

For calendar year 2020, or tax year beginning 01-01-2020, and ending 12-31-2020

Name of foundation JAMES FORD BELL FOUNDATION		A Employer identification number 41-6023099	
Number and street (or P.O. box number if mail is not delivered to street address) 1818 OLIVER AVENUE SOUTH		Room/suite	B Telephone number (see instructions) (612) 377-8400
City or town, state or province, country, and ZIP or foreign postal code MINNEAPOLIS, MN 55405		C If exemption application is pending, check here ▶ <input type="checkbox"/>	
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here..... ▶ <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ... ▶ <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 6,930,075		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ <input type="checkbox"/>	
J Accounting method: <input type="checkbox"/> Cash <input type="checkbox"/> Accrual <input checked="" type="checkbox"/> Other (specify) <u>MODIFIED CASH</u> (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)				
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	10	10		
	4 Dividends and interest from securities	83,161	83,161		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	177,036			
	b Gross sales price for all assets on line 6a				
	255,599				
	7 Capital gain net income (from Part IV, line 2)		177,036		
	8 Net short-term capital gain				
	9 Income modifications				
Operating and Administrative Expenses	10a Gross sales less returns and allowances				
	b Less: Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	260,207	260,207		
	13 Compensation of officers, directors, trustees, etc.	5,000	0		5,000
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	2,725	1,363		1,362
	c Other professional fees (attach schedule)	66,046	39,046		27,000
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	1,057	0		0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	6,054	0		6,054
	24 Total operating and administrative expenses. Add lines 13 through 23	80,882	40,409		39,416
	25 Contributions, gifts, grants paid	259,133			259,133
	26 Total expenses and disbursements. Add lines 24 and 25	340,015	40,409		298,549
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	-79,808			
	b Net investment income (if negative, enter -0-)		219,798		
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing			
	2 Savings and temporary cash investments	96,480	94,436	94,436
	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 (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	723,549	736,567	1,679,400
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	1,767,969	1,677,187	5,156,239
	14 Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	2,587,998	2,508,190	6,930,075	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	2,587,998	2,508,190	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
	28 Retained earnings, accumulated income, endowment, or other funds	0	0	
	29 Total net assets or fund balances (see instructions)	2,587,998	2,508,190	
30 Total liabilities and net assets/fund balances (see instructions) .	2,587,998	2,508,190		

Part III Analysis of Changes in Net Assets or Fund Balances		
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	2,587,998
2 Enter amount from Part I, line 27a	2	-79,808
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3	4	2,508,190
5 Decreases not included in line 2 (itemize) ▶ _____	5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	2,508,190

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a PUBLICLY TRADED SECURITIES	P		
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 255,599		78,563	177,036
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			177,036
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) { <div style="display: inline-block; vertical-align: middle; text-align: center;"> If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 </div> }	2	177,036
	3	

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) (see instructions). If (loss), enter -0-
 in Part I, line 8

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE**

1 Reserved				
(a) Reserved	(b) Reserved	(c) Reserved	(d) Reserved	
2 Reserved	2			
3 Reserved	3			
4 Reserved	4			
5 Reserved	5			
6 Reserved	6			
7 Reserved	7			
8 Reserved ,	8			

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)		
b	Reserved.	1	3,055
c	All other domestic foundations enter 1.39% 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. Others enter -0-)	2	0
3	Add lines 1 and 2.	3	3,055
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-.	5	3,055
6	Credits/Payments:		
a	2020 estimated tax payments and 2019 overpayment credited to 2020	6a	2,280
b	Exempt foreign organizations—tax withheld at source	6b	0
c	Tax paid with application for extension of time to file (Form 8868)	6c	0
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	2,280
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.	8	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed .	9	775
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 2021 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input type="text"/> \$ <u>0</u> (2) On foundation managers. <input type="text"/> \$ <u>0</u>		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="text"/> \$ <u>0</u>		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>	2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="text"/> MN		
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) of each state as required by General Instruction G? <i>If "No," attach explanation.</i>	8b	Yes
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2020 or the taxable year beginning in 2020? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>	10	No

Part VII-A Statements Regarding Activities (continued)

