

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	39,792	103,173	103,173
	2 Savings and temporary cash investments	1,157,203	1,248,159	1,248,058
	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)	5,872,015	6,309,883	6,318,535
	b Investments—corporate stock (attach schedule)	11,907,536	12,443,249	19,938,975
	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)			
	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)	18,976,546	20,104,464	27,608,741	
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	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions	18,976,546	20,104,464	
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
	29 Total net assets or fund balances (see instructions)	18,976,546	20,104,464	
30 Total liabilities and net assets/fund balances (see instructions) .	18,976,546	20,104,464		

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	18,976,546
2 Enter amount from Part I, line 27a	2	1,127,918
3 Other increases not included in line 2 (itemize) ▶ _____	3	
4 Add lines 1, 2, and 3	4	20,104,464
5 Decreases not included in line 2 (itemize) ▶ _____	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	20,104,464

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			
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 8,817,718		8,067,334	750,384
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			750,384
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	750,384
	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	19,220
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	
3	Add lines 1 and 2.	3	19,220
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-.	5	19,220
6	Credits/Payments:		
a	2020 estimated tax payments and 2019 overpayment credited to 2020	6a	17,100
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	17,100
8	Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached.	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed .	9	2,120
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. ► \$ _____ (2) On foundation managers. ► \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ _____		
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) ► 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>HTTPS://WWW.DELUXE.COM/ABOUT/DELUXE-CARES/FOUNDATION/</u>	13	Yes	
14	The books are in care of ► <u>ANDREA KROSKA</u> Telephone no. ► <u>(651) 483-7111</u>			

Located at ► 3680 VICTORIA STREET NORTH SHOREVIEW MN ZIP+4 ► 551262966

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.

		Yes	No
1a	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? <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 checked="" type="checkbox"/> Yes <input 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	1b	No
	Organizations relying on a current notice regarding disaster assistance check here. ► <input type="checkbox"/>		
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?	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.)	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.)	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	
	Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>	
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
See Additional Data Table				

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

Total number of other employees paid over \$50,000. ▶

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

Total number of others receiving over \$50,000 for professional services. ►

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.

	Expenses
1 NONE	0
2	
3	
4	

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 NONE	
2	
All other program-related investments. See instructions.	
3	

Total. Add lines 1 through 3 ►

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	22,795,270
b	Average of monthly cash balances.	1b	1,513,781
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	24,309,051
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	24,309,051
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	364,636
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	23,944,415
6	Minimum investment return. Enter 5% of line 5.	6	1,197,221

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	1,197,221
2a	Tax on investment income for 2020 from Part VI, line 5.	2a	19,220
b	Income tax for 2020. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	19,220
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	1,178,001
4	Recoveries of amounts treated as qualifying distributions.	4	236
5	Add lines 3 and 4.	5	1,178,237
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	1,178,237

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	1,229,191
b	Program-related investments—total from Part IX-B.	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
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	1,229,191
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	1,229,191

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				1,178,237
2	Undistributed income, if any, as of the end of the 2020:				
a	Enter amount for 2019 only.				
b	Total for prior years: 20____, 20____, 20____				
3	Excess distributions carryover, if any, to 2020:				
a	From 2015.	1,306,486			
b	From 2016.	1,288,681			
c	From 2017.	1,166,179			
d	From 2018.	1,128,441			
e	From 2019.				
f	Total of lines 3a through e.	4,889,787			
4	Qualifying distributions for 2020 from Part XII, line 4: ► \$ 1,229,191				
a	Applied to 2019, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required—see instructions).				
c	Treated as distributions out of corpus (Election required—see instructions).				
d	Applied to 2020 distributable amount.				1,178,237
e	Remaining amount distributed out of corpus	50,954			
5	Excess distributions carryover applied to 2020. (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 indicated below:				
a	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	4,940,741			
b	Prior years' undistributed income. Subtract line 4b from line 2b.				
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.				
d	Subtract line 6c from line 6b. Taxable amount—see instructions.				
e	Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions.				
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).				
8	Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions).	1,306,486			
9	Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a.	3,634,255			
10	Analysis of line 9:				
a	Excess from 2016.	1,288,681			
b	Excess from 2017.	1,166,179			
c	Excess from 2018.	1,128,441			
d	Excess from 2019.				
e	Excess from 2020.	50,954			

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)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

	Tax year	Prior 3 years			(e) Total
	(a) 2020	(b) 2019	(c) 2018	(d) 2017	
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).)

