

Form **990-PF**Department of the Treasury
Internal Revenue Service**Return of Private Foundation****or Section 4947(a)(1) Trust Treated as Private Foundation**

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

2022**Open to Public Inspection****For calendar year 2022, or tax year beginning 01-01-2022, and ending 12-31-2022**

Name of foundation HUMBOLDT FAMILY FOUNDATION		A Employer identification number 41-1852021	
Number and street (or P.O. box number if mail is not delivered to street address) PO BOX 520		B Telephone number (see instructions) (952) 857-9840	
City or town, state or province, country, and ZIP or foreign postal code LONG LAKE, MN 55356		C If exemption application is pending, check here ► <input type="checkbox"/>	
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here ► <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ... ► <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ► <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ► \$ <u>3,081,006</u>	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	<i>(Part I, column (d) must be on cash basis.)</i>	

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	265,950			
	2 Check ► <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	280	280	280	
	4 Dividends and interest from securities	54,779	54,779	54,779	
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	125,052			
	b Gross sales price for all assets on line 6a	582,901			
	7 Capital gain net income (from Part IV, line 2)		125,052		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less: Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	446,061	180,111	55,059	
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	0	0	0	0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	3,055	2,750	0	305
	c Other professional fees (attach schedule)	21,650	16,237	0	5,413
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	4,055	3,058	0	1,064
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	25	0	0	25
	24 Total operating and administrative expenses.				
	Add lines 13 through 23	28,785	22,045	0	6,807
	25 Contributions, gifts, grants paid	135,500			135,500
	26 Total expenses and disbursements. Add lines 24 and 25	164,285	22,045	0	142,307
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	281,776			
	b Net investment income (if negative, enter -0-)		158,066		
	c Adjusted net income (if negative, enter -0-)			55,059	

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		114,790	89,795	89,795
2	Savings and temporary cash investments				
3	Accounts receivable ►				
	Less: allowance for doubtful accounts ►				
4	Pledges receivable ►				
	Less: allowance for doubtful accounts ►				
5	Grants receivable				
6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
7	Other notes and loans receivable (attach schedule) ►				
	Less: allowance for doubtful accounts ►				
8	Inventories for sale or use				
9	Prepaid expenses and deferred charges				
10a	Investments—U.S. and state government obligations (attach schedule)				
b	Investments—corporate stock (attach schedule)		1,631,580	1,723,494	2,991,211
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)		1,746,370	1,813,289	3,081,006
Liabilities					
17	Accounts payable and accrued expenses				
18	Grants payable				
19	Deferred revenue				
20	Loans from officers, directors, trustees, and other disqualified persons				
21	Mortgages and other notes payable (attach schedule)				
22	Other liabilities (describe ►)				
23	Total liabilities (add lines 17 through 22)		0	0	
Net Assets or Fund Balances					
	Foundations that follow FASB ASC 958, check here ► <input type="checkbox"/>				
	and complete lines 24, 25, 29 and 30.				
24	Net assets without donor restrictions				
25	Net assets with donor restrictions				
	Foundations that do not follow FASB ASC 958, check here ► <input checked="" type="checkbox"/>				
	and complete lines 26 through 30.				
26	Capital stock, trust principal, or current funds		1,197,457	1,197,457	
27	Paid-in or capital surplus, or land, bldg., and equipment fund		0	0	
28	Retained earnings, accumulated income, endowment, or other funds		548,913	615,832	
29	Total net assets or fund balances (see instructions)		1,746,370	1,813,289	
30	Total liabilities and net assets/fund balances (see instructions)		1,746,370	1,813,289	

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	1,746,370
2	Enter amount from Part I, line 27a	2	281,776
3	Other increases not included in line 2 (itemize) ►	3	0
4	Add lines 1, 2, and 3	4	2,028,146
5	Decreases not included in line 2 (itemize) ►	5	214,857
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29	6	1,813,289

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 FIDELITY - SEE ATTACHED		P		2022-12-31
b FIDELITY - SEE ATTACHED		P		2022-12-31
c FIDELITY		P		2022-12-31
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 86,273		122,935	-36,662	
b 495,227		334,914	160,313	
c 1,401			1,401	
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				(I) 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			-36,662	
b			160,313	
c			1,401	
d				
e				
2 Capital gain net income or (net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7		2	125,052
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		3	-36,662

