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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491258010181

2020

OMB No. 1545-0052

**Return of Private Foundation** or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public. ▶ Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

or	caler	ndar year 2020, or tax year beginning 01-01-20	)20 , a	nd er	nding 12-31-	2020	
		indation IL POWER COMPANY FOUNDATION			A Employer id	entification numbe	r
		Johnson			83-2710944		
Num	ber and	striest (or P.O. box number if mail is not delivered to street address) SCADE ST	Room/suite		<b>B</b> Telephone nu	ımber (see instructior	ns)
2	13 3 CA	SCADE 51					
City	or town	, state or province, country, and ZIP or foreign postal code LLS, MN 565372801	•		C If exemption	application is pending	a. check here
LIC	303 I AL						<b>▶</b> ∟
G Cł	neck al		former public charity		1	ganizations, check he	▶ ∟
		☐ Final return ☐ Amended return				rganizations meeting ik here and attach cor	
		☐ Address change ☐ Name change	•		E If private for	undation status was t	erminated $\Box$
_	,	pe of organization: Section 501(c)(3) exempt private				n 507(b)(1)(A), chec	
			e private foundation  Cash	!	E If the founds	ation is in a 60 mouth	. tamainatian —
of '	year (f	rom Part II, col. (c),	Cash L Accru	ıaı		ation is in a 60-month n 507(b)(1)(B), checl	
line	€ 16)	* 336,524	be on cash basis.)				
Pa	rt I	Analysis of Revenue and Expenses (The total					(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and expenses per	(b)	Net investment	(c) Adjusted net	for charitable
		equal the amounts in column (a) (see instructions).)	books		income	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach	502,081				
	_	schedule)	302,001				
	2	Check ► ☐ if the foundation is <b>not</b> required to attach Sch. B					
	3	Interest on savings and temporary cash investments	148		148		
	4	Dividends and interest from securities					
	5a	Gross rents					
d)	b	Net rental income or (loss)					
Revenue	6a	Net gain or (loss) from sale of assets not on line 10					
eve	b	Gross sales price for all assets on line 6a					
œ	7 8	Capital gain net income (from Part IV, line 2)  Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less: Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	502,229		148		
	13	Compensation of officers, directors, trustees, etc.					
	14	Other employee salaries and wages					
es	15	Pension plans, employee benefits					
ens.	16a	Legal fees (attach schedule)	183		0		183
ă ×	ь	Accounting fees (attach schedule)	1,540		120		1,420
Operating and Administrative Expenses	С	Other professional fees (attach schedule)	0		0		(
}	17	Interest					
25	18	Taxes (attach schedule) (see instructions)					
≣	19	Depreciation (attach schedule) and depletion					
E C	20	Occupancy					
פ	21	Travel, conferences, and meetings					
ਰ ਹ	22 23	Printing and publications	42		0		42
Ē,	24	Total operating and administrative expenses.	42		-		
era e		Add lines 13 through 23	1,765		120		1,645
5	25	Contributions, gifts, grants paid	353,870				353,870
	26	Total expenses and disbursements. Add lines 24 and					
		25	355,635		120		355,51
	27	Subtract line 26 from line 12:					
	a	Excess of revenue over expenses and disbursements	146,594				
	ь	Net investment income (if negative, enter -0-)		<u> </u>	28		
	С	Adjusted net income (if negative, enter -0-)				0	

Page 2

336.524

	3	Accounts receivable			
		Less: allowance for doubtful accounts ▶	0	0	0
	4	Pledges receivable ▶0			
		Less: allowance for doubtful accounts ▶	0	0	0
	5	Grants receivable	0	0	0
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			_
ţ		Less: allowance for doubtful accounts ▶			
	8	Inventories for sale or use	0	0	0
sets	9	Prepaid expenses and deferred charges	0	0	0
As	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	C	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans	0	0	0
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment: basis ▶			

189,930

0 0

0

0

189,930

189,930

189,930

336,524

336,524

336,524

336,524

1

2

3 4

5

6

189,930

146,594

336,524

336,524 Form **990-PF** (2020)

## 15 16 17

18

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20 21

22

23

24

25

26 27

28

30

Part III

Liabilities

Assets or Fund Balances

Net 29

2

3

Less: accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule). . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . .

Foundations that do not follow FASB ASC 958, check here 🕨 🗀

Capital stock, trust principal, or current funds . . . . . . . . .

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

Total liabilities and net assets/fund balances (see instructions) .

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at beginning of year-Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

Paid-in or capital surplus, or land, bldg., and equipment fund

Foundations that follow FASB ASC 958, check here ▶

Other assets (describe > \_

Other liabilities (describe ▶\_

Grants payable

instructions. Also, see page 1, item I)

Accounts payable and accrued expenses .

and complete lines 24, 25, 29 and 30.

Net assets without donor restrictions .

and complete lines 26 through 30.

of-year figure reported on prior year's return)

Add lines 1, 2, and 3 . . . . . . Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Net assets with donor restrictions .