NONE

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.

NONE

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:

See Additional Data Table

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

See Additional Data Table

c Any submission deadlines:

See Additional Data Table

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

See Additional Data Table

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	1,186,458
b <i>Approved for future payment</i> See Additional Data Table				
Total			3b	608,000

Enter gross amounts unless otherwise indicated.

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

[illegible]

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

- [illegible]

- | | | | |
|----------------------|--|---|--|
| Sign
Here | 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. | | |
| | <div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 2px;"></div> Signature of officer or trustee | <div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 2px;"></div> Date | <div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 2px;"></div> Title |

May the IRS discuss this return with the preparer shown below
 (see instr.) ☐ Yes ☒ No

Form **990-PF** (2020)

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
BARRY C MCCARTHY	PRESIDENT 001.00	0		
PO BOX 64235 SAINT PAUL, MN 551640235				
ANDREA KROSKA	VP SECRETARY 010.00	0		
PO BOX 64235 SAINT PAUL, MN 551640235				
EDWARD A MERRITT	TREASURER 001.00	0		
PO BOX 64235 SAINT PAUL, MN 551640235				
KEITH A BUSH	DIRECTOR 001.00	0		
PO BOX 64235 SAINT PAUL, MN 551640235				
JEFFREY L COTTER	DIRECTOR 001.00	0		
PO BOX 64235 SAINT PAUL, MN 551640235				
JANE ELLIOTT	DIRECTOR 001.00	0		
PO BOX 64235 SAINT PAUL, MN 551640235				
CHRIS THOMAS	DIRECTOR 001.00	0		
PO BOX 64235 SAINT PAUL, MN 551640235				
GARRY CAPERS JR	DIRECTOR 001.00	0		
PO BOX 64235 SAINT PAUL, MN 551640235				

Form 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

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

ALEX GOODWIN - FDN COORDINATOR
DELUXE CORP PO BOX 64235
SAINT PAUL, MN 551640235
(651) 483-7111

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

COMPLETE THE GRANT APPLICATION LOCATED ON THE DELUXE CORPORATION FOUNDATION WEBSITE.

- c** Any submission deadlines:

GRANT APPLICATIONS ARE ACCEPTED IN SPRING AND FALL CYCLES EACH YEAR.

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

QUALIFYING NONPROFIT ORGANIZATIONS MUST MEET GRANT FOCUS AREAS AND BE LOCATED IN DELUXE COMMUNITIES.

Form 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

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

ALEX GOODWIN - FDN COORDINATOR
DELUXE CORP PO BOX 64235
SAINT PAUL, MN 551640235
(651) 483-7111

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

MATCHES WILL AUTOMATICALLY BE APPLIED TO ELIGIBLE EMPLOYEE CONTRIBUTIONS.

c Any submission deadlines:

N/A

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

DONATIONS TO ELIGIBLE ORGANIZATIONS WILL BE MATCHED UP TO 2,000 US AND CAD PER EMPLOYEE PER YEAR.

Form 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

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

ALEX GOODWIN - FDN COORDINATOR
DELUXE CORP PO BOX 64235
SAINT PAUL, MN 551640235
(651) 483-7111

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

SUBMIT THE EMPLOYEE VOLUNTEER APPLICATION ON PHILANTHROPY CLOUD.

- c** Any submission deadlines:

REQUIRED HOURS MUST BE DONATED DURING A CALENDAR YEAR BY DELUXE EMPLOYEES.

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

DONATED TIME TO ELIGIBLE ORGANIZATIONS MAY BE MATCHED WITH CASH UP TO 500 PER EMPLOYEE PER YEAR.

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>				
22KILL13625 NEUTRON ROAD DALLAS, TX 75244		PC	GENERAL OPERATING SUPPORT	5,000
AMERICAN RED CROSS MINNESOTA REGION 1201 WEST RIVER PARKWAY MINNEAPOLIS, MN 55454		PC	GENERAL OPERATING SUPPORT	15,000
APPETITE FOR CHANGE INC 1200 WEST BROADWAY AVE NO 180 MINNEAPOLIS, MN 55411		PC	GENERAL OPERATING SUPPORT	14,000
Total ▶ 3a				1,186,458

