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.

		222	2.4 2.01.0			Open to Public Inspection
Fo	r cale	ndar year 2019 or tax year beginning DEC	24, 2019	, and ending	DEC 31, 2019	
N	ame o	of foundation		p o / s - sb	A Employer identification	unmper .
	•	والمستقد والمواصل بمراض والواران	•			
	BLC	OMER FAMILY FOUNDATION			84-3953114	, , , , ,
N	umber :	and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
	630	INDIAN MOUND STREET		303	612-868-76	93
_		town, state or province, country, and ZIP or foreign p	C If exemption application is p	ending check here		
		ZATA, MN 55391				,
_		k all that apply: X Initial return	Initial return of a f	former public charity	D 1 Foreign organizations	check here
u	Onec	Final return -	Amended return	ormer passic enamy		s, oneon note
		= ' '			Foreign organizations me check here and attach co	eting the 85% test,
_	01	Address change k type of organization X Section,501(c)(3) e:	Name change		7	
H				04	E If private foundation sta	. — .
		ection 4947(a)(1) nonexempt charitable trust	Other taxable private found		under section 507(b)(1)	I(A), check here
		arket value of all assets at end of year J Account	•	Accrual	F If the foundation is in a	
(ther (specify)		under section 507(b)(1)	(B), check here
لے	► \$	2,031,576. (Part I, colur	nn (d), must be on cash bas	SIS)	<u> </u>	1 70
	anti	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c) and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
. —		necessarily equal the amounts in column (a))	expenses per books	income	income	(cash basis only)
b,	1	Contributions, gifts, grants, etc., received	2,028,226.		SOLON/ASSESSES	
100	2	Check In the foundation is not required to attach Sch. B		AND AND AND		
-,	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities		•		
	5a	Gross rents				
	h	Net rental income or (loss)				
•	6a	Net gain or (loss) from sale of assets not on line 10	1			
	의 .	Gross sales price for all				
	o 7	Capital gain net income (from Part IV line 2)		0.		
1	8	Net short-term capital gain				
		Income modifications				
	100	Gross sales less returns				
		and allowances				
	1	Less Cost of goods sold				
		Gross profit or (loss)			. ,	
		Other income	2,028,226.	0.	•	
_	12	Total Add lines 1 through 11	2,028,226.	0		0.
	13	Compensation of officers, directors, trustees etc	, 0.	10.		· ·
	14	Other employee salaries and wages			-	<u> </u>
	15	Pension plans, employee benefits		· · · · · · · · · · · · · · · · · · ·		
	(A)	Legal fees			· · · · · · · · · · · · · · · · · · ·	·
		Accounting fees			 	
ι	끠	Other professional fees			 	
	e 17	Interest			RECEI	VED
7	18	Taxes		•	REUL	GOD THE POST OF TH
7707	19	Depreciation and depletion				
_	20	Occupancy			850E OCT 2	7 2020 6
3	₽ 21	Travel, conferences, and meetings				N.
· ·	22	Printing and publications		<u></u> .	OGDE	el IIT
∢ :	b 23	Other expenses			0605	.14, 0
ີ .	E 24	Total operating and administrative	1	,	L	
	ě	expenses Add lines 13 through 23	0.	0.		0.
	25	Contributions, gifts, grants paid	0.			0.
80 30 80	26	Total expenses and disbursements				
\$		Add lines 24 and 25	0.	0.		0.
	27		3			
e)	ľ	Excess of revenue over expenses and disbursements	2,028,226.			
	1	Net investment income (if negative enter -0-)		0.		
		Adjusted net income (if negative, enter -0-)	THE RESERVE OF THE PERSON OF T		N/A	
922		-17-19 LHA For Paperwork Reduction Act Notice	see instructions		1101	Form 990-PF (2019)
523	12	C	.,		~ I — /	1