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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>WWW.FPADVISORS.COM</u>	13	Yes	
14	The books are in care of ► <u>FAMILY PHILANTHROPY ADVISORS</u> Telephone no. ► <u>(612) 377-8400</u>			

Located at ► 1818 OLIVER AVENUE SOUTH MINNEAPOLIS MNZIP+4 ► 55405

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ► <input type="checkbox"/>			
	and enter the amount of tax-exempt interest received or accrued during the year ► 15			
16	At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ►			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

1a	During the year did the foundation (either directly or indirectly):		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions <input type="checkbox"/>	1b		No
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 2020? <input type="checkbox"/>	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
a	At the end of tax year 2020, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2020? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► 20____, 20____, 20____, 20____			
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.) <input type="checkbox"/>	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. ► 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2020 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2020.) <input type="checkbox"/>	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2020?	4b		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

		Yes	No
5a	During the year did the foundation pay or incur any amount to:		
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2)	Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.		5b
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d).	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.		6b No
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?		7b
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
FORD W BELL 1818 OLIVER AVENUE SOUTH MINNEAPOLIS, MN 55405	TRUSTEE 5.00	0	0	0
SAMUEL H BELL JR 1818 OLIVER AVENUE SOUTH MINNEAPOLIS, MN 55405	TRUSTEE 5.00	5,000	0	0
ELLEN GEORGE 1818 OLIVER AVENUE SOUTH MINNEAPOLIS, MN 55405	EXECUTIVE DIRECTOR 5.00	0	0	0
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.				0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. ►		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

1	Expenses

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ►	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities.	1a	5,731,978
b	Average of monthly cash balances.	1b	150,319
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	5,882,297
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	5,882,297
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	88,234
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	5,794,063
6	Minimum investment return. Enter 5% of line 5.	6	289,703

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	289,703
2a	Tax on investment income for 2020 from Part VI, line 5.	2a	3,055
b	Income tax for 2020. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	3,055
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	286,648
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	286,648
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	286,648

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	298,549
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	298,549
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	298,549

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2019	(c) 2019	(d) 2020
1 Distributable amount for 2020 from Part XI, line 7				286,648
2 Undistributed income, if any, as of the end of 2020:				
a Enter amount for 2019 only.			0	
b Total for prior years: 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2020:				
a From 2015.	37,927			
b From 2016.	99,403			
c From 2017.	149,913			
d From 2018.	50,604			
e From 2019.	37,777			
f Total of lines 3a through e.	375,624			
4 Qualifying distributions for 2020 from Part XII, line 4: ► \$ 298,549				
a Applied to 2019, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2020 distributable amount.				286,648
e Remaining amount distributed out of corpus	11,901			
5 Excess distributions carryover applied to 2020. (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	387,525			
b Prior years' undistributed income. Subtract line 4b from line 2b.		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b. Taxable amount—see instructions.		0		
e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions.			0	
f Undistributed income for 2021. 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 2015 not applied on line 5 or line 7 (see instructions).	37,927			
9 Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a.	349,598			
10 Analysis of line 9:				
a Excess from 2016.	99,403			
b Excess from 2017.	149,913			
c Excess from 2018.	50,604			
d Excess from 2019.	37,777			
e Excess from 2020.	11,901			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2020, enter the date of the ruling. ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2020	(b) 2019	(c) 2018	(d) 2017	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of 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 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 Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)
See Additional Data Table

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total ▶ 3a				259,133
b <i>Approved for future payment</i> See Additional Data Table				
Total ▶ 3b				15,000

Enter gross amounts unless otherwise indicated.