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			kind(s) of property sold (e.g se; or common stock, 200 s			How acqu P—Purch D—Donat	ase	<b>(c)</b> Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	1					2 201141			
	-								
•									
•									
	(a)		(f)		1 (	(g)		(1	h)
	<b>(e)</b> Gross sales price		Depreciation allowe	d		other basis			r (loss)
			(or allowable)		plus expe	ense of sale		(e) plus (r	) minus (g)
a									
<u>b</u>									
c d									
e e									
	Complete only for assets	showi	ing gain in column (h) and	owned h	v the foundation o	n 12/31/69		,	I)
			(i)			(k)		Gains (Col. (I	h) gain minus
	(i) F.M.V. as of 12/31/69		Adjusted basis			of col. (i)			less than -0-) <b>or</b>
			as of 12/31/69		over col.	. (j), if any		Losses (fro	om col.(h))
a									
b									
<u>d</u>									
е									
				í If gai	in, also enter in Pa	art I. line 7	1		
2	Capital gain net income	or (ne	et capital loss)		ss), enter -0- in P		}	_	
_					->		, ,	2	
3	=		(loss) as defined in section	-					
	in Part I, line 8	rt I, IIr	ne 8, column (c) (see instru	-			. }	3	
							<u> </u>		
Part	t V Qualification U	Jnder	Section 4940(e) for	Reduce	ed Tax on Net	Investme	nt Inc	come	
ECT	ION 4940(e) REPEA	LED (	ON DECEMBER 20, 20	19 - DO	NOT COMPLE	ETE			
1	Reserved								
	(a) Reserved		<b>(b)</b> Reserved		(c) Reserved			<b>(d)</b> Reserved	
							<u> </u>	<b>-</b>	
2	Reserved						2	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
3	Reserved						3		
4	Reserved						4		
5	Reserved						5		
6	Reserved						6		
7	Reserved						7		
8	Reserved ,						8		
-				_	- ,				

Page **6** 

Pai	t VII-B	Statements Regard	ling	Activities for Which	Form 4720 May Be	Required (c	ontinue	ed)				<u> </u>
5a	During the	year did the foundation p	ay o	r incur any amount to:	·						Yes	No
	(1) Carry	on propaganda, or otherw	ise a	ttempt to influence legisl	ation (section 4945(e))?	Г	Yes	. 2				
		nce the outcome of any sp				L	⊔ Yes	¥	No			
		rectly or indirectly, any vo					٦	<b>✓</b>				
	(3) Provid	le a grant to an individual	for t	avel, study, or other sim	ilar purposes?	Ļ	⊒ Yes		No			
	• •	le a grant to an organizati		, ,,		L	」 Yes	V	No			
		tion 4945(d)(4)(A)? See ir			· -		٦	. 🗷				
		le for any purpose other th					」 Yes	<b>V</b>	No			
		tional purposes, or for the		- ·		г	٦	. 🗷				
b		wer is "Yes" to 5a(1)-(5),		•		ceptions descri		✓	No			
_	•	ns section 53.4945 or in a		•		•				5b		No
	•	ons relying on a current n		, ,			. •	· —	, †			
С	-	wer is "Yes" to question 5a						Ш				
Ī		se it maintained expenditu			•	г	7					
		ttach the statement requir					ا Yes	✓	No			
6a		undation, during the year,				ıms on						
Va		l benefit contract?		, , , , , ,	munectly, to pay premi	JIIIS OII	_					
b		undation, during the year,			lirectly on a perconal be	nefit contract?	⊔ Yes	<b>✓</b>	No	6b		No
ь		ondation, during the year, 6b, file Form 8870.	pay	premiums, directly or mu	illectly, off a personal be	ment contract:		•	}	OD		NO
7-		•	- +b-	foundation a party to a p	rabibited tay shelter tra	neaction? F	_	_				
7a ե	,	ie during the tax year, was				L	」 Yes	$\checkmark$	No	7b		
b	•	id the foundation receive a		,				•	}	/ D		
8		ndation subject to the sect				in remuneration	1 OF	_				
		rachute payment during th				• •	_ Yes		No l			
Pai	33874 6 6 6 6	Information About C	offic	ers, Directors, Trust	tees, Foundation Ma	anagers, Hig	nly Pai	d Er	mploy	yees,		
		and Contractors										
_1_	List all of	ficers, directors, trustee							1			
	(a) Na	me and address	(	<b>b)</b> Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contrib employee bene					se acc	
	(4)	aria addi coo		devoted to position	-0-)	deferred cor			of	ther al	lowand	es
See A	Additional D	ata Table										
									<del>                                     </del>			
2	Compens	ation of five highest-pai	d en	ployees (other than t	hose included on line	L—see instruct	ions). I	[f no	ne, er	nter "l	NONE.	71
	-					(d) Contril						
(a)		ddress of each employee	paid	<b>(b)</b> Title, and average hours per week	(c) Compensation	employee					se acco	
	mo	ore than \$50,000		devoted to position		plans and comper		٦	ot	ner all	owanc	es
NON	<u> </u>					соттрет	341011					
11011	_											
								_				
Tota	I number of	other employees paid over	er \$5	0,000			<u> </u>					
									For	m <b>99</b> (	)-PF	(2020)

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Paid E	mployees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, enter "NOI	NE".
(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.		
Part IX-A Summary of Direct Charitable Activities	result at a tradicational information and a set the number of	
List the foundation's four largest direct charitable activities during the tax year. Include rele organizations and other beneficiaries served, conferences convened, research papers produced.		Expenses
1		
2		
3		
4		
Deleted Towns of Delete		
Part IX-B Summary of Program-Related Investments (see in Describe the two largest program-related investments made by the foundation during the		Amount
1	ie tax year on illes 1 and 2.	Amount
2		
All other program-related investments. See instructions.		
3		
-		
Total. Add lines 1 through 3		
		- 000 5= (0000)

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

Page 8

25.311

25.311

25.311

25.311

25.311

355,515

355.515

355.515

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6

2c

3

4

5

6

7

1a

1b

2

За 3h

4

5

Distributable amount before adjustments. Subtract line 2c from line 1. . . . . . . . . . . . . . . .

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . . . . . . . . .

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

income. Enter 1% of Part I, line 27b. See instructions.

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

organizations check here 

and do not complete this part.)

Tax on investment income for 2020 from Part VI, line 5. . . . . .

Income tax for 2020. (This does not include the tax from Part VI.). . .

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

the section 4940(e) reduction of tax in those years.