g _C	200	Balance Sheets Allached schedules and amounts in the description column should be for end-of year amounts only	Beginning of year	End o	of year
613	anu	column should be for end-of year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments			
	3	Accounts receivable >			
	•	Less, allowance for doubtful accounts			
	4	Pledges receivable			
	'	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	Manager and State Control of the State of th	The second secon	to a record was the record and re
"	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges		,	_
As	1 -	Investments - U.S and state government obligations			-
	l	Investments - corporate stock STMT 1	0.	876,418.	2,031,576.
	ı	Investments - corporate bonds	1		
	l	Investments land, buildings and equipment basis			
	l ''	Less accumulated depreciation			SCHOOL SCHOOL SECTION SCHOOL SCHOOL SECTION SCHOOL
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			
	15	Other assets (describe >			
	ł	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	0.	876,418.	2,031,576.
	17	Accounts payable and accrued expenses			
	18	Grants payable			Return biribi
Ś	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees and other disqualified persons			
aþi	21	Mortgages and other notes payable			
	22	Other liabilities (describe >)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow FASB ASC 958, check here			
es		and complete lines 24, 25, 29, and 30			
Ü	24	Net assets without donor restrictions			
Fund Balanc	25	Net assets with donor restrictions			
β		Foundations that do not follow FASB ASC 958, check here 🕨 🗓 🗶			
Ē		and complete lines 26 through 30	_	_	
ŏ	26	Capital stock, trust principal, or current funds	0.	0.	
sets		Paid-in or capital surplus, or land, bldg, and equipment fund	0.	876,418.	
Ass		Retained earnings, accumulated income, endowment, or other funds	0.	876,418.	
Net Assets	29	Total net assets or fund balances	0.	0/0,410.	
	00	Tabellah lang and anti-make Kondhalanan	0.	876,418.	
		Total liabilities and net assets/fund balances	· .	070,410.	
B	anti	Analysis of Changes in Net Assets or Fund Ba	lances		
	IctoI	net assets or fund balances at beginning of year - Part II, column (a), line	29		
		t agree with end-of-year figure reported on prior year's return)		1	0.
	•	amount from Part I, line 27a		2	2,028,226.
		increases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3		4	2,028,226.
		ases not included in line 2 (itemize) COST BASIS ADJU	JSTMENT - DONA		1,151,808.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co		6	876,418.
					Form 990-PF (2019)

Partely Capital Gains an	d Losses for Tax on In	vestment	Income		· :				
	e kınd(s) of property sold (for exam house, or common stock, 200 shs		ate,	(b) E	How acquired - Purchase) - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
1a				Ι.					
b NONI	Ξ								
<u>c</u>									
<u>d</u>				<u> </u>					
e	· · · · · · · · · · · · · · · · · · ·			<u> </u>			l		
(e) Gross sales price	(f) Depreciation allowed (or allowable)		expense of sale			(h) Gain or (loss ((e) plus (f) minus			
<u>a</u>									
<u>b</u>						<u> </u>			
<u>c</u>		! 					,		
d			·				·		
Complete only for assets showing of	nain in column (h) and owned by t	he foundation	on 12/31/69			(I) Gains (Col. (h) gain	minue		
Complete only for assets showing to	(ı) Adjusted basıs		xcess of col. (1)			ol. (k), but not less tha	n -0-) or		
(i) FMV as of 12/31/69	as of 12/31/69		r col. (j), if any			Losses (from col (h))			
<u>a</u>									
b			_						
<u>c</u>									
<u>d</u>									
e	∫ If gain, also enter	ın Part I, line	7	J					
2 Capital gain net income or (net capital	al loss)	- in Part I, line	e 7	J	2				
3 Net short-term capital gain or (loss)		d (6):		٦					
If gain, also enter in Part I, line 8, col	lumn (c)								
If (loss), enter -0- in Part I, line 8 Part V# Qualification Und	er Section 4940(e) for	Reduced	Tax on Net I	nve	stment Inc	ome			
(For optional use by domestic private fo							N/A		
(For optional use by domestic private to	undations subject to the section 4	940(a) lax uli	net investment inc	Joine	,		14/21		
If section 4940(d)(2) applies, leave this	part blank.								
Was the foundation liable for the section	4942 tax on the distributable am	ount of any ve	ear in the base peri	od?			Yes No		
If "Yes," the foundation doesn't qualify u			•						
1 Enter the appropriate amount in each				itries.					
(a) Base period years Calendar year (or tax year beginning i	(b) Adjusted qualifying dist	ributions	Net value of nor	(c) nchar	ritable-use assets	Distrit (col. (b) div	(d) oution ratio rided by col. (c))		
2018									
2017									
2016									
2015									
2014									
2 Total of line 1, column (d)						2			
3 Average distribution ratio for the 5-ye	ear base period - divide the total o	n line 2 by 5 (O, or by the numbe	r of y	rears				
the foundation has been in existence	*	,		-		3			
4 Enter the net value of noncharitable-t	use assets for 2019 from Part X, li	ne 5				4			
5 Multiply line 4 by line 3						5	<u></u>		
6 Enter 1% of net investment income (1% of Part I, line 27b)					6			
7 Add lines 5 and 6						7			
8 Enter qualifying distributions from Pa						8			
If line 8 is equal to or greater than lin See the Part VI instructions	e 7, check the box in Part VI, line	1b, and comp	lete that part using	a 1%	% tax rate.				

