EXTENDED TO NOVEMBER 16, 2020 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.

For	calen	dar year 2019 or tax year beginning		•	, and e	nding		
Name of foundation A Employer identification number						number		
BERT FAMILY FOUNDATION						83-6372665		
Number and street (or P O box number if mail is not delivered to street address) Room/suite						Room/suite	B Telephone number	¢ ,
_	_	9 WOODLANE BAY			ı		651-491-93	03
		own, state or province, country, and ZIP DBURY, MN 55129	or foreign p	ostal code			C If exemption application is pe	ending, check here
G	Check	all that apply: Initial return		Initial return of a f	ormer public o	charity	D 1. Foreign organizations	, check here
		Final return		Amended return			2 Foreign organizations med	eting the 85% test
		Address cha		Name change		x a t	Foreign organizations med check here and attach cor	mputation
H (_			cempt private foundation	-4	M	E If private foundation stat	
<u> </u>		ction 4947(a)(1) nonexempt charitable tarket value of all assets at end of year		Other taxable private foundaring method: X Cash	Accr	ual .	under section 507(b)(1)	
		Part II, col. (c), line 16)		ther (specify)		uar	F If the foundation is in a (under section 507(b)(1)	
	\$	469,162.		nn (d), must be on cash bas	is.)			(b), check here
_	árt∛l,			(a) Revenue and expenses per books	(b) Net in	vestment	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
_	1	Contributions, gifts, grants, etc., receiv	ed	200,000.	and the contract of the contra			***************************************
	2	Check It the foundation is not required to		Market and the second s	**************************************		a Subgraphophi, To propoplad by	2. proposegoja v 2000.
	3	Interest on savings and temporary cash investments		5,669.		5,669.		STATEMENT: 1
	4	Dividends and interest from securities		3.		3.		STATEMENT 2
	5a	Gross rents				AMMA A L. S		2.43
	b	Net rental income or (loss)		0.40				
<u>a</u>	6a	Net gain or (loss) from sale of assets not on lin Gross sales price for all		942.				
i i	_ b		265.	24 (A)	3 3 3	942.		
٩	7	Capital gain net income (from Part IV, line 2) Net Short-term capital gain			######################################		. 1000 St. 2000 St. 200	
	0	Income modifications			25057 (200	360 1.00 1.20 1.20 1.		- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	10a	Gross sales less returns and allowances		Mary Control of the C		·www.ewalitere.com	hiparikipanamini karungan intin ham-bisa di misa	
	l .	Less Cost of goods sold			1351136	\$363 A		
		Gross profit or (loss)			1數段7%。	Profes		
	11	Other income						
	12	Total Add lines 1 through 11		206,614.		6,614.	0.	
	13	Compensation of officers, directors, trustees, e	etc	0.		0.		0.
	14	Other employee salaries and wages					RECE	IVED
co.		Pension plans, employee benefits						72
ě	.16a	Accounting fees				· -	8 NOV 1	8 2020 주
D. Per	0	Other professional fees			ļ			
	17	Legal fees Accounting fees Other professional fees Interest					OGDE	N. UT
C.	18		мт 3	2.		0.	0.	0.
X I	19	Depreciation and depletion		-				
	20	Occupancy						
8 ⊗ <u>A</u>	21	Travel, conferences, and meetings						
27 E	22	Printing and publications		1 000		1 005		25
2202 ating an	23	•	MT 4	1,060.		1,035.	0.	25.
zater	24	Total operating and administrative		1 062		1,035.	0.	25.
Oper		expenses . Add lines 13 through 23 Contributions, gifts, grants paid		1,062. 25,250.		1,033.		25,250.
^ -	l .	Total expenses and disbursements		25,250.	DP46	270/4	<u> ΣΠΑΣΟΣ</u>	25,250+
	20	Add lines 24 and 25		26,312.		1,035.	0.	25,275.
	27	Subtract line 26 from line 12:			ally ally			
	l	Excess of revenue over expenses and disburse	ments	180,302.				
	1	Net investment income (if negative, enter				5,579.		
	C	Adjusted net income (if negative, enter -0	·)				0.	