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Part X

6

1

2a

3

4 5

6

1

2

3

4

5

Part XII

Part XI

Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see 4 4 7,709 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4 506.216 5

Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

2a |

2b

Page 9

25,311

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Part XIII Undistributed Income (see instructions) (a) (b) (c) (d) Corpus Years prior to 2019 2019 2020 Distributable amount for 2020 from Part XI, line 7 25,311 2 Undistributed income, if any, as of the end of 2020: a Enter amount for 2019 only. . . . . .

**b** Total for prior years: 2018, 2017, 2016 Excess distributions carryover, if any, to 2020: a From 2015. . . . .

**b** From 2016. . . . . 297,410

c From 2017. . . . d From 2018. . . . . . e From 2019. . . . . f Total of lines 3a through e. . . . . . . 297.410 4 Qualifying distributions for 2020 from Part XII, line 4: ▶ \$

same amount must be shown in column (a).)

6 Enter the net total of each column as

**b** Prior years' undistributed income. Subtract 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 . . . . . . 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) . . .

9 Excess distributions carryover to 2021.

10 Analysis of line 9: a Excess from 2016. . . **b** Excess from 2017. . c Excess from 2018. . . .

d Excess from 2019. . . e Excess from 2020. . .

Subtract lines 7 and 8 from line 6a . . . .

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5

indicated below:

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. . . .

e Remaining amount distributed out of corpus

**5** Excess distributions carryover applied to 2020. (If an amount appears in column (d), the

297.410

330.204

330.204

627,614

	Private Operating Found	ations (see instri	uctions and Part V	11-A, question 9)		
1a	If the foundation has received a ruling or del foundation, and the ruling is effective for 20					
b	Check box to indicate whether the organizati	ion is a private opera	ating foundation des	cribed in section $\Box$	│ 4942(j)(3) or □	] 4942(j)(5)
2a		Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2020	<b>(b)</b> 2019	(c) 2018	(d) 2017	(6) 1000
	year listed					
	85% of line 2a					
С	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					
е	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:					
а	"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					
· ·	Supplementary Information			foundation had s	\$5,000 or more	in
1	assets at any time during th		ructions.)			
	Information Regarding Foundation Mana- List any managers of the foundation who hav before the close of any tax year (but only if	e contributed more				n
b	List any managers of the foundation who own ownership of a partnership or other entity) of				arge portion of the	
2	Information Regarding Contribution, Gra	ant, Gift, Loan, Scl	holarship, etc., Pro	ograms:		
	Check here ▶ ☐ if the foundation only mak	es contributions to p	reselected charitabl	e organizations and	does not accept	
	unsolicited requests for funds. If the founda other conditions, complete items 2a, b, c, a	tion makes gifts, gra	ants, etc. to individu			
a	The name, address, and telephone number of	or e-mail address of	the person to whom	applications should	be addressed:	
	Otter Tail Power Foundation					
	215 S Cascade St					
	Fergus Falls, MN 56537 foundation@otpco.com					
b	The form in which applications should be sub	omitted and informa	tion and materials th	ney should include:		
	The information for the Otter Tail Power Con			•	w.otpco.com about-	us otter-impact
_	foundation  Any outprisoin deadlines					
_ c	Any submission deadlines: N A					
d	Any restrictions or limitations on awards, sur factors:	ch as by geographic	al areas, charitable f	fields, kinds of institu	utions, or other	
	The Otter Tail Power Company Foundation d organizations that directly impact local commus ofter-impact foundation.					

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Part XV Supplementary Informa	ition (continued)			
3 Grants and Contributions Paid	During the Year or Appr	oved for Futi	ıre Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	353,870
<b>b</b> Approved for future payment South Dakota State University Box 511A Brookings, SD 57007			Scholarships	6,300
Total	-		<b>▶</b> 2h	6 300

Form **990-PF** (2020)

Down VVII A						
Part XVI-A	Analysis of Income-Producing	Activities				
Enter gross ar	nounts unless otherwise indicated.	1	usiness income		n 512, 513, or 514	(e) Related or exempt function income
_	ervice revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	(See instructions.)
-	contracts from government agencies					
2 Membersh	ip dues and assessments					
3 Interest o investmen	n savings and temporary cash ts		0		140	
	and interest from securities		0	14	148	0
5 Net rental	income or (loss) from real estate:					
	anced property					
	income or (loss) from personal property					
7 Other inve	estment income					
8 Gain or (lo	oss) from sales of assets other than					
•	e or (loss) from special events:					
10 Gross pro	fit or (loss) from sales of inventory					
11 Other rev	enue: <b>a</b>					
	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e)		0		148	0 148
	sheet in line 13 instructions to verify calcu					146
Line No.	Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	income is report	ed in column (e) of	f Part XVI-A contrib		
	instructions.)	empt purposes	Cother than by prov	Tuling runus for such		

Form 99	90-PF (										Pa	ge <b>13</b>
	XVII	Exempt Organi	zations						nships With Nonc			
		ganization directly or in than section 501(c)(3)								501	Yes	No
<b>a</b> Tran	nsfers f	from the reporting foun	dation to a n	oncha	ritable exe	empt organizati	ion of:					
(1)	Cash.									1a(1)		No
` '		assets								1a(2)		No
		sactions:	9 11 1							41.44		١
		of assets to a nonchari ases of assets from a n	•	_						. 1b(1) . 1b(2)		No No
		al of facilities, equipmer								. 1b(2)		No
		bursement arrangemen								1b(4)		No
		or loan guarantees.								1b(5)		No
		mance of services or m								1b(6)		No
<b>c</b> Sha	ring of	facilities, equipment, n	nailing lists, o	other a	assets, or <sub>l</sub>	paid employees	s			1c		No
of tl	he goo	ver to any of the above ds, other assets, or ser nsaction or sharing arra	vices given b	y the i	reporting f	oundation. If t	he four	ndation receive	d less than fair market	value		
(a) Line	No.	(b) Amount involved	(c) Name of	noncha	aritable exen	npt organization	(c	d) Description of	transfers, transactions, ar	d sharing arra	ngemer	nts
		ndation directly or indire in section 501(c) (other	•	•	'	•			_	✓ No		
		omplete the following s		1 301(	C)(3)) 01 11	ii section 527:				<b>L</b> 140		
	163, 6	(a) Name of organization			(b	Type of organiz	zation		(c) Description of	relationship		
					,				, , , ,	·		
Sign	of m	er penalties of perjury, y knowledge and belief h preparer has any kno	, it is true, co						than taxpayer) is base	d on all info	rmatio	n of
Here	,	*****				2021-09-15		*****		May the IRS d return with the prepa		
	<b>,</b>	Signature of officer or t	rustee			Date		Title		below (see instr.)	Yes [	□ <sub>No</sub>
		Print/Type preparer's	name	Prepa	arer's Sign	ature	Da	te	Chapte if palf			
									Check if self- employed ▶ □			
Paid												
Prep Use (		Firm's name ▶							Fire	m's EIN ▶		
J36 (	Jiii y	Firm's address ▶										
									Pho	one no.		

