | | 0. |
| 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | ▶ | 9 | <u> </u> | | 49. |
| | | 10 | <u> </u> | | |
| | Refunded | 11 | | | |
| 11 Enter the amount of line 10 to be Credited to 2020 estimated tax Part VII A Statements Regarding Activities | Retunded | 1 | <u></u> | | |
| 1a During the tax year, did the foundation attempt to influence any national, state, or local legisl | lation or did it participate or interveni | ın | | Yes | No |
| any political campaign? | ation of did it participate of litter vent | , 111 | ŀ | 1a | X |
| , , , , , , , , , , , , , , , , , , , | cas? Saa the instructions for the defu | ution | . I | 1b | X |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political purpos | | IILIUII | ŀ | 20042 | 5-35-68 |
| If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of | any materials published of | | İ | | |
| distributed by the foundation in connection with the activitie's. | | | | | X |
| c Did the foundation file Form 1120-POL for this year? | ; | ٠. | ŀ | 1c | 828 XX |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the | | | | | |
| (1) On the foundation. \$\bigcup 0 \cdot (2) On foundation managers | | - | • | | |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expendit | ture tax imposed on roundation | | | | |
| managers. ▶ \$ | 000 | | ŀ | 254,6326 1 656,8381 | χ , |
| 2 Has the foundation engaged in any activities that have not previously been reported to the IR | ٠. | | ŀ | 2 \ | 389682 |
| 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 in | istrument, articles of incorporation, o |)r - | ŀ | | 3683355 |
| bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | | ŀ | 3 | X |
| 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year | · | NT. | (/ x | 4a | -^- |
| b If "Yes," has it filed a tax return on Form 990-T for this year? | | 1/4 | /A | 4b | |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | | ŀ | 5 . '45%*** '4 '56%*6 | X 238094876 |
| 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 eit | her: | | <i>'</i> | | |
| By language in the governing instrument, or | ŧ | | | | |
| By state legislation that effectively amends the governing instrument so that no mandatory | directions that conflict with the state | e law | ļ | **** X 6/6 | 3333 |
| remain in the governing instrument? | · | | ļ | 6 X | <u> </u> |
| 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete | iete Part II, col. (c), and Part XV | | | 7 X | 22227434 |
| • | | | İ | | |
| 8a Enter the states to which the foundation reports or with which it is registered. See instruction | ns. ► | | <u> </u> | | |
| MN | | | | | |
| b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At | torney General (or designate) | | j | X | |
| of each state as required by General Instruction G2 If "No," attach explanation | • | | 1 | 8b X | |
| 9 Is the foundation claiming status as a private operating foundation within the meaning of sec | ction 4942(j)(3) or 4942(j)(5) for cale | ndar | ľ | | |
| year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," comp | | | [| 9 | X - |
| 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedul | | | 1 | 10 | X |
| | | | Fori | m 990-PF | (2019) |
| | | ~ | | | |

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had not been removed from jeopardy before the first day of the tax year beginning in 2019?