Form

Department of the Treasury Internal Revenue Service

(D	art:	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	of year
₹ ₽	art	column should be for end-of-year amounts only	(a) Book Value	. (b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	135,207.	288,631.	288,631.
	2	Savings and temporary cash investments			
		Accounts receivable ▶			
		Less: allowance for doubtful accounts			
	4	Pledges receivable >	100 M-24		
		Less: allowance for doubtful accounts			
	5	Grants receivable			,
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
Ø	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments - U.S. and state government obligations			
	Ь	Investments - corporate stock			
	1	Investments - corporate bonds			
•	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			A 100 Page 1 100 Page
	12	Investments - mortgage loans			
	13	Investments - other STMT 5	149,614.	176,492.	180,531.
	14	Land, buildings, and equipment: basis			
	•	Less accumulated depreciation			
	15	Other assets (describe >			
		Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	284,821.	465,123.	469,162.
	17		·	·	
	18	Grants payable			
ζ0	19	Deferred revenue			
ij	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable			
Ë	22	Other liabilities (describe)			(5)(0)(大人)(5)(大人)(大人)
		·			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow FASB ASC 958, check here			
s		and complete lines 24, 25, 29, and 30			
Net Assets or Fund Balances	24	Net assets without donor restrictions			
ala	25	Net assets with donor restrictions			
P P		Foundations that do not follow FASB ASC 958, check here 🕨 🗓			
Ë		and complete lines 26 through 30.			
ō	26	Capital stock, trust principal, or current funds	0.	0.	
əts	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
\SS(28	Retained earnings, accumulated income, endowment, or other funds	284,821.	465,123.	
et/	29	Total net assets or fund balances	284,821.	465,123.	
Ž					
_	30	Total liabilities and net assets/fund balances	284,821.	465,123.	
P	art:	Analysis of Changes in Net Assets or Fund Ba	alances		
_				· ·	
		net assets or fund balances at beginning of year - Part II, column (a), line	29		204 021
	-	t agree with end-of-year figure reported on prior year's return)		1	284,821.
		amount from Part I, line 27a		2	180,302.
		rincreases not included in line 2 (itemize)		3	465 123
		ines 1, 2, and 3		4	465,123.
		eases not included in line 2 (itemize)	oluma (h). Juan 20	5	465,123.
<u>6</u>	ı ulal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	Jurini (D), inte 29	6	Form 990-PF (2019)