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>				
ATHENAS WAREHOUSE INC 2290 ADAMS DR NW ATLANTA, GA 30318		PC	GENERAL OPERATING SUPPORT	5,000
ATLANTA COMMUNITY FOOD BANK INC 732 JOSEPH E LOWERY BLVD NW ATLANTA, GA 30318		PC	GENERAL OPERATING SUPPORT	2,500
BESTPREP 7100 NORTHLAND CIRCLE NORTH STE 120 BROOKLYN PARK, MN 55428		PC	GENERAL OPERATING SUPPORT	10,000
Total ▶ 3a				1,186,458

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>				
BRIDGING INCORPORATED 201 W 87TH STREET BLOOMINGTON, MN 55420		PC	GENERAL OPERATING SUPPORT	5,000
BRIDGING INCORPORATED 201 W 87TH STREET BLOOMINGTON, MN 55420		PC	TIME IS MONEY	200
BUCKS COUNTY SPCA 1665 STREET ROAD PO BOX 277 LAHASKA, PA 18931		PC	TIME IS MONEY	200
Total ▶ 3a				1,186,458

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>				
CPS COMMUNITY PARTNERS INC 7950 ELMBROOK DRIVE DALLAS, TX 75247		PC	GENERAL OPERATING SUPPORT	5,000
EDC STRATEGIC INITIATIVES FUND 300 WYANDOTTE ST NO 400 KANSAS CITY, MO 64105		SO I	GENERAL OPERATING SUPPORT	15,000
EDCAUSES INC 115 TOWN CENTER PARKWAY SUITE 103 HOSCHTON, GA 30517		PC	GENERAL OPERATING SUPPORT	5,000
Total ▶ 3a				1,186,458

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>				
EMERGENCY ASSISTANCE FOUNDATION INC 700 S DIXIE HIGHWAY WEST PALM BEACH, FL 33401		PC	PROGRAM SUPPORT - EMPLOYEE RELIEF FUND	338,251
FRIENDS OF WAUSAU HISTORIC LANDMARKS 319 PARK AVENUE WAUSAU, WI 54403		PC	TIME IS MONEY	500
GENESYS WORKS - TWIN CITIES 445 MINNESOTA STREET UNIT 720 ST PAUL, MN 55101		PC	GENERAL OPERATING SUPPORT	5,000
Total ▶ 3a				1,186,458

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>				
GIVING THE BASICS INC 927 S 7TH STREET KANSAS CITY, KS 66105		PC	GENERAL OPERATING SUPPORT	5,000
GREATER TWIN CITIES UNITED WAY 404 SOUTH EIGHTH STREET MINNEAPOLIS, MN 55404		PC	MATCHING GIFT AND TIME IS MONEY	243,232
HARRISON TOWNSHIP SCHOOL DISTRICT 120 N MAIN STREET MULLICA HILL, NJ 08062		GOV	TIME IS MONEY	500
Total ► 3a				1,186,458

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>				
HARVESTERS - THE COMMUNITY FOOD NETWORK 3801 TOPPING AVE KANSAS CITY, MO 64129		PC	GENERAL OPERATING SUPPORT	5,000
IOWA STATE UNIVERSITY FOUNDATION 2505 UNIVERSITY BLVD PO BOX 2230 AMES, IA 50010		PC	MATCHING GIFT	2,000
IRONDALE BASEBALL LEAGUE PO BOX 120693 NEW BRIGHTON, MN 55112		PC	TIME IS MONEY	300
Total ▶ 3a				1,186,458

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>				
JOHN BROWN UNIVERSITY 2000 W UNIVERSITY SILOAM SPRINGS, AR 72761		PC	MATCHING GIFT	300
JUNIOR ACHIEVEMENT OF GEORGIA INC 275 NORTHSIDE DR NW ATLANTA, GA 30314		PC	PROGRAM SUPPORT	15,000
JR ACHIEVEMENT OF THE UPPER MIDWEST INC 1745 UNIVERSITY AVENUE WEST ST PAUL, MN 55104		PC	BIZTOWN/FINANCE PARK	25,000
Total ▶ 3a				1,186,458

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>				
JR ACHIEVEMENT OF THE UPPER MIDWEST INC 1745 UNIVERSITY AVENUE WEST ST PAUL, MN 55104		PC	TIME IS MONEY	400
LITERACY ACTION INC 231 PEACHTREE ST NE ATLANTA, GA 30303		PC	GENERAL OPERATING SUPPORT	10,000
LOAVES AND FISHES TOO 721 KASOTA AVE SE MINNEAPOLIS, MN 55414		PC	GENERAL OPERATING SUPPORT	5,000
Total ▶ 3a				1,186,458