	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) (See instructions.)
1 Program service revenue:					
a _____					
b _____					
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	10	
4 Dividends and interest from securities.			14	83,161	
5 Net rental income or (loss) from real estate:					
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	177,036	
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 _____					
12 Subtotal. Add columns (b), (d), and (e).		0		260,207	0
13 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.)			13	260,207	260,207

[illegible]

Part XVII

		Yes	No
--	--	-----	----

--	--	--

1a(1)	No
1a(2)	No

--	--	--

1b(1)	No
--------------	-----------

1b(2)		No
--------------	--	-----------

1b(3)		No
--------------	--	-----------

1b(4)		No
--------------	--	-----------

1b(5)		No
--------------	--	-----------

1b(6)		No
--------------	--	-----------

1c		No
----	--	----

value
ue

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations

described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

<p>Sign Here</p> <p>*****</p> <hr/> <p>Signature of officer or trustee</p>	<p>2021-07-07</p> <hr/> <p>Date</p>	<p>*****</p> <hr/> <p>Title</p>
---	-------------------------------------	---------------------------------

May the IRS discuss this return with the preparer shown below

(see instr.) ☒ **Yes** ☐ **No**

May the IRS discuss this return with the preparer shown below

(see instr.) ☒ Yes ☐ No

Paid Preparer Use Only	JENNIFER TINGLEY		2021-07-07		
	Firm's name ► CLIFTONLARSONALLEN LLP				Firm's EIN ► 41-0746749
	Firm's address ► 220 S 6TH STREET SUITE 300 MINNEAPOLIS, MN 55402				Phone no. (612) 376-4500

P01485570

2021-07-07

Firm's EIN ► 41-0746749

Phone no. (612) 376-4500

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

FORD W BELL
SAMUEL H BELL JR

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AMERICAN ALLIANCE OF MUSEUMS 2451 CRYSTAL DRIVE ARLINGTON, VA 22202	NONE	PC	GENERAL OPERATIONS	25,000
AMERICAN ASSOC FOR STATE & LOCAL HISTORY 2021 21ST AVE S 320 NASHVILLE, TN 37212	NONE	PC	GENERAL OPERATIONS	5,000
AQUABILITY3218 W OVERLAND RD BOISE, ID 83705	NONE	PC	GENERAL OPERATIONS	2,000
Total ▶ 3a				259,133

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ASSOCIATES OF THE JAMES FORD BELL LIBRARY C/O 1818 OLIVER AVE S MINNEAPOLIS, MN 55405	NONE	PC	GENERAL OPERATIONS	5,000
BELL MUSEUM (UNIVERSITY OF MINNESOTA FOUNDATION) PO BOX 860266 MINNEAPOLIS, MN 55486	NONE	PC	GENERAL OPERATIONS	24,000
BELWIN CONSERVANCY BELWIN CONSERVANCY AFTON, MN 55001	NONE	PC	GENERAL OPERATIONS	500
Total ▶ 3a				259,133

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BLAKE SCHOOL THE110 BLAKE ROAD S HOPKINS, MN 55343	NONE	PC	GENERAL OPERATIONS	2,000
BOYS & GIRLS CLUBS OF INDIAN RIVER COUNTY 1729 17TH AVENUE VERO BEACH, FL 32960	NONE	PC	GENERAL OPERATIONS	2,000
BRAXTON STUNTZ FOUNDATION 2 UPPER RAGSDALE B230 MONTEREY, CA 93940	NONE	PC	GENERAL OPERATIONS	1,000
Total ▶ 3a				259,133

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHAGDUD GONPA FOUNDATION POST OFFICE BOX 279 JUNCTION CITY, CA 96048	NONE	PC	GENERAL OPERATIONS	1,000
CHILDCARE RESOURCES 2300 5TH AVE SUITE 149 VERO BEACH, FL 32960	NONE	PC	GENERAL OPERATIONS	5,000
CHILDREN'S HOME SOCIETY TREASURE COAST 650 10TH STREET VERO BEACH, FL 32960	NONE	PC	GENERAL OPERATIONS	3,000
Total ► 3a				259,133

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CLEVELAND CLINIC INDIAN RIVER FOUNDATION 1000 36TH STREET VERO BEACH, FL 32960	NONE	PC	GENERAL OPERATIONS	2,500
COLLEGE OF VETERINARY MEDICINE 1365 GORTNER AVENUE ST PAUL, MN 55108	NONE	PC	GENERAL OPERATIONS	8,000
CONNECTICUT COLLEGE 270 MOHEGAN AVE PKWY NEW LONDON, CT 06320	NONE	PC	GENERAL OPERATIONS	7,000
Total ▶ 3a				259,133