2017 2016 2015 2014 2 Total of line 1, column (d) 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years 4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5 4 Multiply line 4 by line 3 5 126,859. 6 Enter 1% of net investment income (1% of Part I, line 27b) 6 56. 7 Add lines 5 and 6 7 126,915. 8 Enter qualifying distributions from Part XII, line 4 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.	Part IV C	apital Gains a	and Lo	sses for Tax on Inv	vestment	Income						
NYTL RURAL UTILITY	(a) List and describe 2-story brick wa	the kınd(rehouse;	s) of property sold (for exar or common stock, 200 shs.	nple, real esta . MLC Co.)	ite,	P	 Purchase 		c) Date acqui (mo., day, y	red r.)	
COLDMAN SACHS	1a GENERAL MOTORS F P						1	2/11/3	18	10/04/19		
TITEDHEALTH GROUP	b NTNL RURAL UTILITY P						1	2/21/	18	10/15/19		
VERIZON COMMUNICATIONS	c GOLDMA	N SACHS		<u> </u>				P	1	2/11/2	18	
(e) Gross sales price (f) Deprocration allowed (or allowable) (p) Cost or other basis (p) plus (f) minus (g)) a 25,000. 24,751. 249. 50. 50. 22,770. 230. 62. 25,000. 24,7770. 230. 62. 25,000. 24,7770. 230. 62. 25,000. 24,7770. 230. 62. 25,000. 24,7770. 230. 62. 62,000. 24,7770. 230. 62. 62,000. 24,927. 73. 24,925. 340. 62. 62. 62. 62. 62. 62. 62. 62. 62. 62	d UNITED	HEALTH GI	ROUP			_		P	1	2/21/	18	
25	e VERIZO	N COMMUN	CAT:	IONS				P	0	1/02/	19	03/29/19
1	(e) Gross	sales price	(f)						((h) Gain or (e) plus (f) r	r (loss ninus () (g))
25 , 000	a											249.
4	b											
25	C											230.
Complete only for assets showing gain in column (h) and owned by the foundation on 1221/69. (i) FMV as of 12/31/69 (ii) Adjusted bass (k) Excess of cot. (i) col. (ii) consists of cot. (ii) consists of cot. (iii) consists of consists of cot. (iii) consists of cot. (iii) consists of consists of cot. (iii) consists of cons	d											73.
(i) FMV as of 12/31/69 (j) Adjusted basis as of 12/31/69 (ver col. (j), if any) a	е	25,265.				24,92	5.					340.
(i) FMV as of 12/31/69 as of 12/31/69 byear coll. (j), if any cover cove	Complete on	y for assets showin	g gain in	column (h) and owned by t	he foundation	on 12/31/69.						
Social Capital garn net income or (net capital loss) (if gain, also enter in Part I, line 7 1 3 3 40 3 3 40 3 3 40 3 3 40 3 3 40 3 3 40 3 3 40 3 3 40 3 3 40 3 3 40 3 3 40 3 3 40 3 3 40 3 3 40 3 3 40 3 3 40 3 3 40 3 3 40 40	(i) FMV as	of 12/31/69										
a c capital gain net income or (net capital loss) 2 Capital gain net income or (net capital loss) 3 A 0 .	a											249.
a												50.
Example 1 (Ingan, also enter in Part I, line 7 (It gain, also enter in Part I, line 7 (It gain, also enter in Part I, line 7 (It gain, also enter in Part I, line 8, column (c). If gain, also enter in Part I, line 8, column (c). If gain, also enter in Part I, line 8, column (c). If gain, also enter in Part I, line 8, column (c). If gain, also enter in Part I, line 8, column (c). If gain, also enter in Part I, line 8, column (c). If gain, also enter in Part I, line 8, column (c). If gain, also enter in Part I, line 8, column (c). If gain, also enter in Part I, line 8, column (c). If gain, also enter in Part I, line 8, column (c). If gain, also enter in Part I, line 8, column (c). If gain, also enter in Part I, line 8, column (c). If gain, also enter in Part I, line 7 (a). If gain also enter in Part I, line 7 (a). If gain also enter in Part I, line 7 (a). If gain, also enter in Part I, line 7 (a). If gain also enter in Part I, line 8 (a). If gain, also enter in Part I, line 8 (a). If also inter in Part I, line 8 (a). If gain also enter in Part I,	c											230.
e 340. 2 Capital gain net income or (net capital loss)												
2 Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 If (loss), enter -0 -in Part I, line 8, column (c). If (loss), enter -0 -in Part I, line 2, column (c). If (loss), enter -0 -in Part I, line 2, column (c). If (loss), enter -0 -in Part I, line 2, column (c). If (loss), enter -0 -in Part I, line 2, column (c). If (loss), enter -0 -in Part I, line 2, column (c). If (loss), enter -0 -in Part I, line 2, column (c). If (loss), enter -0 -in Part I, line 2, column (c). If (loss), enter -0 -in Part I, line 2, column (c). If (loss), enter -0 -in Part I, line 2, column (c). If (loss), enter -0 -in Part I, line 2, column (c). If (loss), enter -0 -in Part I, line 2, column (c). If (loss), enter -0 -in Part I, line 2, column (c). If (loss), enter -0 -in Part I, line 2, column (c). If (loss), enter -0 -in Part I, line 2, column (c). If (loss), enter -0 -in Part I, line 2, column (c). If (loss), enter -0 -in Part I, line 2, column (c). If (loss), enter -0 -in												340.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter 0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Was the foundation liable for the section 4940 to x on the distributable amount of any year in the base period? If Yes, the foundation doesn't qualify under section 4940(e). Do not complete this part. I Enter the appropriate amount in each column for each year; see the instructions before making any entries. Base pell years Calendar year (or tax year beginning in) Adjusted qualifying distributions Adjusted qualifying distributions Net value of noncharitable-use assets (col. (b) divided by col. (c)) 2017 2016 2017 2016 2017 2016 2017 2016 2019 Total of line 1, column (d) 3. Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years 4. Enter the net value of noncharitable-use assets for 2019 from Part X, line 5 Multiply line 4 by line 3 5. 1266, 859. 6. Enter 1% of net investment income (1% of Part I, line 27b) 7. Add lines 5 and 6 7. 1266, 915. 8. Enter qualifying distributions from Part XII, line 4 If fine 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.	2 Capital gain ne	et income or (net ca	pital loss	If gain, also enter If (loss), enter -0-	ın Part I, line	7 e 7	}	2				942.
If gan, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes X No If Yes; the foundation doesn't qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year; see the instructions before making any entries. (b) Calendar year (or tax year beginning in) Adjusted qualifying distributions Net value of noncharitable-use assets (col. (b)) divided by col. (c) 2018 15, 259. 34, 246. Distribution ratio (col. (b)) divided by col. (c) 2016 2015 2016 2016 2016 2016 2016 2016 2016 2016 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5 4 284, 711. Multiply line 4 by line 3 Enter qualifying distributions from Part XII, line 27b) Add lines 5 and 6 7 126, 915. 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.	3 Net short-term	n capital dain or (los	s) as def	•								
If (icos), enter -0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Was the foundation lable for the section 4942 tax on the distributable amount of any year in the base period? Yes. The foundation doesn't qualify under section 4940(e). Do not complete this part. 1 Enter the appropriate amount in each column for each year; see the instructions before making any entries. (a) Base period years (a) Calendar year (or tax year beginning in) Adjusted qualifying distributions Net value of nonchartable-use assets (b) Cool. (b) divided by coil. (c) Distribution ratio (col. (b) divided by coil. (c)) 2018 1.5 , 259 . 34 , 246 . 2017 2016 2015 2014 2 Total of line 1, column (d) 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years 4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5 Multiply line 4 by line 3 5 L26 , 859 . 6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 8 Enter qualifying distributions from Part XII, line 4 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.					u (O).		ĴΙ					
(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation doesn't quality under section 4940(e). Do not complete this part. 1 Enter the appropriate amount in each column for each year; see the instructions before making any entries. (a) Base period years (a) Calendar year (or tax year beginning in) 2018 15,259. 2017 2017 2016 2016 2014 2 Total of line 1, column (d) 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years 4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5 Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6 Enter qualifying distributions from Part XII, line 4 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.	If (loss), enter	-0- in Part I, line 8	•					3			N/A	
If section 4940(d)(2) applies, leave this part blank. Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If Yes, the foundation doesn't qualify under section 4940(e). Do not complete this part. I Enter the appropriate amount in each column for each year; see the instructions before making any entries. Calendar year (or tax year beginning in)	Part V Q	ualification U	nder S	ection 4940(e) for	Reduced	Tax on Net	Inve	stment l	ncon	ne		-
Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No	(For optional use	by domestic private	foundati	ons subject to the section 4	940(a) tax on	net investment ini	come.))				
Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No		(0)		•								
If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year; see the instructions before making any entries. Column	it section 4940(d)	i(2) applies, leave tr	iis part bi	ank.								
1 Enter the appropriate amount in each column for each year; see the instructions before making any entries. (a) Base period years Calendar year (or tax year beginning in) 2018 15,259. 34,246. -445570 2017 2016 2015 2014 2 Total of line 1, column (d) 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years 4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5 6 Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6 8 Enter qualifying distributions from Part XII, line 4 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.						•	iod?					Yes X No
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2018 15, 259 . 34, 246		e period years	ng in)		ributions	Net value of no		table-use as	sets			
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4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5 Multiply line 4 by line 3 5 126,859. 6 Enter 1% of net investment income (1% of Part I, line 27b) 6 Add lines 5 and 6 7 126,915. 8 Enter qualifying distributions from Part XII, line 4 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.					2 5, 0.	o, or by the hambe	J. O. J.	54.0		3		.445570
5 Multiply line 4 by line 3 6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 8 Enter qualifying distributions from Part XII, line 4 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.	and roundation	The Book in Oxiotor	.00000	than o youro								
6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 7 126, 915. 8 Enter qualifying distributions from Part XII, line 4 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.	4 Enter the net v	alue of noncharitab	le-use as:	sets for 2019 from Part X, I	ne 5					4		284,711.
7 Add lines 5 and 6 8 Enter qualifying distributions from Part XII, line 4 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.	5 Multiply line 4	by line 3								5		126,859.
7 Add lines 5 and 6 8 Enter qualifying distributions from Part XII, line 4 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.												_
8 Enter qualifying distributions from Part XII, line 4 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.	6 Enter 1% of ne	et investment incom	e (1% of	Part I, line 27b)						6		<u>56.</u>
8 Enter qualifying distributions from Part XII, line 4 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.												400
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.	7 Add lines 5 an	d 6								7		126,915.
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.	8 Enter qualifyin	g distributions from	Part XII.	line 4						8		25,275.
See the Part VI instructions.	If line 8 is equa	al to or greater than	•		1b, and comp	olete that part using	g a 1%	tax rate.				