Part V 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.	1	2,197
	Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)		
b	All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations enter 4% (0.04) of Part I, line 12, col. (b)	2	0
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	3	2,197
3	Add lines 1 and 2.	4	0
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	5	2,197
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		
6	Credits/Payments:		
a	2022 estimated tax payments and 2021 overpayment credited to 2022	6a	5,283
b	Exempt foreign organizations—tax withheld at source	6b	0
c	Tax paid with application for extension of time to file (Form 8868)	6c	0
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	5,283
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2221 is attached.	8	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ►	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ►	10	3,086
11	Enter the amount of line 10 to be: Credited to 2023 estimated tax ► 3,086	11	0

Part VI-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 the instructions for the definition.	1b	No
	<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>		
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. ► \$ _____ 0 (2) On foundation managers. ► \$ _____ 0		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ _____ 0		
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 XIV.</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 2022 or the taxable year beginning in 2022? See the instructions for Part XIII. <i>If "Yes," complete Part XIII</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 VI-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 ►N/A	13	Yes
14	The books are in care of ►JOYCE HUMBOLDT	Telephone no. ►(952) 857-9840	
Located at ►PO BOX 520 LONG LAKE MN			ZIP+4 ►55356
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here.	►	<input type="checkbox"/> 15
16	At any time during calendar year 2022, 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? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ►	16	Yes No

Part VI-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?. (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?. (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?. (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?. (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)?. (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.).	1a(1)	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	
c	Organizations relying on a current notice regarding disaster assistance check here. ►		<input type="checkbox"/>
d	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 2022?	1d	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 2022, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2022? If "Yes," list the years ► 20____, 20____, 20____, 20____	2a	No
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?	3a	No
b	If "Yes," did it have excess business holdings in 2022 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 2022.)	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 2022?	4b	No

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

5a	During the year did the foundation pay or incur any amount to:	Yes	No
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?.	5a(1)	No
(2)	Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?.	5a(2)	No
(3)	Provide a grant to an individual for travel, study, or other similar purposes?.	5a(3)	No
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	5a(4)	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?.	5a(5)	No
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.	5b	
c	Organizations relying on a current notice regarding disaster assistance check ►		
d	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?.	5d	
If "Yes," attach the statement required by Regulations section 53.4945–5(d).			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?.	6a	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?	7a	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?.	8	No

Part VII 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
JOYCE HUMBOLDT 4842 SW BIMINI CIRCLE NO PALM CITY, FL 34990	PRESIDENT 0.50	0	0	0
ROBERT HUMBOLDT 4842 SW BIMINI CIRCLE NO PALM CITY, FL 34990	DIRECTOR 0.50	0	0	0
SUSAN SALONEN 23875 ELDER TURN SHOREWOOD, MN 55331	DIRECTOR 0.50	0	0	0
KAREN HOFFMAN 13661 DULUTH DRIVE APPLE VALLEY, MN 55124	DIRECTOR 0.50	0	0	0
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000. ►				0

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

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

Part VIII-A Summary of Direct Charitable Activities

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

1	Expenses
2	
3	
4	

Part VIII-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.

1	Amount
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ►	0

Part IX 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	3,149,714
b	Average of monthly cash balances.	1b	227,066
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	3,376,780
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	3,376,780
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions).	4	50,652
5	Net value of noncharitable-use assets. Subtract line 4 from line 3..	5	3,326,128
6	Minimum investment return. Enter 5% (0.05) of line 5.	6	166,306

Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreignorganizations check here ► and do not complete this part.)