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DELTA WATERFOWL FOUNDATION 1312 BASIN AVE BISMARCK, ND 58504	NONE	PC	GENERAL OPERATIONS	13,333
EAGLEBROOK SCHOOL 271 PINE NOOK ROAD DEERFIELD, MA 01342	NONE	PC	GENERAL OPERATIONS	1,000
EDUCATION FOUNDATION OF INDIAN RIVER CTY PO BOX 7046 VERO BEACH, FL 32961	NONE	PC	GENERAL OPERATIONS	1,000
Total ▶ 3a				259,133

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ENVIRONMENTAL LEARNING CENTER INC 255 LIVE OAK DR VERO BEACH, FL 32963	NONE	PC	GENERAL OPERATIONS	500
FOOD BANK FOR MONTEREY COUNTY PO BOX 3965 SALINAS, CA 93912	NONE	PC	GENERAL OPERATIONS	1,500
HENNEPIN HEALTH FOUNDATION 701 PARK AVE LSB-3 MINNEAPOLIS, MN 55415	NONE	PC	GENERAL OPERATIONS	5,000
Total ▶ 3a				259,133

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HUMANE SOCIETY OF VERO BEACH PO BOX 644 VERO BEACH, FL 32961	NONE	PC	GENERAL OPERATIONS	2,000
INDIAN RIVER GOLF FOUNDATION PO BOX 1361 VERO BEACH, FL 32961	NONE	PC	GENERAL OPERATIONS	2,000
INDIAN RIVER HABITAT FOR HUMANITY 4568 N US HWY 1 VERO BEACH, FL 32967	NONE	PC	GENERAL OPERATIONS	1,000
Total ▶ 3a				259,133

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
INDIAN RIVER LAND TRUST 80 ROYAL PALM POINTE 301 VERO BEACH, FL 32960	NONE	PC	GENERAL OPERATIONS	1,000
MARDY FISH CHILDREN'S FOUNDATION PO BOX 648158 VERO BEACH, FL 32964	NONE	PC	GENERAL OPERATIONS	2,000
MAYO CLINIC4500 SAN PABLO RD S JACKSONVILLE, FL 32224	NONE	PC	GENERAL OPERATIONS	1,000
Total ▶ 3a				259,133

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MILLBROOK SCHOOLSCHOOL ROAD MILLBROOK, NY 12545	NONE	PC	GENERAL OPERATIONS	2,500
MINNEAPOLIS INSTITUTE OF ARTS 2400 THIRD AVENUE SOUTH MINNEAPOLIS, MN 55404	NONE	PC	GENERAL OPERATIONS	20,000
MINNESOTA HISTORICAL SOCIETY 345 KELLOGG BLVD W ST PAUL, MN 55102	NONE	PC	GENERAL OPERATIONS	16,000
Total ▶ 3a				259,133

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MINNESOTA ORCHESTRAL ASSOCIATION 1111 NICOLLET MALL MINNEAPOLIS, MN 55403	NONE	PC	GENERAL OPERATIONS	10,000
MINNESOTA PUBLIC RADIO 52 EAST 9TH ST ST PAUL, MN 55101	NONE	PC	GENERAL OPERATIONS	4,000
MINNESOTA ZOO FOUNDATION 13000 ZOO BOULEVARD APPLE VALLEY, MN 55124	NONE	PC	GENERAL OPERATIONS	3,000
Total ▶ 3a				259,133

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ORCAS ISLAND CHAMBER MUSIC FESTIVAL PO BOX 646 EASTSOUND, WA 98245	NONE	PC	GENERAL OPERATIONS	2,000
ORCAS ISLAND COMMUNITY FOUNDATION PO BOX 1496 EASTSOUND, WA 982451496	NONE	PC	GENERAL OPERATIONS	1,000
ORCAS OPEN ARTS (ORCAS ISLANDS JAZZ FESTIVAL) PO BOX 1843 EASTSOUND, WA 98245	NONE	PC	GENERAL OPERATIONS	1,000
Total			▶ 3a	259,133