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred

			compensation	
Stephanie Hoff	President	0	0	0
215 South Cascade Street Fergus Falls, MN 56537	0.75			
Cary Stephenson	Vice President	0	0	0
215 South Cascade Street	0.75			

cary stephenson	Vice Fresident	ı	· · · · · · · · · · · · · · · · · · ·	
215 South Cascade Street Fergus Falls, MN 56537	0.75			
Peter Wasberg	Vice President	0	0	0
215 South Cascade Street Fergus Falls, MN 56537	0.75			
		_		_ 1

Fergus Falls, MN 56537				
Peter Wasberg	Vice President	0	0	0
215 South Cascade Street Fergus Falls, MN 56537	0.75			
Janelle Johnson	Treasurer	0	0	0
215 South Cascade Street Fergus Falls, MN 56537	0.75			

Peter Wasberg	Vice President	0	0	0
215 South Cascade Street Fergus Falls, MN 56537	0.75			
Janelle Johnson	Treasurer	0	0	0
215 South Cascade Street Fergus Falls, MN 56537	0.75			
Steve Schoeneck	Director	0	0	0

Janelle Johnson	Treasurer	0	0	0
215 South Cascade Street Fergus Falls, MN 56537	0.75			
Steve Schoeneck	Director	0	0	0
215 South Cascade Street	0.75			

215 South Cascade Street Fergus Falls, MN 56537	0.73			
Steve Schoeneck	Director	0	0	C
215 South Cascade Street Fergus Falls, MN 56537	0.75			

Steve Schoeneck 215 South Cascade Street Fergus Falls, MN 56537	Director 0.75	0	0	0
Rebecca Michael	Secretary	0	0	0

1.50

215 South Cascade Street Fergus Falls, MN 56537

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
GREATER FERGUS FALLS CORPORATION 128 E Lincoln Ave Ste A	PC	Operating support	50,000

Fergus Falls, MN 56537			
BEMIDJI STATE UNIVERSITY 1500 Birchmont Dr NE 7	PC	Scholarships	3
Damaidi: MNI ECCO1			

BEMIDJI STATE UNIVERSITY 1500 Birchmont Dr NE 7 Bemidji, MN 56601	PC	Scholarships	3,000
UNIVERSITY OF MINNESOTA CROOKSTON	GOV	Scholarships	3,000

Definition, Pint 50001			
UNIVERSITY OF MINNESOTA CROOKSTON	GOV	Scholarships	3,000
200 Oak Street SE Suite 500			
Minneapolis, MN 55455			

UNIVERSITY OF MINNESOTA	GOV	Scholarships	3,000
CROOKSTON		•	
200 Oak Street SE Suite 500			
Minneapolis, MN 55455			

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

,			
FERGUS FALLS AREA YMCA 1164 N Friberg Fergus Falls, MN 56537	PC	Server and computer upgrades.	10,000
GARRISON AREA RESOURCE CENTER	PC	Food expenses	2,500

GARRISON AREA RESOURCE CENTER AND FOOD PANTRY	PC	Food expenses	2,500
PO Box 1002 Garrison, ND 58540			
LAKE BECTON COMMUNITY COLLECT	DC.	Mind Francis Taskaslass	3,000

AND FOOD PANTRY PO Box 1002 Garrison, ND 58540			
LAKE REGION COMMUNITY COLLEGE FOUNDATION OF DEVILS LAKE 1801 College Drive N	PC	Wind Energy Technology scholarships	3,000

Garrison, ND 58540			
LAKE REGION COMMUNITY COLLEGE FOUNDATION OF DEVILS LAKE 1801 College Drive N Devils Lake, ND 58301	PC	Wind Energy Technology scholarships	3,000

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

a Paid during the year			
NORTH DAKOTA STATE UNIVERSITY DEVELOPMENT FOUNDATION 1241 N University Drive PO Box 5144 Fargo, ND 58105	PC	Scholarships	8,000

HEYENNE FIRE DEPARTMENTBox 204 nevenne, ND 58374	GOV	Fire hall addition	
argo, ND 58105			

or substantial contributor

Name and address (home or business)

Total .