	n 990-PF (2019) BLOOMER FAMILY FOUNDATION interview Excise Tax Based on Investment Income (Section 4940(a)), 4940(b), 49			395311 see instru		
77	Exempt operating foundations described in section 4940(d)(2), check here and enter						
	Date of ruling or determination letter (attach copy of letter if necess						I
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and enter 1%	·	1	SCHOOL SHOP	() .	
	of Part I, line 27b	Don't line 40 and	(6)			100	
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of		(D) J	16.38 AS		0.	
_	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others	s, enter -u-)		3		0.	
3	Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; other	s enter -N-V	ŀ	4		0.	
4 5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	3, cinci -0-7		5	-	0.	
6	Credits/Payments:				2 / 2 / 2		
		6a	0.				
		6b	0.				
		6c	0.				
	₽	6d	0.				
	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 attache	d		8		0.	
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		▶ [9		0.	
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		. ▶	10			
11	Enter the amount of line 10 to be Credited to 2020 estimated tax		Refunded ►	11			
Pa	THE Statements Regarding Activities				Transmit and the same of the s		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation	on or did it particip	ate or intervene i	n			
	any political campaign?				<u>1a</u>	X	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes?			เดก	1b	X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of ar	ny materials publis	shed or				
	distributed by the foundation in connection with the activities					E SAME SECTION	
	Did the foundation file Form 1120-POL for this year?				1c		
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the yea		0.				
_	(1) On the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright Enter the reimbursement (if any) paid by the foundation during the year for political expenditure						
е	managers. > \$ 0.	tax imposed on it	Juliualion				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2	X	
4	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 instru	ument, articles of	incorporation, or				
-	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	,	, , , , , , , , , , , , , , , , , , , ,		3	X	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a	Х	
b	If "Yes," has it filed a tax return on Form 990-T for this year?			N,	/A 4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5	X	
	If "Yes," attach the statement required by General Instruction T						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	:					
	By language in the governing instrument, or						
	ullet By state legislation that effectively amends the governing instrument so that no mandatory directions of the control	ections that confli	ct with the state l	aw			
	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), an	d Part XV		7	X	
		_					
8a	Enter the states to which the foundation reports or with which it is registered. See instructions	-					
	MN		1 - 1		—		
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorn	ney General (or des	signate)		350	V V	
	of each state as required by General Instruction G2 If "No," attach explanation	. 4049(1)(9) == 491	1011VE\ for onless	do.	8b	X	_
	Is the foundation claiming status as a private operating foundation within the meaning of section		iz(J)(D) for calend	Jar		X)
	year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule list		Jd		10	$\frac{1}{x}$	L
10	and any hersonis account sonstantial continuotors animid the tay Acat . It lies attach a schedule list	ing their names and a	uuresses			0-PF (2019)	