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
QUAIL VALLEY CHARITIES 2345 HIGHWAY A1A VERO BEACH, FL 32963	NONE	PC	GENERAL OPERATIONS	300
REAL MISSION INC 6200 20TH ST SUITE 248 VERO BEACH, FL 32966	NONE	PC	GENERAL OPERATIONS	3,000
RIVERSIDE THEATRE POST OFFICE BOX 3788 VERO BEACH, FL 32963	NONE	PC	GENERAL OPERATIONS	15,000
Total ► 3a				259,133

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SCIENCE MUSEUM OF MINNESOTA 120 W KELLOGG BLVD ST PAUL, MN 55102	NONE	PC	GENERAL OPERATIONS	2,500
SENIOR RESOURCE ASSOCIATION 694 14TH STREET VERO BEACH, FL 32960	NONE	PC	GENERAL OPERATIONS	5,000
SMILE TRAIN633 THIRD AVENUE NEW YORK, NY 10017	NONE	PC	GENERAL OPERATIONS	500
Total ▶ 3a				259,133

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SOUTHWEST INDIAN FOUNDATION 100 WEST COAL AVENUE GALLUP, NM 87301	NONE	PC	GENERAL OPERATIONS	1,000
ST EDWARD'S SCHOOL 1895 ST EDWARDS DRIVE VERO BEACH, FL 32963	NONE	PC	GENERAL OPERATIONS	500
ST LAWRENCE UNIVERSITY 23 ROMODO DRIVE CANTON, NY 13617	NONE	PC	GENERAL OPERATIONS	1,000
Total ▶ 3a				259,133

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE LEARNING ALLIANCE PO BOX 643446 VERO BEACH, FL 32964	NONE	PC	GENERAL OPERATIONS	2,000
THE SOURCE1015 COMMERCE AVE VERO BEACH, FL 32960	NONE	PC	GENERAL OPERATIONS	25,000
UNITED AGAINST POVERTY 2746 US HWY 1 VERO BEACH, FL 32960	NONE	PC	GENERAL OPERATIONS	1,000
Total ▶ 3a				259,133

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
UNIVERSITY OF SOUTH DAKOTA FOUNDATION 414 E CLARK STREET VERMILLION, SD 57069	NONE	PC	GENERAL OPERATIONS	4,000
VERO BEACH ROWINGPO BOX 643063 VERO BEACH, FL 32964	NONE	PC	GENERAL OPERATIONS	2,000
VISITING NURSES ASSOCIATION & HOSPICE FOUNDATION OF INDIAN RIVER COUNTY 1110 35TH LANE VERO BEACH, FL 32960	NONE	PC	GENERAL OPERATIONS	2,000
Total ▶ 3a				259,133

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WALTER ANDERSON MUSEUM OF ART 510 WASHINGTON AVE OCEAN SPRINGS, MS 39564	NONE	PC	GENERAL OPERATIONS	2,000
WESTMINSTER PRESBYTERIAN CHURCH 1200 MARQUETTE AVE MINNEAPOLIS, MN 55403	NONE	PC	GENERAL OPERATIONS	1,000
WILD SALMON CENTER 721 NW NINTH AVENUE 300 PORTLAND, OR 97209	NONE	PC	GENERAL OPERATIONS	1,000
Total ▶ 3a				259,133

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WILDLIFE CONSERVATION NETWORK 209 MISSISSIPPI STREET SAN FRANCISCO, CA 94107	NONE	PC	GENERAL OPERATIONS	1,500
WOMENS REFUGE OF VERO BEACH INC 1850 LEMON AVE VERO BEACH, FL 32960	NONE	PC	GENERAL OPERATIONS	3,000
YOUTH SAILING FOUNDATION OF INDIAN RIVER COUNTY PO BOX 612 VERO BEACH, FL 32961	NONE	PC	GENERAL OPERATIONS	2,000
Total ▶ 3a				259,133

TY 2020 Accounting Fees Schedule**Name:** JAMES FORD BELL FOUNDATION**EIN:** 41-6023099