SHEYENNE FIRE DEPARTMENTBox 204 Sheyenne, ND 58374	GOV	Fire hall addition	5,000
KULM VOLUNTEER FIRE DEPARTMENT PO Box 129	PC	Extrication rescue tools	1,500

Sheyenne, ND 58374	•	The flat addition	3,0
KULM VOLUNTEER FIRE DEPARTMENT PO Box 129	PC	Extrication rescue tools	1,5
Kulm ND 58456			

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business)

	or substantial contributor			
a Paid during the year				
BEULAH WELLNESS FOUNDATION 1900 Central Ave N		PC	Payment 3 of 4	2,500

Beulah, ND 58523			
FERGUS FALLS HOCKEY ASSOCIATION PO Box 691 Fergus Falls, MN 56537	PC	Payment 2 of 5	10,000

PO Box 691 Fergus Falls, MN 56537	PC	Payment 2 of 5	10,000
NORTH DAKOTA STATE COLLEGE OF SCIENCE FOUNDATION	PC	Scholarship	500

Fergus Falls, MIN 56537			
NORTH DAKOTA STATE COLLEGE OF	PC	Scholarship	500
SCIENCE FOUNDATION			
800 Sixth Street North			
Wahneton ND 58076			

NORTH DAKOTA STATE COLLEGE OF	PC	Scholarship	į 50
SCIENCE FOUNDATION			
800 Sixth Street North			
Wahpeton, ND 58076			

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
NORTHWEST TECHNICAL COLLEGE 905 Grant Avenue SE Bemidii MN 56601	PC	Wind energy scholarships	3,000

Bemiaji, Min 56601			
UNIVERSITY OF MINNESOTA FOUNDATION MORRIS 600 East 4th St		\$1,000: Rural Students Scholarship Fund \$1,000: Regular scholarship fund	

Total .

UNIVERSITY OF MINNESOTA FOUNDATION MORRIS 600 East 4th St Morris, MN 56334		\$1,000: Rural Students Scholarship Fund \$1,000: Regular scholarship fund	2,000
BREAST CANCER RESEARCH	PC	Power of Two	100

600 East 4th St Morris, MN 56334		Regular scholarship fund	
BREAST CANCER RESEARCH FOUNDATION 28 W 44th Street Suite 609	PC	Power of Two	100

1101110/1111 00001			1
BREAST CANCER RESEARCH FOUNDATION	PC	Power of Two	100
28 W 44th Street Suite 609			
New York, NY 10036			

За

BREAST CANCER RESEARCH FOUNDATION	PC	Power of Two	1
28 W 44th Street Suite 609 New York, NY 10036			

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
FERGUS FALLS AREA YMCA 1164 N Friberg Fergus Falls, MN 56537	PC	Power of Two	100

rergus rails, MN 36337			
BRECKENRIDGE WAHPETON SWIM TEAM	NC	Power of Two	
3297 US Hwy 75 Breckenridge, MN 56520			

Total .

TEAM 3297 US Hwy 75 Breckenridge, MN 56520			
HEALTH RESOURCES CENTER	PC	Power of Two	100

100

	Breckenridge, MN 56520			
П	HEALTH RESOURCES CENTER 126 E Lincoln Ave	PC	Power of Two	100
	Fergus Falls MN 56537			

HEALTH RESOURCES CENTER 126 E Lincoln Ave Fergus Falls, MN 56537	PC	Power of Two	100

ILALITA RESCONCES CENTER	' C	110000000100	100
126 E Lincoln Ave			
Fergus Falls, MN 56537			

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

	or substantial continuator			
a Paid during the year				
CLINTON FIRE DEPARTMENTPO Box 280		GOV	Power of Two	200

,			
BOTTINEAU FIRE DEPARTMENT PO Box 81 Bottineau, ND 58318	GOV	Power of Two	

Total .

Bottineau, ND 58318			
FERGUS FALLS YOUTH BASEBALL PO Box 1071 Fergus Falls, MN 56537	PC	Power of Two	100

200

353,870

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Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
DELTA WATERFOWL BIG STONE LAKE AREA CHAPTER 36631 650th Ave Ortonville, MN 56278	PC	Power of Two	100

0777/ 07 FFD 0110 F111 G D0170F		. = 5	
WAHPETON FIRE DEPARTMENT 204 5th St S Wahpeton, ND 58075	GOV	Power of Two	400
Ortonville, MN 56278			

WAHPETON FIRE DEPARTMENT 204 5th St S Wahpeton, ND 58075	GOV	Power of I wo	400
CITY OF FERGUS FALLS POLICE DEPARTMENT 122 W Junius Ave	GOV	AED	520

Wahpeton, ND 58075			
CITY OF FERGUS FALLS POLICE DEPARTMENT 122 W Junius Ave Fergus Falls, MN 56537	GOV	AED	520

Total		<b>&gt;</b> 3a	353 870
122 W Junius Ave Fergus Falls, MN 56537			
DEPARTMENT	201	, LES	320
CITY OF FERGUS FALLS POLICE	GOV	I AED	520

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business)

CITY OF BELTRAMIPO Box 6		GOV	Water supply control failure	1,000
a Paid during the year				
,	or substantial contributor			

eltrami, MN 56517			
TY OF FAIRMOUNTPO Box 132	GOV	Overhead wiring system for field	

Bel

Total.

CITY OF FAIRMOUNTPO Box 132 Fairmount, ND 58030		Overhead wiring system for field lighting structures	1,000
	·	· ·	<u>"</u>

airmount, ND 58030		lighting structures	
CITY OF WENDELLPO Box 98	GOV	Generator for water treatment	

, , , , , , , , , , , , , , , , , , ,		, ,	
CITY OF WENDELLPO Box 98	GOV	Generator for water treatment	1,000
Wendell, MN 56590		plant	

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
HARVEY AMBULANCE SERVICEPO Box 4 Harvey, ND 58341	PC	Cardiac monitor replacement	1,000
BOY SCOUTS OF AMERICA	PC	Oxcart Trails breakfast	1,500

BOY SCOUTS OF AMERICA 4200 19th Ave S Fargo, ND 58103	PC	Oxcart Trails breakfast	1,500
MINNESOTA WEST FOUNDATION 1011 First Street W	PC	Powerline and Electrical program scholarships	2,000

Fargo, ND 58103			
MINNESOTA WEST FOUNDATION 1011 First Street W Canby, MN 56220	PC	Powerline and Electrical program scholarships	2,000
Total	 	▶ 3a	353,870

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

recipient

353,870

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

any foundation manager

Name and address (home or business)