	990-PF (2019) BERT FAMILY FOUNDATION		637266		Page 4	
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948 -	see instru	ICTION	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)	334			10	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1	18:50 - 3	~>*<>>	12.	
	of Part I, line 27b					
	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; other's, enter -0-)	2_	-		0.	
3	Add lines 1 and 2	3	ļ		<u>12.</u>	
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4			0.	
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	C BOSCUT FAMILY N	27%, 38%	<u>12.</u>	
	Credits/Payments:	203				
	2019 estimated tax payments and 2018 overpayment credited to 2019 Exempt foreign organizations - tax withheld at source 6a Column 1					

	,					
				* (x 4X)	لــــــــــــــــــــــــــــــــــــــ	
	Total credits and payments. Add lines 6a through 6d	7			0.	
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8		A. vid		
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		LOT.	12	
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
	Enter the amount of line 10 to be: Credited to 2020 estimated tax Refunded rt VII-A Statements Regarding Activities	· <u> 11</u>				
***	· · · · · · · · · · · · · · · · · · ·	20.10	i i	Vac	No	
12	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interversity any political campaign?	ie iri			X	
_		inition	1 <u>1a</u>	+	X	
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the de lifthe answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	111111011	10	- , ,	1	
	distributed by the foundation in connection with the activities.					
_	·		10	*	X	
	Did the foundation file Form 1120-POL for this year? Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		<u> 1c</u>	48.3	家	
a	(1) On the foundation. \$ (2) On foundation managers. \$ (3)		.3.	1		
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	<u>•</u>		100		
-	managers. > \$ 0.	r	1	32	1 1	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X	
2	If "Yes," attach a detailed description of the activities.			: :	25 38.	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	or	1, 8%			
Ū	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	0.	3		X	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a	 	X	
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	I/A 4b	+	 	
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X	
	If "Yes," attach the statement required by General Instruction T.				*	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		3,4		\$2.00 \$2.00	
	By language in the governing instrument, or		L.			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the st	te law	3		<u>``</u>	
	remain in the governing instrument?		6	X		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		7	X		
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.		`			
	MN		^,		\$ k	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		* §	<u> </u>		
	of each state as required by General Instruction G? If "No," attach explanation		. 8р	X		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calculations are considered as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calculations are calculated as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calculations are calculated as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calculations are calculated as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calculated as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calculated as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calculated as a fine calculate	lendar)
	year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV		9		<u> </u>	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		X_	
			Form 99	90-PF	(2019)	