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>				
MERRIMACK VALLEY FOOD BANK INC 735 BROADWAY STREET LOWELL, MA 01854		PC	GENERAL OPERATING SUPPORT	5,000
MEDA - METROPOLITAN ECONOMIC DEV ASSOC 1256 PENN AVENUE NORTH NO 4800 MINNEAPOLIS, MN 55411		PC	GENERAL OPERATING SUPPORT	100,000
NAKA-KON JAPANESE CULTURAL EDUCATION ASSOCIATION 11184 ANTIOCH ROAD NO 344 OVERLAND PARK, KS 66210		PC	TIME IS MONEY	400
Total ▶ 3a				1,186,458

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>				
NAT'L CENTER FOR CIVIL AND HUMAN RIGHTS INC 250 WILLIAMS STREET NO 2322 ATLANTA, GA 30303		PC	GENERAL OPERATING SUPPORT	100,000
NETWORK FOR GOOD INC 1140 CONNECTICUT AVENUE NW NO 700 WASHINGTON, DC 20036		PC	MATCHING GIFT	137,625
NORTH PARK UNIVERSITY 3225 W FOSTER AVE CHICAGO, IL 60625		PC	MATCHING GIFT	150
Total ▶ 3a				1,186,458

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>				
OLATHE NORTH HIGH SCHOOL 600 E PRAIRIE STREET OLATHE, KS 66061		GOV	TIME IS MONEY	500
PIKES PEAK LIBRARY DISTRICT FOUNDATION INC 1175 CHAPEL HILLS DRIVE COLORADO SPRINGS, CO 80920		PC	TIME IS MONEY	400
PREPARE PROSPER 2610 UNIVERSITY AVENUE WEST STE 450 ST PAUL, MN 55114		PC	GENERAL OPERATING SUPPORT	5,000
Total ▶ 3a				1,186,458

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>				
PROJECT UNDERSTANDING OF SAN BUENAVENTURA 2734 JOHNSON DR STE E VENTURA, CA 93003		PC	TIME IS MONEY	500
SCORE FOUNDATION 1165 HERNDON PARKWAY NO 100 HERNDON, VA 20170		SO I	GENERAL OPERATING SUPPORT	10,000
SECOND HARVEST HEARTLAND 1140 GERVAIS AVENUE MAPLEWOOD, MN 55109		PC	GENERAL OPERATING SUPPORT	10,000
Total ▶ 3a				1,186,458

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>				
SHARING PLACE INC 1695 EAST 3300 SOUTH SALT LAKE CITY, UT 84106		PC	GENERAL OPERATING SUPPORT	2,500
SOUTH EAST METRO SHARKS SWIM CLUB PO BOX 251243 WOODBURY, MN 55125		PC	TIME IS MONEY	500
STABLE HANDS INC 225780 RIB MOUNTAIN DR PMB 243 WAUSAU, WI 54401		PC	TIME IS MONEY	200
Total ► 3a				1,186,458

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>				
SYMPHONY SOCIETY OF SAN ANTONIO 115 AUDITORIUM CIRCLE NO B7 SAN ANTONIO, TX 78205		PC	MATCHING GIFT	100
THE WHITE BEAR LAKE VOLLEYBALL ASSOCIATION PO BOX 270152 VADNAIS HEIGHTS, MN 55127		PC	TIME IS MONEY	500
TRUSTEES OF DARTMOUTH COLLEGE 7 LEBANON STREET SUITE 302 6015 HANOVER, NH 03755		PC	MATCHING GIFT	400
Total ▶ 3a				1,186,458

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>				
TWIN CITIES PUBLIC TELEVISION 172 E 4TH STREET ST PAUL, MN 55101		PC	GENERAL OPERATING SUPPORT	10,000
UNITED WAY OF GREATER ATLANTA - AAP 40 COURTLAND STREET ATLANTA, GA 30303		PC	GENERAL OPERATING SUPPORT	33,000
UNITED WAY OF MARATHON COUNTY INC 705 S 24TH AVE STE 400B WAUSAU, WI 54401		PC	TIME IS MONEY	500
Total ▶ 3a				1,186,458