Fergus Falls, MN 56538

Name and address (nome or business)	or substantial contributor	•		
a Paid during the year				
PARKERS PRAIRIE COMMUNITY AMBULANCE PO Box 115 Parkers Prairie, MN 56361		PC	12-Lead EKG machine and Lucas device	2,000
CITY OF MILNORPO Box 70 Milnor, ND 58060		GOV	Observation deck near Storm Lake	2,500
	ı	I	1	I I

Parkers Prairie, MN 56361			
CITY OF MILNORPO Box 70 Milnor, ND 58060	GOV	Observation deck near Storm Lake	2,500
HABITAT FOR HUMANITY FERGUS FALLS PO Box 434	PC	2020 build	5,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
SALVATION ARMY622 E Vernon Ave Fergus Falls, MN 56537	PC	Operating support	5,000
UNIVERSITY OF NORTH DAKOTA FOUNDATION	PC	College of Engineering and Mines makerspace	5,000

FOUNDATION 3501 University Ave Stop 8 Grand Forks, ND 58202		makerspace	
OTTER TAIL COUNTY HISTORICAL SOCIETY 1110 Lincoln Ave W	PC	Founding Fergus Falls: A History book	10,000

353,870

3501 University Ave Stop 8 Grand Forks, ND 58202			
OTTER TAIL COUNTY HISTORICAL SOCIETY 1110 Lincoln Ave W Fergus Falls, MN 56537	PC	Founding Fergus Falls: A History book	10,00

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

recipient

▶ 3a

353,870

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

any foundation manager

or substantial contributor

Name and address (home or business)

	0. 00.000			
a Paid during the year				
CITY OF ARGYLEPO Box 288 Argyle, MN 56713		GOV	Ambulance equipment	2,000
NORTH DAKOTA COMMUNITY FOUNDATION PO Box 387 Bismarck, ND 58502		PC	New ice refrigeration system	5,000
	·			

FOUNDATION PO Box 387 Bismarck, ND 58502			
PIONEER SQUARE COMMUNITY CENTER	GOV	Roof repair	1,000

PO Box 387 Bismarck, ND 58502			
PIONEER SQUARE COMMUNITY CENTER PO Box 173	GOV	Roof repair	1,0
Brocket, ND 58321			

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

	or substantial contributor			
a Paid during the year				
UNIVERSITY OF NORTH DAKOTA 3501 University Ave S002		PC	Electrical Engineering scholarships	8,000

Grand Forks, ND 58202		- Sanarampe	
BISMARCK STATE COLLEGE FOUNDATION 1255 Schafter Street	PC	Energy scholarships	32,000
Ricmarck ND 59501			1

FOUNDATION 1255 Schafter Street Bismarck, ND 58501	۲	Energy Scholarships	52,000
SANFORD HEALTH FOUNDATION PO Box 2010	PC	Children's Miracle Network matching gift	3,000

Bismarck, ND 58501			
SANFORD HEALTH FOUNDATION PO Box 2010 Fargo, ND 58122		Children's Miracle Network matching gift	3,000

SANFORD HEALTH FOUNDATION PO Box 2010 Fargo, ND 58122		Children's Miracle Network matching gift	3,000
Total	 	<b>&gt;</b> 3a	353,870

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of

any foundation manager

or substantial contributor

Name and address (home or business)

	or substantial continuation			
a Paid during the year				
CENTRAL LAKES ROBOTICS 21780 110th Street Fergus Falls, MN 56537		PC	Team operations including purchase of robot parts and support for the team.	1,500
CITY OF GREENBUSH		GOV	Needed fire department items	3,000

recipient

Fergus Falls, MN 56537		support for the team.	
CITY OF GREENBUSH 248 4th Street North Box 98 Greenbush, MN 56726	GOV	Needed fire department items for the City of Greenbush Fire Department.	3,000
CITY OF SUNBURG	GOV	Funding for new LifePak 15	1,500

248 4th Street North Box 98 Greenbush, MN 56726		for the City of Greenbush Fire Department.	·
CITY OF SUNBURG 211 Izola Street PO Box 84 Sunburg, MN 56289	GOV	Funding for new LifePak 15 monitor defibrillator for the Sunburg Ambulance Service.	1,500

Greenbush, MN 56726			Department.	
CITY OF SUNBURG 211 Izola Street PO Box 84 Sunburg, MN 56289			Funding for new LifePak 15 monitor defibrillator for the Sunburg Ambulance Service.	1,500
Total			353.870	

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
INDEPENDENT SCHOOL DISTRICT 592 PO Box 67 111 E Climax, MN 56523	GOV	Plexiglass shields and barriers to help protect students and staff from COVID-19 at Climax-Shelly School.	1,500

500

Climax, MN 30323		School.	
FOOD FOR OUR LEARNING YOUTH 239 N Miles St Appleton, MN 56208	PC	Weekend meals for K-6 students at Appleton Milan Elementary School.	
KINDDED BUDLIC COUCOL	CO1/	C	

FOOD FOR OUR LEARNING YOUTH 239 N Miles St Appleton, MN 56208	PC	Weekend meals for K-6 students at Appleton Milan Elementary School.	
KINDRED PUBLIC SCHOOL 255 Dakota St Kindred ND 58051	GOV	Creating Opportunities for Personal Empowerment COPE	

Appleton, MN 56208		School.	
KINDRED PUBLIC SCHOOL 255 Dakota St Kindred, ND 58051		Creating Opportunities for Personal Empowerment COPE program implementation supplies.	500

Kindred, ND 58051		program implementation supplies.	353.870
KINDRED PUBLIC SCHOOL 255 Dakota St	GOV	Creating Opportunities for   Personal Empowerment COPE	500

255 Dakota St		Personal Empowerment COPE	
Kindred, ND 58051		program implementation	
		supplies.	

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
KITTSON COUNTY HISTORICAL SOCIETY 332 East Main Street Lake Bronson, MN 56734		PC	Building addition project at the museum.	3,000
	!			