Pa	int VIII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	_11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► JACK BERT Telephone no. ► (612) 6	32-	342	<u>8</u>
	Located at ► 5829 WOODLANE BAY, WOODBURY, MN ZIP+4 ►55	125		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		<i>,</i> . ▶	•
	and enter the amount of tax-exempt interest received or accrued during the year 15		/A	NI.
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16	W %"	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the		8.2	
₫ D s	foreign country ► Int VII∍B. Statements Regarding Activities for Which Form 4720 May Be Required	_ &£	le.	. 10000
A.M.			Yes	No
10	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. During the year, did the foundation (either directly or indirectly):	77, 27	, , ,	
ıa	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	3		
	a disqualified person?		Y 28	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1,7%		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	34	ía á i	
	(5) Transfer any income or assets to a disqualified person (or make any of either available	7.5 A		
	for the benefit or use of a disqualified person)?	12. Sq.		
	(6) Agree to pay money or property to a government official? (Exception Check "No"	, 5x	χ'	
	if the foundation agreed to make a grant to or to employ the official for a period after	27.		
	termination of government service, if terminating within 90 days.)		*	18.00 M
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		`	لتنفيد
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b	*****	- 1- 000000 1-00004
	Organizations relying on a current notice regarding disaster assistance, check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2019?	1c	₹₹	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			4.0
	defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019? Yes X No		, St. 1	
		31		
_	If "Yes," list the years		85.85	
U	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b	0.73	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	- 2 D	iligi.	
٠	The provisions of scotton 4542(a)(2) are being approve to any of the yours noted in 2a, not the yours note.			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		4.	
-	during the year?			4.0
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after			
-	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose		10 m	
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,			
	Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		2	
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	_4b		X
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Part VII-B Statements Regarding Activities for Which	Form 4720 May Be R	equired (contin	ued)		
5a During the year, did the foundation pay or incur any amount to:			Ę	Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (sect	ion 4945(e))?	Y	es 🗶 No		
(2) Influence the outcome of any specific public election (see section 4955)		ectly,	\$		5 S
any voter registration drive?		Y	es 🗶 No 🖟	`	1 3
(3) Provide a grant to an individual for travel, study, or other similar purpos	es?		es 🗓 No	1	30
(4) Provide a grant to an organization other than a charitable, etc., organization					
4945(d)(4)(A)? See instructions	and addonosa in section		es 🗶 No 💲		, ,
(5) Provide for any purpose other than religious, charitable, scientific, literal	nz or educational nurnoses, or f				
the prevention of cruelty to children or animals?	ry, or concational purposes, or r		es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify	under the exceptions described				
****	•	in negulations	N/A	5b	
section 53.4945 or in a current notice regarding disaster assistance? See ins				30 (30°)	75 00 N
Organizations relying on a current notice regarding disaster assistance, chec				- 2	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption					
expenditure responsibility for the grant?	I.	I/A Y	es L No		**************************************
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			ľ.		, V.A.
6a Did the foundation, during the year, receive any funds, directly or indirectly, t	to pay premiums on				
a personal benefit contract?		Yo	es 🗶 No 🙎		- Prije
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	a personal benefit contract?		L	6b	X
If "Yes" to 6b, file Form 8870.			£		
7a At any time during the tax year, was the foundation a party to a prohibited tax	x shelter transaction?	Y	es 🗓 No 🏻		, 70
b If "Yes," did the foundation receive any proceeds or have any net income attri	butable to the transaction?		N/A	7b	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than	n \$1,000,000 in remuneration or		, ,		
excess parachute payment(s) during the year?			es 🗶 No 🖺		**/1
Part VIII Information About Officers, Directors, Trus	tees, Foundation Mar	nagers, Highly			
Paid Employees, and Contractors	•				
1 List all officers, directors, trustees, and foundation managers and	their compensation.				
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Exp account,	ense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, allowar	other
JACK M. BERT	TRUSTEE	Cinci o j	соттрензация		
5829 WOODLANE BAY					
WOODBURY,, MN 55129	0.00	0.	0.	· ·	0.
MARY L. BERT	TRUSTEE	· ·	· ·		<u> </u>
	-11001155				
5829 WOODLANE BAY	\dashv \sim		۱ .		^
WOODBURY,, MN 55129	0.00	0.	0.		0.
	⊣`				
	_				
2 Compensation of five highest-paid employees (other than those in		enter "NONE."	l (a)		
(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	(e) Exp account,	ense
עם) ואמוווכ מווע מענוכסס טו כמטון פוווףוטעכב ףמוע וווטוב נוומון שטט,טטט	devoted to position	(C) Compensation	and deferred compensation	allowa	nces
NONE					
	\neg	1			
	\dashv				
	- +	 			
	_	 			
	_				
	\perp				
		<u> </u>			
Total number of other employees paid over \$50,000					0
		<u> </u>	Form	990-PF	(2019)

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3N/A

Total. Add lines 1 through 3

All other program-related investments. See instructions.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	idations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a		1a	209,258.
b		1b	79,789.
C		1c	
d	Total (add lines 1a, b, and c)	1d	289,047.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	289,047.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4,336.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	284,711.
6	Minimum investment return Enter 5% of line 5	6	14,236.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certain	
	foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	14,236.
2a	Tax on investment income for 2019 from Part VI, line 5		
þ	Income tax for 2019. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	112.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	14,124.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	14,124.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	14,124.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
-	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	25,275.
b		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a		3a	
b		3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	25,275.
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	25,275.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	ualifies fo	r the section
	4940(e) reduction of tax in those years.		