| orm 990-PF (2019) PMR FOUNDATION | | | 47-520989 | 95 | Page 6 |
|---|---------------------------------------|-----------------------------|--|---------|----------------|
| Part VII-B Statements Regarding Activities for Which F | orm 4720 May Be Re | equired _{(contini} | ued) | | |
| 5a During the year, did the foundation pay or incur any amount to: | | _ | | Yes | No |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section | 1 4945(e))? | Ye | es X No | . ` | ř |
| (2) Influence the outcome of any specific public election (see section 4955); o | r to carry on, directly or indire | | i | . 4 | |
| any voter registration drive? | | | es X No | 1 . | . F. ' |
| (3) Provide a grant to an individual for travel, study, or other similar purposes | | Ye | es X No | - - | ~ |
| (4) Provide a grant to an organization other than a charitable, etc., organization | n described in section | | | 1. | ٠٠. |
| 4945(d)(4)(A)? See instructions | | Ye | es X No | | * - |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, | or educational purposes, or fo | or | | , [' | • |
| the prevention of cruelty to children or animals? | | Ye | es X No 🗀 | | 1 1 |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni | der the exceptions described i | n Regulations | | . | |
| section 53.4945 or in a current notice regarding disaster assistance? See instri | uctions | | N/A | b | |
| Organizations relying on a current notice regarding disaster assistance, check h | nere | | ▶□ □ | | 7 |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi | | ned | _ [| | |
| expenditure responsibility for the grant? | | /A Ye | es No l' | | 1 |
| 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 | nav premijims on | | | | } , |
| a personal benefit contract? | pay promianto on | □ v _e | es X No | , | 1 |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | erconal hanefit contract? | | | ь | X |
| If "Yes" to 6b, file Form 8870. | croonar benefit contract | | <u> </u> | | † - |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s | halter transaction2 | □ v _e | es X No | - `l . | - |
| b If "Yes," did the foundation receive any proceeds or have any net income attribu | | , | /- | b | + |
| | | | 11/11 / · | • | +- |
| 8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$ | 1,000,000 in remoneration or | | es X No | | |
| excess parachute payment(s) during the year? Part VIII Information About Officers, Directors, Truste | os Foundation Man | | S A NO | | |
| Paid Employees, and Contractors | es, Foundation Man | agers, riigiliy | | | |
| List all officers, directors, trustees, and foundation managers and the | neir cumpensation | | | | |
| List all officers, directors, a disters, and foundation managers and the | (b) Title, and average | (c) Compensation | (d) Contributions to | (e) Ex | |
| (a) Name and address | hours per week devoted | (If not paid, | (d) Contributions to employee benefit plans and deferred | accoun | t, other |
| | to position | enter -0-) | compensation | . allow | ances |
| | PRESIDENT/CEO | | | | |
| 1822 HOMESTEAD TRAIL | | | | | • |
| LONG LAKE, MN 55356 | 2.00 | 0. | 0. | | 0. |
| | SECRETARY AND | TREASURE | ι . | | |
| L822 HOMESTEAD TRAIL | | | _ | | _ |
| LONG LAKE, MIN 55356 | 2.00 | 0. | 0. | | <u>0.</u> |
| | DIRECTOR | | į | | |
| 20 GIDEON'S POINT ROAD | | | f | | |
| EXCELSIOR, MN 55331 | 2.00 | 0. | 0. | | 0. |
| | | | | | |
| | | | | | |
| | | | | | |
| Compensation of five highest-paid employees (other than those inc | | enter "NONE." | (4) 6 | | |
| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week | (c) Compensation | (d) Contributions to employee benefit plans and deterred | (e) Ex | pense |
| (a) Name and address of each employee paid more than \$50,000 | devoted to position | (C) Compensation | and deterred compensation | allowa | ances |
| NONE | | | İ | | |
| , | | | | | |
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| | | | - | | |
| | | | | | |
| | l <u> </u> | | | | 0 |
| otal number of other employees paid over \$50,000 | | | Ear- (| 90-PF | |
| | | | Form 3 | /3U-F | (2019) |

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| F | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four | dations, se | ee instructions) |
|-----|--|----------------|---------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| а | | 1a | 82,017. |
| b | | 1b | 82,017. 140,084. |
| C | | 1c | |
| d | Total (add lines 1a, b, and c) | 1d | 222,101. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) 1e 1 | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 222,101. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 3,332. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 218,769. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 10,938. |
| F | Part 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 | 10,938. |
| 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 | 49. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 10,889. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 10,889. |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0. |
| 74 | Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 10,889. |
| ·re | Part XII Qualifying Distributions (see instructions) | | |
| _ | (contained) | | |
| 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 | 24,842. |
| b | Program-related investments - total from Part IX-B | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| а | Suitability test (prior IRS approval required) | 3a | |
| b | Cash distribution test (attach the required schedule) | 3b | |
| 4 | Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 24,842. |
| 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 | 0. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 24,842. |
| | 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 t | he section |
| | 4940(e) reduction of tax in those years. | | |