1	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		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		X
13		13	X	<u>L</u>
	Website address ► N/A	<u> </u>	<u> </u>	
14	The books are in care of ► WILLIAM S. BLOOMER III Telephone no ► 612-8		693	
	Located at ► 630 INDIAN MOUND STREET #303, WAYZATA, MN ZIP+4 ►5	<u>5391</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	3.7	, ▶	· []
	and enter the amount of tax-exempt interest received or accrued during the year 15	N	/A	N
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	(13)/96	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
₽D2	foreign country ► ift[VII] By Statements Regarding Activities for Which Form 4720 May Be Required	2010		100
1.4.		AND MADE	Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	\$ 75 C W	1 CS	100 201303
18	During the year, did the foundation (either directly or indirectly).			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No		4.5	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No	125		
	رحجا لببيا		4.5	S
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? [X] No (5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?		1	
	(6) Agree to pay money or property to a government official? (Exception Check "No"		23	及星
	If the foundation agreed to make a grant to or to employ the official for a period after		3.3	
	termination of government service, if terminating within 90 days) Yes X No	3.14		. 3
h	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			2
·	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1h	A PARTY	-
	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			A Sept.
	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	20		
	defined in section 4942(j)(3) or 4942(j)(5))	3.2	₹9×	37
a	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?			- 4
	If "Yes," list the years \blacktriangleright		10	Y.
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	▶			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?		1	
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			4.7
	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,		9	1
	Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	্ৰেক্ডঃ দ	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		水银泽	
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		<u>X</u>
	Fo	rm 990 -	·PF ()	2019)

Part VII: By Statements Regarding Activities for Which I	orm 4720 May Be F	Required (contin	nued)		
5a During the year, did the foundation pay or incur any amount to			1000)	Yes Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?		es X No	100 No. 1	1532
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly,				
any voter registration drive?	• • •		es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	37		es X No		<i>3</i> 2.
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				47
4945(d)(4)(A)? See instructions	Y	es X No			
(5) Provide for any purpose other than religious, charitable, scientific, literary.	for			Ž,	
the prevention of cruelty to children or animals?	Y	es X No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described	ın Regulations			
section 53.4945 or in a current notice regarding disaster assistance? See instr	uctions		N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check	here				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it mainta	ined			
expenditure responsibility for the grant?	I	1/A Y	es 🔲 No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			ļ.	建	8.4
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				4
a personal benefit contract?		Y	es 🗶 No 🖁		â
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870.					1,3
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y	es X No		33
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	-E-19-1
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remuneration or		(7 2)		凝
excess parachute payment(s) during the year? Part VIII Information About Officers, Directors, Truste	os Foundation Mar		es X No	STATE OF THE PARTY	4.7
Paid Employees, and Contractors	es, i oundation ivial	lagers, riigiliy			
List all officers, directors, trustees, and foundation managers and the	neir compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expen	ıșe
(a) Name and address	hòurs per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	account, of	iner :es
SEE STATEMENT 2		0.	0.		0.
	•				
, <u></u>				ļ	
Compensation of five highest-paid employees (other than those incl	uded on line 1). If none, e	Li enter "NONE."		<u></u>	—
	(b) Title, and average		(d) Contributions to employee benefit plans	(e) Expens	se
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, of	iher es
NONE		 -	сотрепланоп		
				<u> </u>	
				<u>L</u>	
-					
					_
otal number of other employees paid over \$50,000			>		0
			Form	990-PF ₍₂₀	119)

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Total. Add lines 1 through 3