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Part XIII Undistributed Income (see instructions)

·	(a) Corpus	(b) Years prior to 2018	(¢) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI,				
line 7				14,124.
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				
c From 2016				
d From 2017				
e From 2018 14,745.				
f Total of lines 3a through e	14,745.			
4 Qualifying distributions for 2019 from				
Part XII, line 4: \triangleright \$ 25,275.				!
a Applied to 2018, but not more than line 2a			0.	
b Applied to undistributed income of prior				ı
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2019 distributable amount				14,124.
e Remaining amount distributed out of corpus	11,151.			
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:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	25,896.			
b Prior years' undistributed income. Subtract	23,030.			
line 4b from line 2b		0.		
c Enter the amount of prior years'				1
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2018. Subtract line			•	(
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must				•
be distributed in 2020				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	_			·
may be required - see instructions)	0.			
8 Excess distributions carryover from 2014	^			ļ
not applied on line 5 or line 7	0.			<u> </u>
9 Excess distributions carryover to 2020.	25 006			1
Subtract lines 7 and 8 from line 6a	25,896.			<u> </u>
10 Analysis of line 9:				<u>'</u>
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				
d Excess from 2018 14,745.				
e Excess from 2019 11,151.				<u>'</u>

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	MILY FOUNDA			83-637	2665 Page 10
Part XIV Private Operating Fo			-A, question 9)	N/A	
1 a If the foundation has received a ruling of			.		
foundation, and the ruling is effective for		-	- anatus	1040(1)(2) 05 104	00.45
b Check box to indicate whether the found		ng toundation described i	Prior 3 years	4942(j)(3) or 494	2(1)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
income from Part I or the minimum	(a) 2013	(0) 2010	(6) 2017	(0) 2010	(e) Iolai
investment return from Part X for					
each year listed		<u> </u>		+/	
b 85% of line 2a	-				
c Qualifying distributions from Part XII,			/	1	
line 4, for each year listed			/	+	
d Amounts included in line 2c not					
used directly for active conduct of					
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	<u> </u>	 		 	
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets	ļ	 			
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6, for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public		_			
and 5 or more∕exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info			f the foundation	had \$5,000 or more	in assets
at any time during tl	he year-see instr	ructions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation who			ibutions received by the	foundation before the close	of any tax
year (but only if they have contributed m	nore than \$5,000). (See s	section 507(d)(2).)			
SEE STATEMENT 6					
b List any managers of the foundation who			or an equally large porti	on of the ownership of a part	nership or
other entity) of which the foundation has	s a 10% or greater intere	SL.			
NONE					·
2 Information Regarding Contribution		• • • •	•		
Check here X if the foundation of the foundation makes gifts, grants, etc.,					ts for funds. If
a The name, address, and telephone numb	-			 	
a monant, adarded, and telephone name	or or ornan abortoo or n				
b The form in which applications should b	e submitted and informa	tion and materials they sh	ronly rachide.		
		eron and materials they sh			
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields,	kınds of institutions, or	other factors:	
		<u></u>			000 55
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Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year CORNER CHURCH NONE PUBLIC CHARITABLE 514 N 3RD ST MINNEAPOLIS, MN 55401 5,800. NATIONAL PARKS CONSERVATION NONE PUBLIC CHARITABLE ASSOCIATION 777 6TH ST NW #700 WASHINGTON, DC 20001 50. NONE PUBLIC SISTERS OF ST JOSEPH MINISTRIES CHARITABLE FOUNDATION 1884 RANDOLPH ST PAUL, MN 55105 10,000. NONE PUBLIC CHARITABLE STREET CARDS 501 SE MAIN ST APT 511 MINNEAPOLIS, MN 55414 3,200. AMERICAN ASSOCIATION OF NURSE NONE PUBLIC CHARITABLE ANESTHETISTS FOUNDATION 222 S PROSPECT AVENUE PARK RIDGE, IL 60068-4037 1,100. SEE CONTINUATION SHEET(S) ▶ 3a 25,250. Total b Approved for future payment NONE 0. **▶** 3b Total

Form **990-PF** (2019)

Part XVI-A	Analysis of Income-Producing Activities
. u.t.xv	, maryor or moonie i roddomig nouvillo

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)
Zinta. g. 555 dinibutio dinibuto dinibutio maladitodi	(a)	(a) (b) - E		(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
a					
b			ĺ		<u> </u>
C					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14		
4 Dividends and interest from securities			14		
5 Net rental income or (loss) from real estate:	, ¹ ,		1	š. k	
a Debt-financed property					
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	942.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b		4			
c					
d	<u> </u>		L		
e					
12 Subtotal. Add columns (b), (d), and (e)		0.	٠,	6,614.	
13 Total. Add line 12, columns (b), (d), and (e)				13	6,614.
(See worksheet in line 13 instructions to verify calculations.)					