1	Minimum investment return from Part IX, line 6.	1	166,306
2a	Tax on investment income for 2022 from Part V, line 5.	2a	2,197
b	Income tax for 2022. (This does not include the tax from Part V.).	2b	
c	Add lines 2a and 2b.	2c	2,197
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	164,109
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	164,109
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1.	7	164,109

Part XI 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	142,307
b	Program-related investments—total from Part VIII-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4..	4	142,307

Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2021	(c) 2021	(d) 2022
1 Distributable amount for 2022 from Part X, line 7				164,109
2 Undistributed income, if any, as of the end of 2022:				
a Enter amount for 2021 only.			134,106	
b Total for prior years: 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2022:				
a From 2017.				
b From 2018.				
c From 2019.				
d From 2020.				
e From 2021.				
f Total of lines 3a through e.	0			
4 Qualifying distributions for 2022 from Part XI, line 4: ► \$ _____ 142,307				
a Applied to 2021, but not more than line 2a			134,106	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2022 distributable amount.				8,201
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2022. <i>(If an amount appears in column (d), the same amount must be shown in column (a).)</i>		0		0
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
b Prior years' undistributed income. Subtract line 4b from line 2b.		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.			0	
d Subtract line 6c from line 6b. Taxable amount—see instructions			0	
e Undistributed income for 2021. Subtract line 4a from line 2a. Taxable amount—see instructions				0
f Undistributed income for 2022. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2023				155,908
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0			
8 Excess distributions carryover from 2017 not applied on line 5 or line 7 (see instructions)	0			
9 Excess distributions carryover to 2023. Subtract lines 7 and 8 from line 6a	0			
10 Analysis of line 9:				
a Excess from 2018.				
b Excess from 2019.				
c Excess from 2020.				
d Excess from 2021.				
e Excess from 2022.				

Part XIII **Private Operating Foundations** (see instructions and Part VI-A, question 9)

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

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

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

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

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

- c** Any submission deadlines:

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

Part XIV **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 ATTACHED	135,500
SEE ATTACHED PO BOX 520 LONG LAKE, MN 55356				
Total			► 3a	
b <i>Approved for future payment</i>				
Total			► 3b	0

Part XV-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue:					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	280	
5 Net rental income or (loss) from real estate:			14	54,779	
a Debt-financed property.					
b Not debt-financed property.					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					125,052
9 Net income or (loss) from special events:					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue: a _____					
b _____					
c _____					
d _____					
e _____					
12 Subtotal. Add columns (b), (d), and (e)		0		55,059	125,052
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)					180,111

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

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

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting foundation to a noncharitable exempt organization of:

(1) Cash.	1a(1)	No.
(2) Other assets.	1a(2)	No.

b Other transactions:

(1) Sales of assets to a noncharitable exempt organization.	1b(1)	No
(2) Purchases of assets from a noncharitable exempt organization.	1b(2)	No

of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

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

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

b If "Yes," complete the following schedule.

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

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

Sign Here	*****	2023-04-14	*****	May the IRS discuss this return with the preparer shown below?
				<input type="checkbox"/>
				See instructions. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Paid Preparer Use Only	Print/Type preparer's name JUDE ANHELUK	Preparer's Signature	Date 2023-04-14	Check if self-employed ► <input type="checkbox"/>	PTIN P00939161
	Firm's name ► BOULAY PLLP				Firm's EIN ► 41-0887288
	Firm's address ► 11095 VIKING DRIVE-STE 500 MINNEAPOLIS, MN 55344				Phone no. (952) 893-9320

TY 2022 Accounting Fees Schedule

Name: HUMBOLDT FAMILY FOUNDATION**EIN:** 41-1852021

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING AND TAX PREPARATION	3,055	2,750	0	305

TY 2022 Investments Corporate Stock Schedule

Name: HUMBOLDT FAMILY FOUNDATION

EIN: 41-1852021

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
CORPORATE STOCK	1,723,494	2,991,211

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491105009043
TY 2022 Other Decreases Schedule		
Name: HUMBOLDT FAMILY FOUNDATION		
EIN: 41-1852021		
Description	Amount	
ASSET ADJUSTMENT (CONTRIB/DONATE) ON BALANCE SHEET		214,857

TY 2022 Other Expenses Schedule

Name: HUMBOLDT FAMILY FOUNDATION
EIN: 41-1852021

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MINNESOTA FILING FEE	25	0	0	25

TY 2022 Other Professional Fees Schedule

Name: HUMBOLDT FAMILY FOUNDATION

EIN: 41-1852021

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BROKERAGE FEES	21,650	16,237	0	5,413

TY 2022 Taxes Schedule

Name: HUMBOLDT FAMILY FOUNDATION**EIN:** 41-1852021

Taxes Schedule

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES PAID	67	67	0	67
FOUNDATION TAXES PAID	3,988	2,991	0	997

Schedule B

(Form 990)

Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

OMB No. 1545-0047

- Attach to Form 990, 990-EZ, or 990-PF.
- Go to www.irs.gov/Form990 for the latest information.