All other program-related investments. See instructions

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βŖ	All domestic foundation (All domestic foundation)	ns must complete this part. F	oreign foundations, see i	nstructions)
1	Fair market value of assets not used (or held for use) directly in carrying out chair	ritable, etc., purposes	***	
a	Average monthly fair market value of securities	, ,, ,	1a	44,528.
			1b	
C	Fair market value of all other assets		1c	-
_	Total (add lines 1a, b, and c)		1d	44,528.
	Reduction claimed for blockage or other factors reported on lines 1a and			
Ŭ	1c (attach detailed explanation)	1e	0.	
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	44,528.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amo	ount, see instructions)	4	668.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here at		5	43,860.
6	Minimum investment return Enter 5% of line 5 ADJUSTED FOR S			48.
	Distributable Amount (see instructions) (Section 4942(j))	3) and (i)(5) private operating for	indations and certain	
25.44	foreign organizations, check here and do not complete this	part.)		
1	Minimum investment return from Part X, line 6	· · · · · · · · · · · · · · · · · · ·	1	48.
2a	Tax on investment income for 2019 from Part VI, line 5	2a	\$250	
		2b	336	
	Add lines 2a and 2b		2c	0.
3	Distributable amount before adjustments Subtract line 2c from line 1		3	48.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4		5	48.
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	48.
<u>—</u>	ant XIII Qualifying Distributions (see instructions)			
L'A	autanii duaniying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc.,	purposes:		·
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26		1a	0.
	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 cha	ritable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:			
а	Suitability test (prior IRS approval required)		3a	
	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	0.
	Foundations that qualify under section 4940(e) for the reduced rate of tax on net			
-	income. Enter 1% of Part I, line 27b		5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	0.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent yea 4940(e) reduction of tax in those years	rs when calculating whether the f	oundation qualifies for the si	ection

Form 990-PF (2019)

PartXIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				48.
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		0.		
a From 2014				
b From 2015				
c From 2016				
d From 2017				
e From 2018				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2019 from				
Part XII, line 4: ► \$ 0.				
a Applied to 2018, but not more than line 2a			0.	
b Applied to undistributed income of prior		0		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	0.			
(Election required - see instructions) d Applied to 2019 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount				
must be shown in column (a)) 6 Enter the net total of each column as	0.			0.
indicated below				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income Subtract		0.		
line 4b from line 2b		U •		
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				4.0
be distributed in 2020				48.
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.			
B Excess distributions carryover from 2014		2 (4 (7 (4 (7 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4		
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2020				
Subtract lines 7 and 8 from line 6a	0.			
O Analysis of line 9 [.]				
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				
d Excess from 2018				
e Excess from 2019	LESS CONTRACTOR OF THE PROPERTY OF THE PROPERT	ACAD TELEVISION AND AND AND AND AND AND AND AND AND AN	\$277 WYST TST WY #228 WWW.WYSE WY SELECT	HISHOCKET TO AN ONLY TO SHEET THE PARTY OF THE PARTY.

Form 990-PF (2019)

Form 990-PF (2019) BLOOMER	FAMILY FOUN	IDATION		84-39	53114 Page 1
Part XIV Private Operating For			I A, question 9)	N/A	
1 a If the foundation has received a ruling of	r determination letter that	it is a private operating			
foundation, and the ruling is effective for			.		
b Check box to indicate whether the found	•	J	in section] 4942(j)(3) or 45	342(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	,	Prior 3 years	<u> </u>	12()/(0)
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
investment return from Part X for	(-/	(-)	(0)	(-,)	(0) 10121
each year listed				 / 	
b 85% of line 2a		<u></u> _	 		
 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					
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 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			1		
investment income (interestation dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizatións as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					··
Part XVA Supplementary Infor	mation (Complete	this part only if	the foundation I	nad \$5.000 or more	e in assets
at any time during th				, , , , , , , , , , , , , , , , , , ,	
1 Information Regarding Foundation	Monogona				
a List any managers of the foundation who	•	on 00/ of the total contri	but one recound by the f	lawadatina hafara tha alasa	of any toy
year (but only if they have contributed mo	ore than \$5,000) (See sec	tion 507(d)(2).)	bottons received by the i	oundation before the close	or any tax
WILLIAM S. BLOOMER II	I	·		_	
b List any managers of the foundation who		tock of a corporation (c	or an equally large portion	n of the ownership of a par	tnership or
other entity) of which the foundation has	a 10% or greater interest				
NONE				_	
2 Information Regarding Contributio	n, Grant, Gift, Loan, Se	cholarship, etc., Pro	grams:		
Check here $ ightharpoonup oxed{X}$ if the foundation on	ly makes contributions to	preselected charitable o	rganizations and does no	ot accept unsolicited reques	sts for funds If
the foundation makes gifts, grants, etc., to	o individuals or organization	ons under other conditio	ons, complete items 2a, b	o, c, and d	
a The name, address, and telephone number	er or email address of the o	person to whom applica	tions should be addresse	ed:	
			555.5 55 466.6556	· · ·	
b The form in which applications should be	submitted and information	and materials they sho	ould include		
c Any submission deadlines.				<u> </u>	
	<u> </u>			 _	
d Any restrictions or limitations on awards,	such as by geographical a	reas, charitable fields, k	ands of institutions, or of	her factors:	
					000 DE