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).
	N/A

Form **990-PF** (2019)

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Part	XVII	Information Re Exempt Organi		sfers to a	nd Transactions a	nd Relationsh	nips With Nonchari	table		9
1 Did	the or	<u> </u>		of the following	ng with any other organizati	on described in sec	tion 501(c)		Yes	No
	(other than section 501(c)(3) organizations) or in section 527, relating to political organizations?									
	Transfers from the reporting foundation to a noncharitable exempt organization of:									
(1)	(1) Cash							1a(1)		<u>X</u>
(2)	Other	assets						1a(2)	<u> </u>	<u>X</u>
b Otl	ner tran	sactions:						<u> </u>		
٠,		of assets to a noncharital	, -					1b(1)		<u>X</u>
		nases of assets from a nor		organization				1b(2)	<u> </u>	<u>X</u>
٠,		al of facilities, equipment,	or other assets					1b(3)		X
		bursement arrangements						1b(4)		X
		s or loan guarantees rmance of services or mei	mharchin ar fundrai	cina colicitatio	one.			1b(5) 1b(6)		X
		f facilities, equipment, mai		_				10(0)		X
	_		_			ways show the fair	market value of the goods,		ets.	
Or	service		oundation. If the foui	ndation receive	• •		n or sharing arrangement, s		J.O.,	
(a) Line r		(b) Amount involved			e exempt organization	(d) Description	on of transfers, transactions, and	Sharing arra	angemen	
(-,		(0)	(6)	N/A		(5)				
	1					<u> </u>				
			-							
	╽.									
	_									
	_									
	-						<u>-</u>			
	<u> </u>					<u> </u>				
	-									
	-	 								
	+-									—
	+									
2a s 1	he four	ndation directly or indirect	tly affiliated with, or	related to, one	or more tax-exempt organ	zations described				
		501(c) (other than section			or more tax exempt or gain	2000,1000	Γ	Yes	X	No
		omplete the following sche					_	_		•
		(a) Name of org			(b) Type of organization		(c) Description of relations	hip		
		N/A								
	Under		<u></u>	sotura valstudina	accompanying schedules and s	totomosto and to the be	eat of my knowledge			
Sign					taxpayer) is based on all information		has any knowledge Ma reto	y the IRS d urn with the	iscuss the	iis r
Here		\checkmark	tail a	121	1/	TRUST	sho	own below? X Yes	7 See ins	tr
	Smr	nature of officer or trustee		707	Date ////	Title		<u>∧</u> res		No
	l Oigi	Print/Type preparer's na		Preparer's s		Date	Check If PTIN			
					·g···········		self- employed			
Paid STACKE G. USEM STACIE G. USEM			11/10/20		0051	908				
Preparer Firm's name ► LURIE, LLP				, :=, = = , <u>= = </u>	Firm's EIN ► 41-0					
Use (Only		,							
Firm's address ▶ 2501 WAYZATA BOULEVARD										
MINNEAPOLIS, MN 55405 Phone no. (612)3'						<u> 377-4</u>	4404	1		
						F	orm 990)-PF ((2019)	

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor NONE PUBLIC CHARITABLE ATHLETES COMMITTED TO EDUCATING STUDENTS 1115 E HENNEPIN AVE MINNEAPOLIS, MN 55414 1,000. SALVATION ARMY NONE PUBLIC CHARITABLE 615 SLATERS LANE ALEXANDRIA, VA 22314 1,000. PUBLIC CHARITABLE MINNESOTA PUBLIC RADIO NONE 480 CEDAR STREET ST PAUL, MN 55101 100. KING OF KINGS CHURCH NONE PUBLIC CHARITABLE 1583 RADIO DRIVE WOODBURY, MN 55125 2,000. GLACIER NATIONAL PARK CONSERVANCY NONE PUBLIC CHARITABLE PO BOX 2749 250. COLUMBIA FALLS, MT 59912 MN CONSERVATION VOLUNTEER PUBLIC CHARITABLE NONE PO BOX 325 50. CONGERS, NY 10920 MN PARKS CONSERVATION NONE PUBLIC CHARITABLE 1101 W RIVER PARKWAY, STE 250 50. MINNEAPOLIS, MN 55415 NONE PUBLIC CHARITABLE VOYAGEURS NATIONAL PARK ASSOCIATION 144 GLENWOOD AVE, STE 120 50. MINNEAPOLIS, MN 55405 ANIMAL HUMANE SOCIETY NONE PUBLIC CHARITABLE 9785 HUDSON RD WOODBURY, MN 55125 50. PHX RISING FC YOUTH SOCCER NONE PUBLIC CHARITABLE 9035 E PIMA CENTER PKWY, STE 10 50. SCOTTSDALE, AZ 85258 5,100. **Total from continuation sheets**