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2018 | (c) 2018 | (d) 2019 |
|--|---|----------------------------|--|---|
| Distributable amount for 2019 from Part XI, line 7 | | | , | 10,889. |
| 2 Undistributed income, if any, as of the end of 2019 | | | | |
| a Enter amount for 2018 only | | | 0. | |
| b Total for prior years: | | | | |
| | , | 0. | | |
| 3 Excess distributions carryover, if any, to 2019: | | | | |
| a From 2014 | | | | |
| b From 2015 74,313. | | | | |
| c From 2016 26, 468. | | | | |
| d From 2017 30,406. | | | | |
| e From 2018 105,422. | 236,609. | | - | |
| f Total of lines 3a through e | 230,009. | | | |
| 4 Qualifying distributions for 2019 from | | | | |
| Part XII, line 4: ►\$ 24,842. | | | 0. | |
| a Applied to 2018, but not more than line 2a | | | V • | |
| b Applied to undistributed income of prior | | 0. | | |
| years (Election required - see instructions) | | · · | | |
| c Treated as distributions out of corpus | 0. | | | |
| (Election required - see instructions) | 0. | | | 10,889. |
| d Applied to 2019 distributable amount | 13,953. | | | 10,300. |
| e Remaining amount distributed out of corpus | 14,755. | | | |
| 5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a)) | 0. | | | 0. |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus Add lines 3f 4c and 4e Subtract line 5 | 250,562. | | | |
| 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 | | , i i i iii | (วาม I) เกาะสกาสสราสเพื่อย สมุทธ (Ri [®] C.) - ๆ เ | Richard Cons |
| 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 | 0. | | | |
| not applied on line 5 or line 7 | U• | | | |
| 9 Excess distributions carryover to 2020. | 250,562. | | | |
| Subtract lines 7 and 8 from line 6a | 250,56%. | TEN Y VALLE ZEN Y | | |
| 10 Analysis of line 9: a Excess from 2015 74, 313. | | | · · · · · · · · · · · · · · · · · · · | - |
| 25 452 | | | \$ R | |
| | San San San San San San San San San San | | an atyata '' a latin on hin | the second of the state of the |
| d Excess from 2017 30,406. | 4 | , | 7 / 7 / 7 / 7 / 7 / 7 / 7 / 7 / 7 / 7 / | |
| e Excess from 2019 13, 953. | | * | A 1 674 | |
| 9 EXCOSO II OIII EO 10 | | | <u></u> | <u></u> |