2022Name of the organization
HUMBOLDT FAMILY FOUNDATIONEmployer identification number
41-1852021**Organization type** (check one):**Filers of:****Section:**

Form 990 or 990-EZ

- 501(c)() (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

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

- 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
HUMBOLDT FAMILY FOUNDATIONEmployer identification number
41-1852021

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	JOYCE HUMBOLDT TRUST PO BOX 520 LONG LAKE, MN 55356	\$ 265,950	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input checked="" 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.)
		\$	<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
HUMBOLDT FAMILY FOUNDATION

Employer identification
number
41-1852021

Part II **Noncash Property** (see Instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
—	See Additional Data Table	\$ _____	_____
(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
—		\$ _____	_____

Name of organization HUMBOLDT FAMILY FOUNDATION		Employer identification number 41-1852021	
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.			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
(e) Transfer of gift Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
(e) Transfer of gift Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
(e) Transfer of gift Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
(e) Transfer of gift Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	

Additional Data

Software ID:**Software Version:**

EIN: 41-1852021

Name: HUMBOLDT FAMILY FOUNDATION

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	110 SHS - APPLE INC (2,174.70)	\$ 19,515	2022-01-05
1	300 SHS - AMBARELLA INC (14,787.89)	\$ 54,516	2022-01-05
1	125 SHS - BIO-TECHNE CORP (11,454.30)	\$ 56,450	2022-01-05
1	600 SHS - FREEPORT MCMORAN (6,826.14)	\$ 25,572	2022-01-05
1	500 SHS - FREEPORT MCMORAN (3,147.25)	\$ 21,310	2022-01-05
1	200 SHS - MAXLINEAR INC (3,172.00)	\$ 14,442	2022-01-05
1	2,950 SHS - NEOPHOTONICS CORP (11,556.04)	\$ 45,076	2022-01-05
1	125 SHS - TARGET CORP (6,170)	\$ 29,069	2022-01-05