Lake Bronson, MN 56734			
YOUNG LIFE FOUNDATION 128 1/2 W Lincoln Ave Fergus Falls, MN 56537	PC	Supporting the Young Life Walk with Me program for Young Life Otter Tail County.	1,500
PERHAM AREA COMMUNITY CENTER	PC	Repurposing high school into a	20,000

128 1/2 W Lincoln Ave Fergus Falls, MN 56537		with Me program for Young Life Otter Tail County.	_,
PERHAM AREA COMMUNITY CENTER 620 3rd Ave SE Perham, MN 56573		Repurposing high school into a new community center.	20,000

353,870

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
BIG STONE HEALTH CARE FOUNDATION 450 Eastvold Ave Ortonville, MN 56278	PC	On behalf of Erik Fladhammer and Kelly Stattelman via our Power of 2 Program.	200
I-94 BMX INC17358 Reed Creek Rd	PC	Funding of a larger electrical box	1,000

I-94 BMX INC17358 Reed Creek Rd Elizabeth, MN 56533	PC	Funding of a larger electrical box and wiring of concession registration building.	1,000
WEST CENTRAL INITIATIVEPO Box 318 Fergus Falls, MN 56538	PC	Pelican Rapids Pool Committee and city of Pelican Rapids MN seeking funding for acquatic	5,000

		registration building.	
WEST CENTRAL INITIATIVEPO Box 318 Fergus Falls, MN 56538	PC	Pelican Rapids Pool Committee and city of Pelican Rapids MN seeking funding for acquatic facility.	5,000

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
AMERICAN NATIONAL RED CROSS 1201 W River Parkway Minneapolis, MN 55454	PC	Home Fire Campaign of American Red Cross - Northern Minnesota Region.	1,000

		9	
FERGUS FALLS 544 EDUCATION FOUNDATION 518 Friberg Ave Fergus Falls, MN 56537		To fund grants for the foundation.	1,000

FOUNDATION 518 Friberg Ave Fergus Falls, MN 56537		foundation.	
BELTRAMI FIREFIGHTERS ASSOCIATION 22014 390th St SW	PC	Funding for new bunker gear personal protective equipment	5,000

518 Friberg Ave Fergus Falls, MN 56537		roundation.	
BELTRAMI FIREFIGHTERS ASSOCIATION	PC	Funding for new bunker gear	5,00

Fergus Falls, MN 56537			
BELTRAMI FIREFIGHTERS ASSOCIATION 22014 390th St SW Beltrami, MN 56517		Funding for new bunker gear personal protective equipment used by firefighters.	5,000

BELTRAMI FIREFIGHTERS ASSOCIATION 22014 390th St SW		Funding for new bunker gear personal protective equipment	5,00
Beltrami, MN 56517		used by firefighters.	

22014 390th St SW Beltrami, MN 56517	personal protective equipment used by firefighters.	
Total	 ▶ 3a	353,870

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
MUNICH PUBLIC SCHOOL DISTRICT #19 PO Box 39 Munich, ND 58352		Due to recent COVID restrictions purchasing iPads that students will use to complete coursework for grades K-6.	2,500

PO Box 39 Munich, ND 58352		will use to complete coursework for grades K-6.	
STEELE COUNTYPO Box 275 Finley, ND 58230	GOV	Transitioning to statewide trucking radio system.	2,000

	Munich, ND 58352		for grades K-6.	
	STEELE COUNTYPO Box 275 Finley, ND 58230	GOV	Transitioning to statewide trucking radio system.	2,000
1	MARKETPI ACE OF IDEASPO Boy 9	DC.	Virtualizing programming	2 500

STEELE COUNTYPO Box 275 Finley, ND 58230		Transitioning to statewide trucking radio system.	2,000
MARKETPLACE OF IDEASPO Box 9	PC	Virtualizing programming	2,500

Finley, ND 58230		trucking radio system.	
MARKETPLACE OF IDEASPO Box 9 Mantador, ND 58058	PC	Virtualizing programming	2,500

353,870

MARKETPLACE OF IDEASPO Box 9	PC	Virtualizing programming	2,5
Mantador, ND 58058			

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year			
UND FOUNDATION 3501 University Ave Stop 8157 Grand Forks, ND 58202	PC	Electrical engineering scholarships	8,000
LEEDS VOLUNTEER FIRE DEPARTMENT	PC	Department expansion	5,000

LEEDS VOLUNTEER FIRE DEPARTMENT P O Box 165 Leeds, ND 58346	PC	Department expansion	
UNIVERSITY OF JAMESTOWN	PC	Renovation project - track and	10

Leeds, ND 58346			
UNIVERSITY OF JAMESTOWN 6082 College Ln		Renovation project - track and football field facilties	10,000
Jamestown, ND 58405			

Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

SANFORD HEALTH FOUNDATION OF NORTHERN MINNESOTA 1300 Anne St NW Bemidji, MN 56601	PC	Heart and cardiovascular center	10,000
NORTHERN LIGHTS ARTS COUNCIL PO Box 162	PC	Summer concert series	1,000

NORTHERN LIGHTS ARTS COUNCIL PO Box 162 Langdon, ND 58249	PC	Summer concert series	1,000
DAKOTA COLLEGE AT BOTTINEAU FOUNDATION 105 Simrall Blvd	PC	Repurposing of Old Main	3,000

Langdon, ND 58249			
DAKOTA COLLEGE AT BOTTINEAU FOUNDATION 105 Simrall Blvd Bottineau, ND 58318	PC	Repurposing of Old Main	3,000

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353,870

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
INTERNATIONAL MUSIC CAMP 111 11th Ave SW Suite 3 Minot, ND 58701	PC	Music camp scholarships	2,500
UNITED WAY OF OTTER TAIL AND	PC	Annual commitment	15,250