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| | NDATION | | | 47-520 | 19895 Page 10 |
|--|----------------------------|---|----------------------------|---------------------------------|---------------------------|
| Part XIV Private Operating F | -··- | | II-A, question 9) | N/A | |
| 1 a If the foundation has received a ruling of | | | | | |
| foundation, and the ruling is effective fo | | | ▶∟ | | |
| b Check box to indicate whether the found | | ng foundation described | | 4942(j)(3) or494 | 2(1)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | 41,0040 | Prior 3 years | 1,0040 | , , , , , , , |
| income from Part I or the minimum | (a) 2019 | (b) 2018 | (c) 2017 | (d) 2016 | (e) Total |
| investment return from Part X for | | | | | |
| each year listed | | | | | |
| b 85% of line 2a | | | | | |
| c Qualifying distributions from Part XII, | | | | | |
| line 4, for each year listed | | | | | |
| d Amounts included in line 2c not | | | | | |
| used directly for active conduct of | | 1 | | | |
| exempt activities | | | | | |
| 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 | | | | | |
| alternative test relied upon: | | | | | |
| a "Assets" alternative test - enter: | | | | ` ` | |
| (1) Value of all assets | | / | + | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b "Endowment" alternative test - enter | | | | 1 | |
| 2/3 of minimum investment return shown in Part X, line 6, for each year listed | | ı | | | |
| c "Support" alternative test - enter: | | | | | |
| (1) Total support other than gross | / | | | | |
| investment income (interest, | | | | | |
| dividends, rents, payments on | | | | | |
| securities loans (section | | | | | |
| 512(a)(5)), or royalties) | | 1 | + | | |
| (2) Support from general public and 5 or more exempt | | | | | |
| organizations as provided in | | | | | |
| section 4942(j)(3)(B)(iii) | | | | | |
| (3) Largest amount of support from | | | | | |
| ar exempt organization | | | | | |
| (A) Gross investment income | 1 | | | 1 105 000 | * |
| Part XV Supplementary Info | | | if the foundation | n had \$5,000 or more | e in assets |
| at any time during t | ne year-see instr | uctions.) | | | |
| 1 Information Regarding Foundation | n Managers: | | | | |
| a List any managers of the foundation wh | | | ributions received by th | e foundation before the close | of any tax |
| year (but only if they have contributed r | nore than \$5,000). (See s | section 507(d)(2).) | | | |
| PETER RECHELBACHER | | | | | |
| b List any managers of the foundation wh other entity) of which the foundation ha | | | (or an equally large port | tion of the ownership of a part | nership or |
| | sa 1076 or greater interes | 3L | | | |
| NONE | | | | | |
| 2 Information Regarding Contributi | | | | | |
| Check here 🕨 🗶 if the foundation of | | | | | ts for funds. If |
| the foundation makes gifts, grants, etc., | to individuals or organiza | ations under other condi- | tions, complete items 2 | a, b, c, and d. | |
| a The name, address, and telephone num | ber or email address of th | ne person to whom appli | cations should be addre | ssed: | |
| | | | | | |
| | | | | | |
| b The form in which applications should t | e submitted and informa | tion and materials they s | hould include: | | |
| c Any submission deadlines: | | | | | |
| | | | | | |
| d Any restrictions or limitations on award | s, such as by geographic | al areas, charitable fields | , kinds of institutions, o | r other factors: | |
| · · | | | | | |
| 000001 10 17 10 | | | | | Form 990-PF (2019) |
| 923601 12-17-19 | | | | | |

| · unit, in outploans | [continued] | | | |
|--|---|----------------------|----------------------------------|--------------|
| 3 Grants and Contributions Paid During th | e Year or Approved for Future | Payment | | |
| 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 | Contribution | |
| , a Paid dunng the year | | | | |
| | | | | |
| | | | | |
| AMERICAN YOUTH FOOTBALL INC | NONE | PUBLIC CHARITY | GENERAL | |
| 1000 S POINTE DR STE TH-A9 | | | ' | |
| MAMI BEACH, FL 33139 | | | | 2,000. |
| | | • | | |
| | | | | |
| BLAKE SCHOOL | NONE | PUBLIC CHARITY | GENERAL. | |
| 110 BLAKE ROAD S | TONE | | | |
| HOPKINS, MN 55343 | | | | 10,000. |
| | | | | |
| | | | | |
| | | | | |
| CITY HILL FELLOWSHIP | NONE | PUBLIC CHARITY | GENERAL | |
| 12901 ROBERTS DR EDEN PRAIRIE, MN 55346 | | | | 280. |
| BELL HARRIE, IN 33340 | | | | |
| | | 1.7 | | |
| | | ļ | | |
| CLIMATE GENERATION | NONE | PUBLIC CHARITY | GENERAL | |
| 2801 21ST AVE S, SUITE 110 | | | | |
| MINNEAPOLIS, MN 55407 | | | | 1,000. |
| | | | | |
| | | | | |
| DOLPHIN COMMUNICATION PROJECT | NONE | PUBLIC CHARITY | GENERAL | i |
| P.O. BOX 7485 | | | | |
| PORT ST. LUCIE, FL 34985 | 101111111111111111111111111111111111111 | \\ \ | | 350. |
| | CONTINUATION SHEE | T(\$) | | 24,280. |
| Approved for future payment | | | | |
| | | | | |
| NONE | | | | |
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| | | | | |
| | | | | |
| | | | | |
| Total | | | 26 | 0 |