3 Grants and Contributions Paid During the Year

2022		If recipient is an individual, show any relationship to any foundation manager or substantial contributor		Purpose of grant or contribution		Amount		Check #		Date Cleared	
Recipient Name and Physical Address (where available - home or business)	Recipient Mailing Address	Foundation status of recipient									
ACADEMY OF HOLY ANGELS 6600 NICOLLET AVE S MINNEAPOLIS, MN 55423	ACADEMY OF HOLY ANGELS 6600 NICOLLET AVE S MINNEAPOLIS, MN 55423	NONE	PC	EDUCATIONAL PROGRAM SUPPORT	3,000	1165				10/25/2022	
ACADEMY PREP OF TAMPA 1407 E. COLUMBUS DRIVE TAMPA, FL 33605	ACADEMY PREP OF TAMPA 1407 E. COLUMBUS DRIVE TAMPA, FL 33605	NONE	PC	EDUCATIONAL PROGRAM SUPPORT	4,000	1166				10/28/2022	
ALIGHT 615 1ST AVE NE, STE 500 MINNEAPOLIS, MN 55413	ALIGHT 615 1ST AVE NE, STE 500 MINNEAPOLIS, MN 55413	NONE	PC	PROGRAM SUPPORT	3,000	1167				10/17/2022	
CATHOLIC CHARITIES OF ST PAUL AND MINNEAPOLIS 1200 2ND AVE. S MINNEAPOLIS, MN 55403	CATHOLIC CHARITIES OF ST PAUL AND MINNEAPOLIS 1200 2ND AVE. S MINNEAPOLIS, MN 55403	NONE	PC	PROGRAM SUPPORT	4,000	1168				10/17/2022	
CNEWA - CATHOLIC NEAR EAST WELFARE ASSOC 1011 FIRST AVENUE, #15 NEW YORK, NY 10022	CNEWA - CATHOLIC NEAR EAST WELFARE ASSOC 1011 FIRST AVENUE, #15 NEW YORK, NY 10022	NONE	PC	PROGRAM SUPPORT	1,000	1169				10/18/2022	
CRS - CATHOLIC RELIEF SERVICES 228 W LEXINGTON STREET BALTIMORE, MD 21201-3443	CRS - CATHOLIC RELIEF SERVICES PO BOX 17090 BALTIMORE, MD 21297	NONE	PC	PROGRAM SUPPORT	4,000	1170				11/1/2022	
COLLEGE OF ST. BENEDICT - INSTITUTIONAL ADVANCEMENT 37 S. COLLEGE AVE ST. JOSEPH, MN 56374-2099	COLLEGE OF ST. BENEDICT - INSTITUTIONAL ADVANCEMENT 37 S. COLLEGE AVE ST. JOSEPH, MN 56374-2099	NONE	PC	HUMBOLDT FAMILY SCHOLARSHIP	30,000	1171				10/21/2022	
CROSS CATHOLIC OUTREACH 2700 N. MILITARY TRAIL STE 300 PO BOX 273908	CROSS CATHOLIC OUTREACH 2700 N. MILITARY TRAIL STE 300 PO BOX 273908	NONE	PC	PROGRAM SUPPORT	2,000	1172				10/20/2022	
DOCTORS WITHOUT BORDERS 40 RECTOR STREET 16TH FLOOR NEW YORK, NY 10006	DOCTORS WITHOUT BORDERS PO BOX 5023 BOCA RATON, FL 33427	NONE	PC	PROGRAM SUPPORT	2,000	1173				10/28/2022	
DYSTONIA MEDICAL RESEARCH FOUNDATION, 1 E WACKER DR, SUITE 2810, CHICAGO, IL 60601	DYSTONIA MEDICAL RESEARCH FOUNDATION, 1 E WACKER DR, SUITE 2810, CHICAGO, IL 60601	NONE	PC	RESEARCH AND PROGRAM SUPPORT	10,000	1174				10/20/2022	
FAITHFUL SHEPHERD CATHOLIC SCHOOL 3355 COLUMBIA DRIVE EAGAN, MN 55121	FAITHFUL SHEPHERD CATHOLIC SCHOOL 3355 COLUMBIA DRIVE EAGAN, MN 55121	NONE	PC	EDUCATIONAL PROGRAM SUPPORT	2,000	1175				10/19/2022	
FISTULA FOUNDATION 1922 THE ALAMEDA, SUITE 302 SAN JOSE, CA 95126	FISTULA FOUNDATION 1922 THE ALAMEDA, SUITE 302 SAN JOSE, CA 95126	NONE	PC	MEDICAL CARE IN AFRICA & ASIA	3,000	1176				10/21/2022	
FLORIDA OCEANOGRAPHIC SOCIETY 890 NE OCEAN BLVD STUART, FL 34996	FLORIDA OCEANOGRAPHIC SOCIETY 890 NE OCEAN BLVD STUART, FL 34996	NONE	PC	PROGRAM SUPPORT	1,000	1177				10/21/2022	
FRIENDS OF SAN LUCAS MISSION 3459 WASHINGTON DR, SUITE 207 EAGAN, MN 55122	FRIENDS OF SAN LUCAS MISSION 3459 WASHINGTON DR, SUITE 207 EAGAN, MN 55122	NONE	PC	MISSION SUPPORT IN GUATEMALA	10,000	1178				10/17/2022	
GENERAL SECRETARIAT OF THE FRANCISCAN MISSIONS PO BOX 130 WATERFORD, WI 53185	GENERAL SECRETARIAT OF THE FRANCISCAN MISSIONS PO BOX 130 WATERFORD, WI 53185	NONE	PC	UKRAINE	1,000	1163				5/17/2022	