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) or substantial contributor recipient NONE PUBLIC CHARITABLE SECOND HARVEST 7101 WINNETKA AVENUE N BROOKLYN PARK, MN 55428 100. NONE PUBLIC CHARITABLE WOUNDED WARRIOR PROJECT 4899 BELFORT ROAD, STE 300 JACKSONVILLE, FL 32256 100. LIBERTY RIDGE ELEMENTARY NONE CHARITABLE 11395 EAGLE VIEW BLVD WOODBURY, MN 55129 300. Total from continuation sheets

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

To do to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2019

BERT FAMILY FOUNDATION

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

Employer identification number

83-6372665

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

Organization type (check one)							
Filers of:	Section:						
Form 990 or 990-E	Z 501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
-	nization is covered by the General Rule or a Special Rule . on 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions.						
· ·	ganization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.						
Special Rules							
sections s any one c	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						
year, tota	ganization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the I contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the n of cruelty to children or animals. Complete Parts I, II, and III						
year, con is checke purpose	ganization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box d, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively charitable, etc., contributions totaling \$5,000 or more during the year						
but it must answe	ization 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), r "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 n't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						

Name of organization

Employer identification number

BERT FAMILY F	'OUNDATION
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83-6372665

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JACK AND MARY BERT 5829 WOODLANE BAY WOODBURY, MN 55125	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash (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)

Name of organization

Employer identification number

BERT FAMILY FOUNDATION

83-6372665

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
		\$			

lame of organization

Employer identification number

	ILY FOUNDATION		83-6372665				
			ection 501(c)(7), (8), or (10) that total more than \$1,000 for the				
com	m any one contributor. Complete columns (a) noisting Part III, enter the total of exclusively religious,	charitable, etc., contributions of \$1,000 or	less for the year (Enter this info once)				
Us	e duplicate copies of Part III if additional	space is needed.					
No. om							
rt I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
'``							
—							
— I —							
		(e) Transfer of gif	ft				
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee				
<u> </u>							
			-				
No.							
m tl	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
'' 							
—							
- I —							
		-					
		(e) Transfer of gif	it				
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee				
l							
lo. m							
n	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
-							
_							
		(e) Transfer of gif	·				
	(e) transfer of gut						
	Transferee's name, address, ar	nd 71D + 4	Relationship of transferor to transferee				
	Transferee 3 flame, address, at	10 211 + 4	riciationship of Bunsleror to Bunsleree				
			<u> </u>				
0.							
o. n	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
' 							
- —	·····						
<u> </u>							
	(e) Transfer of gift						
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee				
l							
-							

FORM 990-PF INTERES	T ON SAVIN	IGS AND TEM	PORARY	CASH II	NVESTMENTS	ST	ATEMENT 1
SOURCE		(A REVE PER B	NUE		(B) NVESTMENT NCOME		(C) ADJUSTED ET INCOME
BANK INTEREST			3.		3.		3.
CHARLES SCHWAB (7295 ACCRUED INTEREST PAI	D	-	1,090.		-1,090.		-1,090.
CHARLES SCHWAB (7295 PREMIUM CHARLES SCHWAB (7295		1	-120. 6,876.		-120. 6,876.		-120. 6,876.
TOTAL TO PART I, LIN	IE 3		5,669.		5,669.		5,669.
FORM 990-PF	DIVIDENDS	AND INTER	EST FRO	OM SECUI	RITIES	ST	ATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	RI	(A) EVENUE R BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOME
CHARLES SCHWAB (7295) DIVIDENDS	3.		0.	3	•	3.	3.
TO PART I, LINE 4	3.		0.	3	•	3.	3.
FORM 990-PF	-	TAX	ES				ATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	NET IN	3) NVEST- INCOME	(C) ADJUSTED NET INCOM		(D) CHARITABLE PURPOSES
FEDERAL EXISE TAX		2.		0.		0.	0.

FORM 990-PF	OTHER E	XPENSES	STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
INVESTMENT MANAGEMENT FEES MN ANNUAL FEE	1,035.	1,035.	0.	0. 25.	
TO FORM 990-PF, PG 1, LN 23	1,060.	1,035.	0.	25.	

FORM 990-PF OTHER	INVESTMENTS		STATEMENT 5
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
CHARLES SCHWAB	COST	176,492.	180,531.
TOTAL TO FORM 990-PF, PART II, LINE	13	176,492.	180,531.

FORM 990-PF	PART XV - LINE 1A	STATEMENT 6
	LIST OF FOUNDATION MANAGERS	

NAME OF MANAGER

JACK M. BERT MARY L. BERT