Part*XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Ye	ar or Approved for Future F	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
NONE				
			•	
-				
Tota!		· -	► 3a	0.
b Approved for future payment				
NONE				
		-		
Total			▶ 3b	0. orm 990-PF (2019)
			Fo	rm 930-PF (2019)

Form 990-PF (2019) BLOOMER FAMILY	Y FOUNDATI	ON		84	-3953114 Page	12
Part XVI Analysis of Income-Produ	ucing Activities	s				
Enter gross amounts unless otherwise indicated	Unrelated b	ousiness income		ded by section 512, 513 or 514	(e)	
1 Program service revenue	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income	
a						_
b	_		<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						
4 Dividends and interest from securities						
5 Net rental income or (loss) from real estate:	THAT I					Į
a Debt-financed property						
b Not debt-financed property			<u> </u>			
6 Net rental income or (loss) from personal						
property						
7 Other investment income						
8 Gain or (loss) from sales of assets other						
than inventory						_
9 Net income or (loss) from special events						_
10 Gross profit or (loss) from sales of inventory						_
11 Other revenue						
a	-					_
b	-					_
c	- 				_	_
d	-				 	
e				0		_
12 Subtotal Add columns (b), (d), and (e)			ct			
13 Total Add line 12, columns (b), (d), and (e)				13.		÷
(See worksheet in line 13 instructions to verify calculations.)	4- 4b- A	Liebmant of Eve		D.,,,,,		-
Relationship of Activities	to the Accomp	mishment of Exe	mpt	Purposes		
Line No Explain below how each activity for which inc		· ·	contribi	uted importantly to the acco	omplishment of	
▼ the foundation's exempt purposes (other than	n by providing funds f	for such purposes)				_
						_
						_
						_
					<u>.</u>	_
						_
						_
						_
						_
						_
1						

Form **990-PF** (2019)

Yes No

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c)

Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations**

(othe	r than section 501(c)(3) organ	iizations) or in secti	on 527, relatin	g to political organiz	ations?					
a Trans	sfers from the reporting founda	ation to a noncharita	able exempt or	ganization of				3		
(1)	Cash							<u> -</u>	la(1)	X
(2)	Other assets								la(2)	X
b Other	transactions.							3		
(1) 3	Sales of assets to a noncharital	ble exempt organiza	ation					<u> </u>	lb(1)	X
(2)	Purchases of assets from a noi	ncharitable exempt	organization					<u> </u>	lb(2)	X
(3) F	Rental of facilities, equipment,	or other assets							b(3)	X
(4) F	Reimbursement arrangements							<u> </u>	lb(4)	X
(5) l	oans or loan guarantees							<u> </u>	b(5)	X
(6) F	Performance of services or me	mbership or fundra	ısıng solicitatio	ons				<u> </u>	b(6)	X
	ng of facilities, equipment, ma							L	1c	X
	answer to any of the above \ensuremath{is}									
or se	rvices given by the reporting fo	oundation If the fou	ındatıon receivi	ed less than fair mar	ket value ii	n any transactio	n or sharing arra	angement, show	ın 💮	
colun	nn (d) the value of the goods,	·								
a) Line no	(b) Amount involved	(c) Name o		e exempt organization	n	(d) Description	n of transfers, tran	sactions and shari	ng arrangemen	its
,			N/A							
			_							
		-	****							
		<u> </u>								
		1								
2a Is the	foundation directly or indirect	ly affiliated with, or	related to, one	or more tax-exempt	t organizati	ons described				_
ın sec	tion 501(c) (other than section	1 501(c)(3)) or in se	ection 527?						Yes X	No
b If "Yes	s," complete the following sche			·						
	(a) Name of orga	anization		(b) Type of organi	zation		(c) Description	of relationship		
	N/A									
					_					
	inder penalties of perjury, I declare the	at I have examined this gete. Declaration of pre	return including eparer (other than	accompanying schedule taxpayer) is based on all	es and staten I information	of which blebater p	ist of my knowledge .as any knowledge	widy trie	IRS discuss th	is
Sign ª Here		Ann.	777	Lacher	100	\		shown b	elow? See inst	ir .
		MILL	<u> </u>	wr4/		TREASU	JRER_	X	Yes	No
	Signature of officer or trustee			Date	15	Title	Charle Comm	4 5711		
	Print/Type preparer's nar	ne	Preparer's si	gnature	l Da	ate	Check	if PTIN		
Daid			L		a .		self- employed	l l	40405	
Paid	LAURA C. GU		LAURA (C. GUST,	CP 1	0/15/20	1		49425	
Prepar		FLI LLP					Firm's EIN	39-075	8449	
Use On						400				
	Firm's address ► 760				SUITE	400				
	MIN	NNEAPOLIS	, MN 5	5435			Phone no	952.54 <u>8</u>		
								Form	990-PF (2019)