HUMBOLDT FAMILY FOUNDATION

Recipient Name and Physical Address (where available - home or business)	Recipient Mailing Address	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	Check #	Date Cleared
GENERAL SECRETARIAT OF THE FRANCISCAN MISSIONS PO BOX 130 WATERFORD, WI 53185	GENERAL SECRETARIAT OF THE FRANCISCAN MISSIONS PO BOX 130 WATERFORD, WI 53185	NONE	PC	MISSION SUPPORT	3,000	1179	10/20/2022
HABITAT FOR HUMANITY INTERNATIONAL 322 W LAMAR ST AMERICUS, GA 31709	HABITAT FOR HUMANITY INTERNATIONAL 322 W LAMAR ST AMERICUS, GA 31709	NONE	PC	PROGRAM SUPPORT	1,000	1180	10/18/2022
HANDS TOGETHER HOLY FAMILY CATHOLIC HIGH SCHOOL 8101 KOCHIA LANE VICTORIA, MN 55386	P O BOX 80965, SPRINGFIELD, MA 01138 HOLY FAMILY CATHOLIC HIGH SCHOOL 8101 KOCHIA LANE VICTORIA, MN 55386	NONE	PC	HELP FOR HAITI	1,000	1181	10/24/2022
HOLY ROSARY CHURCH CENTRO GUADALUPANO 2424 18TH AVENUE SOUTH MINNEAPOLIS, MN 55404	HOLY ROSARY CHURCH CENTRO GUADALUPANO 2424 18TH AVENUE SOUTH MINNEAPOLIS, MN 55404	NONE	PC	PROGRAM SUPPORT	1,000	1183	10/27/2022
HOPE FOR UGANDA P O BOX 1863 MINNETONKA, MN 55345	HOPE FOR UGANDA P O BOX 1863 MINNETONKA, MN 55345	NONE	PC	MISSION SUPPORT IN UGANDA	5,000	1184	10/18/2022
INTERFAITH OUTREACH & COMMUNITY PARTNERS (IOP) 1605 COUNTY RD 101 NORTH PLYMOUTH, MN 55447	INTERFAITH OUTREACH & COMMUNITY PARTNERS (IOP) 1605 COUNTY RD 101 NORTH PLYMOUTH, MN 55447	NONE	PC	PROGRAM SUPPORT	2,000	1185	10/21/2022
KIMBERLY HOME PREGNANCY RESOURCE CENTER 1189 NE CLEVELAND ST. CLEARWATER, FL 33755	KIMBERLY HOME PREGNANCY RESOURCE CENTER 1189 NE CLEVELAND ST. CLEARWATER, FL 33755	NONE	PC	PROGRAM SUPPORT	1,000	1186	10/21/2022
KNIGHTS OF COLUMBUS CHARITIES, INC ONE COLUMBUS PLAZA NEW HAVEN, CT 06510	KNIGHTS OF COLUMBUS CHARITIES, INC ONE COLUMBUS PLAZA NEW HAVEN, CT 06510	NONE	PC	PROGRAM SUPPORT	3,000	1188	10/20/2022
LIGHT OF THE WORLD CHARITIES 1300 SE 10TH STREET, SUITE B STUART, FL 34996	LIGHT OF THE WORLD CHARITIES 1300 SE 10TH STREET, SUITE B STUART, FL 34996	NONE	PC	PROGRAM SUPPORT	2,000	1189	10/18/2022
MARYKNOLL FATHERS AND BROTHERS 75 RYDER ROAD OSSINING, NY 10562	MARYKNOLL FATHERS AND BROTHERS 75 RYDER ROAD OSSINING, NY 10562	NONE	PC	PROGRAM SUPPORT	2,000	1190	10/20/2022
MARYKNOLL LAY MISSIONERS 75 RYDER ROAD MARYKNOLL, NY 10562	MARYKNOLL LAY MISSIONERS 75 RYDER ROAD MARYKNOLL, NY 10562	NONE	PC	MISSION SUPPORT	3,000	1191	10/19/2022
MARYKNOLL SISTERS 100 RYDER ROAD MARYKNOLL, NY 10545	MARYKNOLL SISTERS 100 RYDER ROAD MARYKNOLL, NY 10545	NONE	PC	MISSION SUPPORT	3,000	1192	10/19/2022
MARY'S HOME PO BOX 958 STUART, FL 34995	MARY'S HOME PO BOX 958 STUART, FL 34995	NONE	PC	PROGRAM SUPPORT	2,000	1193	10/24/2022
RED CLOUD INDIAN SCHOOL, FR. PETER KLINK, S.I.	PO BOX 5202, SIOUX FALLS, SD 57117-5202	NONE	PC	STUDENT SCHOLARSHIPS	1,000	1194	10/18/2022
RISEN SAVIOR MISSIONS 14533 EUREKA COURT APPLE VALLEY, MN 55124	RISEN SAVIOR MISSIONS 14533 EUREKA COURT APPLE VALLEY, MN 55124	NONE	PC	FOOD FOR PHILIPINES	2,000	1195	10/20/2022
SALVATION ARMY 2445 PRIOR AVE NO. ROSEVILLE, MN 55113	SALVATION ARMY 2445 PRIOR AVE NO. ROSEVILLE, MN 55113	NONE	PC	PROGRAM SUPPORT	1,000	1196	10/17/2022