| .3 Grants and Contributions Paid During the | Year (Continuation) | | | |
|---|---|---------------------|---------------------|----------|
| Recipient | If recipient is an individual, show any relationship to | Foundation | Purpose of grant or | Amount |
| Name and address (home or business) | any foundation manager or substantial contributor | status of recipient | contribution | , Amount |
| GLOBAL MN (MINNESOTA INTERNATIONAL | NONE | PUBLIC CHARITY | GENERAL | |
| 901 UNIVERSITY AVE SE INNEAPOLIS, MN 55414 | | | | 30 |
| | | | | |
| SUTHRIE THEATER FOUNDATION 118 SOUTH 2ND STREET | NONE | PUBLIC CHARITY | GENERAL | |
| MINNEAPOLIS, MN 55415 | | | | 5,000 |
| JAPAN AMERICA SOCIETY OF MINNESOTA | NONE | PUBLIC CHARITY | GENERAL | |
| 13 MAIN STREET SE MINNEAPOLIS, MN 55414 | | | | 100 |
| LONG LAKE VOLUNTEER FIREMENS RELIEF | NONE | PUBLIC CHARITY | GENERAL . | |
| 340 N WILLOW DR LONG LAKE, MN 55356 | | | (| 500 |
| | | , | | ., |
| PLANNED PARENTHOOLD OF MN, ND & SD 671 VANDALIA STREET SAINT PAUL, MN 55114 | NONE | PUBLIC CHARITY | GENERAL | 2,250 |
| | | | | |
| PROJECT SUCCESS ONE GROVELAND TERRACE, SUITE 300 MINNEAPOLIS, MN 55403 | NONE | PUBLIC CHARITY | GENERAL | 500 |
| ٠. | , | | | |
| FUBMAN 3111 FIRST AVENUE SOUTH | NONE , | PUBLIC CHARITY | GENERAL | |
| MINNEAPOLIS, MN 55408 | | | | 1,000 |
| WAYZATA COMMUNITY SAILING | NONE | PUBLIC CHARITY | GENERAL | |
| PO BOX 768 WAYZATA, MN 55391 | | | | 1,000 |
| , | | | | |
| | t | | | |
| | | | | |
| | | | | |
| | | | | |
| / Total from continuation sheets | | | | 10,650 |

| Part XVI-A | Analysis of Income-Producing A | Activities |
|------------|--------------------------------|------------|
| | | |

| Enter gross amounts unless otherwise indicated. | Unrelated | d business income | Exclud | ded by section 512, 513, or 514 | (e) |
|---|--------------------|-------------------|---------------|---------------------------------|---|
| Effet gross amounts unless otherwise maleuted. | (a) | (b) | (C) Exclu- | (d) | Related or exempt |
| 1 Program service revenue: | Business code | Amount | sion | Amount | function income |
| | 0000 | | 1 1 | | |
| | - | | 1 1 | | |
| D | - | | + | | |
| C | - (| | 1 1 | | |
| d | | <u> </u> | + | | |
| e | | | 1 1 | | |
| · · · · · · · · · · · · · · · · · · · | - | | 1 -1 | | |
| g Fees and contracts from government agencies | | | 1 1 | | |
| 2 Membership dues and assessments | | | + | | |
| 3 Interest on savings and temporary cash | | | ام د ا | F0F | |
| investments | | | 14 | 585. | |
| 4 Dividends and interest from securities | | | 14 | 2,392. | |
| 5 Net rental income or (loss) from real estate: | | | + | | |
| a Debt-financed property | | | | | *************************************** |
| b Not debt-financed property | <u> </u> | | | | |
| 6 Net rental income or (loss) from personal | | | | | |
| property | | | 11 | | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other | | | | | |
| than inventory | | | \perp | | |
| 9 Net income or (loss) from special events | | . <u> </u> | | | · |
| 10 Gross profit or (loss) from sales of inventory. | | | | | |
| 11 Other revenue. | | | | | |
| _ a | | | .] | | |
| b | | | | | |
| С | | | | | |
| d | | • | | | |
| e | | | | | |
| 12 Subtotal Add columns (b), (d), and (e) | | 0. | | 2,977. | 0. |
| 13 Total Add line 12, columns (b), (d), and (e) | | | | 13 | 2,977. |
| (See worksheet in line 13 instructions to verify calculations.) | | | | | |