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 NORTHWESTERN-ST PAUL 3003 SNELLING AVENUE NORTH ST PAUL, MN 55113		PC	MATCHING GIFT	1,000
UNIVERSITY OF WISCONSIN FOUNDATION 1848 UNIVERSITY AVENUE MADISON, WI 53726		PC	MATCHING GIFT	100
VALLEY OUTREACH 1911 CURVE CREST BLVD W STILLWATER, MN 55082		PC	TIME IS MONEY	200
Total ▶ 3a				1,186,458

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>				
VETERANS EMPOWERMENT ORGANIZATION OF GEORGIA INC 373 WEST LAKE AVENUE NW ATLANTA, GA 30318		PC	GENERAL OPERATING SUPPORT	10,000
VOLUNTEER CENTER OF GREENSBORO INC 1500 YANCEYVILLE STREET GREENSBORO, NC 27405		PC	TIME IS MONEY	500
WOMEN VENTURE 2021 EAST HENNEPIN AVENUE NO 200 MINNEAPOLIS, MN 55413		PC	GENERAL OPERATING SUPPORT	10,000
Total ▶ 3a				1,186,458

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>				
WOMENS BUSINESS DEVELOPMENT CENTER 8 S MICHIGAN AVENUE NO 400 CHICAGO, IL 60603		PC	GENERAL OPERATING SUPPORT	10,000
Total ▶ 3a				1,186,458

TY 2020 Investments Corporate Stock Schedule**Name:** DELUXE CORPORATION FOUNDATION**EIN:** 41-6034786**Software ID:** 20011422**Software Version:** 20.0.2.0**Investments Corporation Stock Schedule**

Name of Stock	End of Year Book Value	End of Year Fair Market Value
237043 shares of MFS INTL DIVERSIFICAT I	4,878,748	5,662,958
8023 shares of NTGI QM COM DAILY SP 500	5,529,214	11,195,294
15828 shares of VANGUARD SMALL CAP GROWTH INDEX	749,678	1,488,034
184767 shares of AMERICAN CENTURY SMALL CAP VAL	1,285,609	1,592,689

TY 2020 Legal Fees Schedule**Name:** DELUXE CORPORATION FOUNDATION**EIN:** 41-6034786**Software ID:** 20011422**Software Version:** 20.0.2.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FAEGRE DRINKER	6,419			6,419

TY 2020 Other Expenses Schedule**Name:** DELUXE CORPORATION FOUNDATION**EIN:** 41-6034786**Software ID:** 20011422**Software Version:** 20.0.2.0**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MISCELLANEOUS EXPENSES	169			169
SOFTWARE MAINTENANCE AGREEMENT	26,927			26,927
TAX FILING FEE	25			25
MEMBERSHIP DUES	6,050			6,050

TY 2020 Other Income Schedule**Name:** DELUXE CORPORATION FOUNDATION**EIN:** 41-6034786**Software ID:** 20011422**Software Version:** 20.0.2.0**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
GRANTS RECOVERED	236		

TY 2020 Other Professional Fees Schedule**Name:** DELUXE CORPORATION FOUNDATION**EIN:** 41-6034786**Software ID:** 20011422**Software Version:** 20.0.2.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT MANAGEMENT FEES	17,222	17,222		
INVESTMENT PERFORMANCE FEES	8,561	8,561		
CONSULTING FEES	3,143			3,143

TY 2020 Taxes Schedule**Name:** DELUXE CORPORATION FOUNDATION**EIN:** 41-6034786**Software ID:** 20011422**Software Version:** 20.0.2.0**Taxes Schedule**

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
2020 FEDERAL EXCISE TAX PAYMENTS	30,881			

Schedule B (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small>	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information.	OMB No. 1545-0047 2020
	Name of the organization DELUXE CORPORATION FOUNDATION	Employer identification number 41-6034786

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other 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 33¹/₃% 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 990PF, 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
DELUXE CORPORATION FOUNDATION

Employer identification number
41-6034786

Part I

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	DELUXE CORPORATION 3680 VICTORIA STREET NORTH SHOREVIEW, MN 55126	\$ 1,000,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
2	JOHN WILEY SONS INC 111 RIVER STREET HOBOKEN, NJ 07030	\$ 5,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)

Name of organization DELUXE CORPORATION FOUNDATION	Employer identification number 41-6034786
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Part II Noncash Property			
(a) No. from Part I	(b) Description of noncash property given <small>(see instructions). Use duplicate copies of Part II if additional space is needed.</small>	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	

41-6034786

Part III *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 information once. See instructions.)* ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)