HUMBOLDT FAMILY FOUNDATION

Recipient Name and Physical Address (where available - home or business)	Recipient Mailing Address	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	Check #	Date Cleared
ST. PETER CLAVER CATHOLIC SCHOOL 1060 W. CENTRAL AVE ST. PAUL, MN 55104	ST. PETER CLAVER CATHOLIC SCHOOL 1060 W. CENTRAL AVE ST. PAUL, MN 55104	NONE	PC	EDUCATIONAL PROGRAM SUPPORT	1,000	1197	10/27/2022
UNBOUND (CFCA) 1 ELMWOOD AVE, PO BOX 219114 KANSAS CITY, MO 64121-9114	UNBOUND (CFCA) 1 ELMWOOD AVE, PO BOX 219114 KANSAS CITY, MO 64121-9114	NONE	PC	SPONSORSHIP SUPPORT	2,000	1198	11/12/2022
VOLUNTEERS IN MEDICINE CLINIC	417 SE BALBOA AVE, STUART, FL 34994	NONE	PC	MEDICAL CARE FOR POOR	1,000	1199	10/21/2022
AQUINAS HOUSE AT DARTMOUTH COLLEGE	P O BOX 147, HANOVER NH 03755-9973	NONE	PC	PROGRAM SUPPORT	500	1200	11/1/2022
BIG BROTHERS BIG SISTERS TWIN CITIES	3110 Washington Av No, Minneapolis, MN 55411	NONE	PC	PROGRAM SUPPORT	1,000	1201	10/21/2022
CATHOLIC SERVICES APPEAL FOUNDATION	P O BOX 6488, ST PAUL, MN 55106	NONE	PC	PROGRAM SUPPORT	1,500	1202	10/19/2022
COLLEGE OF ST. BENEDICT - INSTITUTIONAL ADVANCEMENT 37 S. COLLEGE AVE ST. JOSEPH, MN 56374-2099	COLLEGE OF ST. BENEDICT - INSTITUTIONAL ADVANCEMENT 37 S. COLLEGE AVE ST. JOSEPH, MN 56374-2099	NONE	PC	ANNUAL FUND	5,500	1203	10/21/2022
LOAVES & FISHES	721 KASOTA AVE SE, MINNEAPOLIS, 55414	NONE	PC	PROGRAM SUPPORT	500	1204	10/17/2022
MISSIONS INC/HOME FREE	3409 E Medicine Lake Blvd, Plymouth, Mn 55441	NONE	PC	PROGRAM SUPPORT	500	1205	10/17/2022
OUR LADY OF THE LAKE CATHOLIC CHURCH 2385 COMMERCE BLVD MOUND, MN 55364	OUR LADY OF THE LAKE CATHOLIC CHURCH 2385 COMMERCE BLVD MOUND, MN 55364	NONE	PC	STUDENT SCHOLARSHIPS	2,000	1206	10/18/2022
SISTERS OF THE ORDER OF ST. BENEDICT ST. JOSEPH'S INDIAN SCHOOL	OFFICE OF MISSION ADVANCEMENT 104 CHAPEL LANE, ST. JOSEPH, MN 56374 1301 N MAIN ST, CHAMBERLAIN, SD 57325	NONE	PC	SUPPORT	1,000	1207	10/21/2022
WESTERN COMMUNITIES ACTION NETWORK	5213 SHORELINE DRIVE, MOUND, MN 55364	NONE	PC	STUDENT SCHOLARSHIPS	500	1208	10/20/2022
				PROGRAM SUPPORT	500	1209	11/1/2022

135,500