UNITED WAY OF OTTER TAIL AND WADENA COUNTIES 120 E Washington Avenue Fergus Falls, MN 56537	PC	Annual commitment	15,250
ANNE CARLSEN CENTER	PC	2nd year of 5 year commitment	20,000

WADENA COUNTIES 120 E Washington Avenue Fergus Falls, MN 56537			15,255
ANNE CARLSEN CENTER 701 3rd St NW PO Box 8000	PC	2nd year of 5 year commitment	20,000

353,870

120 E Washington Avenue Fergus Falls, MN 56537			
ANNE CARLSEN CENTER 701 3rd St NW PO Box 8000 Jamestown, ND 58402	PC	2nd year of 5 year commitment	20,000

ANNE CARLSEN CENTER 701 3rd St NW PO Box 8000	PC	2nd year of 5 year commitment	20,00
Jamestown, ND 58402			

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

or substantial contributor

a Paid during the year			
RUGBY HIGH SCHOOL	GOV	3rd year of 4 year commitment	2,000

Rugby, ND 58368			
GREATER BEMIDJI INC102 1st St W	PC	Gift of Hope fund COVID-19	5,000

GREATER BEMIDJI INC102 1st St W Bemidji, MN 56601	PC	Gift of Hope fund COVID-19 relief	5,000
CITY OF IAMESTOWN102 3rd Ave SE	GOV	Fund for new ladder truck	25,000

Bemidji, MN 56601	PC	relief	5,000
CITY OF JAMESTOWN102 3rd Ave SE	GOV	Fund for new ladder truck	25,000

			İ
CITY OF JAMESTOWN102 3rd Ave SE Jamestown, ND 58401	GOV	Fund for new ladder truck	25,000

Jamestown, ND 58401	301	Talla for new ladder track	23,
Total	 	▶ 3a	353,870

efile GRAPHIC print - DO NOT P	ROCESS As Filed I	Data -	DL	N: 93491258010181		
TY 2020 Accounting Fees Schedule						
Name: OTTER TAIL POWER COMPANY FOUNDATION						
<b>EIN:</b> 83-2710944						
<b>Software ID:</b> 20012075						
<b>Software Version:</b> V1.0						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
Accounting Fees	1,540	120	0	1,420		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLN	N: 93491258010181	
TY 2020 Legal Fees Schedule				_	
Name	OTTER TAIL	POWER COMPANY	FOUNDATION		
EIN:	83-2710944				
Software ID:	<b>Software ID:</b> 20012075				
Software Version:	: V1.0				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
Legal Fees	183	0	0	183	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491258010181		
TY 2020 Other Expenses Schedule						
Name:	OTTER TAIL PO	WER COMPANY F	OUNDATION			
EIN:	<b>EIN:</b> 83-2710944					
<b>Software ID:</b> 20012075						
Software Version: V1.0						
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
Bank Charges	17	0	0	17		
State Registration Fee	25	0	0	25		

efile GRAPHIC print - De	NOT PROCESS As F	iled Data -				DLN: 93491258010181
Schedule B		Schedu	le of Contribut	ors		OMB No. 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	<b>▶</b> Go t		Form 990, 990-EZ, or 99 <u>v/Form990</u> for the latest			2020
Name of the organization OTTER TAIL POWER COMP	ANY FOUNDATION				Employer id	entification number
Organization type (chec	k one):				83-2710944	
	,					
Filers of:	Section:					
Form 990 or 990-EZ	☐ 501(c)( ) (ente	er number) or	ganization			
	☐ 4947(a)(1) none	exempt chari	table trust <b>not</b> treated	as a private founda	tion	
	☐ 527 political org	janization				
Form 990-PF	<b>✓</b> 501(c)(3) exemp	pt private fou	ındation			
	☐ 4947(a)(1) none	exempt chari	table trust treated as a	private foundation		
	☐ 501(c)(3) taxabl	le private fou	ndation			
	cion filing Form 990, 990-l property) from any one co					
Special Rules						
under sections 50 received from any	on described in section 50 9(a)(1) and 170(b)(1)(A)( one contributor, during the 11h, or (ii) Form 990-EZ,	vi), that chec he year, tota	ked Schedule A (Form I contributions of the gi	n 990 or 990-EZ), P	art II, line 13,	16a, or 16b, and that
during the year, to	on described in section 50 otal contributions of more ne prevention of cruelty to	than \$1,000	exclusively for religiou	s, charitable, scient		
during the year, of If this box is check purpose. Don't co	on described in section 50 contributions exclusively for ked, enter here the total complete any of the parts unle, etc., contributions total	or religious, contributions nless the <b>Ge</b>	charitable, etc., purpose that were received dur neral Rule applies to t	es, but no such con ing the year for an his organization be	tributions total exclusively rel cause it receiv	led more than \$1,000. ligious, charitable, etc., ved <i>nonexclusively</i>
Caution: An organization 990-EZ, or 990-PF), but or on its Form 990PF, Pa 990-EZ, or 990-PF).	t <b>must</b> answer "No" on Pa	art IV, line 2,	of its Form 990; or che	eck the box on line	H of its Form 9	n 990, 990-EZ
For Paperwork Reduction Affor Form 990, 990-EZ, or 990	t Notice, see the Instructions	s	Cat. No. 30613X	Schedu	ıle B (Form 990,	990-EZ, or 990-PF) (2020)

Employer identification number 83-2710944

STIER TAIL FOW	ER COMPANT FOUNDATION	83-2710944	
Part I Contributors	Contributors (see instructions). Use duplicate copies of Part I if ad	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Otter Tail Power Company  215 South Cascade Street	\$ 502,081	✓ Person  ☐ Payroll  ☐ Noncash
	Fergus Falls, MN 56537		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)