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.

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

OMB No 1545 0047

2019

Employer identification number

BLOOMER FAMILY FOUNDATION 84-3953114 Organization type (check one) Filers of: Section: Form 990 or 990 EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt 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 X 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 contributions 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, charitable, 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

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

Name of organization

Employer identification number

BLOOMER FAMILY FOUNDATION

84-3953114

220011	ZK TIMITET TOOKSIITTOK		I JJJJIII			
Partil	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1	WILLIAM S. BLOOMER III 630 INDIAN MOUND STREET #303 WAYZATA, MN 55391	\$\$\$\$\$	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 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)			
(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 Noncash (Complete Part II for noncash contributions)			

Name of organization

Employer identification number

BLOOMER FAMILY FOUNDATION

84-3953114

Partill	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
	3,570 SHARES OF ISHARES CORE & SOT 500 ETF		
1		\$\$	12/23/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	3,970 SHARES OF ISHARES RUSSELL MID-CAP VALUE		
1			12/23/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	2,850 SHARES OF ISHARES RUSSELL 1000 GROWTH ETF		
1		sss	12/23/19
(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
		 	90, 990-EZ, or 990-PF) (2019)

Schedule B (Form 990, 990-EZ, or 990 PF) (2019) Name of organization Employer identification number 84-3953114 BLOOMER FAMILY FOUNDATION 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 less for the year (Enter this into once) > \$_ Use duplicate copies of Part III if additional space is needed (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift 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 (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

FORM 990-PF CORPORATE STOCK	CORPORATE STOCK	
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
EQUITIES	876,418.	2,031,576.
TOTAL TO FORM 990-PF, PART II, LINE 10B	876,418.	2,031,576.

	T VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS			STATEMENT 2	
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB		
WILLIAM S. BLOOMER III 630 INDIAN MOUND STREET #303 WAYZATA, MN 55391	PRESIDENT & TR	EASURER 0.	0.	0.	
GERALDINE A. BLOOMER 630 INDIAN MOUND STREET #303 WAYZATA, MN 55391	OFFICER 1.00	0.	0.	0.	
KIMBERLY A. GIANGRASSO 630 INDIAN MOUND STREET #303 WAYZATA, MN 55391	OFFICER 1.00	0.	0.	0.	
CHRISTOPHER K. BLOOMER 630 INDIAN MOUND STREET #303 WAYZATA, MN 55391	OFFICER 1.00	0.	0.	0.	
CHARLES W. BLOOMER 630 INDIAN MOUND STREET #303 WAYZATA, MN 55391	OFFICER 1.00	0.	0.	0.	
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	0.	0.	0.	