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

| Line No. | Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). |
|-------------|---|
| | |
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Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations Part XVII

| | | | | | g with any other organizati | | tion 501(c) | | Yes | No |
|-----------|---|--|--------------------------|-------------------|-----------------------------------|---------------------------------------|--------------------------------------|----------------|---------|--------|
| • | | • • • • | | | g to political organizations? | , | | | | |
| | | from the reporting founda | ition to a noncharitat | oie exempt ort | janization of: | | | 10/1) | | X |
| • | Cash Other | | | | | | | 1a(1) 1a(2) | - | X |
| • | 2) Other | assets isactions: | | | | | | Ia(E) | | |
| | | s of assets to a noncharitat | hle evemnt organizat | ion | | | | 1b(1) | | X |
| | - | hases of assets from a nor | | | | | | 1b(2) | | X |
| • | • | al of facilities, equipment, | | gamzation | | | | 1b(3) | | X |
| • | • | bursement arrangements | or other appets | | | | | 1b(4) | | Х |
| • | • | s or loan guarantees | | | | | | 1b(5) | | Х |
| | | rmance of services or me | mbership or fundrais | sina solicitatio | ns | | | 1b(6) | | X |
| • | | f facilities, equipment, mai | • | • | | • | | 1c | | X |
| | • | | • | | | lways show the fair | market value of the goods, o | ther ass | ets, | |
| | | | | | | | n or sharing arrangement, sh | | | |
| С | olumn (d | i) the value of the goods, o | other assets, or serv | ices received. | | | | | | |
| a) Line | э по | (b) Amount involved | (c) Name of | noncharitable | e exempt organization | (d) Description | n of transfers, transactions, and sl | narıng arra | ngemen | ts |
| | | | | N/A | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
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| | | | | | | | | | | |
| 0 - 1 | | | lly affiliated with an | ralatad ta ana | or more toy evemat ereen | uzationa decaribad | | | | |
| | | ndation directly or indirect 501(c) (other than section | • | | or more tax-exempt organ | izations described | ۲ | Yes | X | No |
| | | omplete the following sche | | CHOII JZI ' | | | <u>L.</u> | 163 | | טוו נ |
| U II | 1 155, 6 | (a) Name of org | | | (b) Type of organization | | (c) Description of relationsh | IID | - | |
| | | N/A | | | (6) 1) | | (0) | <u></u> | | |
| | | 21/ | | | | · · · · · · · · · · · · · · · · · · · | | | | |
| | | · · · | | | | † | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | accompanying schedules and s | | | the IRS d | scuss t | nis |
| Sign | n 👡 | elief, it is true, correct, and com | plete Declaration of pre | parer (other than | taxpayer) is based on all informa | L | nas any knowledge retu | n with the | prepare | er |
| Here | e 🔪. | fet meace | lelec | | 11-5-202 | PRESI | | Yes | | No |
| | Sign | nature of officer or trustee | | | Date | Title | <u></u> | | | |
| | | Print/Type preparer's na | | Preparer's s | | Date | Check If PTIN | | | |
| _ | _ | ANN LINK ANN LINK ANN LINK OWNER 10 | | | | | self- employed | | | |
| Paid | | ANN LINK ANN LINK COMMAND 10 | | | | | | 047 | | |
| | parer | Fill 5 Hallie P Chill TOMBINGOTATION DEL | | | | | Firm's EIN ► 41-07 | 467 | 49 | |
| Use | Only | | | | _ | | | | | |
| | | Firm's address ▶ 22 | | - | | | | | | |
| | | MINNEAPOLIS, MN 55402 Phone no 612-37 | | | | | | | | |
| | | | | | | | Fo | rm 990 |)-PF (| (2019) |

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

2019

Employer identification number Name of the organization 47-5209895 PMR FOUNDATION Organization type (check one) Section: Filers of: 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 X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributors. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II _] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, chantable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively \$ religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