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	2,725	1,363		1,362

TY 2020 Investments Corporate Stock Schedule

Name: JAMES FORD BELL FOUNDATION
 EIN: 41-6023099

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
1,680 SHARES - APPLE INC	33,247	222,919
325 SHARES - AUTOMATIC DATA PROCESSING INC	16,049	57,265
410 SHARES - BAXTER INTL INC	13,339	32,898
200 SHARES - BECTON DICKINSON & COMPANY	15,063	50,044
75 SHARES - BLACKROCK INC	13,099	54,116
335 SHARES - CATERPILLAR INC	29,309	60,977
500 SHARES - COCA COLA COMPANY	19,229	27,420
250 SHARES - DEERE & CO	18,989	67,263
495 SHARES - EMERSON ELECTRIC CO	24,587	39,783
325 SHARES - EXXON MOBILE CORP	27,848	13,397
30 SHARES - GARRETT MOTION INC	187	133
300 SHARES - HONEYWELL INTL INC	16,709	63,810
125 SHARES - INTL BUSINESS MACHINES CORP	23,357	15,735
250 SHARES - JOHNSON & JOHNSON	17,301	39,345
341 SHARES - KRAFT HEINZ HOLDING CORP	14,302	11,819
300 SHARES - MCDONALDS CORP	27,070	64,374
500 SHARES - MONDELEX INTL INC	12,692	29,235
365 SHARES - OCCIDENTAL PETROLEUM CORP	27,435	5,898
300 SHARES - PEPSICO INC	21,028	44,490
275 SHARES - PROCTER & GAMBLE CO	17,843	38,264
390 SHARES - QUALCOMM INC	22,382	59,413
50 SHARES - RESIDEO TECHNOLOGIES INC	502	1,063
225 SHARES - SMUCKER JM CO	17,111	26,010
950 SHARES - TJX COMPANIES INC	21,359	64,875
425 SHARES - TAPESTRY INC	23,287	13,209
200 SHARES - 3M COMPANY	17,997	34,958
225 SHARES - UNITED PARCEL SVC INC	18,026	37,890
563 SHARES - VISA INC	21,545	123,145
1,055 SHARES - WELLS FARGO & COMPANY	36,277	31,840
300 SHARES - ACCENTURE PLC CL A IRELAND	17,631	78,363

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
200 SHARES - LINDE PLC	32,691	52,702
75 SHARES - ALCON INC	2,562	4,949
195 SHARES - CHUBB LTD	21,649	30,015
575 SHARES - TE CONNECTIVITY LTD	18,384	69,615
350 SHARES - NESTLE S.A. ADR SWITZERLAND	21,102	41,230
375 SHARES - NOVARTIS A.G. ADR SWITZERLAND	18,523	35,411
661 SHARES - ROCHE HLDG LTD ADR SWITZERLAND	16,238	28,978
300 SHARES - SCHLUMBERGER LTD	20,618	6,549

TY 2020 Investments - Other Schedule

Name: JAMES FORD BELL FOUNDATION

EIN: 41-6023099

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
1,548 SHARES - INVESCO FTSE RAFI US 1500	AT COST	88,730	233,655
5,672 SHARES - ISHARES INC MSCI AUSTRALIA INDEX	AT COST	118,077	135,844
13,628 SHARES - ISHARES RUSSELL MIDCAP INDEX	AT COST	371,998	934,199
1,782 SHARES - ISHARES COHEN STEERS REIT	AT COST	46,742	96,014
11,717 SHARES - ISHARES RUSSELL 1000 GROWTH	AT COST	720,819	2,825,437
2,218 - SHARES SPDR S&P 500 ETF TR	AT COST	250,333	829,266
2,032 SHARES - VANGUARD FTSE EMERGING MKTS EFT	AT COST	80,488	101,824

TY 2020 Other Expenses Schedule**Name:** JAMES FORD BELL FOUNDATION**EIN:** 41-6023099**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK CHARGES	654	0		654
STATE OF MN FILING FEE	25	0		25
COMPUTER EXPENSE	5,240	0		5,240
OFFICE SUPPLIES	135	0		135

TY 2020 Other Professional Fees Schedule**Name:** JAMES FORD BELL FOUNDATION**EIN:** 41-6023099

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT MANAGEMENT FEES	39,046	39,046		0
CONSULTING EXPENSE	27,000	0		27,000

TY 2020 Taxes Schedule

Name: JAMES FORD BELL FOUNDATION
EIN: 41-6023099

Taxes Schedule

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX	1,057	0		0