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

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

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

Name of organization

Employer identification number

| P | MR | FC | W | VDA | TI | on |
|---|----|----|---|-----|----|----|
| | | | | | | |

47-5209895

| Part I | Contributors (see instructions) Use duplicate copies of Part I if addition | onal space is needed | |
|------------|--|-------------------------|---|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | PETER RECHELBACHER 1822 HOMESTEAD TRAIL LONG LAKE, MN 55356 | _ \$ <u>75,354.</u> | Person Payroll Noncash X (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | - \$ | Person Payroll Omnocash 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) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash Complete Part II for noncash contributions) |

923452 11-06-19

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

Name of organization

Employer identification number

PMR FOUNDATION

47-5209895

| Part I 1 1 (a) | Part II | Noncash Property (see instructions) Use duplicate copies of Property | art II if additional space is needed | |
|---|-------------|--|--------------------------------------|----------------------|
| \$ 75,354. 12/11/1 (a) No. from Description of noncash property given See instructions) (b) Compared See instructions See in | No. from | | FMV (or estimate) | (d) Date received |
| (a) No. Tom Description of noncash property given (b) FMV (or estimate) (See instructions) (c) FMV (or estimate) (See instructions) (d) Date receiver (See instructions) (d) Date receiver (See instructions) (e) FMV (or estimate) (See instructions) (f) FMV (or estimate) (See instructions) (g) Date receiver (See instructions) (g) Date receiver (See instructions) (g) Date receiver (See instructions) (g) Date receiver (See instructions) (g) Date receiver (See instructions) (g) Date receiver (See instructions) (g) Date receiver (See instructions) (g) Date receiver (See instructions) (g) Date receiver (See instructions) (g) Date receiver (See instructions) (g) Date receiver (See instructions) (g) Date receiver (See instructions) (g) Date receiver (See instructions) (g) Date receiver (G) Date receiv | 1 | 441 SHARES OF ISHARES RUSSELL 1000 GRW ETF | | |
| No. (a) (b) FMV (or estimate) (c) (d) Date receive | | | \$75,354. | 12/11/19 |
| (a) No. from Part I Description of noncash property given (See instructions) (A) Date receiver (See instructions) (See instructions) (See instructions) (Date receiver (See instructions)) (Dat | No. from | | FMV (or estimate) | (d) Date received |
| No. from Part I (a) No. from Part I (b) FMV (or estimate) (See instructions) (c) FMV (or estimate) (See instructions) (d) Date receiver (See instructions) (a) No. from Description of noncash property given (a) No. from Description of noncash property given (b) FMV (or estimate) (See instructions) (c) FMV (or estimate) (See instructions) (d) Date receiver (See instructions) (a) No. from Description of noncash property given (b) FMV (or estimate) (See instructions) (c) FMV (or estimate) (See instructions) (d) Date receiver (See instructions) | | | \$ | |
| (a) No. from Description of noncash property given (b) FMV (or estimate) (See instructions) (c) FMV (or estimate) (See instructions) (d) Date receiver from Description of noncash property given (a) No. from Description of noncash property given (a) No. (b) FMV (or estimate) (See instructions) (a) No. (c) FMV (or estimate) (See instructions) (a) No. (b) FMV (or estimate) (See instructions) (b) FMV (or estimate) (See instructions) (c) FMV (or estimate) (See instructions) | No. from | | FMV (or estimate) | (d) Date received |
| No. from Description of noncash property given (a) No. from Description of noncash property given (b) FMV (or estimate) (See Instructions) (c) FMV (or estimate) (See Instructions) (d) Date receiver (C) FMV (or estimate) (See Instructions) (a) No. from Description of noncash property given (a) No. (b) FMV (or estimate) (See Instructions) (b) FMV (or estimate) (See Instructions) (c) FMV (or estimate) (See Instructions) (d) Date receiver (C) FMV (or estimate) (See Instructions) | | | | |
| (a) No. from Part I (b) Description of noncash property given (c) FMV (or estimate) (See instructions) (d) Date received (see instructions) (c) FMV (or estimate) (see instructions) (d) Date received (d) Date received (e) FMV (or estimate) (for estimate) | No. from | | FMV (or estimate) | (d) Date received |
| No. from Description of noncash property given (a) No. from Description of noncash property given (b) FMV (or estimate) (See instructions) (c) FMV (or estimate) (C) (C) (C) (D) (D) (D) (D) (D) (D) (D) (D) (D) (D | | | | |
| (a) No. (b) FMV (or estimate) Form Description of noncash property given (C) FMV (or estimate) CSee instructions Date received | No. from | | FMV (or estimate) | (d) Date received |
| No. (b) FMV (or estimate) (d) from Description of noncash property given (See instructions.) | | | \$ | |
| | No. from | | FMV (or estimate) | (d) Date received |
| \$ | | | s | |

08451027 131839 053-123872-00

Schedule B (Form 990, 990-EZ, or 990-PF) (2019) Name of organization **Employer identification number** PMR FOUNDATION 47-5209895 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or tess for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and 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 (e) Transfer of gift Transferee's name, address, and 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 Transferee's name, address, and 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 Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

923454 11-06-19

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

| FORM 990-PF INTERE | ST ON SAVI | NGS AND TEM | PORARY | CASH IN | VESTMENTS | STATEMENT 1 |
|-------------------------|-----------------|------------------------------|---------|------------------------|-------------------------------|-------------------------------------|
| SOURCE | | (A REVE PER B | NUE | NET IN | (B) VESTMENT COME | (C) ADJUSTED NET INCOME |
| MORGAN STANLEY #211 | 4 | - ,, - , ,, | ~585. | | 585. | |
| TOTAL TO PART I, LI | NE 3 | | 585. | | 585. | |
| FORM 990-PF | DIVIDEND | S AND INTER | EST FRO | M SECUR | ITIES | STATEMENT 2 |
| SOURCE | GROSS AMOUNT | CAPITAL GAINS DIVIDEND | RE | (A) EVENUE BOOKS | (B) NET INVES MENT INCO | (C) T- ADJUSTED ME NET INCOME |
| MORGAN STANLEY #2114 | 2,392 | • | 0. | 2,392. | 2,39 | 2. |
| TO PART I, LINE 4 | 2,392 | • | 0. | 2,392. | 2,39 | 2. |
| - - | | -/* | | | | |
| FORM 990-PF | | ACCOUNTI | NG FEES | } | | STATEMENT 3 |
| DESCRIPTION | | (A) EXPENSES PER BOOKS | NET IN | S) IVEST- INCOME | (C) ADJUSTED NET INCOM | CHARITABLE |
| ACCOUNTING FEES | | 1,075. | | 538. | | 537. |
| TO FORM 990-PF, PG | 1, LN 16B | 1,075. | | 538. | | 537. |
| FORM 990-PF | | TAX | ES | | | STATEMENT 4 |
| DESCRIPTION | | (A) EXPENSES PER BOOKS | | WEST- | (C) ADJUSTED NET INCOM | |
| EXCISE TAX | | 441. | - | 0. | | 0. |
| TO FORM 990-PF, PG | 1, LN 18 | 441. | | 0. | | 0. |
| | _ | | | | | |

| FORM 990-PF | OTHER E | XPENSES | STATEMENT 5 | | |
|-----------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|--|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | |
| MN AG FILING FEES | 25. | 0. | | 25. | |
| TO FORM 990-PF, PG 1, LN 23 | 25. | 0. | | 25. | |

| FORM 990-PF CORPORATE | STOCK | | STATEMENT 6 |
|---|-------|---------------------|----------------------|
| DESCRIPTION | ١ | BOOK VALUE | FAIR MARKET VALUE |
| JOHNSON & JOHNSON STOCK (585 SHARES) I SHARES RUSSELL 1000 GRW ETF (441 SHARES) | | 130,829. 75,354. | 85,334. 77,581. |
| TOTAL TO FORM 99%-PF, PART II, LINE 10B | | 206,183. | <i>,</i> 162,915. |